

Child Sexual Abusers Working with Children - Characteristics and Risk Factors

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Abstract

The present article aims at providing an overview of the current state of research about child sexual abuse occurring in youth-serving institutions and about the individuals who have sexually offended against children with whom they work. Depending on the specific institution and the assessment method used, between 0.1% and 10% of all children and adolescents who were placed in a youth-serving institution have been sexually victimized. In most cases offenders are male and highly educated. Compared to child sexual abusers (CSA) not working with children pedophilic sexual interests seem to be more prevalent in child sexual abusers working with children (CSA-W), while indicators for antisocial behaviors can be found less often. In line with this constellation of risk factors CSA-W primarily reoffend sexually. Thus, risk assessment instruments that specifically measure the risk for sexual recidivism perform best in CSA-W. Concerning offence-supportive strategies previous research found that CSA-W use manipulative behaviors rather than violence prior to the abuse and the abuse most commonly occurs when the CSA-W is alone with the victim. Based on these findings it can be concluded that treatment with CSA-W should focus primarily on the management of pedophilic sexual interests as well as on the relationship problems. However, future research still has to evaluate the impact of psychotherapeutic treatment on these offenders and has to identify additional risk factors that should be considered in treatment approaches.

Key Words: Child sexual abusers working with Children (CSA-W), risk, reoffense

Recently Marshall and colleagues (2014) have argued that child sexual abusers (CSA) are a heterogeneous group of individuals, but identifying subcategories of CSA would help to increase homogeneity, which should in turn facilitate new research and lead to a more precise focus in treatment (Marshall, Smallbone, & Marshall, 2014). In order that researchers and clinicians can make use of such a subdivision, at first those characteristics have to be identified that are shared by individuals belonging to one subcategory. Based on shared personal and offense-related characteristics Marshall and colleagues (2014) suggested to distinguish between affiliative and non-affiliative CSA (Marshall et al., 2014). Affiliative CSA are those who selectively target children in their care, e.g. fathers, step-fathers, other family members, professionals working in settings where they have access to children. Without a doubt such a distinction seems plausible and convincing because various characteristics that discriminate these two groups were already described by previous research (for an overview we want to refer to Marshall et al., 2014). However, as estimated by Marshall and colleagues (2014) 90% of convicted CSA probably belong to the affiliative group implying that there still exists considerable heterogeneity within that group. Therefore, identifying additional subcategories especially concerning affiliative CSA would help to solve this problem.

One such additional subgroup of affiliative CSA could be men who use the child- or youth-serving institutions or organizations within they work to target and abuse children (Sullivan & Beech, 2004;

Turner, Rettenberger, Lohmann, Eher, & Briken, 2014a). These offenders have been referred to as "professional perpetrators" or child sexual abusers working with children (CSA-W) (Sullivan & Beech, 2002; Turner et al., 2014a).

The present article aims at providing evidence to support the suggestion that CSA-W could form a meaningful subgroup. First we will address the extent of child sexual abuse occurring in institutional settings in order to clarify that CSA-W form a quantitatively relevant subgroup. We will then describe characteristics and risk factors that seem to be shared by many CSA-W and continue with a discussion about the rates of recidivism and the predictive performance of risk assessment instruments in this special offender population. Finally, we will outline some findings about similarities in the offense-supportive behaviors shown by CSA-W. Based on these information we will derive relevant topics that could be addressed in treatment with CSA-W and will give some ideas for future research approaches.

The extent of child sexual abuse in youth-serving institutions

Child sexual abuse in child- or youth-serving institutions is an internationally relevant problem and is not restricted to specific institutions. As a response to especially severe and extensive cases in different youth-serving institutions research groups in various countries were assigned to assess the extent of the problem.

