



Providing Treatment to Minor-Attracted People

Dr. Kristin Spooner, DSW, LICSW, CST

The Radical Social Worker

October 4, 2024

KristinSpoonerTherapy@gmail.com

Labels & Stigma

- Minor-attracted Person (MAP)
- Person with Pedophilia (PWP)
- Person w/ a sexual offense history

-
- Child Molester
 - Pedophile
 - Sex Offender



ROAD MAP

- Background Context: Stigma, Moral Panic, and Sexual “Deviancy.”
- Who are Minor-attracted People (MAPs)?
 - Demographic information, minor-attraction as sexual orientation, mental health symptoms & risk factors, and neurobiology.
- Prevention is secondary/tertiary--one directional.
- Treater attitudes and approaches.
- Child Sexual Abuse (CSA) impacts.
 - Identifying the importance of primary preventative approaches



Sociocultural Background Context



What is Stigma?

- Socially constructed categories (norm follower vs. norm deviator).
- Dependent on cultural norms
- Stigma subgroups:
 - Reintegrative Shaming
 - Stigmatic Shaming
 - Courtesy/Secondary Stigma



Understanding Sexual “Deviancy”

- Highly dependent on social norms: theological, legal, psychiatry.
- Disease or "biologically normal variants of sexual variation?"
- Diagnostic and Statistical Manual (DSM) continues to influence stigma

