

## ORIGINAL PAPER

## Clinical and Developmental Characteristics of Sex Offenders in Malaysian Prisons

*Aili HH<sup>1</sup>, Manveen KS<sup>1</sup>, SK Pillai<sup>1</sup>, M Muhsin<sup>1</sup>, W Salwina<sup>2</sup>*

<sup>1</sup>Psychiatry Adolescent and Child Unit, Department of Psychological Medicine, Faculty of Medicine, University of Malaya, 50603 Kuala Lumpur, Malaysia

<sup>2</sup>Department of Psychiatry, Faculty of Medicine, University Kebangsaan Malaysia

### Abstract

The population of incarcerated sex offenders in Malaysia is steadily growing. **Objective:** This is a descriptive study to look at what clinical and developmental characteristics are present amongst the sex offenders in Malaysia, which could be possible mitigating factors. **Methods:** Data was collected from offenders located in 3 prisons where the offenders are held. **Results:** a total of 147 prisoners participated in the study. Slightly more than half of the victims were below the age of 18, of which 10% were below the age of 12. Three quarters of offenders were thirty years and older, while 12% were below 18 years. However their problems began much earlier in their life with 50% of the offenders reporting that they had difficulties in their primary support group, resulting in them feeling their families were less expressive, their parents were distant and unsupportive. 29% of the offenders had not lived with their parents from the age of 16. More than half of the offenders reported academic, behavior and developmental difficulties; they reported losing interest in their studies and were struggling during their schooling days. 43% had history of aggressive behaviour during their adolescent years and 76% had peers who often indulged in risky behaviors. 85% of the offenders were Muslim. 40% made the criteria of Attention Deficit Hyperactive Disorder and conduct disorder while a quarter were diagnosed with having personality disorder. Slightly more than half of the offenders had alcohol and drug-related problems, 36% had history of previous crimes, mainly drug and theft offence. **Conclusion:** The findings show that the sex offenders are indeed a heterogeneous group with pervasive familial, behaviour, academic and social problems which are possible risk that can be identified early in the lives of offenders.

**Keywords:** Incarcerated, Juvenile, Adult, Sex Offenders

## Introduction

Humans, who are abusive of others, are of great concern to many communities. It is similar in Malaysia, there has been increasing cases of sexual abuse reported and prosecuted over the recent years. These sexual crimes have resulted in horrendous injuries and death in many victims including children. As a consequence of heightened public concern regarding safety in the community, the assessment, treatment, and management of sex offenders has become the prerogative of many criminal justice systems<sup>1-3</sup>.

In developed countries interest and research in this forensic population have progressed significantly. Rigorous work done have resulted in considerable depth of knowledge regarding the characteristics of the offenders, progress in managing this population, as well as treatment and policy practices<sup>1,2,5</sup>. Examination of the individual factors has resulted in risk factors being identified<sup>2,6,7-9</sup>. It has also shown there are relationships between certain socio-demographic characteristics and offending behavior<sup>2,6,7-9</sup>. Though the research findings are diversified, certain characteristics are worthy and deserve the attention with implication on management of the offenders<sup>10</sup>.

Unlike many countries around the world, in Malaysia, we do not have yet any systematic data or information regarding the offenders. The study hopes to assess the offenders with reference to a series of variables found to have bearings to their sexual offending behavior in other studies, and to compare these profiles with the local offenders.

## Methods

The consent to carry out the study was sought by the team from the Prison Department Malaysia. All the sex offenders were recruited from 3 prisons, which held these offenders. Consent to be included in the study were taken from the prisoners themselves; five prisoners did not consent to participate and were not included. The prisoners were interviewed individually by a psychiatrist, there were 4 psychiatrists involved in the study. Data was collected using both a semi-structured and a structured clinical interview. The semi-structured interview collected information with regards to the demographic data, developmental and educational history, psychosocial and psychosexual factors. The data collected included family and developmental background, education history included difficulties during primary and secondary school, employment history, substance use, peer relationship, previous offences, victim relationship, etc. The structured clinical interview using the DSM-IV was done to look for Axis I and II disorders, while the Childhood and Adolescent Taxon Scale (CATS) was used to look at behavioral difficulties in childhood. The psychiatrists were not allowed access to the information file of the prisoners due to security reasons. The data were then analysed using descriptive statistics methods e.g. frequencies to look at the frequent or highest number of psychological and sociological characteristics within the sample studied.

