Factors Related to Co-Offending and Coerced Offending Among Female Sex Offenders: The Role of Childhood and Adult Trauma Histories

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Research suggests two important domains of women's sexual offending: *co-offending*, in which additional perpetrators are present with the woman during the crime, and *coerced offending*, in which the woman feels pressured by someone else to commit the crime. This exploratory analysis examines these 2 domains using self-report data from 60 incarcerated female sex offenders (FSOs) in a Midwestern state. In addition to indicating whether a co-offender was present and whether they felt pressure to commit the sex offense for which they were incarcerated, participants provided demographic information about themselves, the victim, and the offense, as well as about their own trauma, substance abuse, and mental illness histories. Results indicate that childhood and adult trauma histories are related to both co-offending and coerced offending among FSOs. Implications for theory, policy and practice, and future research are discussed.

Keywords: female sex offenders; co-offending; coercion; trauma

Despite tremendous growth in research about female-perpetrated crime over the last 40 years, one aspect of women's criminal involvement remains understudied: sexual offending. Research on women who sexually offend has only begun to proliferate in the last decade (Gannon & Cortoni, 2010), leaving significant gaps in our understanding of women's sexual offending relative to both women's offending generally and to men's sexual offending. Moreover, much of the existing research has occurred outside of the United States, raising concerns about the generalizability of findings based on international correctional samples within the unique American incarceration context.

There are several reasons why women's sexual offending has received comparatively little scholarly attention. First, female sex offenders (FSOs)[1] are relatively rare compared to their male counterparts. Data from victimization surveys and official reports suggest that women represent between 1% and 9% of all sex offenders, with most estimates settling on 5% (e.g., see Cortoni, Hanson, Coache, 2010; Embry & Lyons, 2012; Vandiver & Walker, 2002).[2] Second, there exist strong societal perceptions that women and girls cannot, or would not, perpetrate sexual offenses, especially violent ones (Davies, 2013; Strickland, 2008). This may be because women's sexual offending often occurs in the context of child care activities and so is not as readily detected or recognized as men's sexual offending (Wijkman, Bijleveld, & Hendriks, 2010). Finally, women's sexual offending remains something of a taboo topic because FSOs are seen as violating gender norms in ways that male sex offenders (MSOs) are not (Elliott, 1994; Embry & Lyons, 2012; Gakhal & Brown, 2011; Oliver, 2007).

Especially lacking empirical answers are questions about the presence and potentially coercive influence of co-offenders in women's sex crime perpetration (Ford, 2010; Gannon, Rose, & Cortoni, 2010; Harris, 2010). Although researchers have long recognized that girls and women commonly offend in the company or at the behest of male co-offenders (Becker & McCorkel, 2011; Koons-Witt & Schram, 2003; Terranova & Vandiver, 2014), examination of these trends has not been adequately extended to FSOs, despite evidence that co-offending is an important component of women's sexual offending (Johansson-Love & Fremouw, 2006). For example, one recent national estimate finds that approximately 40% of women but only 12% of men committed a sexual offense with a co-offender (Williams & Bierie, 2015).

This analysis aims to provide information about two domains of women's sexual offending: the presence of a co-offender during the offense (in which we differentiate between *co-offending* and *solo-offending* women), and pressure to commit the offense (in which we differentiate between *coerced* and *uncoerced* women). After examining patterns of women's sexual offending in greater detail, we present self-report data from 60 incarcerated FSOs in a Midwestern state to compare differences in demographic information (offender, victim, and offense characteristics) and adverse experiences (trauma, substance abuse, and mental illness histories) between co-offending and solo-offending women and between coerced and uncoerced women. In doing so, we aim to explore and better understand factors related to both co-offending and coerced offending among FSOs. After describing our findings, we identify implications for theory, policy and practice, and future research.

CHARACTERISTICS OF WOMEN'S SEXUAL OFFENDING

Although the FSO literature is not well developed, the existing research identifies some distinguishing characteristics of women's sexual offending. Generally speaking, FSOs tend to be young, ranging in age from early 20s to early 30s (Oliver, 2007; Vandiver & Kercher, 2004; Wijkman et al., 2010), and are likely to be White (Oliver, 2007). Compared to their male counterparts, FSOs tend to be younger and less likely to offend exclusively against female victims (Peter, 2009; Wijkman et al., 2010; Williams & Bierie, 2015). For example, a recent analysis using two decades of National Incident-Based Reporting System (NIBRS) data found that MSOs overwhelmingly selected female victims, whereas FSOs did so in only about half of all incidents (Williams & Bierie, 2015). Women also tend to offend against individuals who are related or known to them (Wijkman et al., 2010) and

who are younger than 18 years old (Vandiver & Kercher, 2004; Wijkman et al., 2010); this includes biological children, who are sexually victimized more frequently by women than men (McLeod, 2015; Williams & Bierie, 2015). However, FSOs are less likely than MSOs to use violence against or cause physical injury (i.e., broken bones, lacerations, internal injuries) to their victims (Williams & Bierie, 2015).

Notably, many FSOs have had some lifetime exposure to traumatic experiences. Specifically, FSOs are especially likely to have histories of physical and sexual victimization, substance abuse, and mental illness compared to both women in the general population and to MSOs (Bloom & Covington, 2009; Fazel, Sjöstedt, Grann, & Långström, 2010; Levenson, Willis, & Prescott, 2015; Vandiver & Kercher, 2004; Wijkman et al., 2010).

For example, Strickland (2008) used an incarcerated sample to compare women who committed a contact sexual offense to women who committed a serious, nonsexual personal crime and found that FSOs had more severe experiences of childhood trauma overall compared to nonsexual female offenders. The higher exposure to childhood trauma among FSOs was especially notable for the subcategory items of physical abuse, emotional abuse, sexual abuse, and neglect (Strickland, 2008). In addition, O'Connor (1987) found evidence of mental illness and substance abuse among FSOs convicted of indecency offenses; overall, FSOs may be more likely than their male counterparts to experience posttraumatic stress disorder and to attempt suicide (Oliver, 2007). Beyond these characteristics of women's sexual offending, in the following text we consider two domains of particular interest for this analysis: co-offending and coerced offending among FSOs.

