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Self-Reports of Grooming Behaviors in Adult Men Who Sexually Abused a Child: Assessment and Treatment Considerations

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Grooming is the dynamic process a sexual offender engages in to gain access to and sexually assault a victim without detection. This study examined the grooming behaviors of adult males who sexually offended receiving community based specialized therapy. The results of the study suggest that over half of the participants used grooming strategies that included: grooming the environment, coercion, tricks, and bribes. However, there was wide discrepancy on reporting of grooming behavior when asked about general strategies versus specific behaviors. These results provide critical information to the existing knowledge base on the assessment and treatment of the population.

Keywords: sexual grooming, child sexual abuse, sexual offending

INTRODUCTION

Fundamental to the therapeutic achievement of sustainable cognitive and behavioral change is, in part, the comprehensive awareness of various facets of the sexual offense and concomitant thought and emotional processes (Gunst et al., 2017; Mpofu et al., 2018; Yates, 2013). In this we mean the intentional consideration of sexual grooming behavior(s) with the traditionally defined sexual offense the offender engaged in, and the cognitive distortions they may possess. The presence of grooming in the compilation of sexually assaultive behavior compels professionals to understand their clients' grooming behaviors to detect a drift toward possible recidivism before it occurs and to thoroughly address all aspects of the sexually offensive behavior (Hui et al., 2015; Williams, 2015).

The purpose of this paper is to examine how adult males receiving community-based treatment for acts of child sexual assault perceive and report their grooming behaviors. To achieve this aim, we begin by providing an overview of grooming behaviors and the role cognitive distortions has historically had in understanding adults who cause sexual harm. A brief review of aspects of adult sex offender assessment and treatment are provided to illustrate how including grooming behaviors as a target of treatment can promote holistic change and positive outcomes. Following this review, findings from our examination of grooming behaviors are provided with recommendations for clinical practice.

LITERATURE REVIEW

Sexual Grooming Behaviors

While a disproportionate number of sexual abuse cases take place within an established relationship (Sullivan & Beech, 2004), unknown child victims may also be targeted. The adult who is looking to perpetrate sexual acts against a child will often engage in a repertoire of behaviors aimed at creating a positive dynamic and reputation with the targeted victim and their environment, which desensitizes them to the inappropriate relationship or behavior (Bennett & O'Donohue, 2014; Craven et al., 2006; McAlinden, 2006). This serves the multifaceted purpose of ensuring secrecy surrounding the sexual offense, avoiding detection, laying the groundwork to discredit the victim should they disclose the abuse, and increasing the probability of future contact (Lanning & Dietz, 2014; McAlinden, 2006; Stokes et al., 2013; Wolf & Pruitt, 2019; Zinzow et al., 2010).

Understanding sexual grooming behaviors in adult sex offenders has received growing attention over the past twenty years. Empirical studies have found distinct stages of grooming (Bennett & O'Donohue, 2014; Winters et al., 2020), multiple targets (Craven et al., 2006; McAlinden, 2006), diverse strategies (Sullivan & Beech, 2004; Whittle et al., 2015; Williams, 2015; Winters & Jeglic, 2016), and varied environments in which contact occurs (e.g. in person or online) (Whittle et al., 2013; Williams et al., 2013; Wolak et al., 2008). The multifaceted nature of sexual grooming behaviors has, up until recently, resulted in a plethora of definitions of the phenomena. Despite the lack of a universal definition, there is an understanding of sexual grooming being a process with distinct stages, varied strategies, and multiple targets with the aim of accessing and sexually abusing a child without detection during or after the abuse. What has not yet been considered in this definition of sexual grooming is if the individual's own cognitions and perception of grooming and sexual harm changes in response to their grooming.

Cognitive Processes Permissive of Sexual Abuse

In company with deceiving others is self-deceit. While the individual works toward creating an environment in which the sexual offense can take place, they themselves must also develop a set of cognitive processes permissive of causing harm to others. Self-grooming, or the distorted cognitions an offender constructs, works toward justifying, minimizing, and/or denying the harm their behavior causes (Blake &

Gannon, 2008; Craven et al., 2006; Ward & Keenan, 1999). This practice of self-deception is comprised of three elements: (1) the individual knew the choice was wrong, (2) they did it anyway, and (3) they manufacture a reason why the decision was acceptable (Khalil, 2017). The reason is not for external actors, but rather for the individual themselves to come to terms with the decision they made, to avoid the cognitive strain of keeping the deceit from others, and ability to claim innocence over the deception (Khalil, 2017). Over time, this reasoning can become ingrained in their thinking process, impact the values and moral compass of the individual, and lead to the development of attitudes and beliefs supportive of sexual abuse (Blake & Gannon, 2008; Khalil, 2017).