Residential, foster and day-care

As one of the first Rindfleisch and Rabb (1984a) found that in 1980 9% of the 28,000 complaints that have been reported to US child protection agencies came from child residential care facilities (Rindfleisch & Rabb, 1984b). These complaints accounted for 31 reported allegations of abuse for every 1,000 children in such institutions (Rindfleisch & Rabb, 1984a). However, it has to be taken into account that the authors did not differentiate between sexual and physical victimizations. Slightly, higher numbers were reported by Margolin (1991) who could identify 422 cases of child sexual abuse in residential care settings in Iowa during 1985 and 1986 (Margolin, 1991). Altogether these 422 cases accounted for 34% of all child sexual abuse cases committed by nonparents and 18% of all child sexual abuse cases in Iowa between 1985 and 1986 (Margolin, 1991).

Euser et al. (2013) interviewed caregivers of adolescents who were living in a Dutch residential care facility as well as the adolescents themselves. Based on the caregivers' reports a prevalence of 5 per 1,000 children or adolescents being sexually abused during the year 2010 was found (Euser, Alink, Tharner, van Ijzendoorn, & Bakermans-Kranenburg, 2013). However, based on the adolescents' self-report this number increased to 280 cases per 1,000 adolescents. Hereafter, children in residential care facilities had a nine times greater risk of being sexually victimized compared to children in the general Dutch population (Euser et al., 2013).

Finkelhor et al. (1988) aimed at assessing the incidence of child sexual abuse occurring in US day-care centers between 1983 and 1985 by contacting child protection officials in all states of the US. Based on this approach the authors could identify 1,639 cases of child sexual abuse in 270 day-care facilities during the according time period (Finkelhor, Williams, Burns, & Kalinowski, 1988). With regard to all children who have been placed in day-care centers between 1983 and 1985 Finkelhor et al. (1988) estimated that 5.5 per 10,000 children in day-care were sexually victimized. The authors stated that the found incidence was, however, lower compared to the number of children being sexually victimized in their own household that was estimated to be 8.9 per 10,000

children in 1985 (Finkelhor et al., 1988).

Concerning children who have been placed in foster care one study found that child sexual abuse occurred in 9.7% ($n = 29$) of all 296 foster families that were under the supervision of the Baltimore City Department of Social Services between 1984 and 1988 (Zuravin, Benedict, & Somerfield, 1993). Furthermore, in 64% of the reported cases the perpetrators were the foster parents while in the remaining cases other juveniles could be identified as the perpetrators (Zuravin et al., 1993). Comparably, Spencer and Knudsen (1992) found that between 1984 and 1990 5.2 of 1,000 children living in foster care in Indiana, USA, were sexually victimized and in 78% of the reported cases one foster parent was responsible for the sexual abuse (Spencer & Knudsen, 1992).

Schools

In a representative sample of US school students in 8th to 11th grade ($n = 2,065$) 9.6% indicated unwanted sexual contact with a school employee and 6.7% reported about incidents involving physical sexual contact (Shakeshaft, 2004). Based on these data Shakeshaft (2004) concluded that more than 4.5 million students in the US are sexually victimized by an employee between kindergarten and 12th grade. In 2000 a comparable study was performed in the UK asking 2,869 women and men between 18 and 24 years of age about own sexually abusive experiences (Cawson, Wattam, Brooker, & Kelly, 2000). It was found that 0.3% of the participants reported about having been sexually abused by a teacher or another professional care giver (Cawson et al., 2000).

A nationally representative study conducted between 2008 and 2011 at German schools revealed that at 3.5% of all schools at least one employee of that school was accused of a child sexual abuse offence (Helming et al., 2011). In about 90% of the reported cases the employee was accused of having touched a child's genitals or having verbally harassed a child. Furthermore, in 7.5% of the cases the suspicion was confirmed and was reported to official authorities, in 17.5% the suspicion was confirmed and was not reported to official authorities but the offender was dismissed from the school, and in 22.5% the suspicion could not be resolved (Helming et al., 2011).

Church

Concerning the prevalence and incidence of child sexual abuse in church settings Böhm et al. (2014) stated that in the past 50 years more than 4,000 cases of child sexual abuse perpetrated by Catholic priests have been reported to the Promoter of Justice at the Congregation for the Doctrine of the Faith in Rome (Böhm, Zollner, Fegert, & Liebhardt, 2014).

