

The
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Paedophilia

Shedding light on the dark field

Understanding sexual attraction to children is essential if they are to be kept safe

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IN AN office in Epsom in southern England, the phone rings. Calls come in from men who have been arrested on suspicion of possessing indecent images of children; those who are fathers will probably have been barred from seeing their children unsupervised until their trials. Or the caller may be a mother whose adolescent son has been charged with molesting a child; if he has siblings social workers may insist that the family is broken up. Some calls are from men desperate to talk to someone about their own sexual desire for children, and terrified that without help they may act on them.



This is Stop it Now UK, an advice service run by the Lucy Faithfull Foundation, a charity.

Callers need not identify themselves (though if they do, and a crime has been committed or a child may be at risk, the staff tell the police). Of 700-800 calls answered each month (another 1,500 go unanswered for lack of resources), most are from men who have recently been arrested—police have often told them about the service in the hope that it can keep them from committing suicide. “We talk about self-care and keeping busy,” says Jenny Michell. “It’s about getting an acknowledgment at the other end of the line that they are still human,” her colleague Sue Herbert, a social worker, chimes in.

The idea of a confidential helpline for some of the world’s most reviled people came from Fran Henry, an American campaigner. In the 1960s, when she was aged 12-16, she was sexually abused by her father. “The abuse I suffered was egregious and affected every aspect of my life,” she says. But when as an adult, after counselling, she confronted her father, she realised that what she really wanted was not to see him in jail, but to make it less likely that other children suffered as she had.

Ms Henry started to visit sex offenders in prisons, asking a single question: what, if anything, could have stopped you? Many said that they had struggled with themselves before offending and believed that they might never have started if they had received counselling. And they thought they could have been caught sooner, if anyone had picked up the warning signs and intervened. From those conversations was born the first helpline, which started in Vermont in 1992 and now runs nationally. The British version followed a decade later. Survivor groups criticised the idea as “offender-friendly”, Ms Henry says; funders, too, were hard to convince. “Some would say: ‘I can’t take this to my board; it’s too yucky.’ Many people refuse to educate themselves on this issue.” But she persisted. “I took the attitude that what we are doing now is not protecting children.”

Back then, child-abuse was mostly covered up or ignored. Now it is known to be extremely common. Crime surveys suggest that nearly a fifth of girls and nearly a tenth of boys worldwide suffer a contact sexual offence before turning 18. The few studies that focused on younger age groups suggest that many were first assaulted before puberty. A recent British survey found that 3% of women, and 1% of men, had suffered rape or attempted rape by an adult (that is, excluding encounters by two under-age children) before turning 16. Few victims tell anyone; and hardly any assaults lead to convictions. Tough sentencing and parole conditions, first introduced in America and copied widely, have been shown by many studies not to have cut recidivism or victimisation rates.

Suffering innocents

Another obstacle to keeping children safe is that misconceptions about the causes of child-abuse abound. Perhaps the most serious is the idea that the perpetrators are all paedophiles. In fact, paedophiles are probably a minority. The term is clinical, not legal or criminological: paedophiles are adults who are only or mainly aroused by prepubescent children. But a third of sexual assaults against children are

thought to be committed by other children, who will not be diagnosed as paedophiles because their sexual interests may well mature as they do. (They may still face criminal sanctions.) In another big chunk, the victims are past puberty. Their abusers may be hebephiles (adults attracted to children in early puberty), or simply unconcerned that a physically mature child is too young, legally or morally, to consent.

Sometimes erotic interests are hard to untangle from other motives. Some child-abusers are socially inadequate and fear adults will reject their sexual advances. Many describe feeling like a child themselves when they abuse, says Heather Wood, a psychotherapist at the Portman Clinic in London, which treats patients with paraphilias (abnormal sexual interests). Or they may be in the grip of what psychotherapists call “manic defence”: an escape from inadequacy and loneliness into exhilarated states such as sexual arousal. The child is reduced to a bit-player in the abuser’s psycho-drama.