## Results

A total of 147 prisoners participated in the study. Their socio-demographic profiles are shown in Table 1.

**Table 1.** Age at index offence, race, marital status, employment of the sex offenders

Age at index offence	No.	%
< 18	18	12
19 - 30	66	45
31 - 50	52	35
> 50	11	7
<b>Race</b>		
Malay	125	85
Indian	11	8
Chinese	6	4
Others	5	3
<b>Marital status</b>		
Single, never married	83	56
Married	15	10
Married, with difficulties	37	25
Divorced	12	9
<b>Employment and income</b>		
High Income (RM11,906 or more)	7	5
Medium Income (RM976 – RM3,855)	82	56
Low Income (RM975 or less):	54	37
Unemployed	3	2
<b>TOTAL</b>	<b>147</b>	<b>100</b>

**Table 2.** Education attainment, and school performance and behavior of the sex offenders in their adolescent years

Academic Concerns	No.	%
Not schooling	14	10
Good / Average / No difficulties	51	34
Poor / Lost interest	84	56
<b>Academic Attainment</b>		
Not schooling	14	10
Primary school	36	24
Lower secondary	45	31
Upper secondary	40	27
Tertiary	12	8
<b>Childhood aggression</b>		
No	84	57
Yes	63	43
<b>Social History</b>		
Loner	35	24
Social able	111	76
<b>Meet Criteria</b>		
No	88	60
Attention Deficit Hyperactive Disorder	59	40
*Conduct Disorder	59	40
<b>Total</b>	<b>147</b>	<b>100</b>

\*Using the DSMIV criteria 40% (N=59) of the offenders met the criteria of Conduct Disorder before the age of 18.

From Table 2, the difficulties in school were described as having difficulty concentrating in class, finding the subjects too difficult to understand and follow, losing interest in

their studies and getting into trouble with authorities. Of the group that described themselves as having many friends, they described their groups of friends were often

involved in fights, frequently played truant from school, threatening or intimidating others, and staying out without parental permission.

While half of the offenders reported no difficulties in their primary support group, the other half reported varied difficulties in their primary support group. 23% of came from poor families and the family were struggling, 15% came from broken families, 6% had positive family history of alcohol and drug use, 3% were brought up in abusive homes and another 3% with authoritarian parents. 29% of the offenders had not lived with their parents from the age of 16 years.

All the victims were females except for one. In Malaysia a person under the age of eighteen years is considered a child. More than half of the victims were below the age of 18 of which 10% of the victims were below the age of 12. 29% (N=45) of the victims were within the family, of which 4 offenders had caused the offence against more than one victim in the family. 36% (N=53) of the offenders had previous history of offending, of which 34% (N=18) of them has had multiple history of previous offence. Theft and assault were the most common offence committed. 8% (N=4) has had previous conviction for rape, had served their time and was released. For one of the offenders, this was his third conviction for rape.

In 25% of the cases, alcohol and/or drugs were used prior to the rape. In a quarter, other than the sexual assault, there was significant brutality used, weapon was used resulting in significant physical injury requiring hospitalization.

Alcohol drug-related problems and anger issues were difficulties stated by the

offenders as troubles they felt they had (Table 3) and more than half of the offenders had a diagnosable co-morbid psychiatric disorder (Table 4).

**Table 3.** Co-morbid psychiatric difficulties

<b>Psychiatric difficulties</b>	<b>N</b>	<b>%</b>
Alcohol usage	8	6
Drugs usage	2	1
Drugs/ alcohol usage	38	26
Anger issues/ aggression	2	1
Substance use/ aggression	42	29
Denied difficulties	55	37
<b>Total</b>	<b>147</b>	<b>100</b>

**Table 4.** Presence of psychiatric disorder

<b>Axis I disorder</b>	<b>N</b>	<b>%</b>
Attention Deficit hyperactive disorder	59	40
Any substance use disorder	39	27
Mood disorder	1	<1
<b>Axis II</b>		
Personality disorder	31	21

## Discussion

Though Malaysia has noted an increase in crime rate, the sudden and sharp increase in crime rate is most seen in property crime followed by violent crime especially murder, attempted murder and gang robbery<sup>11</sup>. Sexual crimes are much lesser in numbers as compared to the two previously stated crimes<sup>11</sup>. Despite this, sexual crimes remain a worrying issue for the community. Most studies regarding sexual offenders have

come from the western countries though interest in this field has steadily grown with increasing studies coming out from countries in Asia<sup>12</sup>. Researches have looked in the etiology of sexual offending behaviors, identifying possible links and major typologies. Significant links have been identified to mental health issues, specifically with regards to individual and environmental factors<sup>13,14</sup>. Major psychiatric disorders as antecedent and concurrent experiences have been identified as possibly enhancing or mitigating this heinous offence<sup>13,14</sup>.

