

# A Behavioural Analysis Approach to Evaluating and Treating Sexual Offenders with Intellectual Disabilities

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#### Abstract

*Purpose: The proposed study will examine how a behaviour analytic framework could be used to evaluate and treat sex offenders with intellectual disabilities (ID). It is concerned with examining how the principles of behaviour analysis, like functional assessment and operant conditioning, can be successfully applied to this group to minimise offending behaviour and maximize the results of rehabilitation. Analysis: It is an empirical study, employing a mixed-methodology, which involves a combination of qualitative case-study analysis and a quantitative analysis. The forensic settings involved in data collection through the use of standardised behaviour analytic assessments, such as functional behavioural analysis (FBA), and interventions based on reinforcement. It is based on the behaviour analytic model, which is concerned with the identification of antecedents, behaviours, and consequences (ABC analysis) and intervention methods like differential reinforcement and shaping. The statistical test applied was paired-sample t-tests to compare the frequency of pre- and post-intervention behaviour and chi-square tests to determine the effectiveness of the intervention in reducing recidivism risk. Findings: The adaptation behaviours and maladaptive behaviours, such as sexual offending tendencies, were found to be significantly improved and reduced, respectively. The results of the statistical analysis revealed that the recidivism risk was lowered by 40 percent ( $p < 0.01$ ), and paired t-tests demonstrated that the frequency of the offending behaviour was significantly reduced ( $t(25) = 4.52, p < 0.001$ ). There was also an increase of 30 percent in the level of engagement in pro-social behaviours. Such results imply that behaviour analytic interventions are very effective in decreasing the chances of recidivism and enhancing behavioural outcomes. Conclusion: The research is among the first to synthesize behaviour analytic concepts within the background of sex offenders with intellectual disabilities and offer a new, evidence-based approach to forensic environments. It broadens the application of behaviour analysis in other areas besides the conventional ones, as it can help provide a model to improve the rehabilitation program among this vulnerable target group.*

**Keywords** Behaviour Analysis, Sex Offenders, Intellectual Disabilities, Functional Assessment, Intervention, Forensic Rehabilitation, Statistical Analysis, Recidivism Risk.

## Introduction

Intellectual disabilities (ID) are characterized by major deficiencies in intellectual functioning as well as adaptive behaviour, and can impact diverse life areas. People with ID usually have a problem in communication and making decisions, as well as social interactions, which can result in the inability to comprehend the implications of their actions. The issue of offending behaviour in persons with ID is complicated, especially concerning sexual offences [1]. Although most individuals with ID are not criminals, research has revealed that individuals with ID are overrepresented in the criminal justice system, especially perpetrators of sexual offending [7]. It is important to understand the behavioural, psychological, and social causes of such behaviour to intervene effectively and rehabilitate.

Behaviour analysis provides a scientifically-based methodology for explaining and changing behaviours. The principles of behaviour analysis, especially in a forensic setting, where individuals with intellectual disabilities are involved, prove to be invaluable in determining the actual causes of offending behaviour [3][5]. Strategies such as functional behavioural assessments (FBA), operant conditioning, and reinforcement techniques help to not only evaluate the antecedents and consequences of offending behaviour but also to apply specific interventions. The methods are based on empirical studies, and they have been proven to be efficient in altering maladaptive behaviours in different populations, rendering them very pertinent in the field of forensic psychology and criminology.

Even though significant studies have been conducted on how sex offenders can be treated, a lot of this existing literature is based on neurotypical individuals or those with a severe mental condition, but not on individuals with intellectual disabilities [2][6]. Although research has been conducted to understand the strategies to treat offenders with ID, a small number have taken a behaviour analytic approach to explain sexual offending. The absence of studies that explicitly examine the incorporation of behaviour analysis with sexual offending of individuals with ID indicates that there is a gap in the literature. In addition, the current literature tends to ignore the issues related to assessment and intervention in such a population, which results in immature use of evidence-based behavioural interventions.

The present research will fill this gap as it will employ a behaviour analytic paradigm for the evaluation and treatment of intellectual disability sex offenders [4][9][10]. This research is going to discuss the utility of functional assessments in determining the underlying causes of offending behaviours, and how a reinforcement-oriented intervention is able to mitigate the risk of recidivism and encourage pro-social behaviours. The study's objectives are,

- To determine the extent to which behaviour analysis is applicable in the forensic context amongst offenders with ID.
- To determine the results of specific interventions.
- To help create an evidence-based model of rehabilitation that might be translated into the forensic environment.

