

*"Attachment and Sexual Offending is a must for anybody working in the field,
as well as for those who want to know more about this area."*

ANTHONY BEECH, UNIVERSITY OF BIRMINGHAM, UK

UNDERSTANDING AND APPLYING ATTACHMENT THEORY
TO THE TREATMENT OF JUVENILE SEXUAL OFFENDERS

Attachment and Sexual Offending



Phil Rich

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Understanding and Applying Attachment Theory to the Treatment of Juvenile Sexual Offenders

by

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Stetson School, USA*



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Treatment of Juvenile Sexual Offenders**

Dedication

I repeat here a dedication from a previous book, but it is no less meaningful now than it was when I first wrote it.

This book, then, is first and foremost dedicated to the victims of sexual abuse. Their victimization is a personal and social tragedy. I add to this a dedication to those children who grow up disconnected in their own families and, in many cases, disconnected from their society. Their loss is our loss as well.

The book is also dedicated to the leadership and staff of the Stetson School in Barre, Massachusetts, a residential treatment program committed to the best possible treatment of children and adolescents who engage in sexually abusive behavior. Stetson remains a remarkable working environment, and a combination of remarkable people in a remarkable field.

About the Author

Phil Rich, EdD, MSW, LICSW is the Clinical Director of Stetson School, a residential treatment program for juvenile sexual offenders and sexually reactive children in Barre, Massachusetts. He received his MSW in 1979 and his doctorate in applied behavioral and group studies in 1992, and has practiced as a clinical social worker for over 25 years. He has served as the program director of five residential and day treatment programs, and has worked extensively with troubled adolescents and adults in residential, inpatient, day treatment, and outpatient settings. He has 12 published books, including *Understanding Juvenile Sexual Offenders: Assessment, Treatment, and Rehabilitation*, published by John Wiley & Sons.

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Introduction

In work with sexual offenders—juvenile and adult—it has become increasingly common to link disturbed or underdeveloped early attachment relationships to the later development of pathology. There is an increasing assumption that such deficits of course exist, with an almost implicit supposition that the onset and maintenance of sexually abusive behavior is fueled by what we might call “attachment deficits.”

However, the idea that a poor attachment is, or may be, a link between childhood experience and the later onset of sexually aggressive behavior is not new. It has been developing over the course of the past decade, most notably in the work of Marshall, Hudson, Ward, Smallbone, and colleagues. Nevertheless, the idea has taken increased hold in the last few years, with increasing discussions and research studies that hypothesize direct links between attachment difficulties and the onset of sexually abusive behavior. As it became clear to me how much time and effort was going into discussing the role of attachment in conference workshops, journal articles, and book chapters, I realized that I needed to learn more about attachment theory and its application to the treatment of juvenile sexual offenders. Hence this book is as much about attachment theory as it is about juvenile sexual offending.

In fact, as any discussion of attachment and juvenile sexual offenders has to be nested within a larger understanding and discussion of attachment theory itself, the first half of the book is significantly about attachment theory. The second half is focused on the relationship between attachment and *juvenile* sexual offending, but it's difficult to do that without also focusing on adult sexual offenders. In part, this is because most of the limited research on attachment and sexual offending has been conducted with adult rather than juvenile offenders, but it is also impossible to separate the two populations, particularly because attachment is both a phenomenon of early childhood and a facet of human psychology that operates throughout the life span. Further, because adult offenders were, of course, children before becoming adults, we can assume that if disturbances in attachment are a factor in adult sexual offending then they must also be a factor in the onset of juvenile sexual offending, at least in those juveniles who continue to perpetrate sexually abusive behavior as adults. Even in those adults who first engage in sexually abusive behaviors as adults, and not as juveniles, it is clear that disturbances in attachment must have also been present during their adolescence.

This is because the patterning of attachment styles is considered to be a phenomenon that first appears in infancy and early childhood, following a developmental progression

throughout childhood and into adolescence and adulthood. Indeed, the idea of *disturbed* attachment falls within the specific realm of developmental psychopathology, implying a distortion or disturbance in normative and expected infant, childhood, or early adolescent development that is a direct or indirect antecedent to the later appearance of psychopathology.¹

THE GOALS OF THE BOOK

The overarching goal of this book is to describe and discuss the nature and impact of attached relationships and social connectedness on the development of juvenile sexual offending. In order to accomplish this broad goal, several steps are required, each of which serves as an independent, but linked, goal.

