

PART I

INTRODUCTION

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Chapter 1

THEORY CONSTRUCTION, DEVELOPMENT AND EVALUATION

Why would a man want to sexually molest a prepubescent child? Does such behaviour reflect entrenched sexual preferences for children or rather a misguided attempt to seek intimacy? Does the predisposition to seek sex with children reside in psychological characteristics found in only a small number of males or are all men capable of such abusive actions? Why would a man in a stable intimate adult relationship want to have a sexual relationship with a teenage girl? It is hard to see how his needs would effectively be met in such an unequal relationship, and yet it does happen. How is it possible for someone to become sexually aroused to a child who is neither physically mature nor sexually motivated? In this case, the cues that normally elicit sexual arousal in adults are missing and yet some men do report feeling extremely aroused by prepubescent children. Finally, how is it possible for a male to force sex upon a woman when she is clearly unwilling and distressed or when she is drunk, unconscious, asleep or otherwise unable to respond? And importantly, how do such individuals reconcile the woman's obvious distress with the view that she was a willing partner?

The answers to these questions have significant practical implications for clinicians and policy makers. Understanding why child molestation or rape occurs, and how it develops and changes over time, is of the utmost importance in helping us reduce the frequency of this serious social problem. The assessment of sexual offenders is designed to detect those characteristics that have predisposed them to engage in sexually abusive actions, and to this end, therapists invest time and resources into the development of sound psychometric instruments and valid assessment procedures. Thus, we rely on obtaining a clear description of the clinical phenomena associated with an offender's actions, for example, problems with managing and controlling negative emotional states, the presence of thoughts and attitudes that legitimise or excuse sexual abuse, and difficulties establishing and maintaining close intimate relationships with other adults.

Identifying clinical phenomena associated with an individual's offence gives valuable insight into the specific causes or aetiological factors that lie behind his abusive behaviour, and helps in the design of intervention programmes to stop him from reoffending. Treatment programmes for sexual offenders are typically based on theoretical assumptions concerning the psychological, biological and socio-cultural mechanisms (i.e. causes) that result in child molestation and rape. There are always clinical theories underlying the selection of the modules contained in treatment manuals. For example, the inclusion of relapse prevention strategies in most state-of-the-art intervention programmes for sexual offenders follows from the belief that relapse is a sequential process influenced by different cognitive, affective and contextual factors (Marshall, 1999). In addition, attempts to equip individuals with enhanced intimacy skills is based on the assumption that their acquisition will lead to improved relationships with adults, therefore reducing the desire to seek sexual contact with children (Marshall, 1999).

The above comments point to the necessity of engaging in aetiological thinking when treating sexual offenders, or at the very least, endorsing the causal assumptions built into treatment manuals used by therapists. There is no way of avoiding dependence on theory and therefore it is desirable to be explicit about the aetiological assumptions underpinning our practice. Formulation-based approaches assume that in order to treat sexual offenders effectively, therapists need to develop a comprehensive understanding of their psychological vulnerabilities and problems (Ward, Vertue & Haig, 1999). The result of this process is a conceptual model representing the client's various problems, the hypothesised underlying causes and their interrelationships. In essence, this clinical theory specifies how the symptoms or problems are generated by psychological mechanisms, for example, dysfunctional core beliefs or behavioural deficits. This process requires us to be theoretically literate.

In order to benefit fully from reading this book, it is necessary to acquire at least a basic understanding of certain ideas in the philosophy of science. Therefore in the remainder of the chapter we will discuss the following concepts: scientific realism, the nature and levels of theory, scientific models, what constitutes an explanation, the role of methodology in science, the process of theory knitting, and criteria for theory evaluation.

THE NATURE OF SCIENCE

There are a number of influential philosophies of science, each with its own perspective on the nature of explanation, theories, models, causality, laws of nature and the concept of truth (Newton-Smith, 2002). These include empiricism, instrumentalism, logical positivism, realism, conventionalism, and numerous variations of these views of science. In this book, we adopt a critical realist view of science. That is, we believe that our best theories converge on the way the world really is and that this knowledge provides a fundamental knowledge base for the construction and implementation of technology, and therefore our efforts to intervene and control the world. According to Psillos (1999) scientific realism has three core theses: metaphysical (a claim about the nature of reality), semantic

(the relationship between scientific terms and the world) and epistemological (the kind of knowledge obtained).

