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**Measurement of Victim Empathy in Intrafamilial and Extrafamilial Child Molesters using the Child Molester Empathy Measure (CMEM)**

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**Abstract**

Although it is widely believed that child molesters are deficient in empathy, there is little unequivocal evidence supporting this view. The present paper explores the issue of whether Australian adult child molesters are deficient in empathy relative to adult male members of the general community, using the Child Molester Empathy Measure (CMEM). This measure was designed specifically for the assessment of victim empathy in child molesters and has previously been used only with Canadian extrafamilial offenders. The present research extends the previous study by contrasting the empathy responses of 11 intrafamilial and 14 extrafamilial child molesters. The results challenge the notion that child molesters have either a generalised or victim-specific empathy deficit. Findings are discussed in terms of the use of the CMEM as an instrument that can reliably distinguish child molesters from nonoffenders, methodological issues, and directions for future research.

*Keywords:* Victim Empathy; Child Molesters; Assessment; Child Molester Empathy Measure (CMEM)

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INTRODUCTION

It is generally believed that sex offenders are deficient in empathy and that assessment and enhancement of victim empathy is necessary for treatment and rehabilitation (e.g., Chaplin, Rice, & Harris, 1995; Fernandez, Marshall, Lightbody, & O'Sullivan, 1999; Marshall, 1996a,b; Marshall & Barbaree, 1990; Marshall, Hudson, Jones, & Fernandez, 1995; Pithers, 1999; Rice, Chaplin, Harris, & Coutts, 1994; Roys, 1997). The way in which empathy has been assessed has undergone significant changes over time, shifting predominantly away from general measures to more context-specific measures (Fernandez et al., 1999) and from a simplistic, unidimensional

assessment to a multidimensional conceptualisation (Marshall et al., 1995).

Historically, empathy assessment has relied exclusively on general self-report questionnaires designed to assess the day-to-day empathy levels in the wider population (Choplan, McCain, Carbonell, & Hagen, 1985). Due to a lack of specific empathy tools tailored for clinical samples (i.e., child molesters and rapists), most clinical studies have utilised general measures. These general empathy measures are nonspecific as to the respondent's unique features (i.e., university student or sexual offender) and are vague regarding contextual factors (i.e., day-to-day interactions or sexual abuse

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situations; Marshall et al., 1995). The main issue of concern is that the conclusions drawn from the general population may not be generalisable to clinical samples. Arguably, the ability of a clinician to accurately and reliably measure and explore empathy in their clients is thus constrained by the unavailability of appropriate and adequate measures (Langevin & Lang, 1985).

There are three measures of general empathy that have been typically used to assess the empathic range of both sex offenders and the general public: the Hogan's Empathy Scale (EM) (Hogan, 1969); the Questionnaire Measure of Emotional Empathy (QMEE) (Mehrabian & Epstein, 1972); and the Interpersonal Reactivity Index (IRI) (Davis, 1983). Although these three general empathy measures are oriented to the assessment of deficits in empathy, empathy is measured in contexts unrelated to sexual offending. Moreover, these scales derive from a theoretical framework that conceptualises empathy simply in terms of emotional recognition (i.e., a cognitive skill that allows discrimination between the emotional states of others) and/or perspective taking (a cognitive skill that enables one to appreciate another's situation). The inadequacy of defining empathy simply in cognitive terms has been recognised by modern theorists (e.g., Hudson, Marshall, Ward, Johnson, & Jones, 1995; Marshall, Jones, Ward, Johnston, & Barbaree, 1991; Marshall & Marc, 1996; Marshall & Pithers, 1994; Marshall et al., 1995; Pithers, 1999; Roys, 1997; Schlank & Shaw, 1996) who argue for the inclusion of an affective empathy component. In this sense, an empathic response requires an individual to not only recognise the emotions of others, but also to share in the experience of those emotions (i.e., emotional replication).

To date, there is only one measure of empathy specifically designed for use with child molesters - the Child Molester Empathy Measure (CMEM) (Fernandez et al., 1999). This scale assesses both the cognitive and affective properties of empathy in relation to three victim scenarios (car accident, sexual abuse by another offender, own victim). The CMEM was tested on a Canadian sample of twenty-nine incarcerated child molesters convicted of sexual offences against extrafamilial female children and a community sample of thirty-six nonoffending males. It was found that child molesters were significantly less able than nonoffending males to recognise the emotions of the general sex abuse victim, and were profoundly deficient in discerning the emotions of their own victims. Interestingly, child molesters and community males reported similar levels of empathy for the child victim of a motor vehicle

accident. From these findings, Fernandez et al. (1999) concluded that the CMEM is able to distinguish child molesters from nonoffenders, and thus is an instrument that could be used validly to evaluate the empathy responses of child molesters.