The first goal is to explain and critically explore the ideas of attachment theory, including its strengths and limitations. One of those limitations lies in the nature of attachment theory as a *developmental* psychology with a primary focus on infancy and early childhood, and a secondary, but nonetheless significant, focus on the attachment in adults. In fact, the vast majority of attachment theory covers early childhood and picks up again in early adulthood. Between these poles, the transformation of attachment from its childhood origins to its adulthood equivalent is not clearly defined. As such, our understanding of attachment in prepubescent children and adolescents lies in a poorly researched limbo. Although we see the presumed outcomes of attachment relationships by mid-childhood and into adolescence, it is not clear what attachment actually means or how it works in that age group, and even if the concept, as described by attachment theory, is relevant in adolescence and adulthood.

Accordingly, the second goal is to define and describe attachment in such a way as to make it a more comprehensible and durable concept that can help us to better understand what we mean by attachment in pre-teens and adolescents, including the nature, quality, and experience of attachment during adolescence. Closely linked, the third goal is to understand how the attachment model is of use in understanding the impact of early patterns of attachment on the adolescent psyche, including its influence on self-appraisal, social interactions and relationships, and the capacity for emotional and behavioral self-regulation. The goal here is to better understand the nature of early and ongoing attachment experiences as an influence on mental schemata in the adolescent, in attachment theory referred to as the "internal working model."

In principle, the internal working model contains the mental templates for self-image, self-agency (the capacity for self-efficacy), representations of others and the external world, patterned scripts and strategies for interpreting and responding to stimuli and demands, and the capacity to mediate and regulate cognitive, affective, and behavioral responses. As it is postulated that the internal working model develops and changes throughout the life span (hence, *working* model), how does the attachment experience in

¹ The reader should remain aware of the distinction between "psychopathology," or the development of mental health disorders, and "psychopathy," or the development of significant antisociality, as both are discussed in the book, and represent different diagnostic sets.

adolescence influence the current mental schema that contains these templates? It is reasonable to presume that feeling secure about self, others, and circumstances is a requisite for the development of effective social skills, including the capacity to face and master complex situations, tolerate difficulty, regulate affect and emotion, and build healthy and satisfying social relationships. Of central importance, then, is understanding in the child, adolescent, and adult the level and quality of internalized security that guides interactions and behaviors. Thus, the third goal is to more clearly understand in pre-teens and adolescents the cognitive and emotional schema, embedded behavioral patterns and internalized scripts for action, and elements of personality that may result from early and ongoing attachment experiences. In effect, the goal is not only to describe the “natural history” of attachment as it evolves from infancy through childhood and into adolescence, but to understand the manner in which it *continues* to shape cognition, affect, behavior, and social relationships during adolescence.

The fourth goal is an obvious one, exploring the relationship that exists between attachment experiences, internalized schema, and the development of sexually abusive behavior in children and adolescent (and subsequently, adults). Central to that question is whether there is any substantial difference in the attachment experiences and patterns of three group of adolescents: (i) a non-clinical population (teenagers who do not get into substantial trouble and are not diagnosed with significant mental health disorders); (ii) troubled but not sexually abusive adolescents, including those who engage in conduct-disordered behaviors or are charged with non-sexual criminal offenses; and (iii) juvenile sexual offenders (recognizing that this population is itself a diverse and non-homogeneous group). Of special concern is whether attachment difficulties are in some way particularly related to the onset of sexually abusive behavior, or more generally a risk factor for anti-social behavior *but not specifically related to sexual offenses*. That is, do attachment difficulties represent a developmental vulnerability that predisposes some individuals towards antisocial behavior but is otherwise unrelated to the onset of sexually abusive behavior, or do they form a significant factor in the development of sexually abusive behavior?

In the first case, assuming that attachment difficulty *is* a risk factor for conduct disorder but not sexually aggressive behavior, other, more pertinent, risk factors are required to fuse and catalyze early experience and eventually lead to sexually abusive behavior. In this case, attachment difficulties are but one risk factor among many, not particularly relevant to later sexual aggression. However, if attachment difficulties themselves represent a risk factor that is *directly* linked to the onset of sexually abusive behavior, with other factors playing a catalyzing but nonetheless secondary role, then such deficits represent a direct pathway to sexual offending behavior. This would represent an important step in our understanding of and ability to predict sexually abusive behavior, at least in the case of sexual re-offense.