According to the metaphysical thesis, the world has a distinct and mind-independent structure. This means human beings do not literally create their own realities and therefore should endeavour to construct and test theories that help them to elucidate the structure of the world. The world exists independently of individuals' wants, wishes, beliefs and attitudes, and therefore the successful implementation of a cherished life plan or personal project requires them to know how it works, at least to some degree. This understanding of the natural and social aspects of life enables human beings to seek and achieve things that are important to them and to reduce or avoid harmful conditions and events. In the case of sexual offending, this means developing an understanding of the psychological, biological, social and cultural processes and structures that result in sexual abuse.

The semantic thesis of scientific realism states that successful theories accurately describe this world and refer to *real* entities and processes. From this perspective, it is a mistake to view theoretical claims about attachment style, cognitive distortions or self-regulatory style as simply convenient fictions that enable us to work with offenders. According to scientific realism such terms genuinely refer to aspects of offenders' psychological make-up; they point to vulnerability factors and social conditions that result in abuse.

The epistemological thesis states that theories that are well developed and predictively successful are likely to be (approximately) true and as such give us knowledge of reality. The notion of approximate truth means we are able to claim that not only do theories refer to aspects of the world, but that the processes and structures posited by successful theories really do exist. To extend the example outlined above, if attachment explanations of sexual offenders' intimacy problems are well supported by the evidence, then we can be confident that such individuals do in fact have insecure attachment styles and distorted internal working models of relationships (Marshall, Anderson & Fernandez, 1999a). The notion of approximate truth is important because it reminds us that while theories may give a partial picture of certain aspects of life, they still need to be fleshed out and refined in some respects.

The version of realism we take in this book is a modest one, and we accept that even our best theories may only be partially true (Kitcher, 2001). In addition, it is possible that for any given scientific problem there could be more than one way of solving it. Any solution to a scientific problem will always reflect human values and interests (see below), and given that these can legitimately vary, different groups often favour different answers.

Of course, it could be argued that the different solutions to scientific problems collectively constitute the global or overall solution. In other words, there is really only one solution. While this may be strictly true, it fails to capture what happens during scientific progress due to differences in values and interests. Individuals frequently focus on different aspects of a problem and therefore their explanatory efforts are concentrated on that particular aspect, with other ways of approaching and researching the problem being deemed to be of little or no interest. For example, evolutionary psychologists and criminologists may both want to solve

the problem of crime and develop good aetiological theories that explain why human beings consistently hurt each other and break the law. Evolutionary psychologists set out to discover the distal selection pressures bearing on this issue and to identify the particular adaptations that enabled human beings to counter threats to themselves and their kin. The next explanatory step is to consider what proximal psychological mechanisms generate violent behaviour in contemporary humans and to trace their development through the human life cycle. The critical point is that biological considerations will constrain any acceptable theoretical work and focus attention on a subset of possible mechanisms and processes. In contrast, criminologists may not accept that human beings have an inherited human nature at all and seek to explain violent behaviour in terms of macro-level structures and processes such as gender construction, unemployment and socialisation. What constitutes a good theory will be viewed quite differently and it is possible, perhaps even inevitable, that criminologists and evolutionary psychologists will think their opponents have got hold of the wrong end of the stick, and regard each others' explanatory efforts as at best irrelevant and at worst, dangerously confused.

According to scientific realism, we know the world in terms of our theories. Human beings construct representations of the mechanisms and structures that lie beneath the surface of life and create phenomena. In turn, we act upon the basis of these representations and change the world in accordance with our interests and needs (Kitcher, 2001). Therefore, knowledge leads to the construction of the institutions and physical and psychological conditions governing individuals' lives. The fact that our interests constrain what counts as (valuable) knowledge, means that human values (as evident in needs and interests) guide the application of scientific knowledge and methods to the everyday world. If these representations are accurate, our interests will be promoted and needs met, but failure to get it right can result in devastation and misery. There is truth in the claim that we construct our world, but only in the sense that scientific knowledge underpins actions that modify the world, the consequences of which may prove to be beneficial or harmful.