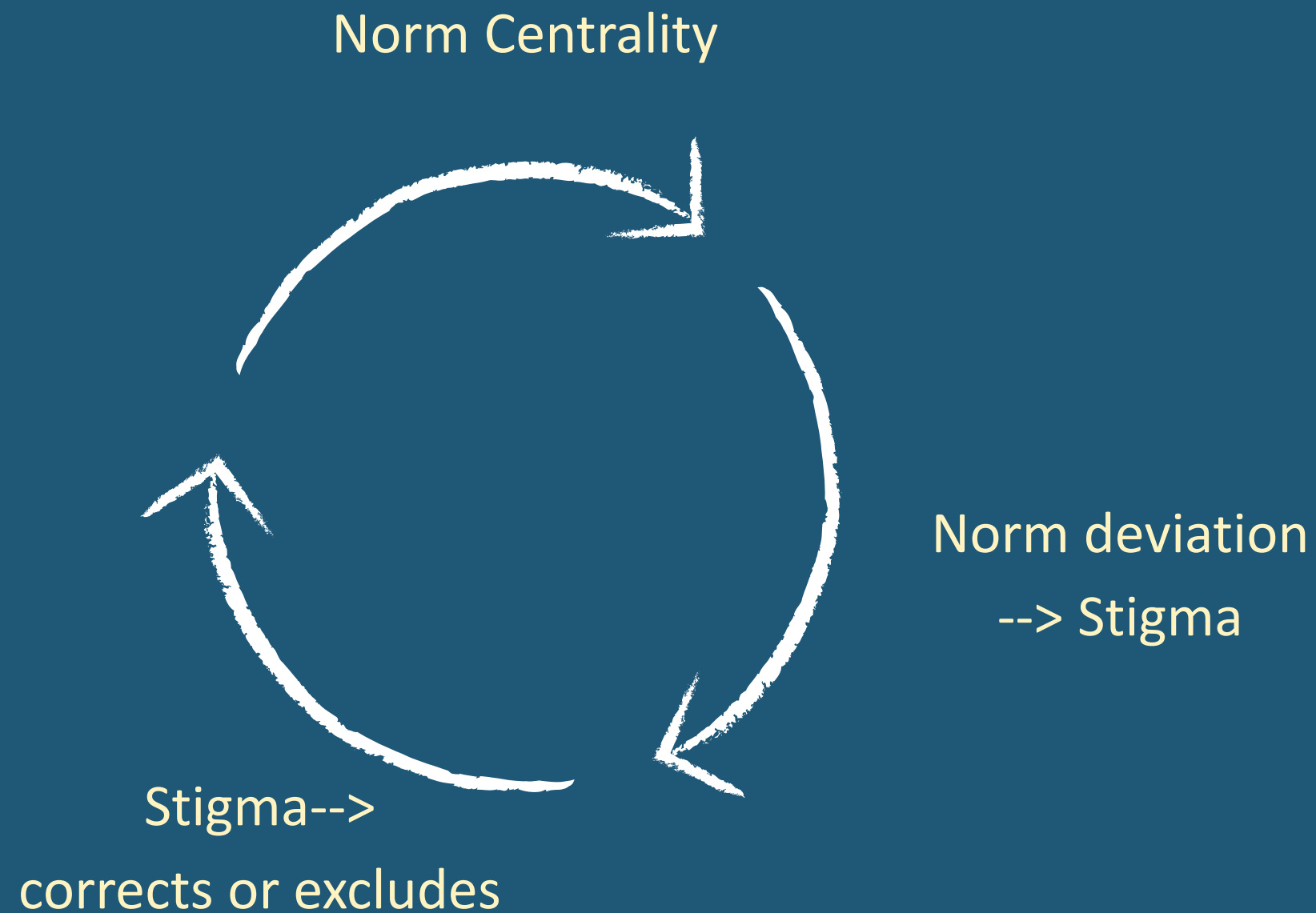


Moral Panic & Societal Influence


- What is moral panic?
- 1990's increase in media related to CSA
- Reported minor-attraction as homogenous--monsters.
- Community fear increases, legislation reactive to fear.
- Increases belief that MAP offending is inevitable.
 - Why bother with treatment?



Norm-Centered Stigma Theory (NCST)



- Social power is required to create norms.
- Groups with power decide who is excluded
- Gate-keeps social currency.
- Maintains social power structures.



Humanizing
Minor-
Attracted
People

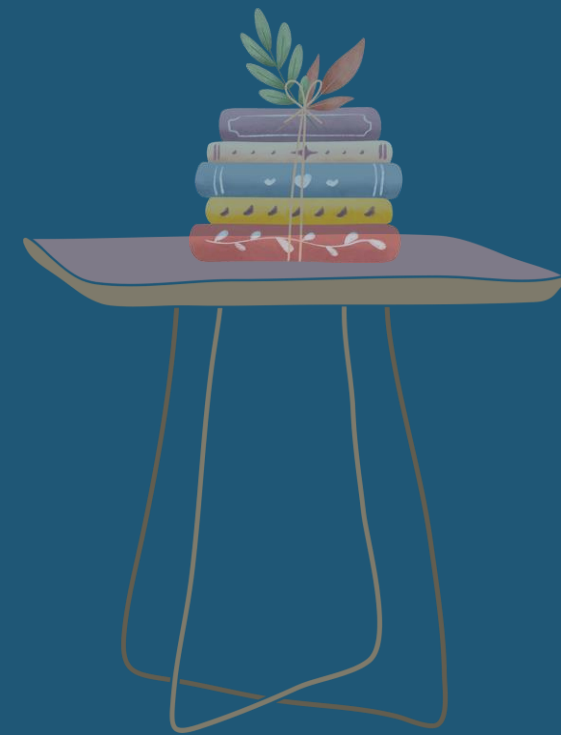
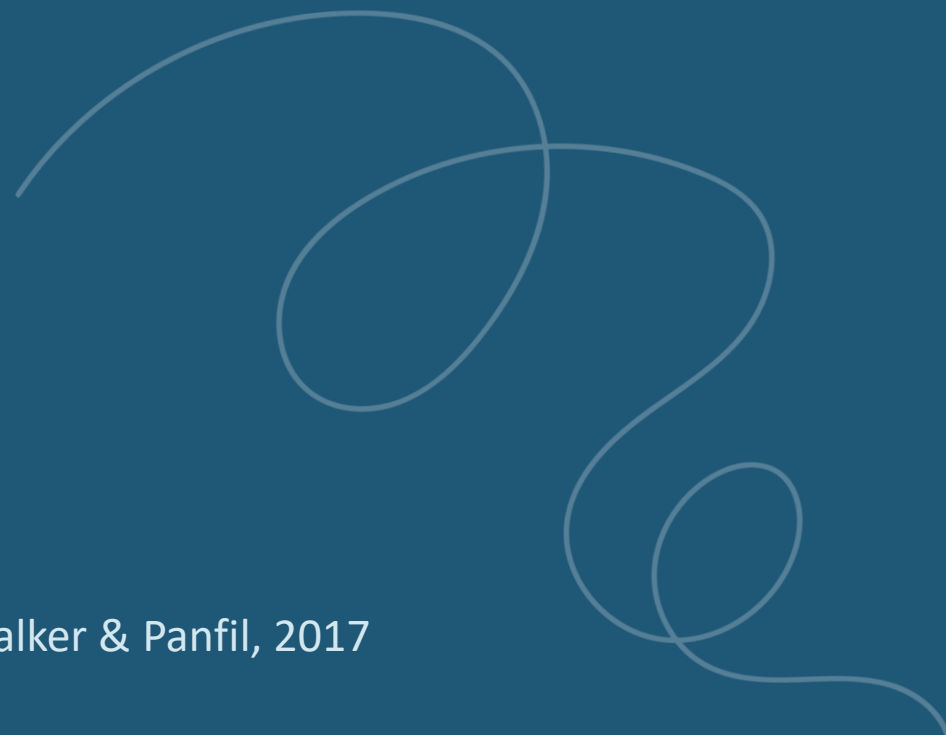
Who are MAPs?