The fifth and final goal of the book is to consider implications for the evaluation and treatment of attachment-related difficulties and pathologies, and particularly, of course, in the treatment of sexually reactive children and juvenile sexual offenders. If attachment is directly or indirectly implicated in the development of antisocial and/or sexually abusive behavior, and we can more fully understand what we mean by attachment in pre-teens and adolescents and how it affects their ongoing behaviors, we can develop and apply an attachment-informed framework for evaluation and treatment. Such a framework can help us to recognize and address both non-pathological and pathological concerns resulting

from early difficulties and disruptions in the attachment process, as well as ongoing attachment experiences that impact current cognition, affect, and behavior, including continuing moral development and sense of social connection and relatedness.

Above all, however, my general goal is to better understand the population of sexually troubled children with whom we work, and help to educate and train professionals in our field, myself included, in how better to work with these youths. As is always my orientation in writing, my intention is to present information, perspective, and theory in a way that synthesizes and challenges, as well as enlarges and illuminates, current ideas. I hope I am able to do this in a way that promotes critical thinking. This means analyzing and carefully evaluating what we are reading and hearing, seeking confirmatory and contradictory ideas, weighing them one against the other, and linking different ideas and perspectives. Not least of all, critical thinking requires imagination and creativity as we form and re-form our own thoughts and beliefs, applying these to the reality of our work. I invite readers, then, to think critically about the ideas I present in this book, and, indeed, about the book itself.

RELEVANCE OF ATTACHMENT THEORY

I began my research for this book with the suspicion that attachment theory would prove to be important and useful in our work, but not the answer we seemed to be looking for. In a previous book, I described our search for the “Factor X” that will explain to us *why* juvenile sexual offenders become juvenile sexual offenders. It was then, and remains, my sense that there are a myriad of reasons, too complex in their effects and in their interactions with one another, for us to ever fully comprehend why one troubled child engages in sexually abusive behavior and another does not, or why some juvenile sexual offenders desist before they become adults and others become sexual offenders in adulthood. The idea behind Factor X, however, is that if only we knew more, and if only our theory was richer, we could decipher the mysteries behind human behavior. This belies and undercuts our stated notion that sexual offenders, be they juvenile or adult, are a heterogeneous group. Nevertheless, we seem to believe “secretly” that they are, actually, a homogeneous group, and if we can just put our finger on Factor X we can nail the homogeneity factor that can explain everything. I find no Factor X in this book.

The conclusion of this book I’ll give away from the start. I conclude that attachment theory is an important and very useful, although flawed, theory that has great applicability to understanding and working more effectively with our population, but attachment status does not distinguish juvenile sexual offenders from other troubled adolescents, any more than it discriminates between adult sexual offenders and other adult criminal groups. It is other factors, other elements, other forces, and other experiences in the lives of youths that, together with attachment, act to shape, rather than determine, developmental pathways and behaviors. Attachment, as an early experience in child development, sets the pace for and is tied to many later developmental events, but on its own is just another player, albeit an important one.

Finally, I conclude that we are not likely to bring about change in the youths we treat through cognitive-behavioral or psychodynamic treatment, individual or group therapy, family therapy, or even the underlying common factors that account for effective therapy.

We will most likely bring about change through the connections, the attachments, and the driving force of relationships and social relatedness. Attachment theory describes for us *how* those connections are made. Applying an assessment and treatment framework informed by attachment theory helps us to see how attachments have formed in any particular individual, how damaged attachment may have contributed to the pathway taken by that individual—including a pathway leading to sexually abusive behavior—and how attachment re-formed may help to create a more socially connected and less antisocial person capable of engaging in self-regulation, moral behavior, and a life style that does not include the victimization of others.

The Relationship of Attachment to Juvenile Sexual Offending

In attachment theory, the term “attachment” is actually a multidimensional construct rather than a word with a single fixed meaning, separating into attachment *experiences*, attachment *patterns*, and attachment *strategies*. There is a link between these dimensions of course, and attachment patterns and strategies develop out of earlier attachment experiences and later come to affect current attachment experiences. However, although they operate interactively and simultaneously to define attachment as a whole, each dimension represents a different aspect of attachment, each with its own meaning. Indeed, this is one of the difficulties in describing “attachment,” *per se*.