Co-Offending Among Female Sex Offenders

As with the general population of women offenders, most FSOs commit their offenses alone rather than with another person (Becker & McCorkel, 2011; Koons-Witt & Schram, 2003). Notably, the tendency toward solo-offending among FSOs is demonstrated in both criminal justice and child protective service (CPS) samples (Bader, Scalora, Casady, & Black, 2008). That said, women are more likely than men to commit sex crimes in the presence of a co-offender (Becker & McCorkel, 2011; Williams & Bierie, 2015). Using NIBRS data for all criminal incidents during 2002–2008, Becker and McCorkel (2011) found that among men, 83% of rapes and forcible sex offenses were perpetrated alone, whereas the percentage among women was only 60%. In another analysis of NIBRS data for sexual assaults specifically during 1991–2011, Williams and Bierie (2015) found that roughly 88% of male but only 60% of FSOs acted alone and that for both groups, the co-offender was likely to be male. These trends suggest a paradox in which "male accomplices are a far more common pattern among female offenders, but at the same time, group offending is not the most common scenario for FSOs" (Williams & Bierie, 2015, p. 243). Still, the presence of a male co-offender increases risk of criminal involvement for women, and this is true of FSOs in particular (Becker & McCorkel, 2011).

It is unclear what factors might distinguish between co-offending and solo-offending FSOs. One recent study of 40 FSOs in the United Kingdom examined clinical differences between women who offended alone versus those who offended with another perpetrator (or perpetrators); results showed that solo-offending women indicated more mental illness and substance abuse problems than co-offending women, whereas co-offending women reported more environmental factors including having an intimate partner who abused children (Gillespie et al., 2015). In fact, most co-offending women in this study offended with an intimate partner (Gillespie et al., 2015). Interestingly, differences between solo- and co-offending

may have less to do with the mere presence of a co-offender and more to do with the sex of the co-offender. Using NIRBS data from 1991 to 2012, Budd, Bierie, and Williams (2017) found that incidents involving one or more female perpetrators shared many offender, victim, and offense characteristics but were generally unlike incidents in which women offended with one or more men. Instead, offenses perpetrated by coed pairs were more likely to involve a female victim and to involve dependent children than offenses perpetrated by solo-offending women (Budd et al., 2017). Finally, Harris (2010) notes that women who co-offend with a male perpetrator make up the largest classification group of FSOs. More important, Harris (2010) identifies two subtypes of co-offending FSOs: "accompanied women" who willingly participate in the offense with a male co-offender, and "coerced women" who are pressured to participate in the offense by the male co-offender—an issue to which we now turn.

Coerced Offending Among Female Sex Offenders

Although there is a predominant belief that most FSOs have male co-offenders who coerced them into committing the offense (Gannon, Hoare, Rose, & Parrett, 2012; Saradjian, 2010), a review by Johansson-Love and Fremouw (2006) found that only 3 of 13 studies demonstrated this to be the case. Furthermore, Nathan and Ward (2002) found that only half of the FSOs in their study who had a male co-offender felt pressured or coerced. When looking at co-offending among FSOs specifically, the literature suggests that not all co-offending FSOs are *coerced*, but instead there is a subgroup of FSOs who willingly coparticipate in the offense (Cortoni, 2010).

As with co-offending among FSOs, little is known about what characteristics might distinguish between coerced and uncoerced FSOs. This may be because most of the published research on "coercion" in sexual offending addresses coercion of the victim by the perpetrator, not coercion of the perpetrator by another person (e.g., see Anderson & Struckman-Johnson, 1998). However, research examining characteristics of FSOs who *did* report being coerced by a male co-offender suggests that these women have a greater number of nonsexual crimes in their criminal histories compared to those who exclusively offend alone (Vandiver, 2006). Thus, there is a call to determine what differentiates between FSOs who commit sex crimes alone or with a co-offender and between FSOs who do so willingly or who are coerced or pressured by another person.[3]

THEORETICAL PERSPECTIVES ON WOMEN'S SEXUAL OFFENDING

The etiology of sexual offending overall remains undertheorized (Simon, 2000), and this is especially true for female sexual offending in particular (Gannon, Rose, & Ward, 2008; Harris, 2010). For example, attachment theory has been used to examine how poor childhood bonding with parents relates to later sexual offending among adult men (Smallbone & Dadds, 1998), yet there is scant evidence of attachment-based explanations of adult women's sexual offending. In criminology especially, theoretical inattention to sex offenders may be because sex crimes are not neatly explained by theories that emphasize social and sociological causes of crime (Harris, 2010; Simon, 2000).

In the absence of criminological or other theories of women's sexual offending, researchers have developed several typologies of FSOs. For example, Mathews, Matthews, and Speltz (1989) used data from a corrections-based sample of 16 FSOs and found evidence of three distinct categories: teacher/lover (in which the woman offends against an adolescent male), predisposed/intergenerational (in which the woman was sexually abused as a child

and in turn abuses her own children), and male-coerced (in which the woman is dependent on a man who initiates her into sexually abusing children). Similarly, Gannon, Rose, and Ward (2008) use a grounded theory approach to identify several risk categories for the 22 FSOs in their study. One risk category is maladaptive lifestyle outcomes, described as "an erratic, unstable lifestyle evidenced by criminal behavior, unsafe and promiscuous sexual lifestyles, and emotional suppression of unresolved childhood experiences" (Gannon et al., 2008, p. 358). These maladaptive lifestyle characteristics share elements of several criminological theories of offending, including both self-control and strain explanations (e.g., see Harris, 2010). A second risk category is major life stressors, which involve physically and/or emotionally abusive personal relationships (Gannon et al., 2008, p. 362).

Building upon their earlier work, Gannon, Rose and Ward (2010) identified three distinct pathways among the FSOs in their sample: *Explicit Approach* offenders "who intended to offend, and explicitly planned their offence behaviours accordingly"; *Directed Avoidant* offenders "who did not intend to offend, but did so under the direction and coercion of a male accomplice"; and *Implicit Disorganized* offenders, "who did not intend to offend (i.e., they engaged in minimal planning), but offended impulsively following severe self-regulatory failure" (p. 359). Identification of these pathways is not only theoretically important for highlighting potentially sex-specific offending motivations for FSOs but also crucial for tailoring treatment protocols because FSOs in each pathway category likely require unique treatment needs (Gannon, Rose, & Ward, 2010).