Cognitive distortions in those who sexually offended, also referred to as dysfunctional belief systems, has received considerable attention as they relate to the traditional definition of sexual abuse (see Elliot & Babchishin, 2012). As they relate to grooming, the conceptual literature asserts these individuals are conscious of their grooming behavior and its intent (McAlinden, 2006), while research has yet to support this idea (Winters et al., 2021). While this article does not seek to answer degree of consciousness of grooming behavior, we do seek to understand how an individual who sexually abused a child understands and reports on their grooming behavior.

Focus of the Assessment and Treatment of Adult Males Who Sexually Offend

Assessment and treatment of individuals who sexually offend is rapidly evolving to accommodate the field's understanding of the variations in the etiology of sexual violence, empirically supported approaches, and dynamic social and political concerns (Stinson et al., 2017). Current best practices for the assessment and treatment of adult males who sexually offended adheres to the Risk-Need-Responsivity principles (Center for Sex Offender Management, 2007; Marshall, 2021; Tyler et al., 2021; Jung, 2017). Risk refers to the level of care in which interventions are provided so that safety of the offender and community is maintained. Interventions are to address the needs of the offender as they relate to the dynamic variables associated with recidivism. Responsivity requires evidence-informed practices be administered in a manner that responds to the individual characteristics of the offender (ATSA, 2014; Marshall, 2021). In each of these three principles, the focus has often been on the traditionally defined sexual offense, not the individual's sexual grooming behavior. This omission of sexual grooming behaviors is evident in current psychosocial assessments and treatment models that fall short on exploring grooming behaviors within the overall context of the offending behavior (Gannon, et al., 2019; Marshall, 2021; Tyler et al., 2021; Yates, 2013), despite its relevance to the sexual offense and impact on the victim (Wolf & Pruitt, 2019).

Knowing the importance of offense related cognitions in the assessment and treatment of individuals who caused sexual harm and connection of sexual grooming to sexual abuse, we sought to contribute to the field's understanding of grooming behaviors and how this can influence assessment and treatment.

METHODS

Procedures

The first step in this retrospective examination of the thought processes and sexual grooming behaviors of convicted sex offenders was to gain approval of the Institutional Review Boards (IRB) at the researchers' respective universities. Once IRB approval was obtained, the researchers worked in conjunction with a local agency that provides therapeutic outpatient group treatment to court mandated clients who had been convicted of sex offenses against adults, children, or both. During group therapy sessions, a graduate research assistant presented the study to the members of each group, and asked if they were willing to participate. If the person was interested in participating in the study, they were given a copy of an informed consent, and in certain cases, the informed consent was read aloud to them, if they so chose. Once consent was obtained, they were given a demographic survey to complete. Each participant was given a copy of the

grooming survey. Once the survey was completed, the participant placed it in a sealed envelope and handed it back to the research assistant. No names were ever recorded on the surveys.

Sample

The final sample consisted of 41 males who had been convicted of child sexual abuse. Three female offenders were approached, but they declined to participate in the study. The overwhelming majority of the sample was white, with only one person identifying as Black, and one person identifying as multi-racial. Six participants declined to provide their ethnicity.

Measures

For this study, two measures were created by the researchers: a demographic survey and a grooming measure (*Sex Offender Grooming Assessment; SOGA*). The grooming measure was shown to be reliable ($\alpha=.907$; see Wolf et al., 2021, for more detail), but based on the psychometric testing that has already been completed, this measure is now being studied with clinicians as respondents. The SOGA included 76 questions about the sexual crime (victim demographics, relationship with first three and last victim, and duration of grooming) and sexual grooming behaviors which were categorized into eight broad groupings: Environmental Grooming, Online Grooming, Tricks, Use of Drugs/Alcohol, Coercion, Bribes, Threats, and Physical Force. Each category had a description of that category of sexual grooming provided, then asked participants if they engaged in this type of grooming (yes/no). After the description and yes/no items, grooming strategies that fall under that category were listed with a Likert-scale of: Never, Sometimes, Often, or Always used. An open ended question asking if the participant would like to share any additional information closed each grooming category of the SOGA.

RESULTS

Demographics of Participants and their Victims

The participant's age at first offense ranged from 20 through 67 years old years old. 52.5% (n=21) reported they were victims of child sexual abuse themselves. The majority of participants were high school educated (n=17), with the second highest group having had some college education (n=11). 71% of the sample had an income of \$30K or less, and 50% made \$25K or less per year.