On a national level the John Jay College study group assessed all accusation against Catholic clergy in the US between 1950 and 2002 (John Jay College of Criminal Justice, 2004). They found that 4% of all Catholic priests were accused of at least one child sexual abuse offense between 1950 and 2002 and that about half of those were accused of more than one offense (John Jay College of Criminal Justice, 2004). However, child sexual abuse is not solely restricted to the Catholic Church. Parkinson et al. (2012) reported that between 1990 and 2008 191 allegations were made against 135 priests within the Anglican Church of Australia (Parkinson, Oates, & Jayakody, 2012). Furthermore, 27 priests were confronted with more than one complaint. However, only about 53% of the allegations finally resulted in an official conviction (Parkinson et al., 2012).

Other institutions

Gallagher (2000) evaluated the incidence of child sexual abuse in different youth-serving institutions

in England and Wales between 1988 and 1992 (Gallagher, 2000). Based on child protection records held by social service departments and the police he estimated that the yearly incidence had to be about 185 cases what corresponded to 3% of all child sexual abuse cases during the according time period. Most of the abusers were either working as teachers (30%), social workers (12%), music tutors (12%), clerics (7%) or scout leaders (7%) (Gallagher, 2000).

Boyle (2014) who analyzed incidents of child sexual abuse within the Boy Scouts of America (BSA) described that between 1980 and 2004 3700 volunteer workers were released from the BSA because of a conviction with a sexual offense (Boyle, 2014). Although Boyle did not report the actual rate he concluded that the vast majority of incidents were child sexual abuse cases while the remaining cases could be subsumed under sexual victimization of adult women (Boyle, 2014).

In a large-scale study sponsored by the US Bureau of Justice between 2008 and 2009, evaluating sexual victimization in juvenile confinement facilities, 10.3% ($n = 2730$) of all children or juveniles reported at least one incident of sexual victimization by the facilities' staff. Moreover, 4.3% ($n = 1150$) of all children in detention reported about contact sexual abuse perpetrated by a staff member (Beck, Cantor, Hartge, & Smith, 2013).

Depending on the type of institution, the operationalization of child sexual abuse or the assessment method it can be concluded that between 0.1% and 10% of all children in youth-serving institutions are sexually victimized by an employee or volunteer. Because many cases are not discovered or are not reported to official authorities, the actual magnitude of the problem is probably even underestimated (Firestone, Moulden, & Wexler, 2009; Gallagher, 1999).

Personal characteristics and risk factors of child sexual abuser working with children

Previous research already described some personal characteristics and risk factors that seem to be shared by many CSA-W. Comparable to other sexual offender populations CSA-W are primarily male. Even though only about one-third of the staff in youth-serving institutions is male it was found that 81% to 96% of sexual offenders in these institutions are male (Gallagher, 2000; Moulden, Firestone, & Wexler, 2007).

Furthermore, CSA-W are usually older at the time of conviction for the child sexual abuse offence compared to CSA not working with children (Firestone et al., 2009; Sullivan & Beech, 2004). Interestingly though, concerning the age of the abusers at the beginning of the index offence one previous study, conducted by our group, did not find any differences between CSA-W and CSA not working with children (Turner et al., 2014a). This may indicate that it could take a longer period of time until the abuse committed by a CSA-W is disclosed or that the abuse conducted by a CSA-W continues over longer periods of time. This finding could be due to more elaborated strategies in approaching the victims and in keeping the victim from disclosing. Furthermore, many CSA-W hold well-respected positions, e.g. teacher, priests, or social workers, which could restrain others from accusing these persons of a sexual abuse. Because many professional or voluntary positions within youth-serving institutions or organizations (e.g. teachers, priests, social workers) require an university degree or at least some kind of structured professional training it is not surprising that CSA-W are usually better educated and have a significantly higher IQ compared to CSA not working with children (Colton, Roberts, & Vanstone, 2010; Sullivan & Beech, 2004).