So, scientists attempt to detect and then to explain the occurrence of phenomena by developing scientific theories. These explanations describe the causal mechanisms and processes causing phenomena, enabling predictions to be made concerning their future occurrence. The valuable thing about scientific knowledge is that it can lead directly to the development of technologies that enable individuals to intervene in the world and achieve important goals. For example, understanding how infections develop and impact on the body has resulted in the invention of powerful drugs, better sanitation and hygiene practices, and ultimately, improved physical health.

Scientific theories of human behaviour set out to achieve two fundamental goals: explanation and prediction (Siegert, McPherson & Dean, in press). A theory explains phenomena, why they exist, and why they possess certain properties. An explanation is basically the application of a theory in order to help understand certain phenomena. It tells a causal story concerning why and how specific events happen and why people behave the way they do. For example, the intimacy deficit model claims that child molesters seek children

as intimate partners because they are unable to meet their emotional needs with adults (Finkelhor, 1984). Explanation is *backward* looking; it helps us understand why a particular outcome happened. By way of contrast, prediction is *forward* looking and is concerned with the precise forecasting of outcomes within a system (Siegert et al., in press). For example, a researcher might predict that an offender with a dismissive attachment style is more likely than individuals with other attachment styles to behave aggressively toward his victim.

THE NATURE OF THEORY AND SCIENTIFIC METHOD

It is now time to consider in more depth just what a theory is and its relationship to scientific laws and models. In a nutshell, a theory is any description of an unobserved aspect of the world and may consist of a collection of interrelated laws or a systematic set of ideas (Kukla, 2001). Laws are true universal propositions referring to all time and space, that express causal or necessary relationships among properties. They are discovered by science. An example of a scientific law is 'All pieces of copper expand when heated'. An example of a possible law in forensic psychology is 'All child molesters have sexual preferences for children'. This is not in fact a law because it is only true for a certain subset of child molesters (Marshall et al., 1999a). It should perhaps be qualified in some way and rephrased as a probable law that only applies to those child molesters with certain characteristics (as yet to be determined!) Theoretical terms refer to entities and processes that are unobservable (e.g. intelligence, character traits) while observation terms denote processes that can be directly observed (e.g. test scores, behaviour).

The terms 'models' and 'theories' are often used interchangeably; however, it is useful to distinguish them from one another. One major use of the term 'model' refers to the utilisation of scientific metaphors or analogies in the development of scientific theory. In this sense an analogy is derived from a source and applied to a target domain. The assumption is that there is some degree of similarity of structure between the model and its referent. A good example of a model is the depiction of the heart as a pump. In this model it is assumed that certain relationships between the components of a pump and its overall functioning also hold for the heart. Just as the major function of a pump is to compress and push air into some object so the heart functions to push blood around the body. Other examples of scientific models based on analogies include the atom being compared to a solar system, the mind being likened to a computer (mind as software and brain as hardware; the hydraulic model of mind), and seeing children as lay scientists (Gopnik, 1996). Models function to help simplify and focus research and if successful may be fleshed out into a mature scientific theory. For example, the claim that the heart is a pump enabled researchers to develop comprehensive theories of the circulation system and also to acquire knowledge about functional and dysfunctional physical systems, leading to the development of effective medical treatments. Models can be conceptual or physical (e.g. Watson and Crick's physical model of DNA: Newton-Smith, 2002).

It is useful to see science from a methodological perspective rather than simply in terms of specific theories and knowledge (Hooker, 1987). Method provides scientists with a *plan of inquiry*, which can guide the search for empirical phenomena, and the subsequent construction of satisfactory explanatory theories. The normative force of methodology (the fact that it prescribes how researchers should proceed) depends partially on the fact that it recommends methods that have worked in the past, that is, that have led to successful problem solving. Typically, science proceeds as follows: constrained by a developing problem and relevant background facts, certain phenomena come to the researcher's attention and are ordered by detecting patterns in the phenomena. Once ordered, these phenomena are explained by abductively inferring the existence of an underlying mechanism. Here, abductive inference involves reasoning from a presumed effect (the phenomenon) to its explanation in terms of an underlying cause. From an initial judgement of the plausibility of such a hypothesis attempts are made to elaborate on the nature of that mechanism, frequently by way of constructing plausible models. The developing theory is evaluated on a number of dimensions including empirical adequacy, explanatory depth and simplicity, and is modified as necessary. Research problems function to guide the clear description of puzzling phenomena and theory formation (Ward et al., 1999).