This is the first such attempt to gather information from the sex offenders incarcerated in Malaysian prisons in Malaysia. Are they similar in characteristics to the other offenders studied? Identification of possible risk factors present in the local sexual offenders would help us help us understand and formulate relevant contributing psychopathology as well look into potential improvements in our legal system and correctional interventions. The results demonstrated that the offenders are indeed a heterogeneous group with some similarities as well as differences with existing literature.

The incarcerated sex offenders in the Malaysian prisons are of older age at the index offence, with 12% of the offenders in the juvenile age group. We are uncertain if there has been an increasing trend of juvenile offenders as seen in Western countries. Juveniles have been noted to account for almost 20% of arrest for rape and other sexual offences<sup>15-17</sup>.

A considerable number of the offenders reported that they faced difficulties (from problems in their primary support group to behavior and academic concerns) early in their childhood days. In the offenders that

attended school, more than half reported having learning difficulties and lost interest in their studies during their schooling years. Though none of the offenders reported history of being abused, in the offenders who felt that they had difficulties within their family, they felt their families were less expressive than other families they knew. They also reported that they felt their parents were distant and un-supportive. Though these are self-reports, several studies have reported higher prevalence of family dynamics e.g. abusive relationships and disturbed family functioning in the histories of sexual offenders<sup>14,18</sup>. Others have reported problems within the family environment such as lack of support from families<sup>19-21</sup> and greater negative childhood experiences especially of violence<sup>19</sup>. It is known that these early childhood experiences often leads to attachment and interpersonal deficits which often affects and undermine the development of secure and appropriate adult relationships<sup>18</sup>. Personological characteristics have also being identified as risk factors for sexual offending. There is growing evidence of strong association of anti-social orientation and sexual offences<sup>14, 22</sup>. The other factors that have been include interpersonal difficulties, hyperactivity and impulsivity, precocious sexual behavior, and empathy deficits<sup>14</sup>. Antisocial behaviour with onset early in childhood is likely to lead to a cascade of secondary problems, including academic failure, involvement with deviant peers, substance abuse, health risking sexual behaviour, and work failure<sup>13,23,24,25</sup>. Researchers<sup>10,13,23,25</sup> have found offenders who committed their first sexual offense in adolescence had histories of being disruptive with high levels of antisocial behavior in their schooling years. The anti-social behaviours were noted to be pervasive in the group studied and noted to have caused impairment from a very young age i.e. from

the adolescent years to their adult life. Though none of the offenders reported that they had use any sexually explicit material, more than half reported that they have been exposed X-rated magazines or videos from their adolescents years. More than half of the offenders reported having difficulties with their academic and losing interest to do well. Just eight percent of the offenders reached tertiary education level. 40% of the group studied met the criteria of ADHD and conduct disorder in their adolescent years. 43% of the group studied gave history of aggressive behaviour and reported experimenting with and using drugs and alcohol in their adolescent years. The anti-social orientation of these offenders are seen occurring through their adult life, a quarter reported having marital difficulties, a third having difficulties holding to steady employment and two-thirds of the offenders reported drug and/alcohol usage and aggression issues. The majority of the offenders were of medium to low income, with an average income of about RM1000/-per month, though a third had irregular employment.

Personality characteristics have been frequently reported amongst juvenile sexual offenders and it include lack of social interactional skills, a history of conduct disorder, serious learning problems, lack of impulse control and depressive symptomatology<sup>14,17</sup>. Personality sub-type has also been described from the antisocial/impulsive, unusual/isolated, over-controlling/reserved, and confident/aggressive<sup>24</sup>. The group of intra-familial offenders in our study described themselves as being shy and isolated. In the other larger group studied, it was the opposite. They described themselves as being sociable and having many acquaintances some of which ended up as their victims. Slightly more than half of the

offenders knew their victims while the other half were strangers. In a quarter of the cases studied had used alcohol and/or drugs used prior to the rape, while in 10% of the offence, physical aggression was used. The anti-social behaviour thread were again seen significantly in the group studied, as 36% (N=53) of the offenders had past history of crimes, from theft, assault, drug related and 4 had history of prior for rape offence. Though Amar SS (2005) reported that there is no significant link to negative peer pressure, in the group studied, there is some concerned as these offenders indicate that aggregating towards other delinquent or antisocial persons produce harmful effects. About a third of the offenders had a previous history of conviction, 4 of who had been convicted, did time and was released for similar rape offence.