The word itself has come to be synonymous with being attached, or having a sense of social connection and the ability to *become* socially connected. Yet “attachment” describes only an abstract concept, actually realized through the *experience* of attachment, the manner or *pattern* in which the experience of attachment is manifested, and scripts or *strategies* by which the seeking and maintenance of experienced attachment is implemented. In its grammar, “attachment” is a verb (to attach oneself to), an adjective (to have an attached relationship with), and a noun (an attachment exists between them). To this end, attachment is a process, an organized set of procedures, *and* a state of being. The attachment concept, then, is operationalized as a subjective experience, a style or pattern, and an approach or strategy. We seek evidence of attachment through self-report, the assessment of classifiable styles (patterns) of attachment, and/or manifestations of attachment-seeking (or maintaining) behavior.¹

Each of these elements not only begins to define what we mean by attachment, but also makes clear that use of the attachment label in exploring, classifying, and understanding human behavior requires different observational and measurement procedures for different dimensions of attachment, and at different stages in human development. The simple and often off-handed manner in which we describe “attachment,” and describe individuals as attached or not attached (or securely or insecurely attached), is both inadequate and ill-informed. Attachment is no less complex and abstract than any other psychological con-

¹ Or, according to attachment theory, the activation of the attachment behavioral system.

struct or phenomenon of human behavior, and should be considered, explored, and understood in this light.

ATTACHMENT IN THE ADOLESCENT

It is not even clear if “attachment” in adolescence is the same phenomenon as “attachment” in infancy and early childhood. Certainly, by adulthood “attachment” has taken on a different meaning and relates more to romantic relationships, the parenting role, and, more loosely, other adult affiliative–social relationships. Adolescence, then, beginning in late, pre-pubescent childhood and extending to early adulthood, serves as a transitional period, bridging the developmental gap between the infant and childhood form of attachment and the adult variant, or outcome, of attachment. Adolescence, along with its many other related roles in cognitive, affective, moral, and social development, is presumably the period during which attachment is redefined and transformed, and in which the attachment experience takes on an entirely different meaning, fuels significantly different behavior, and serves substantially different purposes than childhood attachment.

Through cognitive and affective development and the unfolding of the biological and neurological sequence, during adolescence the experiences of childhood metamorphosize into something quite different, becoming crystallized in the still developing ego as aspects of personality. No longer the biological, evolutionarily driven survival tool hypothesized by attachment theory to be driving the behavior and psychology of the young child, as with human development in general attachment in adolescence is also transformed. Although attachment theory does not provide a clear description of attachment in adolescence, it presumably becomes the proving grounds in which the sense of security and self-confidence derived from early attachment experiences turns into the self-directed behavior, self-image, perceptions of others, social relationships, and behaviors that will increasingly define the adolescent and shape his or her adulthood experiences of self and others.

By adolescence, early attachment experiences and the sense of being attached are folded into mental representations and displayed in behaviors that do not resemble the internalized attachment experience and external behaviors of infants and pre-school children. The mental schema described by so many psychologists, built in part upon early attachment experience, is the key to what attachment becomes and how it contributes to and perhaps drives perceptions of self and others, emotional life, social interactions, behaviors, and self-regulation. Conceptualized by attachment theory as the mental schema by which early attachment experiences are hard wired into the central nervous system, embodied in the “internal working model” are the individual’s experience of the world, sense of self and others, and strategies to make sense of, implement, and manage social interactions. In most models of mental schemata, this metaphysical mental map serves not only as the center of all intentional action but also as the location of the ego, or sense of selfhood. It is this internal working model that is probably the best target for understanding the impact of attachment on the development of selfhood and the transformations in “attachment” that occur during the transition from childhood to adolescence, and again from adolescence to adulthood.

THE LINK BETWEEN RESEARCH AND THEORY

Regardless of increasing truisms that imply or assert that the development of pathology in sexual offenders is linked to underdeveloped attachment in children, there is little evidence that the existence of attachment deficits has any *direct* connection to the development of sexually abusive behavior in children or adolescents, and hence adults. Despite the attractiveness of the position and its appearance as having explanatory power, the idea that poor attachment experiences serve as a developmental pathway to juvenile sexual offending remains specious at this time. This is not to say that attachment difficulties do *not* play a role,² whether major or minor, but merely that we must put such ideas into a context informed by a broad understanding of attachment, sexually abusive behavior, and evidence that links the two, rather than simply interesting and intuitively attractive theory, let alone our great need to understand and be able to categorize all human behavior.

