

*The more people are informed, the fewer victims there will be.*

# Health Professionals

**My patient is a pedophile ...**

Edited by



This booklet was prepared for the program PedoHelp® – steered by Association Une Vie® – by the French Federation of resource centers for professionals dealing with sexual abusers (FFCRIAVS) with Cécile Miele, psychologist and sexologist, Jean-Philippe Cano, psychiatrist and hospital practitioner, and Mathieu Lacambre, head clinical psychiatrist.

# Foreword

Pedophilia is neither a crime nor a legal term.

Pedophilia is a paraphilia that is recognized in psychiatric illness nosography. Most pedophiles are abstinent (not perpetrating any physical attack) - please check with your patient that this is the case.

As a health care professional, you must first and foremost listen to YOUR PATIENT'S suffering. This is probably why the patient has reached out to you; in addition, the patient trusts your skills and goodwill.

# What is pedophilia?

Pedophilia is the attraction or the sexual preference of an adult towards children of prepubescent or early pubescent age.

Pedophilia is a clinical condition defined in the International Statistical Classification of Diseases and Related Health Problems: ICD-10 and DSM-5.

In ICD-10, pedophilia is listed among disorders of sexual preference and defined as "sexual preference for children, whether boys or girls, or of either gender, generally of prepubescent or early pubescent age."

In DSM-5, pedophilia is listed as a paraphilia. The subject suffers from sexual urges or sexually arousing fantasies that involve sexual activity with a prepubescent child. This activity must continue for at least six months and the child must not be older than 13 years of age.

Pedophilia is not a uniform disorder; a number of distinct phenomena can be observed. Pedophilia can be exclusive (only seven percent of the cases, A. Barrata 2011), preferential, or opportunistic. It can be directed exclusively towards girls, exclusively towards boys, or towards both. Lastly, the pedophile may be abstinent or active.

## Is a pedophile patient also a pervert?

The term "pervert" applies to very different scenarios and concepts in the field of mental health. Its meaning has been distorted by the media and everyday conversation. What, precisely, are we discussing?

In relation to *sexual perversion*, pedophilia, like all paraphilias, is understood as a perversion; in this particular case, it is understood as a deviation from behavioral norms.

Perversity is seen as a specific urge and of particular ascendancy, based on the denial of differences between sexes as well as the denial of "otherness"; it is a rampart against unbearable depressive states. However, perversity is neither a necessary condition nor a component of pedophilia.

*"Perversion of the sexual instinct is not to be confounded with perversity in the sexual act... In order to differentiate between disease (perversion) and vice (perversity), one must investigate the whole examen of the individual and the original motive leading to their perverse acts."*

(Krafft-Ebing, 1886)

It is worth noting that most pedophile subjects who are satisfied with an auto-erotic activity have a neurosis, which grants them moral superiority and effective awareness over the child's psyche.

## **How does one become a pedophile?**

There is abundant scientific literature concerning perpetrators of pedophile criminal acts, their anamnesis and their comorbidities; however, there is little data relating to the development of pedophilia on abstinent subjects. We have nevertheless observed that it is not relevant to systematically confuse both disorders.

Furthermore, the construct of any type of sexual preference remains "enigmatic" because of its complexity and the combination of various issues. Besides incontestable individual circumstances, we should not forget societal factors in the eroticization of children (e.g. the issue of hyper-sexualization).

# **Is my patient "dangerous"?**

## **Are there any early warning signs prior to the act taking place?**

From a psycho-pathological perspective, any danger is first a vulnerability. A patient who undergoes therapy has fewer risks of acting out. As health care professionals, we must first attend to this vulnerability. When the therapeutic connection is strong, it is not a taboo question to ask your patient about acting out. The patient may then understand that you are here to help, and that there is an alternative to an irreversible act.

Note: contrary to popular opinion, the consumption of pedo-pornographic images is not necessarily the first step towards acting out against a minor. Studies on the influence of violent images in general do not lead to definite and unequivocal conclusions. In some cases, the consumption of such images may help contain urges, while in other instances, it will ease the crystallization of sexual fantasies. Furthermore, not all consumers of pedo-pornography are pedophiles... Let's avoid generalizations!