THEORY APPRAISAL

Typically, more than one theory is able to account for the evidence (i.e. under-determination) and therefore empirical adequacy alone does not provide a sufficient basis for deciding between competing theories or even deciding whether or not it is worth persevering with one model. Because of this, proper theory appraisal has to be undertaken on evaluative dimensions in addition to that of empirical adequacy. It must be noted that the kind of under-determination we are referring to is transient in nature and is usually resolvable over time (Kitcher, 2001). That is, as two theories are compared critically, a clear winner typically emerges from the testing and evaluation process. A further point is that it sometimes makes sense to develop theories that initially lack empirical adequacy because they are particularly promising in some other respect, for example, because they refer to deep underlying mechanisms (*explanatory depth*) or open up new avenues of enquiry (*fertility*).

Because of the issue of under-determination, philosophers have suggested that epistemic values (i.e. theory appraisal criteria) such as explanatory depth and fertility are equally important for making judgements about which theories are best and for helping researchers choose among competing theoretical explanations (Hooker, 1987; Newton-Smith, 2002). Epistemic values arguably track truth in some respect. In other words, the set of epistemic values in question point to a theory's likely truth. The key idea is that theories exhibiting such epistemic values have proved over time to be deeper and more satisfactory explanations: that is, they seem to be giving us a more accurate picture of the world and its workings. Because of this fact, scientists are prepared to argue that the theory in

question is more likely to be true. It is important to note that the majority of the specific values proposed are conceptual. The following list captures the epistemic values commonly accepted to be good indicators of a theory's truth (Hooker, 1987; Newton-Smith, 2002). We will now outline the major theory appraisal criteria:

- *Predictive accuracy, empirical adequacy and scope* concern whether the theory can account for existing findings and the range of phenomena requiring explanation. An example of an empirically adequate psychological theory, with predictive accuracy and scope, is Bowlby's attachment theory (Ainsworth, 1989). It has been the focus of a considerable amount of empirical research and many of its predictions concerning the relationship between insecure attachment, self-esteem, coping style and socio-emotional intelligence have been supported.
- *Internal coherence* refers to whether a theory contains contradictions or logical gaps. An example of a psychological theory with severe problems of coherence is Freud's theory of infantile sexuality (Davison, Neale & Kring, 2003). A major issue here is the degree to which the theory is testable and whether it covers all possible empirical consequences. That is, critics have argued that it cannot be supported or falsified.
- *External consistency* is concerned with whether the theory in question is consistent with other background theories that are currently accepted. An example of a psychological theory with good external consistency is Pennington's cognitive neuroscience theory of psychopathology (Pennington, 2002). A notable feature of this theory is its consistency with findings and theories from neuroscience, neuropsychology, behavioural genetics and descriptive psychopathology.
- *Unifying power* relates to whether existing theory is drawn together in an innovative way and whether the theory can account for phenomena from related domains; does it unify aspects of a domain of research that were previously viewed as separate? A good example of a theory exhibiting this value is again Pennington's. In his naturalistic theory of psychopathology, he argues that a good explanation will need to explicitly build in genetic, developmental, neuroscience, neuropsychological, phenomenological and environmental factors.
- *Fertility or heuristic* value refers to a theory's ability to lead to new predictions and open up new avenues of inquiry. In a clinical setting this may also include a theory's capacity to lead to new and effective interventions (for a good example, see Marshall and Barbaree, Chapter 3).
- *Simplicity*, as the name suggests, refers to a theory that makes the fewest special assumptions. An example of a relatively elegant psychological theory is Skinner's radical behaviourism (Skinner, 1976). This theory sets out to explain virtually all aspects of human functioning from language development to instances of psychopathology using very basic behavioural processes.
- *Explanatory depth* refers to the theory's ability to describe deep underlying mechanisms and processes. An example of a theory exhibiting explanatory depth in cognitive science is connectionism (Marcus, 2003). Connectionism

provides a computational account of human psychological capacities in terms of simple, interacting units. It also allows for a reduction of complex mental processes to neural networks.