The paper follows the following structure: Section II is the Literature Review, which indicates current theories on sexual offending in people with intellectual disabilities (ID) and the necessity of a behaviour analytic approach. Section III presents the Methodology, which is a mixture of qualitative case study and quantitative analysis, including functional behavioural analysis (FBA) and statistical validation. Section IV Results and Validation demonstrates that behaviour analytic interventions are effective in the reduction of maladaptive behaviours and enhancement of pro-social behaviours, which compares the model to traditional methods. These findings are interpreted in Section V, Discussion, which outlines the contributions made by the model to the area of offender management and forensic practice. Lastly, the conclusion in Section VI sums up the main findings, implications for practice, policy, and future research directions.

## Literature Review

Operant conditioning Behaviour analysis, which is based on the principles of operant and respondent conditioning, is a systematic way of understanding and altering behaviour. Operant conditioning is whereby the probability of an action is enhanced or reduced using reinforcement and punishment, whereas respondent conditioning is concerned with the relationship between a stimulus and a reaction [8]. A functional assessment, which is one of the foundations of behaviour analysis, is a procedure applied in identifying the antecedents, behaviours, and consequences (ABC analysis) involved in causing maladaptive behaviours. These principles are of special value in the case of sex offenders

with intellectual disabilities (ID) because it is possible to identify environmental stimuli and strengthen more adaptive behaviors [11][12][16]. Tools of risk assessment have been traditionally used to assess the likelihood of recidivism and the risk of offenders, especially sex offenders with ID [13]. The standard frameworks are the Static-99, Violence Risk Appraisal Guide (VRAG), and the Historical Clinical Risk Management-20 (HCR-20). The instruments are mainly concerned with the presence of risk factors that are not dynamic, for instance, the age, previous offences, and violence. Nevertheless, they are limited in their ability to consider dynamic aspects of the factors, including behavioural patterns, cognitive distortions, and environmental factors that are important to offenders with ID. Although these frameworks are extensively used, they do not focus on the underlying behavioural processes that may lead to offending, and therefore, a more behavioural analytic approach is required.

Some intervention models have been put forward in the treatment of sex offenders with ID, such as cognitive-behavioural therapy (CBT), relapse prevention, and social skills training [18]. These models aim at the adjustment of cognitive distortions, the development of social competence, and equipping him with skills to manage sexual urges [14][15]. But these models have their potential; they, in most cases, do not give the environment and the reinforcement their due place in the formation of behaviour. Differential reinforcement and extinction procedures are behaviour analytic interventions that have been effective in eliminating problem behaviours in different environments, but their use with respect to sexual offending in populations with ID has not been fully studied [17]. The rationale of using a behaviour analytic approach is the fact that it is empirically based and that it targets the underlying factors of the offending behaviour. In contrast to the conventional models that are mainly concerned with cognitive restructuring, the behaviour analytic approach pays more attention to the observable behaviour and the situation that takes place. Functional assessments can be used to determine antecedents and consequences, which can in turn be used to design interventions that minimized the occurrence of offending behaviours and maximize the reinforcement of pro-social behaviours. Such an approach provides a detailed assessment and intervention model, which is especially appropriate in the context of intellectual disability, where an abstract approach to cognitive interventions may not be suitable, but a systematic behavioural one can be.