# Is there a "cure" from pedophilia?

## What is my role as a health care professional?

The first key element, regardless of your knowledge of the matter, is to be the recipient of your patient's story and where relevant their pain and anguish, while making sure that your perceptions (sometimes negative ones) do not interfere with your listening skills and goodwill.

There are specific therapeutic strategies, and it is important to inform your patient about them: analytic or cognitive-behavioral psychotherapy, sexological approaches, drug therapy, etc. Depending on your resources and constraints, you can either recommend this patient to a therapist or specialized institution, or take on the patient yourself.

The therapeutic goal should not be a "cure" in the sense of a change of sexual preference, which would sound like responding to social pressure and would come up against our clinical limitations, but rather caring for the patient's pain and its causes. Remember that in most cases, your patient will have the same social perceptions of pedophilia as you do!

There are various goals for therapeutic care: management of urges and emotions; care of anxieties and/or depression and weakening of self-esteem; care of addictive behaviors (with or without substance); personality disorders (impulsivity, lack of tolerance for frustration, inhibition, etc.), follow-up with disorders resulting from abuse or negligence (PTSD, etc.), follow-up with sexual disorders, etc. Meeting the patient will be crucial in order to assess their needs and offer adequate assistance.

## **Are there pharmacological treatments?**

Yes, it is possible to pair follow-up or psychotherapy meetings and medication with the goal of reducing and controlling fantasies and/or behaviors linked to a deviant sexual activity. An assessment has to be made first, and the patient has to consent to such treatment.

The only authorized medications in this situation are Androcur® (tablets) and Salvacyl® (injections with timed release). A preliminary therapeutic assessment, as well as observation, are required throughout treatment.

Some studies refer to the prescription of serotonergic antidepressants to relieve compulsive and anxious attitudes that are present among some pedophiles, but the sale of such drugs is not authorized for these purposes.

Other psychotropic treatments may be used to improve some possible comorbidities.

To learn more about the use of pharmacological treatments, please visit the website of your national health agency:

- ➔ The International Network of Agencies for Health Technology Assessment: <http://www.inahta.org/>
- ➔ In France: <http://www.has-sante.fr/portail/>

## When should you alert a judicial authority?

You are probably bound by professional confidentiality because of your rank and/or your institution. Your deontological code, the code of public health (if you work in a hospital) and especially the penal code legally enshrine your obligation to confidentiality, as well as the conditions under which you can, or must, reveal it.

I keep the secret: I must respect complete secrecy to protect my patient (*in France: article 226-13 of the Penal Code*).

I can reveal the secret: I learn that sexual abuse, assault or mutilations have been inflicted on a minor (*in France: article 226-14 of the Penal Code*).

I must reveal the secret: I observe that sexual abuse, assault or mutilations have been inflicted on a minor (*in France: article 226-14 of the Penal Code*); or a person faces imminent danger and I am able, if I act immediately and without taking any risk to myself, to prevent a crime or misdemeanor against this person's physical integrity (*in France: article 223-6 of the Penal Code*).

Should you decide to identify an individual, you can contact the police and/or the judicial system of your country.

In France, for example, the two main institutions are:

- ➔ CRIP (Departmental Cell for the Collection of Troubling Information);
- ➔ The Attorney General.

## Resources / Contact

### Advice

If you need advice regarding assessments and orientation, and/or answers to your questions when you first meet a patient, you can contact any of our partners, listed by country on our website:

➡ <http://pedo.help/help/>

In France: CRIAVS (Resource Centers for Professionals Working with Sexual Abusers) can give you information about therapies and health care options in your department or district:

➡ <https://www.ffcriavs.org/>

# Some legal facts

## Sexual majority

Sexual majority (the ability to consent to a sexual relationship with an adult as long as the adult doesn't have an authority role over the minor) differs in each country.

In France, for example, it is reached at the age of 15.

➔ <https://www.ageofconsent.net/world>

## Sexual abuse

Laws differ according to each country.