Although assumed by Fernandez et al. (1999), the utility of the CMEM in evaluating empathy in child molesters other than those with extrafamilial offending history has not been demonstrated. It has been shown that intrafamilial child molesters have different needs of power, domination, and coercion; different cognitive distortions and sexual fantasies; and different patterns of abuse than extrafamilial child molesters (Parker & Parker, 1986). Furthermore, offences committed by intrafamilial child molesters as compared to extrafamilial child molesters are more penetrative, occur over a longer duration, and generally result in more serious negative outcomes for the victim (emotional, social, and behavioural) (Green, 1993; Dubowitz, Black, Harrington, & Vershoore, 1993; Beitchman, Zucker, Hood, da Costa, & Akman, 1991). It is not known whether intrafamilial child molesters differ from extrafamilial child molesters in terms of their levels of victim empathy. The investigation of this issue constitutes a major aim of the present study.

Given that the CMEM is the only measure of victim empathy developed for child molesters, it is likely to be employed in clinical settings beyond those within its country of origin (Canada). A second aim of this study is to examine whether the findings found by Fernandez et al. (1999) with respect to Canadian extrafamilial child molesters are generalisable to an Australian sample of extrafamilial and intrafamilial child offenders. Since it cannot be assumed that Canadian and Australian community members are equivalent in terms of their empathy levels, a comparison group of Australian nonoffending community males was also employed in the current study. The demographic and intrapersonal characteristics of the Canadian offender and nonoffender samples were not reported by Fernandez et al. and thus the possible effects of such variables on empathy responses is unknown. Consequently, the final aim of this study is to establish the degree to which the empathy responses of Australian child molesters and nonoffenders are associated with demographic variables and personal offence and victimisation histories.

## METHOD

### *Participants*

Fifty adult males served voluntarily as participants in this study. Twenty-five incarcerated child molesters (medium security prison, Ararat, Victoria) comprised the experimental group and were recruited via advertisements posted on notice boards in their prison common rooms. Twenty-five nonoffending males (the comparison group) were recruited from the general public by means of newspaper advertisements. For both groups, the advertisements asked for volunteers to participate in a semi-structured interview about attitudes towards victims of crime. Community respondents were selected for inclusion into the study using the demographic variables of age, cultural background, and socioeconomic status in order to match the demographic composition of the offender sample as closely as possible.

The child molester sample ranged in age from 22 years to 72 years ( $M = 44.08$  years,  $SD = 14.56$  years) and comprised 11 intrafamilial child molesters ( $M = 46.81$  years,  $SD = 16.68$  years) and 14 extrafamilial child molesters ( $M = 49.13$  years,  $SD = 12.88$  years). No member of the child molester sample had participated in any sex offender treatment prior to their assessment.

The comparison group ranged in age from 20 to 60 years ( $M = 31.2$  years,  $SD = 10.25$  years). Consistent with many previously published studies (Hudson et al., 1995) participants in the child molester group were significantly older than community controls,  $t(48) = 3.62$ ,  $p = .001$ . However, such age differences have not been shown to influence research results significantly (Hudson et al., 1995). In the present study, age was not correlated with any of the demographic variables.

### Measures

The semi-structured interview incorporated the completion of two questionnaires: a demographic questionnaire and a measure of victim empathy.

*Demographics questionnaire.* This questionnaire sought information about participants' age (in years and months), cultural background, level of education, income, and marital status. Participants were also asked if they had been the victim of a crime, if they had committed a minor crime, if they had committed a crime against a person, and whether they had had a personal experience of sexual abuse as a child. For participants in the child molester sample, information about offence history and offence characteristics was also sought from the offender and validated against prison records.

*Victim Empathy.* The Child Molester Empathy Measure (CMEM) (Fernandez et al., 1999) measures victim empathy in three contexts: 1) toward a child who is permanently disabled as a result of a motor vehicle accident; 2) toward a child who had been sexually abused by an unknown assailant over a period of time; and 3) toward the offender's own victim(s). For each of these vignettes, the respondent is asked to indicate: his recognition of the child's distress (emotional recognition and perspective taking: Part A) and his own feelings about the child (emotional replication: Part B). The respondent provides his responses to each item by marking on a scale ranging from 0-10 the degree to which he considers the child to be experiencing that is described, or what he is feeling when he thinks of the child.