Identifying likely perpetrators and working out what drives them would mean they could be offered tailored support—which is where helplines such as Stop it Now come in. “They live among us, so it’s better that we know them and treat them,” says Ms Michell of Stop it Now UK. And though paedophiles are a minority of those who commit sexual offences against children, understanding them is particularly important, because they are among the most predatory and prolific abusers.

The stigma of paedophilic desires means that just how common they are is not known. Michael Seto, an expert on paraphilias and sexual offenders at the University of Toronto, says that probably 1% of all men are predominantly or only attracted to prepubescent children, a share that may double if children in early puberty are included. Female paedophiles are probably more rare, since almost everyone diagnosed with any type of paraphilia is male. Women also seem to commit only a tiny fraction of sexual offences against children, whether the motive is paedophilic or something else. Only around 5-7% of those accused or convicted of such crimes are female; victimisation surveys suggest they are responsible for perhaps a tenth of all offences, or slightly more.

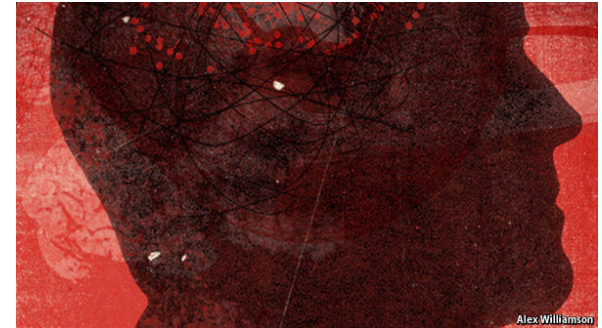
Some experts think that paedophilia usually has an early biological cause, perhaps genetic or in the womb. Others emphasise the role of life events. The two may intertwine, says Professor Seto, as with schizophrenia, say, or depression. “Just because there are biological factors doesn’t rule out the role of experience.”

One theory is that men who are attracted to children have the evolutionarily driven sexual preference for youthful traits, such as unlined skin—without, for some reason, the usual liking for the curves that indicate fertility. That could help explain why fewer women are paedophiles: women typically find men around their own age most attractive, whatever age that is.

Another theory starts from the observation that most people find children beautiful, but in a way that elicits protective rather than sexual feelings. James Cantor of the University of Toronto has scanned paedophiles’ brains and found abnormalities in the connective white matter, which might indicate “cross-wiring” that causes the wrong response to be triggered by the sight of a child. He and others have also

shown that paedophiles are more likely than other men, or than those who have sexually offended against adults, to be short, left-handed or of low IQ. All these traits are seen somewhat more often in people with neurological disturbances.

Those who see paedophilia as learned behaviour point to two other observations. The first is that a third to a half of known paedophiles were themselves abused as children, a much higher share than among other men. Maltreated children learn that adults are frightening, says Donald Findlater of the Lucy Faithfull Foundation. Then, as their sexual interests develop during puberty, they may focus on children, whom they find less threatening. The second observation is that same-sex preference is far more common among paedophiles than among men who prefer adult partners: more than half are thought to prefer boys. That suggests a degree of identification with the object of desire.



To the extent that paedophilia is an orientation, like being straight or gay, attempts to change it are probably pointless. For “exclusive” paedophiles—those whom adults leave cold—the best that can be hoped is probably that they accept they will never have a satisfying sexual relationship. But those who also feel some attraction towards adults may be helped by cognitive behavioural therapy that teaches them to focus on their admissible desires. There is little evidence supporting behavioural and psychological therapies. But most studies have been small and poorly designed—and on convicted child-molesters, who are likely to be more impulsive and anti-social, and less intelligent, than those who have not been caught. They differ even more from paedophiles whom morality and self-control have enabled so far to avoid offending. Randomised controlled trials are urgently needed, says Professor Seto.

Both exclusive and non-exclusive paedophiles need to be disabused of mistaken beliefs about children. In 2006-07 Sarah Goode of the University of Winchester, in southern England, administered questionnaires to 56 anonymous self-described paedophiles she recruited on online forums. Many held wrong and dangerous beliefs about children, saying, for example, that child pornography was harmless if the child had “consented” and that they preferred the children to look as if they were enjoying themselves. In fantasies, they imagined children seeking and initiating sexual contact with adults.