In a previous study Sullivan and Beech (2004) evaluated different sociodemographic and developmental characteristics in 41 CSA-W in comparison to 264 CSA not working with children.

They found that while 50% of CSA not working with children were in a stable adult sexual relationship at the time the child sexual abuse started, this accounted for only 25% of the CSA-W (Sullivan & Beech, 2004). Furthermore, while 59% of CSA not working with children had children on their own, only 17.5% of CSA-W had own children (Sullivan & Beech, 2004). Concerning own abusive experiences during childhood 51% of the CSA-W reported that they were sexually abused and 38% reported that they were physically abused as children. This compares to 60% of CSA not working with children reporting about own sexually abusive experiences and 43% about physically abusive experiences during childhood (Sullivan & Beech, 2004). In this context, Perillo et al. indicated that clergy CSA with multiple victims reported more often about own sexually abusive experience (Perillo, Mercado, & Terry, 2008).

Besides these differences in the sociodemographics research primarily focused itself on the assessment of pedophilic sexual interests and antisocial behaviors in CSA-W, two risk factors that are especially important concerning sexual offending (Hanson & Morton-Bourgon, 2005).

Pedophilic sexual interests

Concerning the assessment of pedophilic sexual interests previous research has identified some variables that show a strong association with the construct. Having a large number of child victims, having especially young victims, and having primarily male victims are among these indicators (Seto & Lalumiere, 2001).

In a previous study conducted by our own group we evaluated the above-mentioned indicators in 38 CSA-W in comparison to 66 extra-familial CSA (CSA-E) and 119 intra-familial CSA (CSA-I) (Turner et al., 2014a). In line with previous research we found that CSA-W had a higher number of victims in the index offence as well as in all other previous child sexual abuse offences (Turner et al., 2014a, see also Lueger-Schuster et al., 2014; Sullivan & Beech, 2004). Also, CSA-W had more often exclusively male victims compared to CSA-E and CSA-I while no differences occurred concerning the victims' age between the three groups (Turner et al., 2014a; see also Parkinson et al., 2012; Spröber et al., 2014; Sullivan & Beech, 2004). Furthermore, 63.2% of CSA-W were diagnosed with a pedophilia according to DSM-IV criteria, while only 40.9% of CSA-E and 43.7% of CSA-I received a pedophilia diagnosis (Turner et al., 2014a). In contrast, in an evaluation of 78 forensic reports conducted about Catholic priests (a CSA-W subgroup), who have been convicted because of a child sexual abuse offence, Leygraf et al. found that only 12% of the Catholic priests could be diagnosed with a pedophilia (Leygraf, König, Kröber, & Pfäfflin, 2012).

CSA-W are also more likely to admit being sexually attracted to children and it was suggested that a majority are aware of their pedophilic sexual interests before they turn 18 years (Sullivan & Beech, 2004; Turner et al., 2014a). This finding could indicate that CSA-W are more aware of their deviant sexuality and this awareness arises quite early in their lives.

Concerning men working with children who have not previously been convicted because of a child sexual abuse offence one previous study found that of 91 male public sector child care workers 15% expressed a sexual interest in children when asked if they were sexually attracted to children or if they would have sex with a child if it was certain that no one would ever find out (Freel, 2003). Comparably, in a so far unpublished study, also performed by our group, we assessed sexual fantasies involving children in a large German community sample ($n = 8,726$) using an online questionnaire. It was found that more men who indicated that they have previously abused a child (not necessarily convicted for the child sexual abuse offence) and who are working with children on a professional or voluntary basis ($n = 37$; 0.4%) reported about sexual fantasies involving boys and girls than men who have sexually abused a child and who were not working with children ($n = 90$;

1.0%) (Turner et al., submitted).

Taken together these findings imply that pedophilic sexual interests seem to be more prevalent in CSA-W than in CSA not working with children.