The items in Part A of the CMEM assess cognitive empathy (emotional recognition and perspective taking). Specifically, items in Part A assess the respondent's capacity to recognise: (a) the emotional status of the child victim (e.g., guilt, anger, shame, etc.), (b) potential problematic sequelae of victimisation (e.g., sleep disturbances, problems with school work, etc.), (c) the potential for upsetting feelings (e.g., fear of being hurt, feeling repulsed by sex, fearful of close relationships, etc.), (d) potential difficulties with social relationships (e.g., arguing with others, friendless, withdrawn from others, etc.), and (e) potential behavioural problems (e.g., lying or stealing, low energy, psychiatric problems, etc.). The items in Part B index the affective component of empathy (emotional replication) by quantifying the emotional state of the respondent to each victim scenario (e.g., upset, hopeful, disgusted, etc.) as well as their resultant feelings in relation to what the child has experienced (e.g., personal responsibility, guilt, curiosity, sense of pride, etc.). Scores are calculated by summing the responses on the 0-10 scale for the negatively phrased items (e.g., feels angry) and reversing the scoring for the positively phrased items (e.g., the child has a well-adjusted attitude towards sex). The range of possible scores is 0-300 for Part A, 0-200 for Part B, and 0-500 for the total scale. High scores reflect greater empathy, indicating recognition of distress and the absence of positive feelings in the child (Part A) and/or in the respondent (Part B).

In terms of its psychometric properties, the CMEM have been shown to have excellent internal reliability (alpha coefficients ranging from .80 to .94) and adequate test re-test reliability (correlations ranging from .64 to .83).

*Design and Procedure*

The present study employed a quasi-experimental design. In terms of offender recruitment, once a prisoner expressed interest in the study to their unit's senior prison officer, the officer informed the prison-based psychologist, who then contacted the principal researcher to arrange a suitable interview time. All offenders were assured that they would incur no penalty if they withdrew their participation at any time and that their responses would be treated with the strictest confidence. It was emphasised to all offenders that the information they provided would not be used within the prison system, and that completed questionnaires would not be stored at the prison.

With respect to the community sample, all potential participants who contacted the principal researcher were given information regarding the general nature of the study. An interview time was scheduled for respondents who met the selection criteria and who chose to participate in the study.

At interview, all participants engaged in a semi-structured interview based on the demographic questionnaire. Participants then completed the paper-and-pencil CMEM. At all times the principle researcher was available to provide instruction and clarification to any questions. At the end of the interview, each participant was given the opportunity to discuss with the researcher their thoughts and feelings about the interview, and were invited to add other comments they felt were appropriate.

RESULTS

*Description of the Child Molester and Comparison Samples*

Table 1 summarises the demographic and personal history information, offender characteristics, and offence history and current offence characteristics of the child molester and community comparison samples. The child molester and community

samples were well matched in terms of ethnic composition and marital status. Although the majority of individuals in the child molester (76%) and community samples (75%) were educated to at least Year 11 of secondary school, the mean years of education was higher in the community sample than in the offender sample,  $F(1, 48) = 5.19, p = .027$ . As can be seen from Table 1, the community sample comprised more individuals with tertiary training than the offender groups.

The socioeconomic backgrounds of the child molester and comparison samples, in terms of their employment and level of income, were also compared. With respect to employment, the diverse nature of occupations reported by participants within each group made it necessary to collapse employment into three categories (unskilled labour, skilled labour, and professional) so that meaningful comparisons could be made. Unskilled labour included such occupations as dish washer, cleaner, garbage collector and shelf stock filler, whilst skilled labour referred to plumbers, carpenters, taxi drivers, and brick layers. Professional positions included such occupations as lawyers, accountants, nurses, teachers and medical practitioners. Although the number of child molester and community control participants in the three employment categories differed significantly,  $\chi^2(2, N = 50) = 7.05, p = .03$ , examination of the standardised residuals showed that group differences were significant only in terms of the professional employment category. Consistent with differences in level of education attained and employment status, the average income earned by individuals in the child molester sample was significantly less than that earned by individuals in the community sample,  $F(1, 48) = 4.31, p = .044$ . Thus, prior to conviction, individuals in the child molester sample earned an average income of AU\$26,454.16 ( $SD = AU\$12,621.54$ ) while members of the community sample earned an average income of AU \$34,161.90 ( $SD = AU \$2664.49$ ).