Drawing from existing research on co-offending and coerced offending among FSOs as well as from these theoretical perspectives, we identify several factors that are important to consider in attempting to differentiate between solo- and co-offending FSOs and between coerced and uncoerced FSOs. Perhaps, most prominent among these factors are women's adverse or traumatic experiences, which may include childhood sexual abuse (Mathews et al., 1989), having a physical or emotionally abusive intimate partner (Gannon et al., 2008; Gillespie et al., 2015), and home life disruptions (Gannon et al., 2008). Next, substance abuse and mental illness (Gillespie et al., 2015), as well as impulsivity and poor emotional regulation (Gannon et al., 2008; Gannon, Rose, & Ward, 2010), may be related to co-offending and coerced offending among FSOs. Finally, prior criminal activity (Gannon et al., 2008; Vandiver, 2006) appears important to consider. Notably, these observations reflect the basic tenets of the feminist pathways, a developmental theoretical model in criminology that situates women's criminal offending in the context of their prior victimization experiences and trauma histories (e.g., Daly, 1992; see Wattanaporn & Holtfreter, 2014, for a review). Specifically, the feminist pathways model views girls' and women's trauma histories, including child abuse, substance abuse, and adult violent victimization, as risk factors for their later offending trajectories (McDaniels-Wilson & Belknap, 2008).

Given this empirical and theoretical context, the purpose of this study is to identify factors that differentiate between solo- and co-offending FSOs and between uncoerced and coerced FSOs. Our aim in this analysis is to better understand the dynamics of women's sexual offending, to improve treatment provision for this population of offenders.

METHODS

This analysis of co-offending and coerced offending among FSOs is part of a broader study commissioned by one Midwestern state's corrections department to assess the similarities and differences between women and men convicted of sexual offenses. In February of

2011, a review of Correction Management Information System data revealed 103 women currently convicted and incarcerated for a sexual offense involving penetration or sexual contact at the state's only women's prison. A pilot survey was developed, reviewed by one author's institutional review board (IRB), and was tested in a group of 25 women to ascertain their willingness to complete the survey. Changes to the survey and approval of the changes from IRB necessitated a 3-month wait before the survey could be disseminated to the remaining population of women. Changes to the survey were minimal and required the use of a shortened version of some of the instruments, none of which were included in the present analysis. During the wait, more than 20 of the women in the original sample were released from prison. The second wave of data collection, after changes were made to the survey, resulted in 35 usable surveys. Sixty usable surveys were obtained for the final analysis, for a response rate of 58%. Only 2 women declined to complete the survey, and more than 20 women were released prior to data collection, partially explaining the low response rate. In addition, women were asked to participate in this study by "call out," which is done when women may have other obligations for school, medical appointments, and so on. Thus, these data collection sessions may have been a low priority to the women who did not participate in the survey. Five call-out sessions were held on 3 different days. We do not know if differences existed between the women who participated in the study and those who did not because of the use of an anonymous survey.

Instrumentation

The survey contained three sets of questions relevant for this analysis: (a) information about the offender, victim, and offense; (b) information about the participants' trauma, substance abuse, and mental illness histories; and (c) information about co-offending and coerced offending among participants.

Offender, Victim, and Offense Characteristics. Self-reported descriptive information about offender, victim, and offense characteristics were collected from the participants who completed the survey. Offender characteristics included age at the time the survey was conducted, age at the time of offense, race, education level, and a dichotomous measure of prior conviction. Victim characteristics included sex and age of the victim and the relationship between the perpetrator and the victim. Offense characteristics included the age difference between the perpetrator and victim, number of victims, and number of times the offense occurred.

Trauma, Substance Abuse, and Mental Illness Histories. Given the high likelihood of adverse experiences among FSOs, the survey included several measures to capture these characteristics. First, the Adverse Childhood Experiences (ACE) scale was used to examine participants' exposure to childhood abuse and household dysfunction (Felitti et al., 1998). The overall score includes 10 dichotomous questions with "no" coded as 0 and "yes" coded as 1. A maximum score of 10 was possible, with higher scores indicating greater cumulative trauma exposure ($\alpha = .77$). The overall scale consists of two subscales: Childhood Disruption and Childhood Abuse. The Childhood Disruption subscore ranges from 0 to 4 and includes questions regarding separation from parents because of divorce or incarceration as well as questions about parent/guardian substance abuse, mental illness, and suicide. The Childhood Abuse subscore ranges from 0 to 6 and includes questions about physical, emotional, and sexual abuse experienced as a child, witnessing parental violence, as well as experiences of neglect. Research indicates a cumulative impact, where higher numbers of adverse experiences are associated with a greater likelihood of

negative outcomes. The ACE scale has been used in one study regarding FSOs (Levenson et al., 2014), but no research has tested reliability and validity with this population to date.

Second, the survey assessed adult intimate partner abuse (IPA) victimization using a short form of the Conflict Tactics Scale (CTS; Straus & Douglas, 2004). This 17-item measure was used to examine experiences of physical and sexual violence, as well as intimidating behavior, by an intimate partner. Three additional items were used to examine participants' stalking victimization experiences including being followed, repeatedly contacted, or surveilled by an intimate partner; these were modified from the Obsessive Relational Pursuit Scale (Spitzberg, & Cupach, 2003). Each item was measured in a yes/no dichotomy of whether the behavior had ever happened in the participant's lifetime. A maximum score of 14 was possible, with higher scores indicating greater victimization ($\alpha = .93$). The current research examined IPA victimization and included the CTS subscales (and corresponding ranges) for severe violence (0–5), intimidating behavior (0–5), sexual violence (0–4), and stalking (0–3). The analysis looked at these scales individually as well as cumulatively.

Third, substance abuse history was assessed by asking participants if they had been required to take part in a substance abuse program during their current incarceration. Upon entry into the prison, all individuals are assessed using the Substance Abuse Subtle Screening Inventory (SASSI; Lazowski, Miller, Boye, & Miller, 1998; Kubiak, Boyd, Slayden, & Young, 2005). This measure has 93 items and 8 subscales. Any individual with a score indicating probability of substance dependence is required to enter treatment. Therefore, requirement to participate in treatment was used as a proxy for substance abuse history.

Fourth, the K6+ nonspecific distress scale (Kessler et al., 2002) was used to provide an indicator of risk for mood disorder among participants. The six-question scale demonstrates high sensitivity in identifying cases of serious mental illness. The K6+ has been validated on a criminal justice population (Kubiak, Beeble, & Bybee, 2010, 2012). The scale measures the degree to which an individual has experienced feelings such as hopelessness and restlessness in the past 30 days. The scale is measured on a 5-point Likert-type scale where $0 = $ *none of the time* and $4 = $ *all of the time* ($\alpha = .89$). A score above 9 out of a possible 20 when adding the sum of the responses is considered clinically significant (Kessler et al., 2010).