The use of multiple values in evaluating theories, however, does create some problems for researchers and clinicians. First, it means that theory appraisal is a complex process involving tradeoffs between the different values outlined above. Such tradeoffs between epistemic values occur because there is no algorithm for infallibly choosing the strongest theory; human judgement is inevitably required in making such determinations. In addition, different criteria may be preferred depending on the context of a research project, and the presence or absence of strong competitors. In the early stages of a theory's life it may make sense to favour its heuristic value and downplay its relatively poor showing on the more empirical criteria such as empirical scope and predictive accuracy. Of course, this partly depends on what the competing theories are like, or even if there are competitors. Sometimes, there may be only one promising theory in a given domain. Second, thinking through the different strengths and weaknesses of a theory takes quite a bit of cognitive labour and is a demanding process. This is probably why in most mature sciences there is a cognitive division of labour between theoreticians and experimental scientists. Theoreticians formulate, develop and evaluate theories while experimentalists test them, a time consuming task requiring high levels of technical and practical skill.

An important point when evaluating any theory is to keep in mind that theory appraisal is always a comparative process. Theories are usefully construed as cognitive tools that provide clinicians and researchers with maps to navigate their way through the complexities of clinical practice. Considering theories from a pragmatic perspective means that it may be the case that two different theories have quite different strengths and offer something unique in both research and clinical arenas. In this situation, it would be prudent to use both in their respective domains of application while remaining on the lookout for a more comprehensive theory that combines the virtues of each of these less satisfactory alternatives. For example, Finkelhor's precondition theory is marred by a lack of internal coherence and scope but is clinically very useful in helping offenders to grasp the dynamic nature of the offence process (fertility or heuristic value; see Chapter 2). The important thing to keep in mind is that because theories are tools, each may have a narrow domain of application and perform quite a restricted job. It is necessary to be aware of the function and scope of different theories in order to capitalise fully on their strengths and avoid falling victim to any weaknesses.

In summary, the evaluation of a theory or model involves the explicit consideration of a number of different epistemic values (Hooker, 1987; Newton-Smith, 2002). The ability of a theory to account for research findings and to survive hypothesis testing is certainly a necessary requirement for scientific acceptance. Of equal or even greater importance is its ability to extend the scope of existing perspectives and to integrate competing or diverse approaches to the study of the relevant phenomena. In addition, logical consistency, simplicity and heuristic worth represent important epistemic values against which a theory can be evaluated. Ambiguity, inconsistency, vagueness and

undue complexity may restrict the overall value of a theory and should be noted whenever they are evident. Theory evaluation is a comparative process and the fact that a theory contains gaps or logical inconsistencies does not mean that it should necessarily be abandoned or rejected. Its value depends on how it compares with its competitors, and its overall explanatory capacity (Hooker, 1987). Overall, the basis for a belief in the success of science in accounting for the world and the truth of the above realist approach to theory construction and evaluation resides in realism's track record. This record provides the best explanation for the explanatory and predictive power of science and, relatedly, the utility of technologies based on these realist theories. When talking about the clinical domain, technologies are the assessment and therapeutic strategies derived from aetiological theories.

THEORY CONSTRUCTION AND DEVELOPMENT IN SEX OFFENDING

We will now illustrate briefly how the process of theory construction, development and appraisal functions in the sexual offending domain by using the example of intimacy deficits. This will help to highlight the role of theories in the sexual offending area and to clarify what constitutes good theoretical work.

In the 1980s researchers noted (see Chapter 12) that sexual offenders appeared to have difficulties relating effectively to adults, often resulting in loneliness and unhappiness (Marshall, 1989, 1999). A first suggestion was that the cause of these social and emotional problems resided in a lack of social skills. Therefore the solution was to give sexual offenders social skills training (Overholser & Beck, 1986). However, subsequent research failed to find convincing evidence of social skills deficits (failure of prediction), casting doubt on the adequacy of the social skills deficit hypothesis. Marshall (1989) proposed that one way of accounting for the relationship problems noted in sexual offenders was to adopt an attachment perspective. He argued that sexual offenders' childhood rejection and abuse resulted in the acquisition of an insecure attachment style and feelings of emotional loneliness, hostile attitudes, and a lack of intimacy and some social skills. This innovative theory encouraged clinicians to focus on self-esteem and intimacy problems and to develop a suite of new interventions to address these problems.