Such false thinking may flow from the “sexual over-perception bias”: a cognitive flaw which makes men (but not women) prone to seeing sexual interest where there is none. That is bad enough when it means thinking a friendly female colleague is making advances; when it means reading a child’s playfulness and warmth as seductive, it is very dangerous.

In the 1970s the North American Man-Boy Love Association and, in Britain, the Paedophile Information Exchange (now disbanded) peddled the notion that sex between an adult and child can be loving and consensual, even educational. They gained remarkable support

from feminist and civil-rights groups for their aim of abolishing age-of-consent laws, which they argued restricted children's freedom. Though they failed, until recently anyone seeking information online about paedophilic urges would struggle to find other sympathetic voices. That is starting to change.

For such moments as this

Virtuous Paedophiles (VirPed), a website set up in 2011 for paedophiles determined not to act on their desires, offers "advice and camaraderie: the only place that you are not insulted and degraded," says Todd Nickerson, one of the few members to go by his real name. It also offers hope that paedophiles can live an offence-free and "somewhat happy" life. "There is a message from society that you are doomed to offend," he says, which serves children poorly, since "despair can become a self-fulfilling prophecy."

Some forum members remind Mr Nickerson of himself 30 years ago: going through puberty and realising, to his horror, that the age of the girls he found attractive seemed stuck at pre-teenage. He and other experienced members challenge the beliefs that enable abuse ("paedophiles are very good at deluding themselves that a kid is coming on to them") and share tips: always act as if a child's parent is in the room; avoid situations such as children's birthday parties; never fantasise about a child you know. Mr Nickerson says he has never touched a child sexually, "and never will"; he has never been accused of molestation. Going public has attracted vilification—but also, to his gratitude, "kind and sweet" messages from survivors of abuse, thanking him for the work he is doing.

Some wonder whether exclusive paedophiles might be helped to maintain their self-control by "abuse-free" erotica, such as child sex dolls, or cartoon or computer-rendered films or images. Such "virtual child pornography" is illegal in Britain, Canada and many other countries (though some is allowed in America, where a decade ago the Supreme Court overturned a blanket ban, citing constitutional protections for free speech). Research is urgently needed to establish whether it would function as an outlet for dangerous urges or instead as an incitement to abuse, says Professor Seto. "Clearly there's an 'ick' factor. But we've got to ask ourselves: what are the options here? We are asking of paedophilic men that they remain entirely celibate."

In some countries convicted paedophiles may be offered drugs: either SSRIs, antidepressants that dampen obsessive rumination and also lower libido; or anti-androgens, which block the action of male sex hormones. Anti-androgens can have serious side-effects, including heart disease. And their tangible effects, which include erectile difficulties and a feminised body shape, make double-blind controlled trials impossible. Many men refuse to take them, and others start but soon stop. But for offenders committed to going straight, they seem to cut recidivism.

Some paedophiles beg for drugs and experience the loss of their sex drive as a blessed relief, says Don Grubin, a forensic psychologist who is overseeing a British drug-treatment programme. But drug therapy will only suit about one in 20 offenders, he thinks: those with very high

sex drives and obsessive thoughts focused exclusively on children.

In 1972, and again in 1984, Wayne Bowers, a Michigander who runs CURE-SORT, a small charity that seeks to cut child-abuse, was convicted for molesting young boys. Before his second jail term he joined a programme for sex offenders at the Johns Hopkins sexual disorders clinic in Baltimore. The anti-androgens they prescribed helped, he says: “I still knew the attraction, but didn’t feel aroused.” That allowed him to benefit from group-therapy sessions, where he learned to think about his actions from the child’s point of view and to stop justifying his behaviour.

Many countries offer libido-lowering drugs to convicted sex-offenders who volunteer for them. Some parts of America, Australia and Europe go further by making such treatment mandatory, perhaps as a condition of parole. That may seem an obvious solution—but it is worse than ineffective. Since child-molesters are often driven less by sexual impulses than by a need for intimacy or control—or by sadism—a man forced to take drugs that affect his body and self-image may respond with rage and become more dangerous.