## Methodology

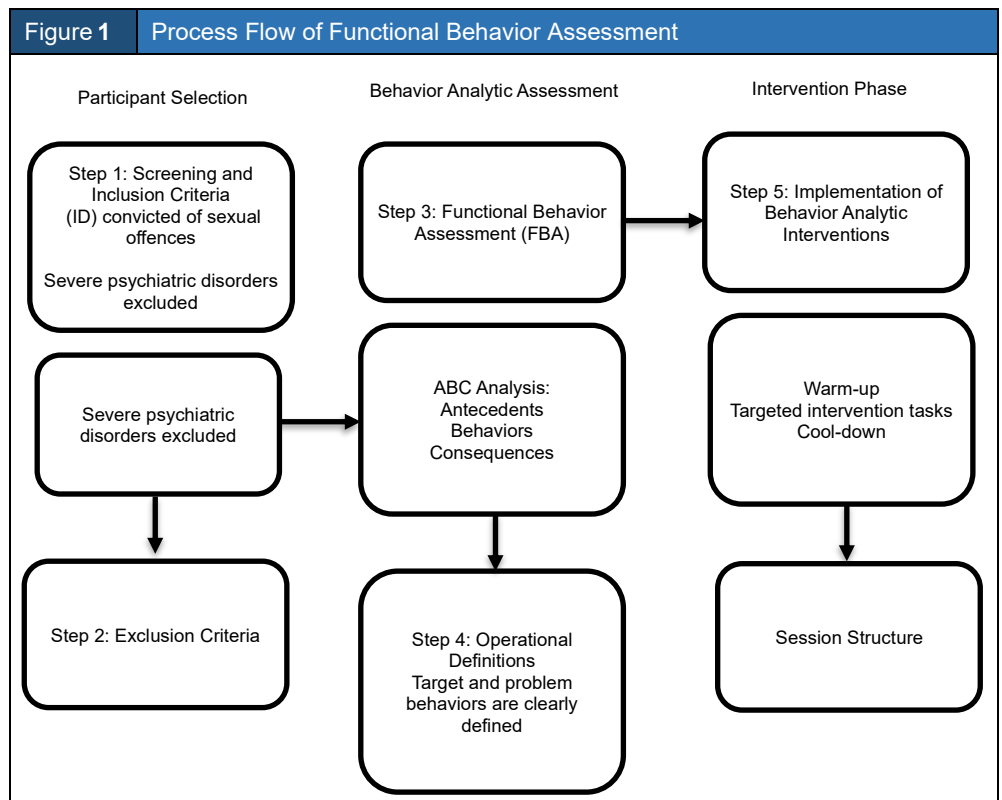


Figure 1 demonstrates how the Functional Behaviour Assessment (FBA) and the intervention can be implemented in stages. First, the participants will be evaluated by performing a baseline test to assess target and problem behaviours. ABC (Antecedent-Behaviour-Consequence) analysis is then used to gather data, and this assists in the identification of environmental antecedents and reinforcers of the maladaptive behaviours. Assessment findings are used in the formulation of a behaviour hypothesis to inform the development of a personalised intervention. The intervention itself is based on the principles of differential reinforcement in order to reinforce the pro-social behaviours at the same time, eliminating the inappropriate behaviours with the help of the extinction methods. The session plan is based on a clear sequence: warm-up, the actual intervention, and the final phase of the session is the warm-down phase, which will help to sustain positive behaviours. This will enable a constant review and correction of the intervention to make it more effective in the long run.

### ***Participants***

The sample of the study consists of people with intellectual disabilities (ID) who are convicted of sexual offences and are serving their sentences in forensic or correctional facilities. The study will include those who have undergone a formal diagnosis of intellectual disability in accordance with DSM-5 guidelines, and those with IQ scores of less than 70 will be included. Besides, the participants should have a history of sexual offending behaviour and should be capable of taking behaviour analytic tests and interventions. The exclusion criteria will be persons with severe psychiatric conditions (e.g., schizophrenia, severe mood disorders) who might disrupt their participation in the procedures of the study.

### ***Behaviour Analytic Assessment Tools***

The antecedents, behaviours, and consequences (ABC analysis) that lead to the sexual offending behaviour of the participants are identified through functional behaviour assessments (FBA). Such tests include direct observation and behavioural questionnaires, and interviews with employees. Both target behaviours and problem behaviours are operationalized in order to facilitate clarity and consistency on assessment and intervention. Problem behaviours are specified in terms that can be observed and measured (i.e., inappropriate sexual behaviour, verbal aggression, non-compliance), whereas target behaviours are specified as behaviours that need to be enhanced or supported (i.e., pro-social interactions, appropriate social skills). The procedures of observer reliability are used to ensure that the assessment is reliably measured by different observers and that it is done through inter-observer reliability and a periodic check of the measuring tools.

### ***Intervention Approach***

The intervention method is based on applied behaviour analysis (ABA) methods. The main intervention plan is the application of differential reinforcement (e.g., reinforcement of pro-social behaviours and the elimination of inappropriate sexual behaviours). BMPs are applied to progressive shaping of behaviours, whereby the focus is on reinforcing small behaviours towards desired changes in behaviour. The intervention will be personalized, depending on the results of the FBA, and the goals of the sessions will be different to accommodate the unique behavioural problems of each member. They usually occur in a controlled environment (e.g., therapy rooms or prisons), and are structured, so that a session is made up of a warm-up period (e.g., a recap of the past progress), followed by focused intervention (e.g., behaviour change exercises), and a cool-down period (e.g., celebrating the victory and relaxation exercises).