Antisocial behaviors

Concerning the assessment of antisocial behaviors previous research has linked substance abuse, a history of nonsexual crimes, an antisocial personality disorder and psychopathy to the existence of antisocial tendencies in an individual (Hanson & Morton-Bourgon, 2005).

In this context, Langevin et al. (2000) found a lower rate of previous convictions as well as a lower rate of previous aggressive behaviors in clergy CSA compared to a general sex offender sample (Langevin, Curnoe, & Bain, 2000; see also Sullivan & Beech, 2004). Supporting these findings we could identify (in the above-mentioned study) a lower rate of previous convictions for a general offense as well as a lower rate of previous convictions for a sexual offense in CSA-W at least compared to CSA-E (Turner et al., 2014a). Furthermore, less CSA-W reported about previous problems with alcohol or illegal drugs (e.g. loss of driver's license, delinquency under the influence of alcohol or drugs, previous in-patient alcohol or drug withdrawal treatment) compared to CSA-E and CSA-I (Turner et al., 2014a). CSA-W also had lower scores in the Psychopathy Checklist-Revised (PCL-R, Hare, 2003). Thereby, lower scores in factor 2 were mainly responsible for this difference (Turner et al., 2014a). Factor 2 of the PCL-R assesses impulsive tendencies in an individual and is associated with criminal and antisocial behaviors as well as substance abuse problems (Benning, Patrick, Hicks, Blonigen, & Krueger, 2003). Finally, of the included 38 CSA-W only one (2.6%) was diagnosed with an antisocial personality disorder diagnosis, while 25 CSA-E (37.9%) and 30 CSA-I (25.2%) had an antisocial personality disorder diagnosis according to DSM-IV (Turner et al., 2014a). Comparably, in the Leygraf et al. (2012) study only 5% of the Catholic priests met the diagnostic criteria for any personality disorder. Leygraf et al. concluded that compared to all other incarcerated men in Germany, who have a lifetime prevalence of about 43% for any personality disorder, the prevalence in catholic priests who have sexually abused a child has to be considered as rather low (Leygraf et al., 2012; von Schönfeld et al., 2006).

In contrast though, these findings could not be replicated in the above-mentioned community sample of German men. In that sample more men who had abused a child and who were working with children reported about a previous conviction with a violent or sexual offence compared to men not working with children who have previously abused a child (Turner et al., submitted). Taken together it seems as if antisocial behaviors can be found more often in men from the community who are working with children and who have sexually abused a child before than incarcerated CSA-W at least compared to child sexual abusers not working with children. However, this suggestion should be treated very cautiously because there are various differences between incarcerated men and men from the community that could be responsible for this finding. Furthermore, the differing assessment methods of the cited studies can also account for these differences.

Nevertheless, it has to be concluded that CSA-W, at least incarcerated CSA-W, seem to show less antisocial behaviors compared to CSA not working with children.

Risk and Recidivism in CSA-W

Studies assessing the rate of recidivism and the predictive performance of commonly used risk

assessment instruments in CSA-W are scarce. However, it can be suggested that according to the specific constellation of risk factors in incarcerated CSA-W - frequent pedophilic sexual interests and less frequent non-sexual antisocial behaviors - this group seems to be especially threatened by sexual recidivism while violent or other forms of reoffenses seem to play only a subordinate role. In our sample of 37 CSA-W we found that 13.5% ($n = 5$) men recidivated with a sexual offence while only 1 CSA-W (2.7%) recidivated with a nonsexual offence during a follow-up period of about 5.5 years (Turner et al., 2014b). In this study recidivism was defined as any new reconviction. Another study that evaluated 337 Catholic priests who had abused a child found a sexual recidivism rate of 6.2% during a mean follow-up period of 16 years (range: 5 - 25 years) (Montana et al., 2012). In that study recidivism was defined as sexual contact with a child or a juvenile under the age of 18 years or the use of child pornography. Eligible incidents were identified based on self-report or on reports by others (Montana et al., 2012). Furthermore, the assessment of recidivism started after the priests had been released from a 6-month stay at a residential treatment program that included individual and group therapy (Montana et al., 2012). These findings might indicate that Catholic priests seem to have a lower rate of sexual recidivism compared to the whole CSA-W group or that psychotherapeutic treatment reduced their rate of recidivism.