Table 1  
*Demographic and Personal History Characteristics of Child Molester and Community Samples.*

Demographic Characteristics	Child Molester Sample			Community Sample		
	Intrafamilial (n=11)		Extrafamilial (n=14)		Combined (n=25)	
	n	%	n	%	n	%

Cultural Background								
Anglo Australian	9	82	12	86	21	84	23	92
European Australian	1	9	2	14	3	12	2	8
Indian Australian	1	9	-	-	1	4	-	-
Marital Status								
Single	6	55	5	35	11	44	10	40
Married/defacto	5	45	7	50	12	48	12	48
Divorced/separated	-	-	1	7	1	4	3	12
Educational Level								
Secondary	11	100	12	85	23	92	5	20
Tertiary	-	-	2	14	2	8	20	80
Occupational Status								
Unskilled labour	2	18	3	21	5	20	2	8
Skilled labour	7	64	7	50	14	56	10	40
Professional	2	18	2	14	4	16	13	52
Income Level								
9,000 - 19,000	5	45	3	21	8	32	2	8
20,000 - 29,000	3	27	6	42	9	36	4	16
30,000 - 39,000	2	18	-	-	2	8	8	32
40,000 - 49,000	-	-	1	7	1	4	2	8
50,000 - 59,000	1	9	2	14	3	12	5	20
Victim of Crime								
Sexual abuse	5	45	6	42	11	44	1	4
Other crimes	4	44	3	21	7	28	2	8
Criminal Background								
Minor crime	7	63	9	64	16	64	8	32
Against a person	11	100	14	100	25	100	2	8

Note. Sample sizes and percentages vary due to missing data.

The child molester and control groups also differed significantly in terms of their personal experience of sexual abuse,  $\chi^2(2, N = 50) = 11.49, p = .003$ . The finding that a high proportion of individuals in the child molester sample had been sexually abused as children is consistent with a substantial body of literature which report similar victimisation rates in groups of sexual offenders (e.g., Graham, 1996; Hilton, 1993; Hunter, Goodwin, & Becker, 1994; Lamphear, 1985; Miller, 1987).

The criminal backgrounds of the child molester and control groups in terms of minor crimes and crimes against a person were also compared (see Table 1). Minor crimes included shop lifting, stealing goods from cars and houses, dealing in illicit drugs (i.e., marijuana, amphetamines, ecstasy and cocaine).

Crimes against a person included armed robbery, physical and sexual assault, rape, murder. Individuals in the child molester group reported committing significantly higher rates of both minor crimes,  $\chi^2(1, N = 50) = 5.13, p = .023$ , and crimes against a person,  $\chi^2(1, N = 50) = 38.78, p = .001$ , than did members of the community sample. The result that child molesters are more likely to have committed a minor crime and a crime against a person is to be expected, given the recruitment procedure and the nature of the population being investigated.

#### *Child Molester Offender Characteristics*

The child molester group was described in terms of offence history, current sexual offence

characteristics, offending behaviour, and sentence disposition (see Table 2).

Offence History

As can be seen in Table 2, almost all individuals in the child molester sample (84 %, N = 21) had previously committed a sexual offence and most had convictions for more than one previous sexual offence. Approximately 8 of the intrafamilial (72%) and 13 of the extrafamilial (92%) child molesters had previously committed a sexual offence. The mean numbers of sexual offences previously committed by intrafamilial and extrafamilial child molesters were 3 (range = 1-19) and 5 (range = 1-30), respectively. Regarding nonsexual offences previously committed by child molesters, approximately 64% (N = 16) had committed theft/burglary offences and 56 % (N = 14) had committed various drug offences.

Current Sexual Offence Characteristics

Inspection of Table 2 indicates that 16 percent of the child molesters were first time offenders (intrafamilial child molesters, 18%; and extrafamilial child molesters, 14%) while the majority of child molesters had committed multiple sexual offences.

Offending Behaviour

Table 2 indicates the type of sexual offences committed by the child molester sample. The majority of child molesters committed indecent assault of a child less than 10 years of age, wilful and obscene exposure, voyeurism/peeping, buggery/attempted buggery and sexual penetration. The mean number of sexual offences committed by each child molester was 5.6 (range 1-50).

Approximately 55 percent of the victims of the child molesters were female, and 45 percent were male. The mean age of the victims of the child molesters was 9.5 years (range 7-13 years).

