

SEARCHLIGHT 2023

CHILDLIGHT ANNUAL FLAGSHIP REPORT

TECHNICAL NOTES

Project **B** _____

**The nature of online offending
against children: Representative
data from Australia, UK and the
USA**

B

The nature of online offending against children: Representative data from Australia, UK and the USA

Technical Note

This study builds upon the previous survey research on child sex offending in community samples. While previous studies have focused on psychological correlates and risk factors, our survey gathered data on demographics, health status, social support, childhood exposure to adversity, and technology and internet habits, as well as attitudes and behaviours relating to online and offline child sexual offending.

The project focused on men because men are the majority of child sex offenders. Patterns of female sexual offending against children have similarities but also key differences from male offending patterns, including differences in risk factors, contexts, motives and strategies amongst female offenders (Burgess-Proctor et al., 2017). Such gendered differences in perpetration may be better measured in surveys that are developed with a specific focus on female perpetration.

The research team followed ethical procedures and fully disclosed the purpose of the survey to participants and noted limits to confidentiality if it was determined that a child was currently at risk of significant harm. No child protection referrals were made because of the study. Due to the nature of the survey, a potential limitation is the underreporting of abusive behaviours.

Adhering to best practice in behavioural surveys, attention checks were added throughout the survey to check consistency in participant answers and a final question was added at the end of the survey asking participants if they had been honest throughout. Those who failed the attention check or had not answered honestly were removed from the sample (Australia n=727; U.K n=721; U.S n=847)

Questions asked about men (over 18) and their behaviours against children (under 18). These behaviours have been classified as offending behaviours based on international standards of violence against children identified through the UN Convention on the Rights of the Child. Each jurisdiction may have differing national laws on the age of consent. In most jurisdictions, online sexual behaviours enacted against children under 18 are considered illegal behaviour even if the perpetrator is reporting on an instance in which this behaviour happened when they were close in age to the victim (e.g., 19 years old). The age of consent for sexual contact varied between 16 and 18 between and within the countries under study. There is a limitation in this study that we cannot disaggregate the age of the child or the offender at the time of these behaviours.

The research team used a variety of validated survey measures and developed their own measures, which have subsequently been validated. The survey design used the following measures for the survey:

- Correlates of Admission of Sexual Interest in Children (Seto et al., 2017)
- Interest in Sex with Children (Seto et al., 2015)
- Offense-Supportive Attitudes and Beliefs (Seto et al., 2015)
- Peer Influences (Seto et al., 2015)
- Pornography Viewing (Seto et al., 2015)
- Age of attraction (AoA) (Ó Ciardha et al., 2021)
- Sexual attraction to children (Ó Ciardha et al., 2021)
- Proclivity to sexually offend (Ó Ciardha et al., 2021)
- Sexual offending (Ó Ciardha et al., 2021)
- Honesty and debriefing (Ó Ciardha et al., 2021)
- Phq-4: The Four-Item Patient Health Questionnaire For Anxiety And Depression (Kroenke et al., 2009)
- NIDA Quick Screen V1.0¹
- National Institute on Alcohol Abuse and Alcoholism's screening question on heavy drinking days (Smith et al., 2009)
- Brief Disability Questionnaire (Von Korff et al., 1996)
- The multidimensional scale of perceived social support (Dahlem et al. 1991)
- Adverse Childhood Experiences Questionnaire (Felitti et al., 1998)

The survey also developed an Adapted Child Sexual Abuse (CSA) Myth Scale that was drawn from Collings (1997). The research team includes academic and practice experts in child sexual abuse, public health and secondary prevention who provided input into the survey. The survey received thorough feedback from the Project Advisory Group

(which includes representatives from law enforcement, financial intelligence units, government departments and mental health support services). The survey received ethics approval (HC220317) from the University of New South Wales in September 2022.

Sampling

Data were provided by CloudResearch (<https://www.cloudresearch.com>), an online recruitment and survey company with access to an international pool of over 1.5 million participants. Online panels are well suited for sensitive research topics where participants would traditionally be reluctant to participate due to the lack of anonymity, such as using telephone or in person methods (Porter et al, 2019). Evidence indicates that data provided by CloudResearch is more likely to be of a higher quality than that from other online survey platforms or undergraduate students (Douglas, Ewell, & Brauer, 2023).

Stratified random sampling was conducted to obtain three cross-sectional samples of around 1,500 men representative of the Australian, U.K, and U.S male populations in terms of age, residential location, household income, and educational attainment. Data collection spanned from November 2022 to January 2023. Originally, surveys from 2,697 Australian, 2,240 U.K, and 2,397 U.S respondents were obtained. Around one-quarter of the Australian sample (n = 732) and one-third of the U.K (n = 895) and U.S (n = 721) sample indicated that they were either female at birth, did not identify as male, failed the mid-survey attention check, or reported that they had not answered the questions honestly. These participants were removed, resulting in an analytical sample of 1,965 Australian, 1,519 U.K, and 1,502 U.S men.

¹ <https://nida.nih.gov/sites/default/files/pdf/nmassist.pdf>

The samples were somewhat concordant with the population based on the sampling stratification characteristics, with the average prevalence deviating by 3.25%. However, there were broader deviations between the samples and the Australian, U.S, and U.K 2021 censuses of the adult male population (these deviations were based on the benchmark demographics covered in the next paragraph). The Australian sample was over representative of participants who indicated that they were Aboriginal/Torres Strait Islander (15.4% vs. 3.4%), born in Australia (82.3% vs. 64.4%), married or living with their partner (67.2% vs. 58.1%), and employed (77.4% vs. 71.3%). The U.S sample was disproportionate in terms of participants who were white (68.6% vs. 58.1%), had an annual household income of \$150,000 or more (11.3% vs. 17.7%), and did not complete high school (4.9% vs. 11.7%). The U.K sample was over representative of men who lived with their partner (17.0% vs. 11.1%), were employed (73.0% vs. 63.5%), had an annual household income of £100,00 or more (6.2% vs. 1.8%), and a vocational or trade qualification (14.9% vs. 6.8%). The absolute bias between the samples and the census populations were 5.9% for Australia, 2.6% for the U.S, and 3.4% for the U.K, exceeding the recommended threshold of 2.5% for a representative sample (Dal Grande et al., 2015).