Because CSA-W seem to mainly recidivate with a sexual offense risk measures that explicitly assess the risk for sexual recidivism perform quite well in CSA-W and might even be superior compared to other risk measures that assess the risk for sexual violent or violent only recidivism. In this context, we found that only the Static-99 could significantly predict sexual recidivism in CSA-W ($AUC = .78$), while the Sexual Offender Risk Appraisal Guide (SORAG; Quinsey, Harris, Rice, & Cormier, 2006), the Sexual Violence Risk-20 (SVR-20; Boer, Hart, Kropp, & Webster, 1997) and the PCL-R could not predict sexual recidivism (Turner et al., 2014b). Furthermore, none of the latter instruments had significant incremental validity over the Static-99 (Turner et al., 2014b). In line with our results Montana et al. found that the Static-99 could significantly predict sexual recidivism in Catholic priests ($AUC = .67$) (Montana et al., 2012). However, the two above-cited studies were the only ones we could identify that evaluated the actual rate of recidivism in CSA-W and the predictive performance of commonly used risk assessment instruments and thus the current state of research is still weak and has to be interpreted quite cautiously.

Grooming and offense-supportive behavior

Some CSA-W choose their work with the intention to facilitate child sexual abuse offenses (Colton et al., 2010; Sullivan & Beech, 2004). Others sexually offend against children due to difficulties in establishing a sexual relationship with adults (Holt & Massey, 2013). Of the 41 CSA-W assessed by Sullivan & Beech (2004) 17 (41.5%) indicated choosing their job exclusively to sexually abuse children, while eight (19.5%) answered that facilitating sexual contact with children was not part of their motivation for choosing their profession (Sullivan & Beech, 2004).

Irrespective of the motivation to take on a job in a youth-serving institution some strategies have been identified that are used by many CSA-W to engage children in sexual activities. CSA-W more frequently applied coercive or manipulative strategies rather than using violence or force prior to the abuse (Moulden, Firestone, Kingston, & Wexler, 2010; Parkinson et al., 2012). These manipulative behaviors aim at gaining the child's trust and affection by showing special attention to the child, offering emotional assistance in struggling situations, giving presents or money or by buying alcohol or other forbidden things (Moulden et al., 2010; Spröber et al., 2014; Sullivan & Beech, 2004). Often such offenders are very skilled in identifying vulnerable children or juveniles who are in need for emotional support and affection (Colton et al., 2010). Other CSA-W use their position of authority, e.g. threatening to give poor school grades, disguising the abuse as something educational or threatening religious punishment (Colton et al., 2010; Moulden et al., 2010).

Most cases of abuse occurred either in the offender's home, on the grounds of the institution or outside of the institution, for example during excursions (Firestone et al., 2009; Hobbs, Hobbs, & Wynne, 1999; Holt & Massey, 2013). Only seldom did the offense occur in the child's home. Parkinson et al. (2012) reported that CSA-W with one victim were most likely to abuse on the grounds of the institution, CSA-W with two to three victims most likely abused children in their own residence, and CSA-W with four to nine victims most likely abused children outside the institution (Parkinson et al., 2012). Furthermore, it seems as if most incidents occurred when the offender was alone with the child, especially if being alone included spending the night together at the same place (Parkinson et al., 2012; Spröber et al., 2014). Sullivan and Beech reported that 31 (77.5%) CSA-W arranged meetings outside of work during which they were alone with the child, 27 (67.5%) took children away over night, and 16 (40%) even travelled abroad with a child in order to facilitate sexual abuse (Sullivan & Beech, 2004).

Before being alone with a child, however, the offender did not only have to win the trust of the child but also the trust of the parents and the child's social environment (McAlinden, 2006). This is supported by the finding that CSA-W with one victim were less likely to socialize with the victim's families than CSA-W who abused two or three children (Parkinson et al., 2012).