Table 2  
*Offence History, Current Sexual Offence Characteristics, Offending Behaviour, and Disposition of the Child Molester Sample*

Offence Characteristics	Child Molester Sample					
	Intrafamilial		Extrafamilial		Combined	
	n	%	n	%	n	%
<b>Offence History</b>						
Sexual offending	8	72	13	92	21	84
Murder/manslaughter	-	-	1	4	1	4
Theft/burglary	7	63	9	64	16	64
Drug offences	5	45	9	64	14	56
<b>Current Sexual Offence Characteristics</b>						
First offence	2	18	2	14	4	16
Multiple offences	9	81	12	85	21	84
<b>Offending Behaviour</b>						
Indecent assault (<16 years)	2	18	4	28	6	24
Indecent assault (<10 years)	9	81	10	71	19	76
Wilful and obscene exposure	11	100	14	100	25	100
Voyeurism/peeping	11	100	8	57	19	76
Buggery/attempted buggery	9	81	10	71	19	76

Soliciting for prostitution	3	27	4	28		7	28
Sexual penetration	10	81	13	92	23	23	92
	M	SD	M	SD		M	SD
Sentence Disposition (years/months)							
Length of current sentence	7.1	5.9	7.2	5.6	7.2	7.2	5.6
Amount of time	2.9	1.5	3.8	2.2		3.4	1.8

Sentence Disposition

In terms of the length of sentence offenders will serve for their current offence, individuals in the intrafamilial offender subgroup will serve an average of 7.1 years in prison (*SD* = 5.9 years) and had completed an average of 2.9 years (*SD* = 1.5 years). The extrafamilial offender subgroup will serve an average of 7.2 years (*SD* = 5.6 years) in prison and had completed an average of 3.8 years (*SD* = 2.2 years) of their current sentence.

*CMEM Scores for Child Molester and Nonoffender Samples*

In the following analyses, two aspects of empathy (recognition of victim distress and emotional replication) as well as the ‘overall’ CMEM empathy scores elicited by the different victim descriptions are compared between the two participant groups. Table 3 presents the mean and standard deviations for the child molester and community control samples on each CMEM empathy measure.

Table 3  
*Mean Empathy Scores for the Australian Child Molester and Community Comparison Samples*

CMEM	Child Molester						Community Sample	
	Intrafamilial (n=11)		Extrafamilial (n=14)		Combined (n=25)		(n=25)	
	M	SD	M	SD	M	SD	M	SD
Case 1: Car Accident Victim								
Part A *	175.45	29.13	160.85	39.14	167.28	35.19	180.96	24.88
Part B **	110.36	23.10	100.50	25.92	104.84	24.72	105.40	25.58
Composite ***	285.81	43.80	261.35	51.22	272.12	48.72	286.36	44.74
Case 2: General Sex Abuse Victim								
Part A *	216.90	55.64	194.00	71.91	204.08	65.00	228.60	30.06
Part B **	151.18	27.54	114.78	34.12	130.18	35.87	126.08	27.11
Composite ***	368.09	78.61	308.78	98.77	334.88	93.60	354.68	49.45
Case 3: Own Victim								
Part A *	178.81	62.35	173.71	69.72	175.96	65.27	-	-
Part B **	126.45	27.35	115.07	34.65	120.08	31.55	-	-
Composite ***	305.27	71.29	288.78	98.69	296.04	86.39	-	-

* Emotional recognition & perspective taking	** Emotional replication	***Overall empathy
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To examine whether empathy levels differ between the child molester and comparison samples, a series of two way analyses of variance were performed with group status and victim type (i.e., accident victim or general sexual abuse victim) as the between- and within- subject independent variables, respectively. The dependent measures were emotional recognition-perspective taking (Part A), emotional replication (Part B), and overall empathy (composite score), respectively.

With respect to overall empathy levels, the two-way ANOVA showed that neither the main effect for group,  $F(1,48) = 1.45, p = .23$ , nor the group by victim type interaction,  $F(1,48) = .07, p = .73$ , achieved significance. However, there was a significant main effect for victim type,  $F(1,48) = 38.57, p = .001$ , with a higher level of empathy reported for the general sex abuse victim than for the accident victim. Thus, the overall level of victim empathy did not differ between child molesters and nonoffenders. Indeed, for both groups the overall level of victim empathy varied only according to the type of victim presented in the case vignette.

*Comparisons of Intrafamilial and Extrafamilial Child Molester Samples*

The question of whether child molester empathy levels vary as function of their relationship with the victim was explored using a series of two-way analyses of variance with child molester subtype (intrafamilial versus extrafamilial) as the between-subject factor and victim type (accident victim, general sexual abuse victim, and own victim) as the within-subjects factor. The dependent measures were emotional recognition-perspective taking (Part A), emotional replication (Part B), and overall empathy (composite score), respectively.