The representativeness of each sample was improved by iteratively adjusting the weight of each participant until the sample distribution aligned with the population distribution according to several benchmark demographic characteristics from the Australian, U.S, and U.K 2021 censuses of the male adult populations (Speed, 2005). These were age, annual household income, race, country of birth, educational attainment,

marital status, and employment. Participants with non-missing benchmark variable data were included in the weighted samples (Australia = 1,945; U.S = 1,473; U.K = 1,506). The median weight was 0.81 (range 0.09 – 6.52) for Australian participants, 0.84 (range 0.31 – 7.14) for U.S participants, and 0.92 (range 0.06 – 4.34) for U.K participants. Weighted scores that exceeded the median plus six times the interquartile range were truncated to reduce the mean squared errors of the outcome estimates (Battaglia, Hoaglin, & Frankel, 2009). The absolute bias of the weighted samples ranged from 0.03% to 0.14%, indicating minimal difference between the sample and the respective male populations based on the benchmark variables.

Statistical analyses

Descriptive statistics and bivariate associations were calculated to distinguish men who have sexual feelings and/or sexually offend against children from those who have no sexual feelings or offend against children. Next, descriptive statistics and bivariate associations were calculated distinguishing unique categories of men. Finally, we compare the factors differentiating men who want help for their sexual feelings towards children to those who have sexual feelings towards children but do not want help. Odds Ratios (OR) and 95% confidence intervals (95% CIs) were calculated using weighted regression analyses and are presented as measures of effect size and precision of the association between variables. The results presented in this report are for descriptive purposes only. Associations should not be interpreted as causal or free of confounding. Analyses were conducted using SAS v9.4 and IBM SPSS 24 software.

Technical note references

- Australian Bureau of Statistics. (2021). Population: Census. ABS. <https://www.abs.gov.au/statistics/people/population/population-census/latest-release>.
- Battaglia, M. P., Hoaglin, D. C., & Frankel, M. R. (2009). Practical considerations in raking survey data. *Survey Practice*, 2(5), 1–10. <https://doi.org/10.29115/sp-2009-0019>
- Collings, S. J. (1997). Development, reliability, and validity of the child sexual abuse myth scale. *Journal of Interpersonal Violence*, 12(5), 665–674.
- Dahlem, N. W., Zimet, G. D., & Walker, R. R. (1991). The multidimensional scale of perceived social support: a confirmation study. *Journal of Clinical Psychology*, 47(6), 756–761.
- Dal Grande, E., Chittleborough, C. R., Campostrini, S., Tucker, G., & Taylor, A. W. (2015). Health estimates using survey raked-weighting techniques in an Australian population health surveillance system. *American Journal of Epidemiology*, 182(6), 544–556.
- Douglas, B. D., Ewell, P. J., & Brauer, M. (2023). Data quality in online human-subjects research: Comparisons between mturk, prolific, cloudresearch, qualtrics, and SONA. *PLOS ONE*, 18(3), e0279720. <https://doi.org/10.1371/journal.pone.0279720>
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study. *American journal of preventive medicine*, 14(4), 245–258. Retrieved from <http://www.sciencedirect.com/science/article/B6VHT-3T11WSM-1/2/9c12234151e0b85e68918d0c803f52b2>
- Kroenke, K., Spitzer, R. L., Williams, J. B., & Löwe, B. (2009). An ultra-brief screening scale for anxiety and depression: the PHQ–4. *Psychosomatics*, 50(6), 613–621.
- Ó Ciardha, C., Ildeniz, G., & Karoğlu, N. (2022). The prevalence of sexual interest in children and sexually harmful behavior self-reported by men recruited through an online crowdsourcing platform. *Sexual Abuse*, 34(2), 207–226.
- Porter, C. O., Outlaw, R., Gale, J. P., & Cho, T. S. (2019). The use of online panel data in management research: A review and recommendations. *Journal of Management*, 45(1), 319–344.
- Seto, M., Hermann, C. A., Kjellgren, C., Priebe, G., Svedin, C. G., & Långström, N. (2015). Viewing child pornography: Prevalence and correlates in a representative community sample of young Swedish men. *Archives of sexual behavior*, 44(1), 67–79.
- Seto, M. C., & Eke, A. W. (2017). Correlates of admitted sexual interest in children among individuals convicted of child pornography offenses. *Law and Human Behavior*, 41(3), 305.
- Smith, P. C., Schmidt, S. M., Allensworth-Davies, D., & Saitz, R. (2009). Primary care validation of a single-question alcohol screening test. *Journal of general internal medicine*, 24, 783–788.
- Speed, T. P. (2005). Iterative proportional fitting. In Armitage, P. and Colton, T. (Eds). *Encyclopedia of Biostatistics*, John Wiley & Sons.
- Von Korff, M., Ustun, T. B., Ormel, J., Kaplan, I., & Simon, G. E. (1996). Self-report disability in an international primary care study of psychological illness. *Journal of clinical epidemiology*, 49(3), 297–303.



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