The average number of victims per participant was 1.8, with 36.9% (n = 14) of the offenders admitting to multiple victims, with the highest number of victims at 10 victims for one offender. The youngest victims were 3 years old (n=2 participants), and the oldest victims were 17 years old (n = 1 participant), with the most common ages of abuse being 12 and 13 years old. The number of female victims was 2.7 times that of male victims.

All participants in the study were mandated into treatment through referral from the court system, parole, or probation. For the majority of the sample (80.5%, n=33) this was their first time in a sex offender treatment program. 62% of the sample had been in treatment for six months or less at the time of the study.

Reports of Grooming Behaviors by Category, Item, and Open-Ended Question

The majority of the sample (82.9%, n=34) used at least one grooming behavior towards their child victim, with a mean of 2.22 grooming behaviors used per participant. However, as shown in Table 1, there is quite a disparity between the responses given to the categorical grooming behavior questions versus specific behaviors that encapsulated the type of grooming category. For instance, when asked "Did you groom the environment?", 41.5% of the sex offenders in this study endorsed 'yes', but upon further

assessment of the behaviors endorsed in that grooming category, 87.8% reported grooming the environment (as assessed by later questions, such as “acting like a friend to the people around the victim”, “tried to create a positive reputation to establish trust”, “spent time with the caretakers of the victim” which received an endorsement other than “Never”). In another example, when asked about their use of threats in the commission of the offense, 7.3% endorsed ‘yes’, but through analysis of later specific behavioral questions (e.g. ‘threaten harm to the victim’, ‘threaten harm to victim’s pets’, ‘threaten harm to victim’s family’), 17.1% used threats with their victim(s).

Table 1: Types of Grooming Behavior as Reported by Adults Convicted of Sexually Abusing a Child

Grooming Categories	Participants who endorsed yes to this grooming category	Participants who reported using at least 1 specific grooming behavior under this category
Grooming the Environment	41.5% (n=17)	87.8% (n=36)
Online Grooming	19.5% (n=8)	22.0% (n=9)
Tricks	29.3% (n=12)	68.3% (n=28)
Use of Drugs/Alcohol	24.4% (n=10)	26.8% (n=11)
Coercion	41.5% (n=17)	70.7% (n=29)
Bribes	46.3% (n=19)	53.7% (n=22)
Threats	7.3% (n=3)	17.1% (n=7)
Physical Force	12.2% (n=5)	12.2% (n=5)

DISCUSSION

This study examined the way adults who sexually assaulted children in an outpatient treatment setting perceived and reported their grooming behaviors. Almost all participants (80.5%) were mandated to treatment, with 62% of the study participants being in treatment less than six months. Almost all participants (82.9%) reported using at least one grooming behavior, with the average number of behaviors being 2.2. However, given the discrepancy in responses to a general type (category) of grooming and specific strategies falling within that category, the average number of grooming behaviors used by an offender requires closer examination.

The results of this data suggest that when asked directly about a certain grooming technique (e.g., “Did you use tricks to groom the victim into abuse”), participants were more likely to endorse ‘no’. However, when they were asked about specific grooming behaviors that involved tricking the victim, such as making the victim think it was a game, they were more likely to endorse yes. Furthermore, when asked an open-ended question, such as “Is there anything else you would like us to know about this?”, participants would sometimes provide insights into the type of grooming they used but had reported ‘no’ to in the categorical question. These responses were sometimes used to assess the correct number of participants who used the type of grooming described in each variable. For instance, a participant endorsed ‘no’ for online grooming, but when asked if he chose his victim because the victim was isolated, responded with “Yes, chose victim because internet, isolation.”

The discrepancy in reporting between general category and specific items within it existed across all categories of sexual grooming except for physical force. The sexual grooming categories with the most difference between general category response and specific item endorsement response, in order of prevalence were: grooming the environment (n=19), tricks (n=16), and coercion (n=12). Types of sexual grooming with the least difference in reporting between general category and specific items within that

category were: physical force (n=0), use of drugs/alcohol (n=1), online grooming (n=1), bribes (n=3), and threats (n=4).

The most common sexual grooming strategies, as reported by study participants, were grooming the environment (87.8%), coercion (70.7%), tricks (68.3%), and bribes (53.7%). The least common were physical force (12.2%), threats (17.1%), online grooming (22%), and use of drugs/alcohol (26.8%). Unlike the categories of grooming reported to be used the least, the four most common strategies tend to be more ambiguous, subtle, and open to interpretation. This may contribute to the discrepancy we found in their reporting of the use of these types of behaviors.