Germany is one of the few countries that tries to treat all paedophiles, even those not in trouble with the law. Its criminologists refer to crimes unknown to the authorities as the *Dunkelfeld* (dark field); for many types of crime this is much larger than the obverse *Hellfeld* (light field). This is particularly true of child-abuse.

Prevention Project Dunkelfeld, which runs at 11 clinics nationwide, gives confidential treatment to people troubled by sexual desires for children below or in the early stages of puberty. A national television-advertising campaign urges them to get in touch. “No one is guilty because of their sexual inclination,” it says. “But everyone is responsible for their behaviour.” Half the men it has accepted for treatment for paedophilia or hebephilia had never been accused of abusing a child, and said they had never done so.

Strict German laws about doctor-patient confidentiality mean that those who contact Project Dunkelfeld can be sure they will not be reported to the police. That means therapists may be remaining silent about past abuse, or evidence that someone with access to children has a history of offending. Critics—a few in Germany and more abroad—find that too much to stomach. But supporters say that therapists would surely never have received such evidence were it not for that confidentiality, and that untreated paedophiles are more likely to offend.

That such arguments are not merely hypothetical can be seen from the experience of Johns Hopkins, where Mr Bowers was treated in the 1980s. During the following decade state laws were passed requiring police to be told of child-abuse disclosed during treatment. The rate of self-referrals to its sex-offenders’ programme fell from about seven a year to zero, and patients also stopped disclosing previously unknown



offences. A paper published in 1991 concluded that no children were being protected as a result of the law, and that therapy was probably made less effective.

Many countries now require any suspicion of child-abuse to be reported, under pain of criminal sanctions. Laura Hoyano, a lawyer at Oxford University who specialises in child-abuse and exploitation cases, has studied such laws—and concluded that they, too, have done little or nothing to protect children from abuse. Investigations into scandals in churches, schools and children’s homes have found that many people had suspicions, but said nothing—even in places with mandatory-reporting laws. The failure to speak out stemmed from a desire to protect institutions’ reputations, or fear of retribution. Strong protection for whistle-blowers, says Ms Hoyano, is at least as important as a duty to report.

Mandatory-reporting laws have had perverse consequences, too. Police and social services have been swamped. A report in 2013 in Queensland, Australia, which requires reporting of “reasonable suspicion” that a child is, or is at risk of, being harmed, found that in the previous year reports were made about 71,928 children—7% of all those in the state. More than three-quarters related to suspicions so vague or minor that they did not meet the threshold for notification. Only 6,974 reports were substantiated. The report concluded that innocent families had been harmed by the unavoidably intrusive investigations.

Mandatory-reporting laws may also make victims less likely to seek help. Children are often kept silent by their assailants saying that if they tell anyone, the authorities will find out and put them in care. Britain has no mandatory-reporting laws, but professional guidelines mean teachers cannot promise a child confidentiality. “For me that is one reason that some children don’t tell,” says Mr Findlater of Stop it Now UK.

Typically, says Mark Rosenberg of the Task Force for Global Health, an American charity, someone else knows about or at least suspects the abuse, but keeps quiet. They may shy away from bringing disgrace on the family—or struggle to reconcile the image of the demonic child-abuser with someone they know and even love. “People won’t reach out if they think that only monsters molest kids,” says Jenny Coleman of Stop it Now USA.

There go I

According to Mr Nickerson, people opposed to any attempt to understand or treat paedophilia often say: What if your child was a victim? “I understand this, but let’s reverse it,” he says. “What if your son or daughter came to you one day and said, ‘I have to tell you something—I think I may be a paedophile.’ Would you advocate some of the policies you now advocate if it was your child who was dealing with this unfortunate sexuality?” Children, too, would be better protected by greater understanding and by help for those who might otherwise harm them.

Correction: *This article originally stated that Project Dunkelfeld's therapists do not report evidence of ongoing abuse to the police. This is not correct. The article has been amended to reflect the fact that confidentiality will be broken in these circumstances*

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