With respect to overall empathy levels, the two-way ANOVA showed that neither the main effects for victim type,  $F(1,23) = 1.19, p = .28$ , or child molester subtype,  $F(1,23) = 2.51, p = .13$ , nor the child molester subtype by victim type interaction,  $F(1,23) = .03, p = .85$ , achieved significance. Thus, the overall victim empathy levels of offenders did not vary as a function whether they were categorised as either intra- or extra-familial offenders or whether they were responding to an accident victim, or a child abuse victim of their own or of an other perpetrator.

However, as is evident from an inspection of Figure 1, intra- and extra-familial child molesters differed in terms of specific empathy skills. Although intrafamilial child molesters reported higher levels of emotional recognition and perspective taking, as well as higher levels of emotional replication than extrafamilial child molesters for all types of victim, this difference was significant only in terms of their ability for emotional replication. A two-way analysis of the mean scores for emotional replication showed a significant main effect for child molester subtype,  $F(1,23) = 7.61, p = .01$ , with intrafamilial offenders achieving higher scores than extrafamilial offenders. However, neither the main effect for victim type,  $F(1,23) = 2.62, p = .12$ , nor the child molester subtype by victim type interaction,  $F(1,23) = .07, p = .93$ , achieved significance. Similarly, in terms of emotional recognition and perspective taking, there were no significant main effects for child molester subtype,  $F(1,23) = .251, p = .13$ , or victim type,  $F(1,23) = 1.20, p = .28$ , and no significant child molester subtype by victim type interaction,  $F(1,23) = .04, p = .85$ .

*Empathy and Personal History Characteristics*

The relationship between overall empathy levels and having experienced childhood sexual abuse or otherwise having been a victim of other crimes was examined using correlational analyses (see Table 4). Point biserial correlations revealed that having been a victim of childhood sexual abuse or other crimes was not significantly related to overall empathy scores for any of the child molester or community samples. It is not appropriate to make direct comparisons between these groups since only one member of the community sample reported childhood sexual abuse, and only two had been victims of crime. However, while not statistically significant, it is noteworthy that empathy is negatively correlated with having been the victim of a nonsexual crime.

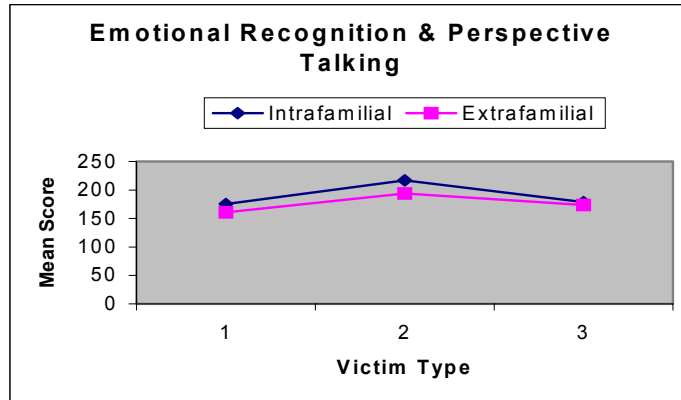
Correlational analyses were also used to examine the relationship between overall empathy levels and a range of other personal history variables, including years of education, income, years in occupation, and age. The correlation coefficients between overall empathy scores and these demographic

variables in the child molester (intrafamilial, extrafamilial, or combined sample) or community groups were uniformly low (range  $r = .03$  to  $r = .25$ ) and no correlation was significant.

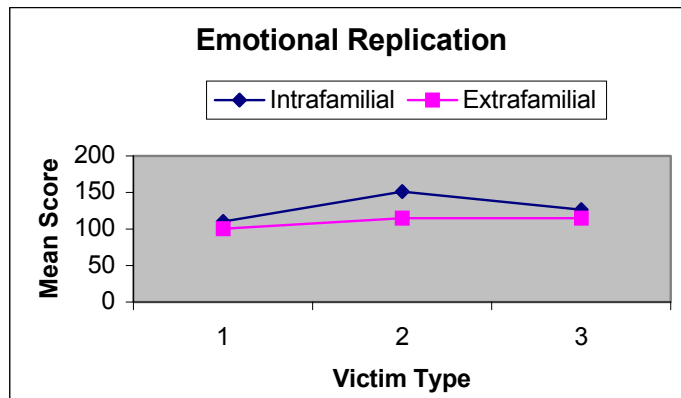
*Empathy and Experience of Sexual Abuse and Other Crimes*

The relationship between overall empathy levels and having experienced childhood sexual abuse or other having being a victim of other crimes was examined using correlational analyses. Point biserial correlations revealed that having been a victim of childhood sexual abuse or other crimes was not significantly related to overall empathy scores for any of the child molester or community comparison samples.