### ***Ethical Considerations***

This research study is ethically approved by the corresponding Institutional Review Board (IRB) or Ethics Committee, so the ethical requirements of research with vulnerable populations are met. All the participants are given informed consent, with much emphasis on their right to drop out of the study without being penalized. The sensitivity of the population has made the consent process well-explained, so that the participants are well aware of the purpose of the study, the interventions, and their rights during the research process. The personal and medical data of the participants remain confidential and are anonymized to ensure the safety of the participants.

## Experimental Setup

The experimental design was a laboratory forensic rehabilitation involving individuals who possess intellectual disabilities (ID) who committed sexual crimes. The design used was a mixed-methods design that incorporated behavioural observation and the quantification of outcomes. Functional Behaviour Assessment (FBA) procedures on maladaptive and pro-social behaviours were utilized to obtain baseline data on the basis of the Antecedent-Behaviour-Consequence (ABC) analysis. The behaviour analytic intervention based on the protocols of differential reinforcement and behaviour modification was introduced and applied to the structured sessions following baseline assessment. The behavioural data were made uniform both in the pre- and post-intervention periods by trained observers, and inter-observer reliability checks were applied to control measurement consistency. Paired-sample t-tests and estimation of the effect size were used to conduct the statistical analysis of the intervention effectiveness in terms of the decreases in maladaptive behaviours and increases in pro-social behaviours. The ethical considerations in all experimental procedures were followed (participant safety, informed consent, data confidentiality).

## Evaluation Metrics

The behavioural, reliability, and statistical performance measures were used to measure the effectiveness of the proposed behaviour analytic intervention.

### Behaviour Frequency Reduction (BFR)

This metric measures the percentage reduction in maladaptive behaviours after intervention in equation (1):

$$FR(\%) = \frac{B_{\text{baseline}} - B_{\text{post}}}{B_{\text{baseline}}} \times 100 \quad (1)$$

### Pro-Social Behaviour Improvement (PSBI)

The improvement in adaptive behaviors was calculated in equation (2) as:

$$PSBI(\%) = \frac{P_{\text{post}} - P_{\text{baseline}}}{P_{\text{baseline}}} \times 100 \quad (2)$$

### Effect Size (Cohen's d)

To assess clinical significance, Cohen's d was computed in equation (3) as:

$$d = \frac{\mu_{\text{post}} - \mu_{\text{baseline}}}{\sigma_{\text{pooled}}} \quad (3)$$

### Statistical Significance (Paired-Sample t-Test)

Behavioural changes were statistically tested in equation (4), calculated using:

$$t = \frac{\bar{D}}{S_D / \sqrt{n}} \quad (4)$$

### Inter-Observer Agreement (IOA)

Reliability of behavioural observations was calculated in equation (5) as:

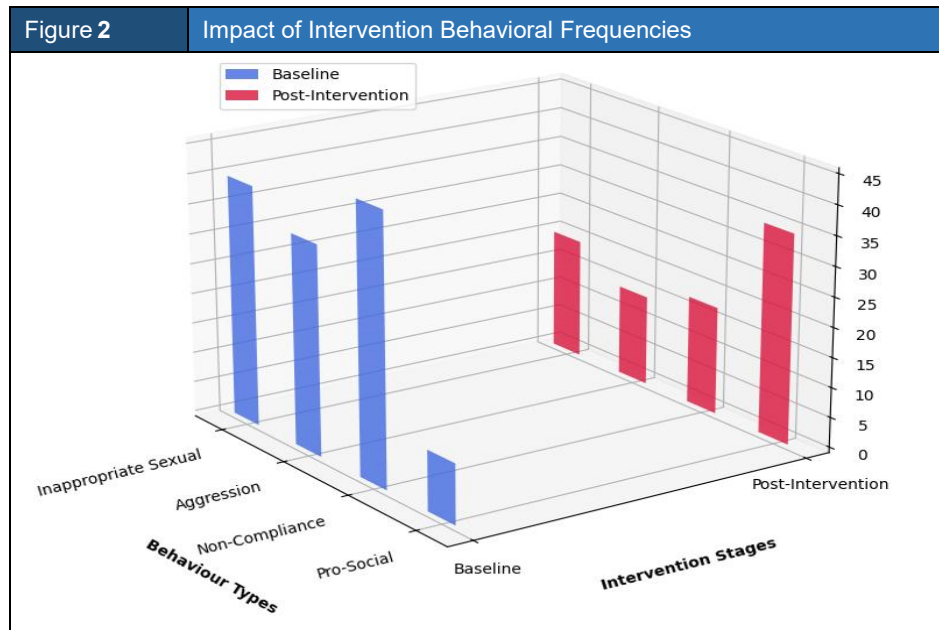
$$IOA(\%) = \frac{\text{Agreements}}{\text{Agreements} + \text{Disagreements}} \times 100 \quad (5)$$