Co-Offending and Coerced Offending. Finally, the survey assessed our two primary domains of interest: co-offending and coerced offending. Participants who gave an affirmative answer to the question "Was another person involved in the perpetration of this offense?" were identified as co-offending women; all remaining respondents were identified as solo-offending women. Second, participants were asked, "Did one of you pressure the other into participating [in this offense]?" Three potential responses were available: "They pressured me," "No pressure," or "I pressured them." Participants who reported "they pressured me" were identified as coerced women, whereas those who reported "no pressure" were identified as uncoerced women. No participants reported "I pressured them."[4]

Some women may have reported being pressured to offend out of social desirability. Given the social taboo associated with sexual offending, it is possible that women who perpetrated willingly falsely reported a co-offender to appear more acceptable to the research team. The Marlow-Crowne Social Desirability Scale (Crowne & Marlowe, 1960) was used to counteract this methodological issue with self-report surveys. This scale has been found to be a reliable and valid measure of social desirability for MSOs (Tatman, Swogger, Love, & Cook, 2009) but has yet to be tested on FSOs. However, this measure has been validated with nonoffending female populations and found to have similar psychometric properties (Loo & Loewen, 2004). This scale consists of 10 items measured on a Likert-type scale

where 1 = *Agree* and 3 = *Disagree* (α = .41). Scores range from 10 to 30 with a higher score indicating greater social desirability. Both mean scores and an ordinal level of measurement (high, medium, and low) were used to test for the influence of social desirability on reported co-offending and coerced offending.

More important, the measures of co-offending and coercion were discrete survey items that participants answered independently of one another. Thus, the group of coerced women is not necessarily composed exclusively of co-offending women; participants who reported being coerced could be either solo- or co-offending women. The decision to retain these as separate items was driven by concerns about statistical power and low cell size because the subsample of co-offending women was prohibitively small to separate into uncoerced and coerced subcategories. Moreover, it is possible that participants may have been pressured to participate by someone who was not present during the commission of the offense. That said, we do examine the relationship between co-offending and coerced offending to estimate the overlap of these two domains.

At the bivariate level, independent groups *t* tests and chi-square tests were used to determine whether any variables of interest are related to, respectively, co-offending and coerced offending among FSOs. Because of small sample size, it was not possible to perform large multivariate analyses. However, we conducted two logistic regressions (with a limited number of variables included in each model) to examine predictors of co-offending and coerced offending among FSOs. Finally, we examined the bivariate relationship between co-offending and coerced offending to estimate the overlap of these two domains.

RESULTS

Demographic Information

Offender Characteristics. Participants ranged in age from 21 to 63 years (*M* = 39.5, *SD* = 9.37) at the time of the survey. At the time of their offense, they ranged in age from 12 to 54 years (*M* = 30.1, *SD* = 7.13). Most women were White (66%, *n* = 39) with smaller percentages of African American (20%, *n* = 12), Native American (10%, *n* = 6), and other races (4%, *n* = 2) represented in the sample. Approximately two thirds of the sample reported having a high school diploma/general educational development (GED) or less (60%, *n* = 35). Smaller percentages reported having some college (19%, *n* = 11), a college degree (21%, *n* = 12), and a graduate degree (3%, *n* = 2). Just more than one third of the sample (35%) reported having a prior conviction. Available demographics were found to be similar to the full population of women incarcerated for sexual offenses (Kubiak, Kernsmith, Kernsmith, & Bender, 2011), thus this sample is representative of women in the same prison; however, education was not available in official data sources. Age and race of this sample are also similar to those found in other studies of women who have committed a sex offense (Oliver, 2007; Vandiver & Kercher, 2004; Wijkman et al., 2010; Table 1).

Victim Characteristics. Participants were nearly equally likely to have offended against a male victim (48%, *n* = 25) as a female victim (52%, *n* = 27). Victims ranged in age from 2 to 61 years old, with an average of 12.8 years (*SD* = 9.30). More than half of the participants (52%, *n* = 26) reported offending against a child younger than age 13 years, whereas 38% (*n* = 19) reported offending against an adolescent 13–17 years old, and 10% (*n* = 5) against an adult. Participants were equally likely to offend against their own children (42%, *n* = 23) or another person that they know (42%, *n* = 23) and 16% (*n* = 9) identified the victim as a stranger or no relation (see Table 1).

TABLE 1.   Offender, Victim, and Offense Characteristics (*N* = 60)

	N/M	*%/SD*
Offender age	39.5	9.37
Age at offense	30.1	7.13
Race		
White	39	66.1%
Non-White	20	33.9%
Education		
Diploma/GED or less	35	60.3%
Some college	11	19.0%
Associate's, bachelor's, graduate degree	12	20.7%
Prior conviction	21	35.0%
Victim sex		
Male	25	48.1%
Female	27	51.9%
Victim age	12.8	9.30
Perpetrator/victim relationship		
Parent/guardian	23	41.8%
Other known individual	23	41.8%
Stranger	9	16.4%
Perpetrator/victim age difference	17.0	12.38
Number of victims		
One	37	66.1%
Multiple	19	33.9%
Number of victimizations		
One time	25	54.3%
More than once	21	45.7%

Note. GED = general educational development.

Offense Characteristics. Age differences between the victim and offender ranged from the offender being 24 years younger to 50 years older than the victim. The average age difference involved the offender being 17 (*SD* = 12.38) years older than the victim. Two thirds (66%, *n* = 37) of the sample reported that the current offense involved one victim. Among women reporting multiple victims in the current offense (34%, *n* = 19), the number of victims ranged from two to six (*M* = 2.68, *SD* = 1.25). Just more than half of the sample (54%, *n* = 25) reported that the offense happened one time. Among women reporting repeated offenses against the same victim, the number of offenses ranged from

2 to 12 occasions (SD = 3.08). In more than half of repeat offenses (56%, n = 14), the offending continued between 1 and 11 months, and for 28% (n = 7) of the sample, the offending occurred for 1 year or longer (see Table 1).

Trauma, Substance Abuse, and Mental Illness Histories Among Female Sex Offenders

Nearly the entire sample (89.3%, n = 50) reported at least one adverse childhood experience, with participants reporting between 0 and 10 adverse childhood experiences (M = 4.3, SD = 2.88). Rates of other forms of family disruption including divorce, parental incarceration, and family substance abuse were high, with 74% (n = 43) of participants reporting at least one form of disruption. The number of reported family disruptions ranged from 0 to 4 with a maximum score of 4 (M = 1.5, SD = 1.22). Rates of abuse in childhood were similarly high, with 81% (n = 46) of the sample reporting at least one type of child abuse or neglect. Number of forms of abuse ranged from 0 to 6 (M = 2.8, SD = 2.11; Table 2).

