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Sexual sadism in sexual offenders An elusive diagnosis

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Abstract

The present review considers the various conceptual and operational definitions of sexual sadism as this has been diagnosed among sexual offenders. The most persistent problem this review identified concerns the criteria of the fusion of sexual arousal with one or more of the various features of the offenders' actions or of the victims' responses. Not only do the definitions of sadism vary considerably in what it is that is thought to provoke sexual arousal, the operationalization of these definitions also varies. Furthermore, none of the operational definitions appears to satisfactorily or reliably measure sadism. In face of these discouraging observations we recommend abandoning the present diagnostic criteria and shifting to a dimensional approach to defining sadism.

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1. Introduction

The first recorded case of a sadistic sexual offender appears to have been Gilles de Rais, a 15th century French nobleman (Hickey, 1991). He was said to have raped, tortured, and murdered hundreds of children. Reports over the centuries since that time reveal individual sexual offenders who display apparently sadistic features, including, of course, Donatien Alphonse Francois, the Comte de Sade, after whom the disorder was named (Hickey, 1991). However, it was not until Professor Richard von Krafft-Ebing (1886) wrote his comprehensive descriptions of sexual deviancy that sadism was accepted as topic for scientific study. Stekel's (1929) later book on sadism and masochism provided clear descriptions of the

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features of these two related disorders and this finally led to the popularization of the use of these terms in clinical practice. While there clearly are sadists who do not sexually offend, (Breslow, 1989; Spengler, 1977; Weinberg, 1987), and who are of scientific and clinical interest in their own right, it is only those sadists who commit sexual crimes that are the focus of this paper.

There is now a very extensive literature on sadistic sexual offenders including numerous case reports (Arieti & Schrieber, 1981; Guttmacher, 1963; Kozel, Cohen, & Garafalo, 1966; Rae, 1967; Schechter, 1990; Schlesinger, 1990) as well as reviews and research studies (Brittain, 1970; Grubin, 1994a; Hickey, 1991; Holmes & DeBurger, 1988; Ressler, Burgess, & Douglas, 1988; Revitch, 1957; Warren, Hazelwood, & Dietz, 1996). Much of this literature also deals with sexual murderers, not all of whom are necessarily sadists (Grubin, 1994a), and serial murderers, not all of whom are sexual murderers (Ressler et al., 1988). Many studies, unfortunately, do not satisfactorily discriminate among these possibly different types of offenders, and some authors assume that serial killers are in fact serial sexual murderers (Myers, Reccoppa, Burton, & McElroy, 1993), while others conclude that serial sexual murderers are sadists (Giannangelo, 1996). This confused use of various terms makes it difficult to review this extensive literature and at times in this paper we will be obliged to draw inferences from studies that have not made these distinctions as clearly as we would like.

What we will attempt to do is first consider conceptual definitional issues, including diagnostic criteria, and then examine the operational bases on which the diagnosis of sexual sadism is made. Finally, we will draw implications for research and practice that we believe derive from our consideration of the literature.

2. Definitional issues

As noted above, we intend to discuss only those sadists who commit sexual offenses although of course actual diagnoses of sexual sadism are the same whether applied to offenders or not. Before we consider the various definitions of sexual sadism that have appeared in the literature, however, we must distinguish some related terms.

2.1. Definitions of related terms

According to Myers, Burgess, Burgess, and Douglas (1999) *sexual homicide* describes murders where there is crime scene evidence of a sexual component such as “removal of the victim’s clothing, exposure of the victim’s sexual organs, sexual positioning of the body, evidence of oral, vaginal, or anal intercourse, or other signs of sexual exploitation” (p. 153). *Serial murder* is defined by Myers et al. in terms of evidence that the same person has committed “three or more separate homicides in three or more separate locations” (p. 154). These conditions are meant to distinguish serial killers from mass murderers who kill several people at one time at one location. Myers et al. also distinguish two types of *sexual murderers* and these distinctions are relevant to the present issue. *Vindictive murderers* (or displaced

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