- People who experience romantic and sexual interest in minors.
- ~3-9% of men and ~1-4% of women.
- Typically align with one of two DSM-5 diagnoses:
 - Pedophilia
 - Pedophilic Disorder (PD)
- Experience exclusive or non-exclusive interests.
- 50-60% of child sexual abuse convictions do not meet criteria for pedophilia/PD



Minor-Attraction as a Sexual Orientation

- Studies reviewed MAP age of onset, sexual & romantic bxs, and stability over time--similar to all other sexual orientations.
- LGBTQ+ resistance to minor-attraction as orientation.
 - Conflation of healthy LGBTQ+ identities with harmful impacts of Childhood Sexual Abuse (CSA).



Understanding

MENTAL HEALTH SXS

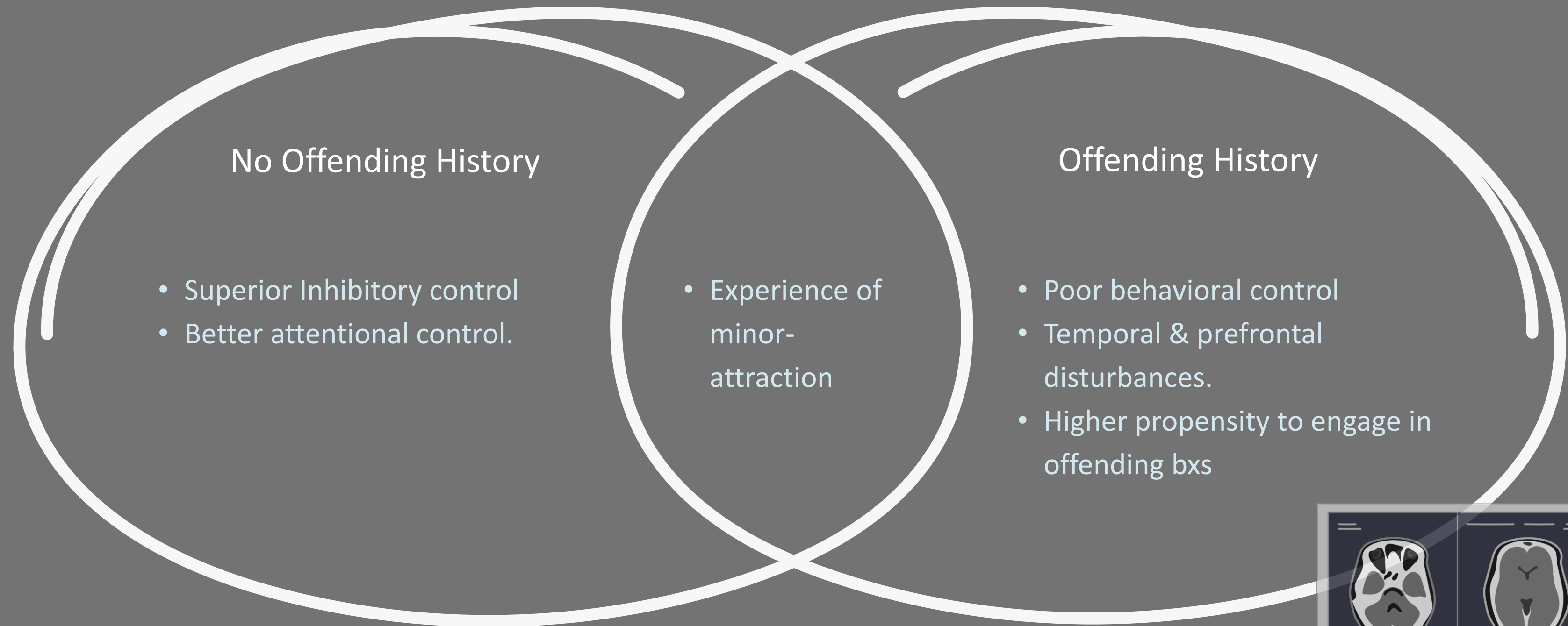
- Suicidality
- Self-hatred
- Self-injurious behaviors
- Substance dependence
- Mood disorders
- Anxiety/social phobia



POTENTIAL RISK FACTORS

- Intimacy & social skill deficits
- Emotional dysregulation
- Cognitive distortions
- Distorted sexual scripts

Neurobiological & Behavioral Research



Practitioner
Stigma
&
Treatment
Barriers



Fear of Liability: Mandated Reporting & Duty to Warn

- Confusion related to duty to warn requirements.
- What is reasonable decision making?
- Correlation between stigma & reporting decisions.
- Fear offending will happen if report is not made.
- Students request further ethics courses/trainings.