Rates of lifetime IPA victimization among the sample were similarly high. The majority of participants (70%, n = 42) reported at least one type of IPA victimization, with an average number reporting almost six types (M = 5.83, SD = 5.21) of violence. Physical violence was the most commonly reported (63%, n = 38) subcategory of violence, with participants averaging 1.67 types of physical violence (SD = 1.58), such as hitting, kicking, or choking. A majority of participants (57%, n = 34 for each) also reported experiencing intimidation (M = 1.75, SD = 1.87) and sexual victimization (M = 1.64, SD = 1.65) by an intimate partner. Stalking victimization was less common but still reported by a more than a third (40%, n = 24) of participants, who experienced on average less than one stalking behavior (M = 0.72, SD = 1.00; see Table 2).

TABLE 2.   Trauma, Substance Abuse, and Mental Illness Histories (N = 60)

	M	SD
Adverse childhood experiences	4.3	2.88
Household disruption	1.5	1.22
Child abuse	2.8	2.11
Adult intimate partner violence victimization	5.83	5.21
Physical	1.67	1.58
Sexual	1.64	1.65
Intimidation	1.75	1.87
Stalking	0.72	1.00
Substance abuse history	N = 20	51%
Severe mental illness score	8.4	6.97
Severe mental illness (9 or higher)	N = 17	43%

Slightly more than half of the participants reported that they were identified at prison intake as having substance abuse disorders (51%, $n = 20$) based on the SASSI. Serious mental illness, as measured by the K6+, was identified in 43% ($n = 17$) of the participants. The summative score ($M = 8.4$, $SD = 6.97$) indicates that a significant proportion of the sample may be experiencing subthreshold mental illness (see Table 2).

Co-Offending Among Female Sex Offenders

Out of 60 total respondents, 51 gave a valid response to the co-offending item. Of those, more than half (55%, $n = 28$) reported the presence of a co-offender during the sex offense for which they were incarcerated. No differences were found in mean scores on the social desirability scale between co-offending and solo-offending women, $t(49) = -0.392$, $p = .696$. In addition, no differences in co-offending were found between FSOs holding high levels of social desirability and those reporting low or medium levels, $\chi^2(2, N = 51) = 0.322$, $p = .851$.

First, offender, victim, and offense characteristics were examined in relationship to reported co-offending. No offender or offense characteristics were significantly associated with co-offending among FSOs. Victim sex was the only demographic characteristic related to co-offending, as co-offending women were more than twice as likely as solo offending women to select a female victim, $\chi^2(1, N = 45) = 12.02$, $p = .001$ (Table 3).

Second, trauma histories were examined in relationship to reported co-offending. Co-offending women had significantly more childhood household disruption than solo-offending women, with the former reporting an average of 2.07 ($SD = 1.04$) disruptions in childhood and the latter reporting less than one disruption, $M = 0.96$, $SD = 1.13$, $t(47) = 3.61$, $p = .001$, on average. More specifically, co-offending was more common among participants who experienced parental divorce, $\chi^2(1, N = 47) = 10.40$, $p = .001$; parental substance abuse, $\chi^2(1, N = 48) = 7.22$, $p = .007$; and parental incarceration, $\chi^2(1, N = 49) = 7.76$, $p = .005$. Although no significant differences in mean scores of the four types of IPA victimization were found between solo- and co-offending FSOs, subcategory analyses revealed that two types of IPA victimization were more likely among co-offending than solo-offending women: having been threatened with a weapon by a partner ($\chi^2 = 5.40$, $p = .020$) and having had a partner threaten one's family with harm ($\chi^2 = 5.40$, $p = .020$). Neither substance abuse history nor severe mental illness distinguished between co-offending and solo-offending FSOs in this sample (see Table 3).

Coerced Offending Among Female Sex Offenders

Out of 60 total respondents, 29 gave a valid response to the coercion item. Of those, nearly two thirds (66%, $n = 19$) reported being pressured by another person to commit the sex crime for which they were incarcerated. No differences were found in mean scores on the social desirability scale between coerced women and uncoerced women, $t(27) = -1.178$, $p = .249$. In addition, no differences in coerced offending were found between FSOs holding high levels of social desirability and those reporting low or medium levels, $\chi^2(2, N = 29) = 0.967$, $p = .617$.

First, offender, victim, and offense characteristics were examined in relationship to reported coerced offending. No offender or offense characteristics were associated with coerced offending among FSOs. Victim age was the only demographic characteristic related to coerced offending, with coerced women perpetrating against significantly younger victims than uncoerced women, $t(23) = -2.771$, $p = .011$. The average victim age for coerced women was 8.9 years old ($SD = 4.2$), whereas the average victim age for uncoerced women was 15.9 years old ($SD = 8.4$; Table 4).

TABLE 3.   Factors Related to Co-Offending Among Female Sex Offenders ($N = 51$)

	Co-Offending ($n = 28$)	Solo ($n = 23$)	p
Offender age	40.4 ($SD = 10.6$)	39.1 ($SD = 8.8$)	
Age at offense	29.1 ($SD = 6.7$)	31.1 ($SD = 8.1$)	
Race			
White	16 (57.1%)	16 (72.7%)	
Non-White	12 (42.9%)	6 (27.3%)	
Education			
Diploma/GED or less	14 (50.0%)	13 (59.1%)	
Some college	7 (25.0%)	4 (18.2%)	
Associate's, bachelor's, graduate degree	7 (25.0%)	5 (22.7%)	
Prior conviction	7 (25.0%)	10 (43.5%)	
Victim sex			***
Male	7 (28.0%)	16 (80.0%)	
Female	18 (72.0%)	4 (20.0%)	
Victim age	13.0 ($SD = 12.7$)	12.8 ($SD = 5.7$)	
Perpetrator/victim relationship			
Parent/guardian	14 (51.9%)	7 (30.4%)	
Other known individual	7 (25.9%)	13 (56.5%)	
Stranger	6 (22.2%)	3 (13.0%)	
Perpetrator/victim age difference	16.0 ($SD = 14.4$)	18.1 ($SD = 11.3$)	
Number of victims			
One	16 (57.1%)	17 (73.9%)	
Multiple	12 (42.9%)	6 (26.1%)	
Number of victimizations			
One time	13 (46.4%)	10 (43.5%)	
More than once	15 (53.6%)	13 (56.5%)	
Adverse childhood experiences	4.96 ($SD = 2.66$)	3.52 ($SD = 2.93$)	
Household disruption	2.07 ($SD = 1.04$)	0.96 ($SD = 1.13$)	**
Child abuse	3.04 ($SD = 2.23$)	2.52 ($SD = 1.99$)	
Adult intimate partner violence victimization	6.79 ($SD = 5.43$)	4.73 ($SD = 5.20$)	
Physical	1.79 ($SD = 1.66$)	1.57 ($SD = 1.56$)	
Sexual	1.89 ($SD = 1.77$)	1.32 ($SD = 1.62$)	
Intimidation	2.18 ($SD = 1.96$)	1.21 ($SD = 1.65$)	
Stalking	0.93 ($SD = 1.09$)	0.52 ($SD = 0.95$)	
Substance abuse history	55.6% ($n = 10$)	57.1% ($n = 8$)	
Severe mental illness score	7.65 ($SD = 6.53$)	9.40 ($SD = 7.85$)	

