

The Causes of Rape: Understanding Individual Differences in Male Propensity for Sexual Aggression, by Martin L. Lalumière, Grant T. Harris, Vernon L. Quinsey, and Marnie E. Rice (Washington, D.C.: American Psychological Association, 2005), 294 pp., \$59.95 (\$49.95 for APA members).

Preventing Sexual Violence: How Society Should Cope with Sex Offenders, John Q. LaFond (Washington, D.C.: American Psychological Association, 2005), 259 pp., \$59.95 (\$49.95 for APA members).

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As I was reading these two books, my local newspaper was running stories about three separate cases (spanning about two years' time) of abduction, sexual assault, and murder of children. My state's legislature was endeavoring to do something about it. Meanwhile, an international story reports that some male soldiers of one faction are raping some female noncombatants associated with a different faction. If past trends hold, such stories are probably appearing in the news as you read this review some months later.

Less ubiquitous: A columnist for my local newspaper recently conveyed information from a member of an association of people that focuses on treating sex abusers. The columnist referred to them as "an organization with adamant views based on research, not politics" and wrote that the association "insists that the proof is in: Good therapy works amazingly well."¹

These two books were written to promote our understanding of why people commit sex crimes and what steps society might take to protect us. The books also provide data relevant to the claim that good sex-offender treatment works "amazingly well."

The causes of rape

Lalumière and colleagues begin with an exploration of human rape across culture and time, and then a substantive overview of what is known about forced copulation in non-human animals “to introduce concepts that are important when it comes to understanding the sources of individual differences among humans and other species, and to place the study of rape in a wider scientific context.”² They show that forced copulation occurs in a wide variety of species, and appears to occur more in species that have sexual size dimorphism favoring males, polygynous mating systems, male-biased operational sex ratio, asynchronous breeding, group living or breeding, and lesser male than female parental investment. The authors note that all of these characteristics are present in *Homo sapiens*.

The review of non-human species also yields the following regularities:

- Forced copulation is something males do to females.
- Forced copulation does not appear to be an anomalous behavior generated by such unusual conditions as overcrowding, captivity, or poor health.
- Males tend to target fertile females.
- Forced copulation sometimes leads to insemination, fertilization, and offspring.
- Males in most species do not engage exclusively in forced copulation; males that engage in forced copulation are generally also seen courting females at other times.
- Some males are more likely than others to engage in forced copulation, and some are more successful at it than others.

The authors conclude that across species “forced copulation ... is a tactic used by some males under some conditions to increase reproduction.”³

When Lalumière and colleagues focus their scientific analysis on *Homo sapiens*, what do they find?

- Rape is more common when the women to be raped are devalued and the perceived costs of rape are low.
- Men who are more likely to devalue women and who incur or perceive lower costs for exhibiting sexual coercion are more likely to rape.
- Rape and sexual coercion appear to be part of a general anti-social tendency.
- Generally, rapists are not sexually deprived in terms of access to sexual partners, and they appear to seek short-term and frequent sexual relationships to a greater extent than men who do not engage in sexual coercion.
- The use of sexually coercive tactics is likely part of a host of other mating and antisocial tactics used by antisocial men to create sexual opportunities and increase their number of sexual partners.
- Rapists are characterized by high mating effort and antisociality.
- There is strong phallometric evidence that many rapists are sexually different from men who do not commit rape.
- Rape is very rarely associated with life-threatening injury in peacetime and sometimes results in pregnancies.
- Under many circumstances men pursue mating opportunities when the cost of doing so is low, reproductive consequences notwithstanding.
- Although the research limitations support only provisional conclusions, there is little evidence that most rapists are particularly affected by mental disorders (other than paraphilia and/or antisocial personality disorder) or brain damage.

Lalumière and colleagues also identify contextual and situational factors associated with greater likelihood of forced copulation.

Steps society might take to protect us

Lalumière and colleagues write that “psychologists know a great deal about the personal characteristics that distinguish or fail to distinguish rapists from other offenders and from other men. They also know that some convicted rapists are

more likely than others to commit sexual offenses once again, and they can identify those men reliably.”⁴

LaFond concurs: “There is ... a small group of sex offenders who are very dangerous and do have a lasting proclivity to sexually reoffend. Important strides have been made in accurately identifying who they are, [which can] enhance our ability to apply current crime-control strategies to those sex offenders who are at greatest risk of reoffending. Limited resources can then be concentrated on the most dangerous sex offenders, thereby maximizing our chances of preventing sexual violence.”⁵

Treatment

So, we have a pretty good idea about which sex offenders are most dangerous, but do we know what to do about them? What about sex-offender treatment? Does it work “remarkably well” as claimed in the newspaper article I cited at the beginning of this review?

The authors of these two books examine similar data regarding the effectiveness of sex-offender treatment, but arrive at somewhat different conclusions. The universally recognized “most ambitious and scientifically sound study to date on whether treatment reduces sexual recidivism” found “no positive effect for treatment.”⁶ It was found that people who completed treatment did better than people who dropped out of treatment, but “volunteers who had sought treatment and received it had very similar recidivism rates ... to those who also had volunteered for treatment but did not receive it.”⁷

There is currently some difference of opinion about what to make of recent studies that do show differences in detected recidivism between treated sex offenders and untreated controls, because those studies all have significant design limitations. LaFond distinguishes between “the agnostic view” that “simply put, the effectiveness of adult sex-offender treatment has yet to be demonstrated” and the “cautiously optimistic view” that “the balance of available

evidence suggests that current treatments reduce recidivism, but that firm conclusions await more and better research.”⁸

Even the cautious optimists acknowledge that there have been “few high-quality research studies” to support their optimism, the apparent positive effects of treatment might not be caused by treatment at all, and the “treatment effects in reducing sexual recidivism were not large in absolute terms (7%).”⁹ That is, treated people were 7% less likely to be detected for committing a new sex crime than those who had not been treated.