The attachment theory was an advance on the social skill deficit hypothesis and offered considerable heuristic value, greater explanatory depth, external consistency (with theory from developmental psychology), and greater unifying power (integrated evolutionary, cognitive and behavioural views of interpersonal problems). However there did seem to be some predictive failures and problems accounting for the range of intimacy issues noted in sexual offenders. A critical clinical observation was that some offenders did not appear to be particularly lonely or to report feeling insecure. This issue was not easily dealt with by Marshall's initial attachment theory. In response to this and other problems, Ward and his colleagues (Ward, Hudson, Marshall & Siegert, 1995b) reformulated the theory and proposed that different types of insecure attachment were

associated with quite distinct clinical problems and offence styles. Subsequent empirical work has supported aspects of this theory and thrown doubt on others (e.g. Smallbone & Dadds, 1998). Further refinements in theory and research design by Smallbone and others have led to a rich body of research findings, and more tailored treatment strategies (Smallbone, 2005).

The point of this example is that a critical conceptual analysis of Marshall's original theory helped to identify its strengths and weakness and led to the construction of better theory, research, and arguably more precisely targeted treatment. By focusing explicitly on the strengths and weaknesses of this attachment perspective it was possible to draw upon the deeper resources of attachment theory and reformulate it in a way that improved its scope and explanatory depth.

We have argued above that theoretical discussion and critique are necessary steps in the development of effective treatment of sexual offenders. A significant question is what kind of theory are we referring to?

LEVELS OF THEORY

Typically, in the few book chapters actually devoted to discussion of sexual offending theories, theories tend to be classified according to the types of source theories utilised in their construction, for example, cognitive, learning, systems, psychodynamic or biological theories (see Lanyon, 1991; Schwartz, 1995). In our view this is not the most promising way of categorising theories and results in the conflation of level of generality (or focus) with type of psychological systems (e.g. behavioural, cognitive, biological) and theoretical tradition (e.g. psychodynamic versus behavioural). Additionally, theories of the same type (e.g. learning theories) may vary greatly in terms of their breadth and degree of detail. For example, a learning theory framework could be used to explain one type of problem (e.g. deviant sexual arousal) or to provide a comprehensive explanation of all aspects of sexual offending (e.g. Marshall & Barbaree, 1990).

A meta-theoretical framework for classifying theories based on their level of generality of focus, and also upon the extent to which the relevant factors are anchored in both developmental, or contemporary, experiences and processes has been provided by Ward and Hudson (1998a). In this framework, they distinguished between level I (multifactorial), level II (single factor) and level III (micro-level or offence process) theories. Level I theories represent comprehensive or multifactorial accounts of sexual offending (e.g. Marshall & Barbaree, 1990). The aim is to take into account the core features of sexual offenders and to provide a complete account of what causes these phenomena and how they manifest in sexually abusive actions. Level II, or middle level theories, have been proposed to explain single factors thought to be particularly important in the generation of sexual crimes: for example, the presence of empathy deficits (Marshall, Hudson, Jones & Fernandez, 1995). In this approach the various structures and processes constituting the variable of interest are clearly described, and their relationship with each other specified. In a sense, level II theories expand on the factors identified in level I theories. Level III theories are

descriptive models of the offence chain or relapse process (e.g. Pithers, 1990; Ward, Loudon, Hudson & Marshall, 1995d). These micro-models typically specify the cognitive, behavioural, motivational and social factors associated with the commission of a sexual offence over time; they constitute temporal or dynamic theories. The levels of theory model is meant to help researchers distinguish between different types of theory and ultimately to facilitate their integration through a process of theory knitting (see below). It should be noted that the levels of theory framework is only intended to function as a heuristic for locating theories according to their primary explanatory focus. Therefore, the distinctions between the different levels of theory is not intended to be overly rigid and some theories may in fact fall somewhere in between the three levels (see Chapters 14 and 15 on relapse prevention and offence chain models). Furthermore, the ultimate aim for theorists is to construct a global theory that integrates theories from the different levels into a unified explanation of sexual offending (Ward & Hudson, 1998a).