Evidence of attachment deficits and a link to juvenile sexual offending is drawn largely from investigations into the attachment status of adult sexual offenders, but even in this domain such evidence is both limited and questionable. In many ways, a critical review of the research with adult sexual offenders suggests that, despite the use of empirical research designs, there is a confirmatory bias. That is, research seems to be used to confirm a priori theory almost uncritically, rather than discover, test, or evaluate it. In fact, it is not uncommon to read in much of the present research (which is quite sparse and often conducted by the same group of researchers, or built directly upon the work of these researchers) that although the data do not *yet* support the theory, there is nevertheless good reason to believe that attachment deficits *are* key, and it is simply a matter of time, better research design, and improved measurement processes until evidence supporting theoretical assumptions *is* discovered. For instance, despite acknowledging the many limitations reported in most studies, Mulloy and Marshall (1999) write that they continue to be sure that "despite the problems . . . there appears to be no doubt that attachment styles are an important area of dysfunction in sexual offenders" (p. 106). Similarly, Smallbone and Dadds (2000) write that "notwithstanding these limitations, these results indicate that childhood attachment may play some role in the development of coercive sexual behavior" (p. 13). It is as though we have decided that it *is* there (the attachment deficit link) and we will find it, if not now then soon.

It may be true that difficulties and disruptions in the experience of early attachment and the development of satisfactory and nourishing social relationships contribute significantly to the onset of coercive and abusive sexual behaviors in some men, and this idea has both obvious face validity and intuitive appeal. But, so far, this is just an attractive theory that seeks to answer disturbing and complex questions for which we have few other answers.

In fact, there is limited support that the attachment classifications of adult sexual offenders differ significantly from those of non-sexual criminal offenders or non-offenders (i.e., the general population). Accordingly, research has so far engaged largely in a theoretical assumption that attachment deficits *do* exist and that they *are* significantly linked to the development of sexually abusive behavior (in men, at least), despite failing to find strong

² Indeed, it is my conjecture that attachment *does* play a part in the development of sexually abusive behavior, but fills just one part, not the whole cast.

or consistent proof for this attractive idea. Even across similar studies, researchers have failed to demonstrate any consistent or predictable outcomes that support attachment deficit or related hypotheses, although tend to focus on almost any data that even minimally support the already assumed presence of attachment deficits. In most cases, other data from the *same* research could just as easily suggest that differences in attachment deficits are no more apparent in sexual offenders than in non-sexual criminal offenders, or even the general public. Even when researchers do provide some evidence for their hypotheses in this area, a more critical look at the data shows flaws and weaknesses. This approach, in which research supports theory rather than seeking to understand the problem, is characterized by Andrew Lang, the late nineteenth-century Scottish writer, who is credited as saying that some use research as an drunken person uses a lamp post—for support, rather than illumination.

Reviewed in Chapters 11 and 12, it is as though research studies grab onto the small details that support the theory, rather than the data that do not. These supporting data, even if slim, are used to move us towards a conclusion that researchers seemingly have already reached. In politics, this is called “spin.”

THREE RISKS IN ASSESSING ATTACHMENT IN JUVENILE SEXUAL OFFENDERS

Aside from a critique of adult sexual offender research, as mentioned, attachment research in adolescent sexual offenders is even more rare than the relatively sparse research into attachment, social relatedness, and empathy in adult sexual offenders, and is just getting underway at this point. We face three risks, then, if we draw our conclusions from the current research and theory.

Risk One: Failure to Discriminate between Adult and Juvenile Sexual Offenders

We may assume that the same patterns, experiences, and/or strategies of attachment and social connectedness that have been or may be found in adult male sexual offenders also apply to juvenile sexual offenders, although we already know that juveniles are different from adults, and juvenile sexual offenders are different from adult sexual offenders.

We have already come to recognize essential differences between the two populations (juvenile and adult sexual offenders) in most aspects of their sexually abusive behaviors, including motivations, context, and targets, as well as developmental level. It is important to recognize that similar differences will also be found in their experience and level of attachment, which presumably plays a different role during adolescence, is still developing, and is in transition between the childhood variant of attachment and its adult counterpart. It is not only a mistake at this juncture to assume that we have actually proven something about attachment in adult sexual offenders, when we actually have not, but it would be an even bigger mistake to simply transfer what we believe we know about attachment in adult sexual offenders to the realm of juvenile sexual offending. We have already