COUNTERFEIT DEVIANCE

STI SI TAHM

WHAT DOES THE RESEARCH TELL US?

WHAT MORE NEEDS TO BE DONE?

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AGENDA

- OVERVIEW
- Definitions
- THE HYPOTHESES
- RESULTS OF RESEARCH SO FAR
- QUESTIONS AND NEXT STEPS

DEFINITION: COUNTERFEIT DEVIANCE (GRIFFITHS E.T. AL, 20--)

- THE PRESENCE OF SEXUAL BEHAVIORS IN PERSONS WITH ID CONSISTENT WITH A PARAPHILIA
- THE SEXUAL BEHAVIORS ARE NOT PRIMARILY THE RESULT OF DEVIANT FANTASIES OR URGES BUT OF FACTORS ASSOCIATED WITH INTELLECTUAL DISABILITY

DEFINITION: PARAPHILIA (DSM5)

- INTENSE, PERSISTENT SEXUAL INTEREST.
- DIFFERENT FROM THE NORM.
- NORM = GENITAL STIMULATION OR PREPARATORY FONDLING, WITH NORMAL, PHYSICALLY MATURE, CONSENTING HUMAN PARTNERS.

PARAPHILIA (CONTINUED)

- SOME PEOPLE DON'T HAVE INTENSE INTERESTS IN SEX (ELDERLY, MENTALLY ILL, DEPRESSED).
- THEN PARAPHILIA = SEXUAL INTEREST > NORMAL.
- Some people have "preferential" interest not intense interest.

PARAPHILIA (CONTINUED)

- SOME ARE HARMLESS TO SELF AND OTHERS SPANKING, CROSS-DRESSING, SHOE FETISH.
- OTHERS CAUSE DISTRESS OR IMPAIRMENT TO THE PERSON AND/OR PERSONAL HARM OR RISK TO OTHERS SEX INTEREST IN CHILDREN, FORCED SEX.

KEY LEARNING POINT: THE OUTSIDE IS NOT THE INSIDE!!

- PARAPHILIAS REQUIRE <u>BOTH</u> BEHAVIORS (THE OUTSIDE) AND SEXUAL INTEREST/URGES (THE INSIDE).
- COUNTERFEIT DEVIANCE THEORY POSITS THAT DEVIANT SEX BEHAVIORS (THE OUTSIDE) FOR ID PERSONS CAN BE ASSOCIATED WITH OTHER FACTORS, (INSIDE AND OUTSIDE).

11 HYPOTHESES FOR COUNTERFEIT DEVIANCE

STRUCTURAL: SANCTIONS VS. EXPRESSION OF HEALTHY
SEXUALITY LEAD TO ENGAGING IN SEX BEHAVIORS TO AVOID
DETECTION, SUCH AS IN PARKING LOT AWAY FROM DAY
PROGRAM STAFF OBSERVATION.

HYPOTHESES

• MODELLING: ID PERSONS IMITATE STAFF BEHAVIORS, SUCH AS TOUCHING THAT INVADES OTHERS PERSONAL SPACE.

HYPOTHESES

- BEHAVIORAL: IN APPROPRIATE SEXUAL BEHAVIOR HAS BEEN REWARDED WITH ATTENTION (EVEN NEGATIVE ATTENTION), OR PERSON WITH ID HAS LEARNED THAT INAPPROPRIATE SEXUAL BEHAVIOR CAN ALLOW ESCAPE FROM A SITUATION THEY FIND UNDESIRABLE.
- **LEARNING HISTORY:** Persons with ID 3-4 times more likely to experience sexual abuse. They may be sexually reactive.

HYPOTHESES

- MORAL VACUUM: VALUES AND STANDARDS ABOUT HEALTHY SEXUAL BEHAVIOR WERE NEVER LEARNED BY PERSON WITH ID SO THE BEHAVIOR VIOLATES NORMS AND SOMETIMES LAWS.
- **SEXUAL KNOWLEDGE:** LACK OF APPROPRIATE, COMPREHENSIVE KNOWLEDGE LEADS TO INAPPROPRIATE SEXUAL BEHAVIORS.

