

Sex offenders are of grave concern to the public due to the nature of sexual offending. The public tends to believe that the recidivism rates of sexual offenders, particularly pedophiles, are quite high. This information sheet is intended to provide a quick overview of the research on this topic.

Recidivism is defined as being charged with the commission of a new offence. In the case of sex offenders, the public is most concerned with sexual recidivism - the commission of a new sexual offence. Recidivism rates vary by the time frame being looked at and by the type of sexual offending.

Recidivism Rates

One research project looked at 61 previous studies of sexual recidivism using a 4-5 year follow up period. This research on sex offenders found that 13.4% recidivated with a sexual offence, 12.2% recidivated with a non-sexual, violent offence and 36.6% recidivated with any other offence.¹

A long term follow-up study of child molesters in Canada found that 42% were reconvicted of sexual or violent crime during the 15-30 year follow-up period.²

In addition, the long-term follow-up study (15-30 years) of child molesters showed that the average recidivism rate for this group of offenders is actually lower than the average recidivism rate for non-sexual offenders (61% versus 83.2% respectively for any new conviction).

Likelihood of Recidivism

The long term follow-up study referred to above included a control group of non-sexual criminals. The highest rate of recidivism (77%) was for those with previous sexual offences, who selected boy victims outside the family and who were never married.³

In general, rapists reoffend more often than child molesters.⁴

Among child molesters, those with male victims have been found to have the highest recidivism rates, followed by those with unrelated female victims.⁵

Incest offenders show the lowest recidivism rates of all sexual offenders.⁶

Factors Related to Recidivism

Canadian research on what triggers recidivism among sex offenders found that the recidivists were generally considered to have poor social supports, sexual pre-occupations, attitudes tolerant of sexual assault, antisocial lifestyles, poor self-management strategies and difficulties cooperating with community supervision.⁷

This same study found that the number of recidivists and non-recidivists who had attended treatment programs was the same. However, the recidivists were more likely to have dropped out or to have been described as poor treatment candidates.

Success While on Supervision

Recent amendments to the Corrections and Conditional Release Act, designed to deny more sex offenders access to conditional release, suggest that there is a perception that sex offenders on conditional release are at high risk for re-offending or violating conditions. However, studies have shown that sex offenders have success rates on conditional release similar to the general offender population.

A follow-up study of sex offenders on conditional release found that almost 80% were successful on conditional release.⁸ In comparison, National Parole Board statistics for 1996/97 show that over 85% of offenders on parole and statutory release were successful.⁹

Treatment Issues

Treatment is one variable associated with recidivism that can be influenced by correctional programming, making treatment a high priority for sex offenders.¹⁰

The public tends to believe that sex offenders are not amenable to treatment. However, successful sex offender treatment programs have been shown to reduce the risk of reoffending.

In terms of treatment, the most highly regarded approach employs a cognitive behavioral model employing relapse prevention in high risk situations. This model fits with the Correctional Service of Canada's (CSC) assessment and treatment of sex offenders. CSC focuses on identifying the nature and pattern of the offender's behaviour and providing the offender with the coping strategies that will reduce the risk of recidivism. This approach emphasizes the need for offenders to take responsibility for their actions, recognize their cycle of offending and identify their high risk situations, and helps them develop strategies to avoid relapse. 12

Program intensity is linked to offender needs. Moderate to high needs will be met in medium

or maximum security settings where programs are longer and more intensive. Offenders who are identified as low risk/needs will be matched with low intensity, short duration programs in minimum security settings, and in the community.

The majority of treatment programs usually include an education component emphasizing attitudes towards sexuality and relationships, empathy enhancement, anger management, victim awareness, techniques to reduce or control deviant arousal and relapse prevention skills. Emphasis is placed on reducing the risk of sexual offending through a combination of self-management and external control.

Future Directions

The public's fear of sex offender recidivism is legitimate. The effects of sexual offending are felt by victims, families and communities for years following the offence.

Over the past few years, Canada has changed both law and practice in dealing with sexual offenders. The following are some of the new initiatives:

- The Corrections and Conditional Release Act allows judges to set parole eligibility at one-half of the sentence
- Sex offenders can be detained until the end of their sentence
- Police are authorized to notify specific individuals or the community at large of the release of sex offender deemed high risk to reoffend
- Police can ask the courts to apply a peace bond to sex offenders in the community to restrict their movements, require reporting to police or reside at a particular location
- Sex offenders can be declared a Long Term Offender at time of sentencing, meaning that the offender can receive up to 10 years community supervision following imprisonment for at least 2 years
- Sex offenders can be declared a Dangerous Offender at time of sentencing, meaning that the offender can be held in prison indefinitely
- Criminal records of pardoned sex offenders who apply for positions of trust with children can be revealed upon approval by the Solicitor General

A number of these provisions are relatively new and we need to give them time to work. Together, they make a fairly comprehensive set of protections for the community. Some of them can be used more effectively, and we can continue to build on what we know about treating sex offenders. The success of offenders in the community can be improved through appropriate treatment while in custody, intense relapse prevention programs during conditional release supervision, and long-term follow-up and support for sex offenders on an "as needed" basis at no cost to the offender.

The best protection we can offer any community is the prevention of crime in the first place. The John Howard Society believes that the most effective method of preventing sexual offending is to break the cycle of sexual abuse and violence in homes and families. We know that 50% of men in federal prisons were victims of child abuse or witnessed family violence. Our child welfare workers see kids who, with early intervention and treatment of problems, might not go on to become adult sex offenders. The earlier we work intensively with kids and youths who show sexual deviance, the more successful we are at preventing the creation of an adult sex offender. We know what needs to be done. We just need to make it a priority.

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Endnotes

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