Note. GED = general educational development.
**$p < .01$. ***$p < .001$.

TABLE 4. Factors Related to Coerced Offending Among Female Sex Offenders (N = 29)

	Coerced (*n* = 19)	Uncoerced (*n* = 10)	*p*
Offender age	39.1 (*SD* = 9.7)	41.6 (*SD* = 12.2)	
Age at offense	28.9 (*SD* = 7.1)	29.0 (*SD* = 6.1)	
Race			
White	14 (73.7%)	5 (50.0%)	
Non-White	5 (26.3%)	5 (50.0%)	
Education			
Diploma/GED or less	9 (47.4%)	6 (60.0%)	
Some college	4 (21.1%)	2 (20.0%)	
Associates, bachelors, graduate degree	6 (31.6%)	2 (20.0%)	
Prior conviction	6 (31.6%)	2 (20.0%)	
Victim sex			
Male	7 (36.8%)	3 (33.3%)	
Female	12 (63.2%)	6 (66.7%)	
Victim age	8.9 (*SD* = 4.2)	15.9 (*SD* = 8.4)	*
Perpetrator/victim relationship			
Parent/guardian	8 (44.5%)	6 (60.0%)	
Other known individual	6 (33.3%)	3 (30.0%)	
Stranger	4 (22.2%)	1 (10.0%)	
Perpetrator/victim age difference	20.6 (*SD* = 9.2)	12.3 (*SD* = 12.3)	
Number of victims			
One	12 (63.2%)	6 (60%)	
Multiple	7 (36.8%)	4 (40.0%)	
Number of victimizations			
One time	8 (42.1%)	3 (30.0%)	
More than once	11 (57.9%)	7 (70.0%)	
Adverse childhood experiences	5.12 (*SD* = 3.08)	3.67 (*SD* = 2.78)	
Household disruption	1.83 (*SD* = 1.30)	1.60 (*SD* = 1.17)	
Child abuse	3.50 (*SD* = 2.36)	1.89 (*SD* = 2.09)	
Adult intimate partner violence victimization	8.95 (*SD* = 4.93)	2.77 (*SD* = 2.86)	**
Physical	2.16 (*SD* = 1.57)	1.2 (*SD* = 1.55)	
Sexual	2.63 (*SD* = 1.64)	0.67 (*SD* = 1.12)	**
Intimidation	2.79 (*SD* = 1.78)	0.80 (*SD* = 1.23)	**
Stalking	1.37 (*SD* = 1.07)	0.0 (*SD* = 0.00)	***
Substance abuse history	54.5% (*n* = 6)	33.3% (*n* = 1)	
Severe mental illness score	9.18 (*SD* = 6.85)	8.67 (*SD* = 4.93)	

Note. GED = general educational development.
*p < .05. **p < .01. ***p < .001.

Second, trauma histories were examined in relationship to reported coerced offending. None of the mean scores for adverse childhood experiences were found to be significantly different for coerced and uncoerced women; however, individual chi-square tests showed that coerced offending was more common among participants who experienced child abuse, including emotional, $\chi^2(1, N = 28) = 3.91$, $p = .048$; physical, $\chi^2(1, N = 28) = 3.91$, $p = .048$; and sexual abuse, $\chi^2(1, N = 28) = 7.25$, $p = .007$. Coerced women also reported a much higher rate of adult IPA victimization ($M = 8.95$, $SD = 4.93$) compared to their uncoerced counterparts, $M = 2.77$, $SD = 2.86$; $t(26) = 3.468$, $p = .002$. More specifically, FSOs who experienced intimidation ($\chi^2 = 5.98$, $p = .014$), stalking ($\chi^2 = 14.25$, $p < .001$), and sexual violence ($\chi^2 = 5.54$, $p = .019$) by an adult intimate partner were more likely to report being coerced into sexual offending and to report higher rates of each of these types of violence. No significant relationship with coerced offending was found for physical violence victimization, substance abuse history, nor severe mental illness (see Table 4).

Predictors of Co-Offending and Coerced Offending

Logistic regression analyses were performed to predict the probability that an FSO reported having a co-offender and being coerced, respectively. In the co-offending model, the predictors included significant characteristics found at the bivariate level: victim sex, childhood household disruption, and two types of IPA victimization: having been threatened with a weapon by an intimate partner and having had an intimate partner threaten one's family with harm. The full model was significant, $\chi^2(4, N = 47) = 26.273$, $p < .001$, and was able to correctly classify 85.1% of the subsample. When holding all other characteristics constant, having a female victim ($\beta = 5.683$, $W = 4.506$, $p < .05$), experiencing childhood disruption ($\beta = 2.836$, $W = 6.035$, $p < .05$), and having been threatened with a weapon by an intimate partner ($\beta = 10.100$, $W = 3.927$, $p < .05$) were all significant predictors of reported co-offending. In the coerced offending model, only the overall scores for IPA victimization and childhood abuse were included because of the small number of participants who answered this question. A test of the full model was significant, $\chi^2(2, N = 25) = 7.115$, $p < .05$, and was able to correctly classify 72.0% of the subsample. IPA victimization ($\beta = 1.319$, $W = 4.381$, $p < .05$) was a significant predictor of coerced offending, but childhood abuse was not statistically significant (Table 5).

