Sexual aggression and type of violence among forensic outpatients with and without low IQ

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Determining prevalence rates and, more accurately, defining the extent and nature of problems associated with people with ID who commit sexual offenses has been arduous and frustrating (Wilcox, 2004). The prevalence of sexual assault among people with ID varies across studies from 4 to 40% (Embregts et al., 2010; Lindsay, 2004; Sajith et al., 2008). These rates are difficult to estimate (Craig, 2017), given the misinterpretation of behaviors, increased visibility of offenders with ID (Craig & Hutchinson, 2005; Keller, 2016), or the settings in which the abuse takes place (Singh et al., 2011). Lindsay (2011) also highlights the significant methodological differences between studies. Similarly, it is difficult to differentiate the recidivism risk profile of Forensic Outpatients with a low IQ who committed a Sexual Offense (FOIQSO) in contrast to Forensic Outpatients without a low IQ who committed a Sexual Offense (FOSO).

This study aims to identify whether there are differences in terms of risk factors for recidivism and type of violence between FOIQSO and FOSO.

Method

Instruments

Coding guide for violent incidents (CGVI)
(Cornell, 1996)

The CGVI is a scoring guide to assess the type of violence according to the perpetrator's motivation, situational precipitants, and the origin of the violence (9 items). This assessment distinguishes two types of violence: instrumental and reactive.

Static-99 Revised (Static-99R)
(Phenix, Fernandez, Harris, Helmus, Hanson, & Thornton, 2016).

The Static-99R is an actuarial risk assessment scale for sexual recidivism in male sex offenders. It consists of 10 static items, empirically validated. All information must be obtained from official court records. This assessment was conducted by trained psychologists.

Participants

The sample consists of 27 male forensic outpatients, Not Guilty for Reason of Insanity, who commit sexual offenses. They were hospitalized in a High-risk security facility (CRP les "Marronniers"). FIIQSO committed sexual offenses such as indecent assault, public indecency, sexual molestation, attempted rape, and rape.
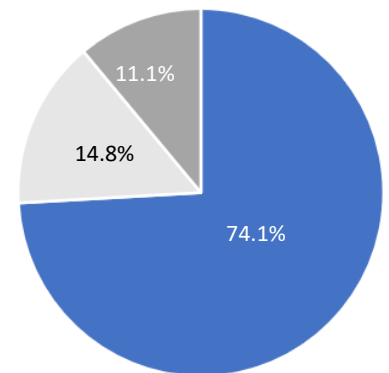
The sample is divided into two groups:
- **FOIOQSO** (n = 13),
  $Mean_{Age}$= 26.62 years (σ = 10.81),
- **FOSO** (n = 14),
  $Mean_{Age}$= 34.64 years (σ = 11.18).
The groups do not differ in average age.

Procedure and Data analysis

Data were collected based on files retrieved at the Sentence Enforcement Courts (Belgium) responsible for the post-release follow-up of forensic patients between 2014 and 2018. Two experimenters collected data. For inter-rater validity, analyses indicate that Kappa coefficients for the scores on all *Static-99R* items are significantly excellent (.88 to .99). Kappa coefficients for the set of CGVI scores are significantly satisfying or even excellent (.63 to .99).

Figure 1 – Types of offenses

74.1% Sexual
14.8% Violent (non sexual)
11.1% Non violent, non sexual

- Sexual ■ Violent (non sexual) ■ Non violent, non sexual

Results and Discussion

Figure 2 – Static-99R scores

t = 2.22*
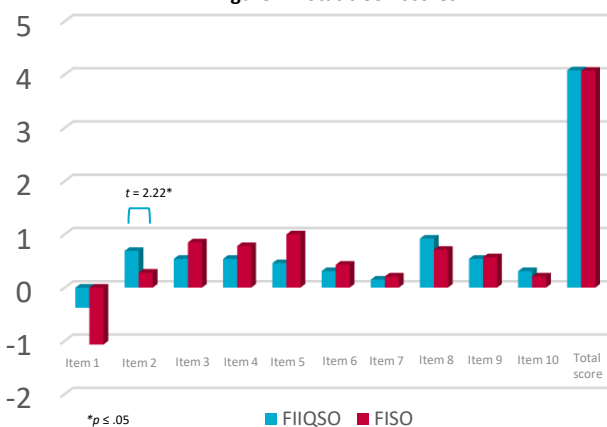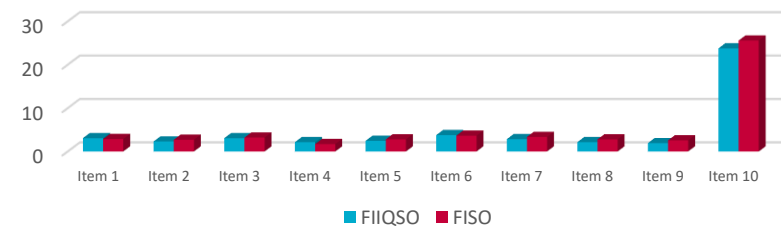
*p ≤ .05

■ FIIQSO ■ FISO

Figure 3 – CGVI scores

■ FIIQSO ■ FISO

Correlational analyses between the CGVI items and the Static-99R items highlight two strong predictors of sexual risk factors. The domain of "Relationship to Victim" is negatively correlated with the Static-99R total score (r =.58 ; p ≤ .001). Thus, the closer the victim is to the sexual offenders, the lower the risk of sexual recidivism. This relationship is also found in regression analyses (β = -.55 ; t = -3.61 ; p = .001). Similarly, the presence of "Psychosis" was found to positively predict the risk of sexual recidivism (β = .33 ; t = 2.17 ; p = .040).

The literature highlights that people with ID are more single and unmarried (Boer et al., 2007). Similarly, they are more likely to live in family settings, institutions, or supervised apartments (Faubert, 2015; Fujira, 2010; Paradis, 2007). Furthermore, social isolation and being in a family setting are significant risk factors in violent behavior among ID offenders (Boer et al., 2010; Hounsome et al., 2018).

Conclusion

Although people with an ID are commonly thought to be at higher risk of committing an offense, evidence-based data are still lacking and difficult to obtain (Vicenzutto et al., 2022). To avoid further stigmatizing people with ID, it is of utmost importance to better understand the personal and situational risk factors associated with violent and sexual offenses. Better identification of clinical and criminological characteristics would lead to more relevant risk management.

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