In France, any form of sexual abuse, with or without penetration, perpetrated upon a 15-year-old minor is characterized as sexual abuse (sometimes aggravated), including when the minor has expressed consent or has not expressed non-consent (*article 222 and following from Penal Code*).

Recording, broadcasting, transmitting or simply holding pornographic images of a minor constitutes an offense (*article 227-23 of the Penal Code*).

If an adult seduces a 15-year-old minor on the Internet, with sexual proposals, this constitutes an offense (*article 227-22-1 of the Penal Code*).

More information:

- ➔ [https://en.wikipedia.org/wiki/Sexual\\_abuse](https://en.wikipedia.org/wiki/Sexual_abuse)
- ➔ [https://en.wikipedia.org/wiki/Laws\\_regarding\\_child\\_sexual\\_abuse](https://en.wikipedia.org/wiki/Laws_regarding_child_sexual_abuse)
- ➔ <http://www.endvawnow.org/en/articles/492-sources-of-international-law-related-to-sexual-harassment.html>

### **International Convention on the Rights of the Child**

The International Convention on the Rights of the Child (CRC), is a treaty adopted by the Assembly General of the United Nations on 20 November 1989.

- ➔ <http://www.unicef.org/>

Excerpt: Article 34

States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

- (a) The inducement or coercion of a child to engage in any unlawful sexual activity;
- (b) The exploitative use of children in prostitution or other unlawful sexual practices;
- (c) The exploitative use of children in pornographic performances and materials.

# The PedoHelp® project

PedoHelp® is an international information and prevention project on pedophilia.

This free, international and ecofriendly project aims to raise awareness among many actors in order to reduce the number of sexual abuses committed on children.

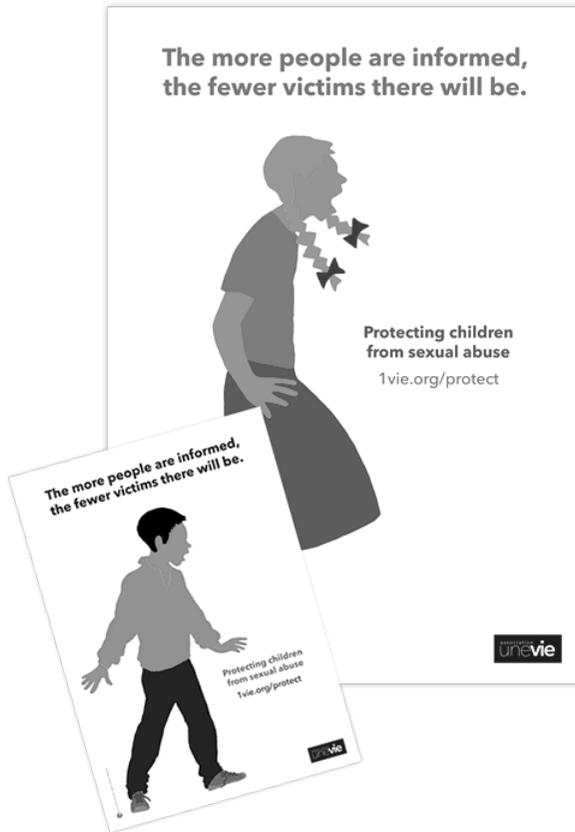
***The more people are informed, the fewer victims there will be.***

Main website: [www.pedo.help](http://www.pedo.help)

Awareness website for children: [www.nonono.help](http://www.nonono.help)

# Awareness kit

Our awareness kit is available as free download on the project's website: [www.pedo.help](http://www.pedo.help).



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**To find out more, visit [www.ffcriavs.org](http://www.ffcriavs.org)**

## **Association Une Vie®**

Association Une Vie® is committed to promoting respect between people, as well as encouraging fulfillment of individuals and their community. This includes providing awareness content to protect children from the risk of sexual abuse.

The project PedoHelp® is conducted by Association Une Vie®.

**To find out more, visit [www.1vie.org](http://www.1vie.org)**

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