One has to bear in mind though, that almost all previous studies about offence-supportive strategies have been conducted with clergy CSA-W only. However, it can be hypothesized that these suggestions apply for other CSA-W as well.

Conclusions

Based on the current state of research it can be concluded that CSA-W compile a relevant subgroup within the whole CSA population. Members of the CSA-W group share sociodemographic characteristics and a particular constellation of risk factors. These features seem to set them apart from CSA not working with children and should thus be considered when planning risk management as well as therapeutic strategies and approaches.

Although many CSA-W have abused children within their professional or voluntary workplace, they have shown that they are capable of holding a stable and meaningful job. Thus, treatment could focus on identifying professional positions that do not involve the direct contact to children but that do nevertheless satisfy the offender and provide him with new self-worth. A stable job would also assist the offender in developing realistic and appropriate plans for his future and would support his social reintegration after being released from prison or other detention facilities (Marshall, Marshall, Serran, & O'Brien, 2011). Supporting the social reintegration process CSA-W should make use of their prosocial abilities that they also seem to have because they were capable of holding a well-respected position in society, e.g. teachers, priests, before they offended.

Another important question that should be addressed during therapy is the CSA-W's motivation that has driven him to choose a job that involves the frequent contact with children. CSA-W who admit choosing the job with the intention to sexually abuse children are likely driven by strong pedophilic sexual interests that are anyway present in many CSA-W. Treatment approaches with these offenders should focus on the development of appropriate coping strategies to deal with these pedophilic sexual interests. The increased awareness of their deviant sexuality that was observed in CSA-W compared to CSA not working with children can support treatment approaches in this context. Although it can be hypothesized that psychotherapy seems to be effective in many CSA-W, pharmacological approaches can be used in those offenders where psychotherapy has not shown the desired effects, especially in order to control strong pedophilic sexual interests with a high risk.

In CSA-W who have not primarily chosen a job in a youth-serving institution in order to facilitate contact to children, especially lacking relationship skills should be addressed. As suggested by Marshall and colleagues (2014) these offenders seem to be seeking for affection when they engage in sexual contact with children because they do not experience affection in a satisfying way in their adult relationships (Marshall & Marshall, 2014; Marshall et al., 2014). However, these offenders have to learn and recognize that children cannot fulfill their unfulfilled affectionate and sexual needs. In many CSA-W control of impulsive and criminal tendencies probably plays a less prominent role during therapy.

Even if still discussed controversially some studies have shown that treatment can reduce the risk in CSA (Grønnerød, Grønnerød, & Grøndahl, 2014; Hanson, Bourgon, Helmus, & Hodgson, 2009; Hanson et al., 2002; Langström et al., 2013; Lösel & Schmucker, 2005). However, it has to be taken into account that the presented treatment considerations are solely hypothetical, as they have not been empirically tested so far. This illustrates that although research was able to identify some important issues that should probably be dealt with in treatment, the impact of treatment on the risk in CSA-W should be one major topic addressed by future research. Furthermore, future research should evaluate other risk factors that have been found to correlate with sexual recidivism. Some factors that might be especially relevant in CSA-W could be an emotional congruence with children and the children's world, sexual preoccupation, lacking victim empathy and cognitive distortions about children as appropriate sexual partners. Identifying differences in further risk factors would help to improve risk assessment and management of CSA-W.

In order to further increase homogeneity within the CSA-W population future research should address the question if findings for specific subgroups of CSA-W can be generalized. This is especially important because most findings about CSA-W are from samples with clergy CSA-W. Finally, more insight into the grooming process of CSA-W is needed.

Although some suggestions for treatment and future studies can be derived it is also important to educate child-care personnel about the actually known extent and circumstances of child sexual abuse in youth-serving institutions and about the specific characteristics of men who have abused or are at an increased risk of abusing the children with whom they work. This is all the more important as it are those individuals who would be capable to detect any abusive actions at a rather early stage.

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