RESEARCH STUDIES ARE VERY LIMITED

- STRUCTURAL AND MORAL VACUUM HO'S
- MODELLING AND LEARNING THEORY HO'S
- BEHAVIORAL HO
- SEXUAL KNOWLEDGE HO

STRUCTURAL STUDIES

- Young, sigafoos, suttie, Ashman (1998) After deinstitutionalization, aggression and moral attitudes did not improve in 289 patients with ID.
- Heil, Harrison, English, Ahlmeyer (2009) Sex offenders who offended in Community and in prison had higher rates of reoffense upon release compared to Offenders who offended in the community and did not offend in prison. Some Persons incarcerated for non sex offenses who committed sex offenses while in Prison continued to commit sex offenses after release and frequency of Offending increased over time.

MODELING AND LEARNING HISTORY STUDY

• LINDSAY, LAW, QUINN, SMART AND SMITH (2001) — COMPARED SEX ABUSE HISTORIES OF ID SEX OFFENDERS WITH ID NON SEX OFFENDERS. 38% OF ID SEX OFFENDERS HAD BEEN VICTIMIZED. 12% OF ID NON SEX OFFENDERS HAD BEEN VICTIMIZED.

SEXUAL KNOWLEDGE STUDIES

- TALBOT AND LANGDON (2006) NO DIFFERENCE IN SEX KNOWLEDGE BETWEEN ID TREATED
 OFFENDERS AND UNTREATED OFFENDERS.
- MICHIE, LINDSAY, MARTIN & GRIEVE (2006) ID SEX OFFENDERS HAD MORE SEX KNOWLEDGE THAN ID NON SEX OFFENDERS. USED MATCHED CONTROL GROUP.
- Lunsky, Frijters, Griffiths, Watson (2007) Confirmed Michie, et,al. ID offenders
 V. Children, Rapists, Repeaters (type 1) had more sex knowledge than fondlers,
 EXHIBITIONISTS, PUBLIC MASTURBATERS (type 2). Type 2 had same sex knowledge as
 MATCHED ID CONTROL GROUP.
- LOCKHART ET, AL. (2010) CONFIRMED MICHIE (2006) AND LUNSKY (2007). LACK OF SEX KNOWLEDGE MAY BE A FACTOR IN OFFENDING FOR TYPE 2 OFFENDERS.

CURRENT STATE OF KNOWLEDGE

- Some people with ID can and do have deviant arousal patterns (paraphilias) sometimes these cause personal distress/impairment and/or risk/harm to others (paraphilic disorders)
- Some people with ID have the behaviors associated with paraphilias and paraphilic disorders but lack the intense, persistent sexual urges or sexual interests. Their behaviors are linked to other factors.
- COUNTERFEIT DEVIANCE IS NOT A CLINICAL DISORDER. IT IS A CONCEPT WHICH SUGGESTS THAT THE SEXUALLY INAPPROPRIATE
 AND SOMETIMES EVEN CRIMINAL SEXUAL BEHAVIORS OF PEOPLE WITH ID CAN BE MOTIVATED BY A WIDE VARIETY OF FACTORS
 BOTH INTERNAL TO PEOPLE WITH ID AND IN THEIR EXTERNAL ENVIRONMENTS.
- COUNTERFEIT DEVIANCE IS USEFUL IN PRETREATMENT ASSESSMENT AND IN DEVELOPING TREATMENT PLANS FOR PERSONS WITH ID WHO HAVE SEXUALLY PROBLEMATIC BEHAVIORS.
- COUNTERFEIT DEVIANCE RESEARCH IS IN ITS EARLY STAGES; MUCH MORE SYSTEMATIC RESEARCH IS NEEDED REGARDING THE MULTIPLE FACTORS IN THE THEORY OF COUNTERFEIT DEVIANCE.

NEXT STEPS