Overlap Between Co-Offending and Coerced Offending

Because the co-offending and coercion questions were discrete survey items, the overlap of these two domains was further investigated. First, of the 28 co-offending women, 24 answered the coercion question. Of those 24 women, 17 (70%) reported that their co-offender pressured them to commit the offense, whereas 7 (30%) reported that there was no pressure applied by either party. This finding suggests that nearly one third of our sample of FSOs reported willingly participating in the offense even when they reported having a co-offender.[5] Second, of the 19 coerced women, 17 (89%) reported the presence of a co-offender and only 2 (11%) reported solo-offending. It is possible that the 2 solo-offending women felt pressured by a nonpresent co-offender, although our data do not allow us to verify this. As expected, most of the coerced women reported being pressured by a co-offender.

TABLE 5.   Logistic Regressions Predicting Co-Offending and Coerced Offending Among Female Sex Offenders

	Co-Offending ($N = 47$)				Coerced Offending ($N = 25$)			
	β	*SE*	Odds Ratio	*p*	β	*SE*	Odds Ratio	*p*
Victim sex	1.737	0.818	5.683	*				*
Childhood household disruption	1.042	0.424	2.836	*				*
Threatened with weapon by intimate partner	2.313	1.167	10.100	*				*
Intimate partner threatened to harm family	0.470	1.027	1.600					
Overall childhood abuse score					0.012	0.187	1.012	
Overall IPA victimization score				*	0.277	0.132	1.319	*

Note. SE = standard error; IPA = intimate partner abuse.
*$p < .05$.

DISCUSSION

The goal of this exploratory study is to identify factors that differentiate between co-offending and solo-offending FSOs, and between coerced and uncoerced FSOs, to better understand these dynamics of women's sexual offending. Although our sample was limited, the data nonetheless confirm that co-offending and coerced offending are important domains of women's sexual offending because we found statistically significant predictors that distinguish between these categories of FSOs. Our results indicate that childhood and adult trauma histories are related to both co-offending and coerced offending among FSOs.

First, several factors strongly differentiate between solo- and co-offending among FSOs. Compared to their solo-offending counterparts, co-offending women were significantly more likely to experience disruptions in parental attachment. For every 1-point increase in the Childhood Disruption subscale, FSOs were almost 3 times more likely to report having a co-offender. Bivariate results suggest that co-offending FSOs were significantly more likely to have had disruptions related to parental substance abuse, parental incarceration, and divorce. Experiencing intimidation or threats by any adult intimate partner also was more likely among co-offending than solo-offending FSOs. At the bivariate level, FSOs who reported that an intimate partner threatened to harm their family or threatened them with a weapon were significantly more likely to report having a co-offender. Logistic regression analyses showed that women who reported being threatened with a weapon in any adult romantic relationship were 10 times more likely to report having a co-offender at the time of their sexual offense. In addition, co-offending women were more likely than solo-offending women to select female victims because logistic regression analysis showed that FSOs with female victims were almost 6 times more likely to report having a co-offender.

Our analysis reveals fewer factors that differentiate between uncoerced and coerced offending among FSOs, and the relationships are not as strong as in the co-offending model. Compared to their uncoerced counterparts, coerced women were more likely to report childhood experiences of physical, emotional, and sexual abuse, as well as experiencing IPA victimization, including intimidation, stalking, and sexual abuse by any adult intimate partner. Logistic regression analyses found that for every 1-point increase in the overall IPA victimization score, FSOs were 1.3 times more likely to report coerced offending. Coerced women were also more likely than their uncoerced counterparts to select younger victims, although this relationship was significant only at the bivariate level.

On the whole, offender, victim, and offense characteristics did not emerge as important predictors of either co-offending or coerced offending among the FSOs in our sample. Furthermore, neither group was distinguished by substance abuse or mental illness histories because scores were similar across solo- and co-offending women and across uncoerced and coerced women. However, trauma histories played a prominent role in predicting both co-offending and coerced offending among FSOs, albeit in different ways. Although co-offending women and coerced women alike reported significant trauma in both childhood and adulthood, the specific type of trauma experiences differed for these groups of FSOs. In childhood, disruptions in parental attachments because of divorce, incarceration, and parental substance abuse were associated with co-offending among FSOs but not with coerced offending. Conversely, childhood physical, emotional, and sexual abuse were associated with coerced offending among FSOs but not with co-offending. In adulthood, having a threatening intimate partner was associated with both co-offending and coerced offending, whereas stalking and sexual IPA victimization was only associated with coerced offending. These results suggest that different trauma histories distinguish between solo- and co-offending women and between uncoerced and coerced women.

Our results both conform to and diverge from patterns of women's sexual offending identified in other studies. Mirroring the findings of other FSO research (Vandiver & Kercher, 2004; Wijkman et al., 2010), more than half of our respondents reported offending against a victim younger than the age of 13 years, and more than half were a parent or guardian of the victim (e.g., mother, stepmother, teacher). In addition, our results suggest high rates of adverse childhood and adult experiences among our entire sample, as have other studies with similar findings of child abuse and neglect among FSOs (Green & Kaplan, 1994). And as with other research studies of FSOs (Peter, 2009; Wijkman et al., 2010; Williams & Bierie, 2015), the victims in our overall sample were equally likely to be female as male, although the victims of co-offending women were mostly female. However, our results diverge from those of other published FSO studies in one way. Although other studies have suggested that severe mental illness and substance abuse histories play a role in women's sexual offending (Fazel et al., 2010; Vandiver & Kercher, 2004; Wijkman et al., 2010), neither measure contributed in a statistically significant way to our understanding of co-offending or coerced offending among our sample of FSOs.

Implications for Practice, Policy, and Theory

Our findings suggest relevant practice, policy, and theoretical implications. First, the findings of this study suggest the need for a nuanced approach to working with FSOs, especially with respect to their adverse childhood and adult IPA victimization experiences. Childhood attachment disruptions and being involved with a threatening adult intimate partner may be related to women's susceptibility to joining a co-offender in sex

crime perpetration, whereas physical, emotional, and sexual abuse in childhood and IPA victimization in adulthood may be related to women's susceptibility to being coerced by another person into sex crime perpetration. Therefore, practitioners working with young women who have experienced physical, emotional, and sexual abuse during childhood should be aware of the risk for future (perhaps unwilling) involvement in sexual offending and provide treatment aimed at reducing this risk. Likewise, providing services to families that experience disruptions in attachments may be a prevention strategy to reduce women's involvement in later sexual offending because the combination of childhood abuse and attachment disruptions may carry over into their adult relationships (Harris, 2010). For example, girls' childhood abuse and neglect experiences can inhibit help-seeking behaviors for those who go on to experience IPA victimization years later as adults (Kubiak et al., 2012). For women whose abusive intimate partners engage in sex crime perpetration, this may increase risk of their own involvement in, and subsequent incarceration for, sexual offending. That it may increase risk of their unwilling participation in later sex crime perpetration is yet another reason why adequate treatment for girls' and women's childhood and adulthood trauma experiences is so badly needed.