In addition to LaFond’s agnostics and cautious optimists, we must recognize that there are true believers and cautious pessimists. Note that the 2002 meta-analysis was sponsored by the Association for the Treatment of Sex Abusers (ATSA),¹⁰ the “organization with adamant views based on research, not politics” whose member, a true believer, claimed that treatment works “amazingly well.”

And there are cautious pessimists. Lalumière and colleagues have reviewed the treatment of sex offenders in great depth, and “we believe that there are too few well-controlled studies of sex offender treatment to conduct an informative meta-analysis.”¹¹ They note that the small observed differences between treated and control groups could be accounted for by such factors as:

- Comparison groups that included an unknown number of men who would have refused or dropped out of treatment had it been offered,
- A longer follow-up period for the comparison group,
- Exclusion of offenders from the treatment group but not the comparison group,
- Disproportionately high-risk offenders in the comparison group, and
- Disproportionately low-risk offenders in the treated group.¹²

Lalumière and colleagues “conclude that the balance of available evidence suggests that current treatments *do not* reduce recidivism, but that firm conclusions await more and better research.”¹³ “There is no clarity about whether anyone has demonstrated a specific effect of treatment in lowering sexual offender recidivism. The situation is even worse with respect to rapists in particular. There is simply no convincing evidence that treatment has ever caused rapists to desist or even to reduce their offending behavior.”¹⁴

I count myself among the cautious pessimists regarding the effectiveness of sex-offender treatment. In addition to the empirical results that do not show treatment to be effective, there are theoretical reasons to question whether we can expect any sex-offender treatment methods to ever be developed that would protect society from men who rape. One key empirical finding is that “the pregnancy rate among rape victims is similar to the pregnancy rate for consensual sex and may even be higher.”¹⁵ The data regarding humans are consistent with data from other species: forced copulation is a tactic used by some males under some conditions to increase reproduction.¹⁶ In other words, for many—perhaps most—rapists, coercive sex is not a symptom of mental illness, but an integral part¹⁷ of the offender’s lifestyle.¹⁸

Risk
management
and
containment

LaFond introduces his book by telling us that for many years he has been skeptical of many of society’s efforts to protect us from sexual violence. Understandably, people have asked him, “Well, what would you do?” His response, *Preventing Sexual Violence*, explores what is known about sex offenders, sex victims, sex crimes, and societies’ responses. He notes that much of what catches the public’s eye, such as the three stories of child abduction, assault, and murder mentioned at the beginning of this review, are not representative of sex crimes, sex offenders, or sex victims. And many of our public laws have been written in quick response to such high-profile offenses.¹⁹ LaFond proposes, instead, that society should carefully and soberly consider what is known about what

works and what does not, and which interventions would target the most dangerous offenders in the most cost-effective way. Of course no system of managing and containing risk will be foolproof, but LaFond's analysis suggests ways that society can most affordably and most effectively reduce sex offending.

The Causes of Rape promotes our understanding of sex offending, and *Preventing Sexual Violence* can guide our response. Read them. And in the meantime, be careful out there.

- Notes
1. Lyons, T. (4/12/05). Sex offender therapy, not bracelets, is best child protection, expert says. *Sarasota Herald-Tribune*, at 1B.
 2. Lalumière et al., p. 6.
 3. *Id.*, p. 58.
 4. *Id.*, p. 4
 5. LaFond, p. 58.
 6. Lalumière et al., pp. 176-179, 194; LaFond, pp. 77-78. This and the next quote are from LaFond, pp. 78. For more about that study, see Marques, J. (1999). How to answer the question, does sex offender treatment work? *Journal of Interpersonal Violence*, 4, 437-451.
 7. LaFond, pp. 77-78. See also, DeClue, G. (2002). Remaking relapse prevention with sex offenders: A source book, and Practice standards and guidelines for members of the Association for the Treatment of Sexual Abusers (ATSA). *Journal of Psychiatry & Law*, 30, 285-292. (book review)
 8. LaFond, pp. 79-80.
 9. *Id.*, p. 80. See Hanson, R. K., Gordon, A., Harris, A. J. R., Marques, J. K., Murphy, W., Quinsey, V. L., & Seto, M. C. (2002). First report of the collaborative outcome data project on the effectiveness of psychological treatment for sex offenders, *Sexual Abuse: A Journal of Research and Treatment*, 2, pp. 169-194.
 10. Lalumière et al., p. 178.
 11. *Id.*, p. 172. Note that Vernon Quinsey is a co-author of the 2002 meta-analysis and a co-author of *The Causes of Rape*, so he has apparently gone on record saying that there are not enough good studies to conduct the meta-analysis that he co-conducted! Dr.

Quinsey illustrates that one can be optimistic one day and pessimistic another.

12. *Id.*, pp. 178-179.
13. *Id.*, p. 179.
14. *Id.*, p. 188.
15. *Id.*, p. 186.
16. I caution the reader that this statement is intended to be understood within the context of evolutionary biology. For those not well versed in that theory, consider that behaviors are typically multiply determined, and the same behavior can be analyzed from different perspectives. In its weakest sense, this means that some—perhaps most—rapes are partially motivated by reproductive drives. It does not imply that most rapists are consciously intending to impregnate their victims.
17. In terms of evolutionary biology, a tactic. See Lalumière et al., p. 44.
18. In terms of evolutionary biology, a strategy. See Lalumière et al., p. 44.
19. At the time of this writing, Florida is legislating at least one new law based on one of these cases, the “Jessica Lunsford Act.” Downloaded April 26, 2005 from <http://www.theorator.com/bills109/hr1505.html>.