Mean empathy score for emotional recognition and perspective taking, emotional replication, and overall



empathy by child molester subtype over three victim types (Type 1: Car accident victim;



Type 2: General sexual abuse victim; Type 3: Own sexual abuse victim).

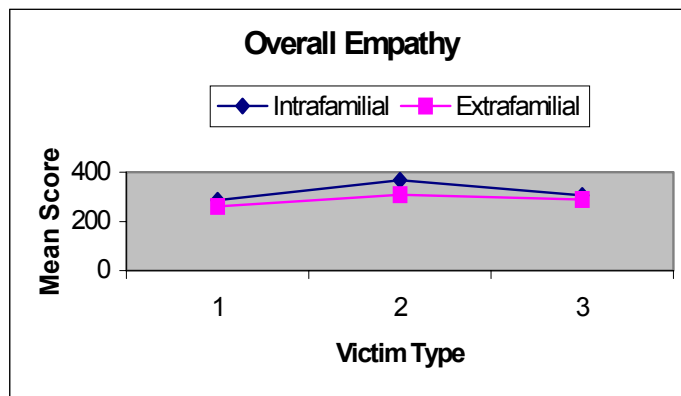


Figure 1.

Table 4  
*Correlations between CMEM Mean Scores for Overall Empathy and Experience of Sexual Abuse and Victim of Other Crimes*

Variable	Child Molester Sample			Community Sample
	Intrafamilial (n=11) r	Extrafamilial (n=14) r	Combined (n=25) r	(n=25) r
<b>Car Accident Victim</b>				
Victim of sexual abuse	0.19	-0.15	0.07	-0.16
Victim of other crime	-0.28	-0.25	-0.25	0.09
<b>General Sexual Abuse Victim</b>				
Victim of sexual abuse	0.27	0.19	0.29	-0.03
Victim of other crime	0.11	-0.32	-0.14	0.10
<b>Own Sexual Abuse Victim</b>				
Victim of sexual abuse	0.26	0.33	0.10	-
Victim of other crime	-0.56	-0.10	-0.26	-

## DISCUSSION

It is widely believed that a lack of victim empathy is a critical factor allowing child molesters to sexual abuse children (e.g., Chaplin, Rice, & Harris, 1995; Marshall, 1996a,b; Marshall & Barbaree, 1990; Marshall et al., 1995; Pithers, 1999; Roys, 1997; Williams & Finkelhor, 1990). However, in the present study it was found that child molesters did not differ substantially from individuals in the nonoffender community sample in terms of their overall level of empathy or when empathy is related specifically to cognitive empathy (emotional recognition and perspective taking) or to affective empathy (emotional replication). These findings were evident irrespective of whether empathy was assessed in relation to an accident victim, or to a sexual abuse victim by an unknown perpetrator.

This outcome was unexpected given the findings of Fernandez et al. (1999) that while child molester and nonoffender samples did not differ in their level of empathy towards a child accident victim, child molesters displayed significantly lower empathy than nonoffenders towards a 'general' child sexual abuse victim (i.e., a victim by an unknown perpetrator). A number of possibilities

can be considered in seeking to account for these disparate results. Fernandez et al.'s sample comprised only extrafamilial child molesters whereas the present sample also included intrafamilial offenders. Although Fernandez et al. argued that their findings could be generalised to the broader population of child molesters, offender subtype differences might plausibly be raised as a causative factor for the between-study differences. However, the overall CMEM empathy scores elicited by the Australian and Canadian extrafamilial offenders in relation to the car accident victim were almost identical. Moreover, equivalent levels of empathy were reported by the Australian intra- and extrafamilial child molesters in relation to this car accident victim. This lack of differentiation lessens the likelihood that child molester subcategorisation explains satisfactorily the observed differences.

It is possible that the conflicting results might be satisfactorily accounted for by differences in variables such as ethnic milieu (e.g., French or English speaking Canadian), socioeconomic or educational status, or personal experience of sexual abuse or other crimes. It was not possible to make direct comparisons between the samples of Fernandez et al. and those of the present study on any of these variables since this information was not available for the Canadian sample (W.L.