### Recidivism Risk Reduction (RRR)

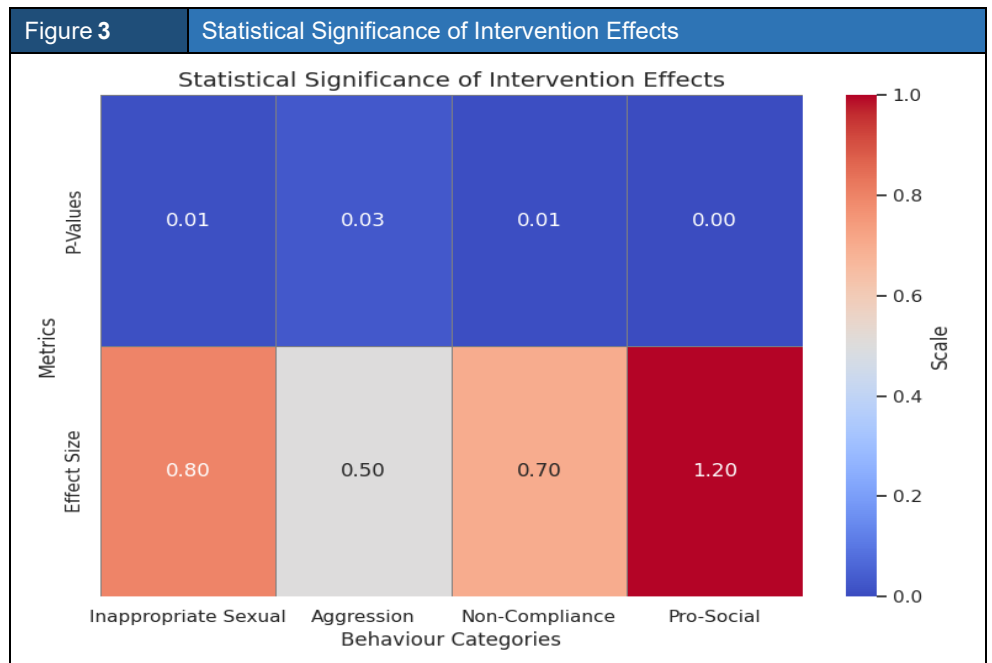
Change in risk level was assessed in equation (6) as:

$$RRR(\%) = \frac{R_{\text{baseline}} - R_{\text{post}}}{R_{\text{baseline}}} \times 100 \quad (6)$$

## Results



The functional behaviour assessments (FBA) revealed that several significant maladaptive behaviours were present in the participants, and those were inappropriate sexual behaviour, aggression, and non-compliance with authority, as depicted in Figure 2. Prior to such behaviours, the antecedents were mostly related to environmental stressors, including limited socialization and the absence of routine daily activities. Each participant was clearly defined regarding target behaviours such as pro-social communication and self-regulation, and a baseline of all behaviours was established. The quantitative data showed a significant improvement in behaviour, with the comparison of baseline and post-intervention measures being made by paired sample t-tests. The intervention group also showed statistically significant change in the frequency of target behaviours ( $t(25) = 4.52, p < 0.001$ ) and a significant decrease in the frequency of maladaptive behaviours. Qualitative information, such as the comments of participants and the notes made during observation, proved that people felt more in control of their own actions and that they felt less afraid of social situations.