Malaysia has a multi-ethnic population with Islam being the major religion of the population, the Malay race makes up 53.3%, Chinese 26.0%, while the Indian race 7.7%. Though there is still a controversy regarding ethnic background of offenders, it is interesting to note that 85% of the perpetrators studied are Malay and Muslim in religion. It was also noted in that all the perpetrators of children sexually abused in the family were of the Malay ethnicity. As in most religion for Muslims, extra-marital sex and sex with children is strongly forbidden. Malays are the predominant ethnic group in the country, but that alone does not explain why the majority of the offenders were Malays especially in the context of intra-familial offence. Could there be under-reporting of such offences in the other ethnic group? The Indian ethnic group has been found to statistically form the major group in gangsterism and gang related activities in the country<sup>11</sup>. In Malaysia, sexual education has only recently been agreed upon to be introduced in schools

after much debate and strong objections from religious groups and associations.

There are many variables related to sexually abusive behavior. Though the factors noted above were discussed in compartmentalized sections, there are continuous and logical connections. The implication of the study is that it seems that we are dealing with a group of men with many problems and the problems are chronic. Their problems seemed related to their behavior, beginning in their childhood and persisting to their adulthood. The results seemed to suggest that there are possible risk factors that can be identified early in the lives of offenders: a) difficult family background b) academic difficulties c) peer relationship d) substance use and e) anger issues and their sexual behavior. Thus in terms of rehabilitation, these factors need to be taken into consideration and a diversity of intervention options made available.

## Conclusion

There has been an increasing need to address the problems of sexual abuse and assault in this country. The need to understand the causes of sexual offending remains as an urgent and compelling matter. As seen in the study, are multiple pathways to offending, and the likely of various combinations of factors increase the likelihood for committing a sexual offense.

*The authors hope this paper will provide guidelines regarding the necessary domains which should be addressed in a **comprehensive assessment** of not only sex offenders in Malaysia but as well as important implication for all children presenting with behavior, academic or family difficulties.* The team felt that the exercise was useful, as it allowed the authors to identified domains where work could be

improved to reflect better care in the group of offenders. While this paper does not seek to argue the merits of the country's legislation, it does however seek to explore where trained professional armed with current research knowledge in the area of sexual violence would be able to assist and meet a wide range of legal, forensic, and clinical needs.

## Limitations

The number of offenders was relatively small thus statistical analysis was not able to be carried out and the assessment may not be generalized to all offenders in Malaysia. The data collected was self-reporting data thus the researchers are aware that information may be concealed or heightened by the offenders. The team was not allowed access to the records kept by the prison officers due to security reasons.

## Acknowledgment

The team would like to thank the Health and Translational Medicine Cluster, University Malaya and the Department of Psychological Medicine and the Prison Department of Malaysia for giving us the opportunity and cooperation to carry out this research.

## References

1. Hanson R.K. & Bussiere M.T. Predictions of sexual offender recidivism: A Meta-analysis. User Report, No. 1996-04. Ottawa: Department of the Solicitor General of Canada; 1996.
2. Hanson R.K. and Bussiere M.T. Recidivism of Sex Offenders, CSOM Publications; 1998 from [www.csom.org/pubs/recidsexof.html](http://www.csom.org/pubs/recidsexof.html)