Findings from this study suggests adults who sexually abused children may in fact not be knowledgeable or conscious of their grooming behavior and intent, as suggested by McAlinden (2006). Some participant reports included “there was no grooming”, “she seemed to like me”, and “she told me she has been with numerous men and seemed into me”. This lack of awareness has major clinical implications. Understanding how an offender understands their grooming behavior(s) as part of the offense is imperative in relation to prevention, resource allocation, and comprehensive treatment. As one participant stated “At the time I did not (know what grooming was) but after treatment I realize.” When the grooming strategies used by the individual are known, therapists can focus their work on helping the client understand what sexual grooming is and the underlying motivation for their grooming behaviors. If grooming behaviors resume, additional resources (e.g. more intense supervision, increased frequency of therapy) can be put into place to support the individual and keep the community safe until the therapist is able to work (in partnership with other helping professionals involved with the case) with the offender on understanding what triggered this relapse in behavior and extinguish the behavior. This can help ease the burden on professionals who often have large caseloads and are working in, and with, over stressed systems by responding with more supports when only needed, versus keeping unnecessary supports in place during periods of lower risk and need.

Sexual grooming is often the initial stage of child sexual abuse (Winters & Jeglic, 2017). To provide comprehensive treatment, grooming behaviors of adults with sexual offenses must first be assessed. Including psychometrically validated measures such as the Sex Offender Grooming Assessment (Wolf et al., 2021) into initial evaluations to identify the type of grooming behavior(s) used by the individual who caused sexual harm works toward providing clarity and depth to risk, needs, and future treatment (Jung, 2017). This insight allows the clinician to target grooming behaviors during therapeutic work, provide psychoeducation on this aspect of the sexual offense to the client (thus increasing the client’s own awareness of their behavior and empowering their change), and address any unfamiliarity or cognitive distortions around grooming that might exist. As one participant reported “I didn’t realize it was offensive at the time, but I felt very compatible with him”. Being able to recognize when sexual grooming behaviors resume in a client affords the professional an opportunity to activate additional resources in the offender’s support network and explore factors that contributed to the change. This rapid response can enhance safety for the offender and vulnerable individuals around them by disrupting the possibility of recidivism before it takes place.

In understanding how an individual grooms people and environments to sexually abuse a child, clinicians not only gain valuable insight into the offense(s), but they also have an opportunity to learn where and how the behavior (and the underlying thought processes driving it), originated from. For example, over half of our sample reported their own history of child sexual abuse. Are the sexual grooming strategies they use as adults’ ones that were used on them as children? As one participant reported “My grooming techniques were exactly the same as were used on me.” Did their own abuse contribute to, and normalize, a worldview, set of thought processes (cognitive distortions), and behavioral strategies that influenced them to offend? The movement toward integrating a trauma-informed care (TIC) approach to the treatment of adults who caused sexual harm (Jansse, 2018; Levenson, 2013; Levenson & Willis, 2014) works toward addressing the cognitive distortions and self-deception underlying the abusive behavior of individuals who

sexually abused children. When applied, a TIC approach considers the developmental history and lived experiences of the individual in the onset of sexually harmful ideology and behavior (Levenson & Grady, 2016). Thus a TIC framework may prove useful in exploring the development and maintenance of cognitions supportive of sexual grooming.

Limitations

Limitations of this study include the use of a relatively homogenous population (males engaged in outpatient therapy) who were in the early stages of treatment. This may have impacted their understanding of sexual grooming behaviors in general, and what strategies they used. We had a relatively small (n=41) sample size which prohibits us from generalizing the findings to the entire population of adults with sexual offenses. While no identifying data was collected, and participants were assured no one other than the researchers would see the anonymous results, concern about sharing information or behaviors not previously disclosed may have influenced survey responses. The SOGA is a new survey that requires additional examination. Discrepancy in reports within grooming categories, particularly categories that are more obscure, may be a result of language used.

Overall, this study indicates the need for additional research into the grooming behavior of individuals with sexual offenses against children and their understanding of this aspect of the offense. When it has been examined, grooming children for sexual abuse has disproportionately relied on online transcripts (Greene-Colozzi, et al., 2020; Malesky, 2007; Marcum, 2007; Shannon, 2008; Winters et. al., 2017). This restricts an accurate understanding of grooming as online grooming is not a universal, or as our study found, common strategy. Prior research has found discrepancy in the reports of grooming when asking the individual who was harmed or the one who caused the harm. This supports a recommendation that the offender's own understanding and use of sexual grooming be assessed and addressed in treatment (Whittle et al., 2015). Specifically, future research should look at how the victim and the offender's report of grooming align and differ during the treatment process and the mechanisms influencing the experience, perception, recall, and reporting of sexual grooming.

NOTE

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