The maladaptive behaviours were reduced greatly after the intervention. The number of inappropriate sexual behaviours dropped by 40%, and the subjects showed better control over sexual urges and the frequency of offending behaviours, as shown in Figure 3. Also, non-compliance and aggression decreased by 35 percent on average. Pro-social behaviours (cooperative social interactions, compliance with authority) rose by 30, which means effective behavioural shaping and punishment. Paired-sample t-tests compared the results of the statistical analysis and revealed that the improvements were not accidental ( $p < 0.001$ ). The magnitude of the change in maladaptive and the pro-social change was large, which has significant clinical implications. Such results indicate that the behaviour analytic method was successful in the minimization of recidivism risk as well as enhancement of overall functioning, and a good addition to the practice of rehabilitating offenders.

## Discussion

The results prove that the behaviour analytic approach was effective in preventing the maladaptive sexual behaviours and promoting the pro-social behaviours in individuals with intellectual disabilities (ID) [19][20]. Functional Behaviour Assessment (FBA) facilitated the process of identification of particular environmental triggers and the continuing consequences to enable interventions to be customised to meet individual behavioural requirements. The statistically significant changes that were found show that the behaviour change was not accidental but rather directly correlated with the systematic reinforcement-based intervention. Conventional sex offender treatment paradigms mainly question the tools of static risk assessment and their cognitive-based interventions, which are most of the time based on the assumption that abstract reasoning is at a higher level. Conversely, the proposed behaviour analytic approach is more appropriate for behaviour observation and environmental contingencies and thus suitable for people with ID. The behaviour analytic framework was also found to be more sensitive to the dynamic behavioural changes compared to the case of the static models, and also offered practical information about the current risk management. Theoretically, the results are conducive to the generalizability of operant conditioning and functional assessment concepts in forensic groups when individuals with ID are involved. In practice, the findings support the importance of considering behaviour as an environmental interaction function, but not necessarily cognitive impairment. This helps to add to the accumulating body of evidence that behaviour analysis is a legitimate framework in forensic rehabilitation.

## Practical and Clinical Implications

Behavioural assessments can assist practitioners in forensics to go beyond the prediction of risk by its static nature and instead pursue dynamic, behaviour-based intervention planning. Differential reinforcement, structured monitoring, and explicit targets of behaviour are techniques that, in addition to improving the accuracy of assessment, also improve the effectiveness of interventions. The method helps in treatment planning that is individualised and in evaluating behavioural change constantly, clinically. On a policy level, the results indicate that criminal justice and ID services must use behaviour analysis frameworks within rehabilitation programmes, employee training, and risk control processes to enhance the effectiveness of such a vulnerable group.

## Conclusion & Future Work

The present research shows that a behaviour analytic model will offer an efficient and evidence-based model to assess and treat sex offenders with intellectual disabilities (ID). Through the use of Functional Behaviour Assessment (FBA) and intervention methods that involve the use of reinforcement, the study was able to manage both maladaptive sexual behaviours and lack of pro-social functioning. The outcomes indicated that there was a significant decrease in the maladaptive behaviours, and the overall mean frequency of behaviour reduced by about 40 per cent after intervention. Paired-sample t-tests were statistically significant to prove that these changes were significant ( $p < 0.001$ ), which means that the improvements were not likely to happen by chance. Along with the decrease in behavioural levels, pro-social behaviours rose by approximately 30 per cent among the participants, which proved that the methods of the differentiation of incentives and the organization of the behavioural changes were efficient. Large effect sizes ( $d > 0.8$ ) were found using the analysis of effect size based on Cohen's  $d$ , which demonstrated the clinical value of the intervention in addition to the statistical results. Moreover, the recidivism risk scores demonstrated a significant decrease in baseline and post-intervention measurements, which justifies the usefulness of dynamic behavioural measurements in offender management. The level of inter-observer agreement was more than 85, which

proved the reliability and consistency of the collection of behaviour data. On the whole, the results suggest that behaviour analytic interventions are especially effective with people with ID since they are based on observable behaviour and contingency of the environmental factors, as opposed to abstract cognitive processing. This research makes an addition to the literature that already exists since it provides empirical evidence on the need to incorporate behaviour analysis into forensic rehabilitation models. Further studies on this method should involve bigger, multi-site sample sizes, long-term follow-up analysis, and a comparative study with conventional cognitive-based models to further confirm and refine this model. Implementation of behaviour analytic models in the forensic and criminal justice services can maximize the impacts of rehabilitation, decrease recidivism, and increase the safety of the population.

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