Popular Media & Misinformation

- Media leverage, higher ratings = increase fear/anxiety/reactivity.
- Influences help-seeking behaviors.
- Manipulation of pedophilia terminology.



Clinician Experiences of Trauma

- Vicarious trauma, Personal trauma hx, secondary stigma trauma.
- Avoidance of discussing sexual interests/harmful behaviors.
 - survivors vs folx who have perpetrated.
- Therapist trauma history/childhood abuse--75%.
- Fear of exclusion and ostracization.



Treatment Competency

- Refusal to work with population due to lack of competency.
- Fear of making a mistake.
- Treater responsibility & NASW Code of Ethics
- Harm perpetrated by practitioners towards help-seeking MAPs;
discontinuing tx (40%).



Problem Breakdown



Problem Breakdown

- Everyone deserves access to competent and client-centered tx.
 - NASW code of ethics: Service, Dignity & Worth of a Person, & Social Justice.
- Prevention has been secondary or tertiary--one directional.
- Treater attitudes create barriers to primary prevention and prehabilitation.





Community Impact

- Between 1993 and 2008, reduction in CSA cases.
 - No conclusive data as to why.
- Lifetime cost of fatal & non-fatal cases of CSA, ~9.3 billion.
 - Per survivor, ~ \$122,261.
- Sex Offender Registry
 - Tax payer cost: tens of thousands of dollars.

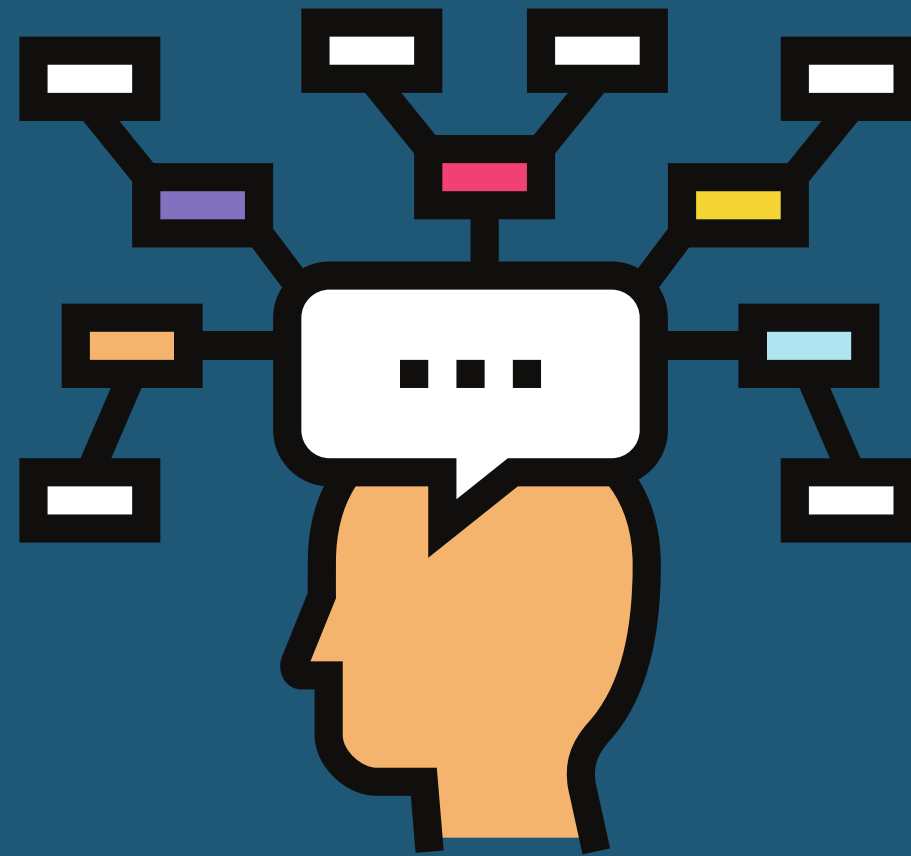
Alternative Approaches

- Germany & the Prevention Project Dunkelfeld (PPD or Dunkelfeld):
 - Rewriting social narratives related to minor-attraction.
 - Approached as sexual orientation (management not conversion).
 - Different mandated reporting/duty to warn laws.

Theoretical Approaches

Narrative
Humanization

Intersectionality



Narrative Humanization

- In-person, most effective:
 - Narratives directly from group members.
 - Difficult for highly stigmatized groups--too risky.
- Second option:
 - Narrative-based depictions and/or recording of interviews/discussions.
 - Support learner's needs and protects highly stigmatized MAPs.



Intersectionality

- Individuals can only be fully understood by all their parts.
- Requires seeing beyond one identity
- Client-centered approach
- Additional marginalized identities?



Q&A