Marshall. Personal communications, November 9, 1999; February 19, 2001). Whilst it cannot be discounted that such factors have contributed to the disparate findings between studies with respect to the general sexual abuse victim, in the present study, no demographic or personal history variables were associated with empathy responses.

In conceptualising the observed differences between the two studies, it is salient to examine not only the offender and nonoffenders' averaged empathy scores, but also the extent of variability within each sample group. Whilst remarkable similarity exists in the distribution of empathy scores achieved by the nonoffender samples of both studies, marked differences are evident in the distribution of offenders' empathy scores. These differences are most prominent with respect to the CMEM responses indexing overall empathy related to the offender's own victim, where substantially greater variation exists amongst the Canadian child molester sample. Given the recency of the CMEM as a measure of empathy, and the consequent lack of comparative research, the stability of findings relating to offender samples is yet to be determined. Further research using the CMEM with other child molester sample groups is clearly warranted. However, with respect to the Australian and Canadian nonoffender community samples, the convergent findings suggest the stability of CMEM for nonoffender populations.

The present sample of intra- and extra-familial child molesters could not be differentiated in terms their empathy responses, irrespective of whether empathy was assessed in relation to an accident victim, a child abuse victim of another perpetrator, or their own victim. This outcome contrasts with previous research that reports a specific empathy deficit in relation to the child molesters' own victims in addition to a deficit in empathy for child sexual abuse victims in general (Fernandez et al., 1999). As noted previously, the similarity between the Australian intra- and extra-familial child molesters' empathy responses mitigates the argument that offender subcategorisation accounts meaningfully for the between-study differences.

Interpretation of the findings of the present study warrants consideration of a number of methodological limitations. First, only a relatively small number of incarcerated child molesters volunteered to participate in the present research. Whilst not unique to this study, and indeed commonplace within forensic psychological research, access to a large offender population was difficult and, in this case, limited to a single medium security prison. As a result, it cannot be

determined how well the present findings generalise to broader populations of child molesters. Similarly, the possibility exists that with a larger sample size, and consequently higher statistical power, statistically significant differences in the empathy levels of offenders and nonoffenders may have been observed. Additional research using larger samples is needed before a definitive conclusion regarding empathy deficits in offenders can be drawn. Second, the effect of bias introduced through the necessarily voluntary nature of participation cannot be determined. It is noteworthy nonetheless that the demographic profile of the participants in this study, and the findings with respect to empathy for nonsexual victims match well those found by Fernandez et al. (1999) using a larger sample. Third, there is a lack of published information about the CMEM. Although similar Australian and Canadian CMEM profiles were attained for nonoffenders, the CMEM empathy profiles for Australian offenders challenge the notion that child molesters have either a generalised or victim-specific empathy deficit. The issue of whether these findings represent actual cultural or offender specific differences, or result from methodological artefacts (e.g., sample size) or from limitations of the scale itself, can only be addressed by future studies that utilise the CMEM with large sample groups. Clearly, while the present research contributes to the body of knowledge about the CMEM as it applies to both offenders and community samples, further research will determine ultimately its utility in clinical and research settings.

Further research is also required to understand the relationships among cognitive distortions, deviant sexual preferences, and victim empathy in child molesters. It is reported that men who have deviant sexual preferences are less likely to empathise with the victim and are more likely to endorse distorted justifications and attitudes supporting sexual interactions between adults and children (Choplin, McCain, Carbonell, & Hagen, 1995). If this is true, then the role of cognitive distortions in mediating victim empathy may be the single most important factor in understanding empathy deficits. Indeed, understanding the complex relationships between empathy, cognitive distortions, and sexually offending behaviour is essential if the efficacy of treatment programs for sexual offenders is to progress.

In summary, the present research adds to current knowledge about the CMEM in the assessment of empathy in child molesters. Although similar Australian and Canadian CMEM profiles were attained for nonoffenders, the empathy profiles for

Australian offenders may challenge the notion that child molesters have either a generalised or victim-specific empathy deficit. In the present study, Australian intra- and extra-familial child molesters and nonoffending community members reported similar empathy levels towards children who were the victims of a motor vehicle accident or the victims of sexual abuse. Moreover, child molesters demonstrated no less empathy for their own child sexual abuse victims than for the other victim types. If future studies, using larger offender samples, were to replicate these findings, clinicians would be well advised to exercise caution in administering the CMEM as an instrument that can reliably distinguish child molesters from nonoffenders and to question the priority given to empathy development in treatment.

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