3. Hanson R.K. and Bussiere M.T. Predicting relapse: A meta-analysis of sexual offender recidivism studies. *Journal of Consulting and Clinical Psychology*. 1998; 66 (2):338-362.
4. Hanson R.K. and Bussiere M.T. Predictions of sexual offender recidivism: A Meta-analysis. User Report, No. 1996-04. Ottawa: Department of the Solicitor General of Canada; 1996.
5. Becker J.V. and Jicks S.J. Characteristics, Interventions and Policy Issues. *Ann New York Academy Science*. 2003; 989:397-410.
6. Hanson R.K. and Andrew H. The Sex Offender Need Assessment Rating (SONAR): A Method for Measuring Change in Risk Levels. Corrections Research Department of the Solicitor General of Canada; 2000.
7. Harris A.J. Risk Assessment and Sex Offender Community Supervision: A Context-Specific Framework. *Federal Probation, A Journal of Correctional Philosophy and Practice*. 2003; 70 (2): 81-89.
8. Beech AR and Ward T. The integration of etiology and risk in sexual offenders: A theoretical framework. *Aggression and Violent Behavior*. 2004; 10 (1), November-December: 30-63.
9. Barbaree H.E., Langton C.M. and Peacock E.J. Different Actuarial Risk Measures Produce Different Risk Rankings for Sexual Offenders. *Sex Abuse*. 2006; 1(8):423-440.
10. van Wijk A.P., Vreugdenhil C., van Horn J., Vermeiren R., Doreleijers T.A.H. Incarcerated Dutch juvenile sex offenders compared with non-sex offenders. *Journal of Child Sexual Abuse*. 2007; 16 (2): 1-21.
11. Amar S.S. The Rise of Crime in Malaysia an Academic and Statistical Analysis. *Journal of the Kuala Lumpur Royal Malaysia Police College*. 2005; 4:25-35.
12. Lee C.Y., Chao S.S., Chen S.P., Chou F.H., Su C.Y., Ho W.W. The characteristics of and risk factors associated with incarcerated sex offenders in Taiwan. *International Journal of Law & Psychiatry*. 2010; 33 (3): 144-8.
13. Prentky R.A., Knight R.A., Lee A.F.S. Child Sexual Molestation: Research Issues National Institute of Justice, Research Report U.S. Department of Justice Office of Justice Programs; 1997.
14. Starzyk K.B. and Marshall W.L. Childhood family and personological risk factors for sexual offending. *Aggression and Violent Behavior*. 2003; 8:93-105.
15. Becker J.V., Harris C.D. and Sales B.D. Juveniles who commit sexual offenses: A critical review of research. In G.C.N. Hall, R. Hirschman, J. Graham & M. Zaragoza (Eds.), *Sexual Aggression: Issues in Etiology and Assessment, Treatment, and Policy*. Washington, DC: Taylor and Francis; 1993.
16. Becker J.V. and Hunter J.A. Understanding and treating child and



- juvenile sexual offenders. *Advances in Clinical Child Psychology*. 1997; 19: 177-197.
17. Becker J.V. and Hicks S.J. Juvenile Sex Offenders. Characteristics, interventions, and policy issues. *Annals of The New York Academy of Sciences*. 2003; 989:397-410.
  18. Ward T., Keenan T. and Hudson S.M. Understanding cognitive, affective, and intimacy deficits in sexual offenders A developmental perspective. *Aggression and Violent Behavior*. 2000; 5, 1 (2): 41-62.
  19. Lewis D.O., Shankok S.S., Pincus J.H. and Glaser G. Violent Juvenile Delinquents: Psychiatric neurological, psychological and abuse factors. *Journal of the American Academy of Child Psychiatry*. 1979; 18: 297–309.
  20. Bischof G.P., Stith S.M., Whitney M.L. Family environments of adolescent sex offenders and other juvenile delinquents. *Adolescence*. 1995; 29 (117): 157-170.
  21. Boyd N.J., Hagan M. and Cho M.E. Characteristics of adolescent sex offenders: A review of the research. *Aggression and Violent Behavior*. 2000; 5(2) March-April: 137-146.
  22. Hanson, R. K. and Morton-Bourgon, K.. Predictors of sexual recidivism: An updated meta-analysis. *Journal of Consulting and Clinical Psychology*. 2005; 73 (6): 1154–1163.
  23. English K., Retzlaff P., Kleinsasser D., and Gardner J. The Colorado Sex Offender Risk Scale. *Journal of Child Sexual Abuse*. 2002; 11(2): 77-96.
  24. Worling J.R. Personality-Based Typology of Adolescent Male Sexual Offenders: Differences in Recidivism Rates, Victim-Selection Characteristics, and Personal Victimization Histories. *Sexual Abuse: A Journal of Research and Treatment*. 2001; 13(3):149-166.
  25. Wiesner M., Kim H.K. and Capaldi DM. Developmental trajectories of offending: Validation and prediction to young adult alcohol use, drug use, and depressive symptoms. *Development and Psychopathology*. 2005; 17: 251-270.

**Corresponding Author**

A/Prof Aili H Hashim  
 Psychiatry Adolescent and Child Unit,  
 Department of Psychological Medicine,  
 Faculty of Medicine, University of Malaya,  
 50603 Kuala Lumpur, Malaysia

**Email:** aili@ummc.edu.my