In addition to the distinction between levels of theory, Ward and Hudson also emphasised the importance of taking into account the distal–proximal distinction. Distal factors constitute vulnerability factors that emerge from both developmental experiences (e.g. sexual abuse) and genetic inheritance (e.g. anxious temperament). These *trait* factors make a person vulnerable to offending sexually once precipitating factors are present: for example, relationship conflict. Although vulnerability factors have their origins in a person's developmental history, they are always causally implicated in the onset of sexually abusive behaviour. For example, deficits in emotional regulation skills may have been acquired during a man's childhood but actively contribute to the onset of sexual offending several years later.

Proximal factors are triggering processes or events, and interact with the vulnerability factors to cause sexual offending. These factors fall naturally into two distinct groups: psychological *state* factors and situational events. The state variables are the manifestation of individuals' underlying vulnerabilities and are activated by situational events such as interpersonal conflict. For example, emotional coping deficits are likely to produce powerful negative affective states following an argument with a partner or a stressful social event such as losing a job. Both the negative emotional state and the loss of employment are proximal causes that, in conjunction with a person's longstanding difficulties in coping with emotions, directly result in a sexual offence. In this situation, sexual activity is used as a means to reduce or modulate powerful emotions and as such, represents an inappropriate coping response.

In our view, the levels of theory model provides a useful way of arranging theories by their domain of application and focus. This is likely to be of help in promoting a greater degree of collaborative research and theory development in the area. Essentially, our view is that by carefully specifying the level of a theory and its explanatory focus it will be possible to engage in more fruitful critical analysis and comparisons between competing theories. There is not much point in deciding which of two (or more) theories is better if they belong to different levels; it is a bit like comparing apples and oranges. Additionally, mapping theories across the three levels of the model enables researchers to notice possible

areas of convergence and ultimately results in more unified and deeper explanatory theories. For example, it may become apparent that theories of empathy deficits and cognitive distortions can be unified by a single theory of mind approach (see Chapters 8 and 9). This process of theoretical integration is called theory knitting (Kalmar & Sternberg, 1988).

THEORY KNITTING

A theory knitting strategy stipulates that researchers should seek to integrate the best existing ideas in a given domain within a new framework (Ward & Hudson, 1998a). This strategy involves identifying the common and unique features of the relevant theories, so that it is clear what constitutes a novel contribution and what does not. The major virtue of this approach is that good ideas do not get lost in a continual procession of 'novel' theories that appear briefly in the literature and then disappear forever, often for no good reason.

Kalmar and Sternberg (1988) contrast this perspective with the traditional segregative approach to the process of theory development in psychology. According to the segregative perspective, different theories are set up in competition and compared for their ability to predict data satisfactorily. Rather than attempting to combine and develop the best elements of each theory, this approach tends to compare individual theories and view them as mutually exclusive and self-sufficient. A major disadvantage of this perspective is that it can trap theorists into seeing things only from the point of view of their preferred theory. It can also lead to researchers focusing unknowingly on different aspects of the same phenomenon. The failure to ask 'What can I usefully take from this theory or model?' frequently leads to the premature dismissal of other points of view and a kind of insular arrogance among researchers, each convinced their theory is superior to all others.

An example of the theory knitting process being applied to the sexual offending domain is the way in which the Pithers and Marques model of the offence chain (Pithers, 1990) has been integrated into the self-regulation model developed by Ward and Hudson (Ward & Hudson, 1998a). According to the original Pithers and Marques (Pithers, 1990) model, offenders lacking effective coping skills fail to manage a variety of internal and external risk factors. This failure results in a lapse, catastrophic thinking (an abstinence violation effect) and subsequent reoffending (a relapse). Ward and Hudson recognised that the relapse pathway identified in this model was applicable to some offenders and provided a useful treatment framework for these individuals (see Chapters 14 and 15 for more detail on this theory). However, their own empirical research and conceptual analysis of the traditional model led to the conclusion that there were in fact at least four quite distinct relapse pathways, each associated with different treatment needs and issues. They also used self-regulation theory to reformulate traditional relapse prevention concepts such as the abstinence violation effect and seemingly irrelevant decisions. Using two major types of treatment-related goals (approach and avoidant), in conjunction with three distinct types of self-regulatory style (under-regulation, mis-regulation and intact