Despite this, our study found a substantial proportion of FSOs who reported *willingly* participating with a co-offender or who offended alone. Thus, the role of deviant sexual interest among FSOs is likely to influence their treatment needs. Previous studies have shown that even coerced females have reported deviant interests for their victims, with almost all FSOs reporting sexual thoughts occurring after initiation into sexual offending by the co-offender (Saradjian, 1996). Thus, therapists working with FSOs should assess these deviant sexual interests and provide treatment that leads to appropriate sexual behaviors.

Our findings align with and support policy recommendations made by other scholars working in this area (Cortoni, 2010; Ford, 2010). For example, to effectively assess and treat FSOs, it is important to understand the nature of their involvement in sex offense perpetration. In light of the prominence of co-offending in typologies of FSOs, it is important to make distinctions not only between co-offending and solo-offending women but also between coerced and uncoerced women. Ford (2010) notes that FSOs who are coerced by a male co-offender should aim to build their self-esteem, take assertiveness training courses, and seek treatment for building and maintaining healthy relationships. Cortoni (2010) proposes a new item in the assessment of FSOs that comes to understand women's willingness to participate in the offense, and surmises that there will be two very different treatment models for women who willingly perpetrate and those who are pressured to perpetrate. "For example, a coerced offender may demonstrate significant deficits in assertiveness and an exaggerated dependence on her co-offender. Deviant arousal and fantasizing, and attitudes that condone sexual abuse may appear more frequently in initiators or willing participants" (Cortoni, 2010, p. 94).

Finally, that disrupted childhood attachments were more likely among co-offending than solo-offending women suggests that attachment-based explanations of sexual offending that to date have been applied mostly to men may indeed be useful in explaining women's sexual offending, at least among women who co-offend. Second, the finding that childhood and adult trauma experiences serve as risk factors for co-offending women and coerced women alike may lend support to gender-specific sources of strain as outlined by Broidy and Agnew (1997) as well as to feminist pathways theoretical models that emphasize the role of prior trauma histories in women's criminal offending (e.g., see McDaniels-Wilson & Belknap, 2008).

Limitations and Directions for Future Research

Although our study makes new contributions to the small body of literature on FSOs, there are important limitations to note. This study used a small, corrections-based sample; thus, its findings represent a limited group of female offenders who have been charged, sentenced, and incarcerated for sexually violent crimes, which is a relatively rare event (Lonsway & Archambault, 2012). The response rate in the survey was also low, which may have resulted in a sample that was not representative of the full incarcerated population. We also used self-report data which were not triangulated by case file data because this information was not available to the authors. We were unable to test full logistic regression models because of the study's sample size (Vittinghoff & McCulloch, 2007). Having more participants would have allowed us to include more predictor variables that have been theoretically and empirically associated with co-offending and coerced offending among FSOs.

There also are limitations to the survey instrument. First, the self-report responses may have been influenced by social desirability response bias (SDRB). Although an SDRB item was included in the analysis, this measure has only been validated on nonoffending females and MSOs. Second, the item we used to assess respondents' substance use was an indirect rather than a direct measure. Third, the addition of family status (i.e., being a mother) may have shed additional light on their offending pathways. Last, and perhaps most pressingly, because of limitations of the survey items, we do not know the sex of participants' co-offenders, nor the nature of the relationship between participants and their co-offenders. The same limitation is true for the person by whom participants reported being pressured. This means that we cannot determine the proportion of FSOs who co-offended with or were coerced by men, or who co-offended with or were coerced by intimate partners. We are also unable to determine if the co-offender or the individual who pressured the FSO was abusive during the time of the offense. Knowing the sex of, and the nature of the participants' relationship with, the co-offender would enhance the findings of this study, especially because we know that presence of a male co-offender is a factor for women's sexual offending in particular (Becker & McCorkel, 2011).

Future studies would benefit from a larger sample size, a nonincarcerated sample, and data that come from multiple sources including self-report data and case files. Future studies also could address some of the limitations of this analysis, for example, by including direct measures of IPA victimization and substance abuse, and more detailed demographic information about FSOs' family status, their co-offenders and circumstances surrounding the coerced offending. Moreover, our data indicate that both co-offending and coerced offending are important domains of study among FSOs, and future research in this area should collect data on the sex of the co-offender and the relationship between participants and their co-offenders. In addition, more data is need about childhood and adult trauma histories among FSOs, and whether either or both offenders were under the influence of a controlled substance at the time of the offense. Finally, one important question for future research to investigate is the influence co-offenders and coercive co-offenders have on FSO recidivism rates.

CONCLUSION

The purpose of this exploratory study is to examine co-offending and coerced offending among FSOs to better understand these two domains of women's sexual offending. Our findings suggest that both co-offending and coerced offending are important aspects of

women's sexual offending and that both of these domains are associated with childhood and adult trauma histories. Our results suggest that future FSO research should address co-offending and coerced offending, as well as prior traumatic experiences, to gather a more complete picture of women's sexual offending. In conducting this research, we hope to replace long-held taboos with empirical evidence for advancing and improving treatment protocols for FSOs, and to help reduce the sizeable gaps in our knowledge about women's sexual offending that yet remain.

NOTES

1. While we prefer to discuss individuals in this sample as people first (i.e., "women who sexually offend"), for the sake of brevity, we sometimes use the abbreviated terms *female sex offenders* (*FSOs*) and *male sex offenders* (*MSOs*).

2. However, victimization studies indicate this may underestimate the rates of female-perpetrated sexual violence (Denov, 2004; Giguere & Bumby, 2007; Vandiver & Kercher, 2004; Vandiver & Walker, 2002).

3. The terms *pressure* and *coercion* may be distinct from one another; however, the language of our survey says *pressure*, whereas the literature tends to use *coercion*. For this analysis we are using them interchangeably, even though we recognize they may not be completely equivalent.

4. This self-reported measure relies on the participants' interpretation of whether they experienced coercion. It is conceivable that they experienced pressure but did not recognize it as such.

5. Interpret with caution because this self-report measure was dependent on the participant's interpretation of what it means to be pressured to offend.

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