regulation), they developed a four-pathway model that was able to cover the majority of offence and relapse patterns evident in sexual offenders. The content validity of the Ward and Hudson theory has been established subsequently by several groups of researchers (e.g. Bickley and Beech, 2002). The availability of a more complex model meant that treatment was able to be tailored to offenders' specific needs as opposed to adopting a 'one size fits all' approach (see Chapters 14 and 15). Ward and Hudson knitted together the best aspects of the Pithers and Marques approach with some new ideas from self-regulation theory and their own research findings to construct a more comprehensive relapse prevention treatment model.

STRUCTURE OF THE BOOK

Theories are indispensable resources for clinical work with sexual offenders. They provide a framework for assessment by noting the difficulties offenders are likely to experience, outlining how such problems are interrelated, and specifying their psychological, social, biological and cultural causes. In other words, case formulation (the end product of assessment) is crucially dependent on the existence of sound aetiological theories. A good case formulation for a sexual offender should outline the developmental factors that made him vulnerable to committing a sexual offence. The relevant developmental variables may include inconsistent parenting, being a victim of sexual abuse, experimenting sexually at an early age, or compulsively masturbating as an adolescent. These learning events could lead to the formation of dysfunctional psychological mechanisms that later play a role in sexual offending. For example, inconsistent caring might lead to insecure attachment and resulting loneliness or difficulties in adult relationships. For another individual, a lack of capacity to modulate negative emotions or an inability to utilise social supports in times of emotional distress could be a partial cause of subsequent sexual abuse. Strong negative mood states might result in a loss of control, which, in conjunction with sexual desire, lead an individual opportunistically to use a child to meet his sexual needs. From a clinical perspective, the presence of different deficits or vulnerability factors requires the application of distinct therapeutic strategies, or at least, the placement of different priorities on existing treatment approaches. For example, some individuals may need to acquire relatively greater levels of relationship skills to address attachment difficulties while others would benefit from learning how to manage their moods more effectively.

In this book we use the levels of theory framework developed by Ward and Hudson to structure the discussion of sexual offending theories. Our aim is to present the key ideas underpinning each theory as clearly as possible, and to examine their merits from both a research and a clinical point of view. We are particularly concerned with focusing on the clinical utility of the theories, believing that most have a positive contribution to make to assessment and treatment.

In Part II we critically evaluate the major multifactorial theories of child molestation and rape. These theories have been selected because of their current

popularity or potential to illuminate important aspects of sexually abusive behaviour. The emphasis in Part III is on single-factor theories employed to explain the characteristics most associated with sexual offending: empathy deficits, cognitive distortions, deviant sexual arousal, impaired social functioning, cultural factors supporting abuse and risk factors. For each topic, the two or three most influential theories will be described, evaluated and their clinical implications drawn out. In Part IV, descriptive models of the offence and relapse process are discussed and in Part V, a number of treatment theories are critically scrutinised. The last section is an interesting innovation in a theory book, included because we wanted to examine explicitly a number of recent treatment frameworks that are currently the focus of intense discussion.

The epistemic values or theory appraisal criteria outlined above will be used to guide each theory evaluation. In order to make our discussion as user friendly as possible we will not systematically consider every value for every theory. That would prove to be rather cumbersome and time consuming. Rather we will focus on the most salient strengths and weaknesses of each approach. At the end of each chapter an overall summary of the merits and utility of the theories examined will be presented, helping the reader to appreciate the overall picture for each topic and perspective. Our focus will be on male perpetrators and primarily on the sexual crimes of rape and child sexual abuse.

It should be apparent by now that we view theory as an indispensable tool for clinicians as well as researchers. In our opinion, theory formation and appraisal has been somewhat neglected by workers in the field, with most current interest centring on risk assessment, classification and treatment efficacy. These are worthy and important topics but all are dependent on underlying aetiological and treatment theories. It is time to expose the aetiological assumptions residing deep within current practices and to shed some critical light on the way we think about sexual offending, and by implication, provide more compelling justifications for intervention.