

Working with Paraphilias

Clinical Strategies for Working with Clients Who Express
Paraphilic Interests in Sex Offense Treatment

Objectives

- ▶ Explain how clinicians conceptualize paraphilias and distinguish paraphilic interests from paraphilic disorders
- ▶ Demonstrate strategies for helping clients identify, make sense of, and talk about their paraphilias
- ▶ Apply techniques for managing paraphilic interests and behaviors

Part 1: How Clinicians Conceptualize Paraphilias

Sexual Interests

- ▶ **Normophilic** - Sexual interest in genital stimulation or preparatory fondling with phenotypically normal, physically mature, consenting human partners
- ▶ **Paraphilic** - Any intense or persistent (sometimes preferred) sexual interest other than sexual interest in genital stimulation or preparatory fondling with phenotypically normal, physically mature, consenting human partners
- ▶ **Paraphilic Disorder** - Paraphilia that is currently causing distress or impairment to the individual or a paraphilia whose satisfaction has entailed personal harm, or risk of harm, to others (American Psychiatric Association, 2022)

Paraphilic Disorders in the DSM-5-TR

Anomalous Target Preferences

- ▶ Pedophilic Disorder
- ▶ Fetishistic Disorder
- ▶ Transvestic Disorder

Anomalous Activity Preferences

Courtship Disorders

- ▶ Voyeuristic Disorder
- ▶ Exhibitionistic Disorder
- ▶ Frotteuristic Disorder

Algolagnic Disorders

- ▶ Sexual Sadism Disorder
- ▶ Sexual Masochism Disorder

Different or Problematic?

- ▶ Nearly half of a Canadian sample of general population (N=1,040) expressed interest in at least one paraphilic category (Joyal & Carpentier, 2017)
 - ▶ Voyeurism, fetishism, exhibitionism, frotteurism, and masochism most commonly endorsed
- ▶ BDSM in general population:
 - ▶ Not related to psychopathology (Richters et al., 2008; Spratt et al., 2023)
 - ▶ Compared to controls, BDSM practitioners were less neurotic, more extraverted, less rejection-sensitive, and had higher subjective well-being (Wismeijer & van Assen, 2013)
 - ▶ Masochism significantly linked to with higher satisfaction with sex life (Joyal & Carpentier, 2017)

What We Know About Paraphilic Interests in People Who Commit Sexual Offenses

- ▶ Not necessary to commit a sexual offense
- ▶ Common to have multiple paraphilias (American Psychiatric Association, 2022)
- ▶ Tendency to use fantasy to cope with negative emotionality (Gauthier et al., 2023)
- ▶ Deviant Sexual Interests - defined as enduring attractions to sexual acts that are illegal or highly unusual - are one of the two major predictors of sexual recidivism (Hanson & Morton-Bourgon, 2005)

Clinical Concerns

- ▶ Is the paraphilic interest a disorder?
 - ▶ Distress, Impairment, Harm
- ▶ Is the paraphilic interest risk-relevant?
 - ▶ Relevant to known sexual recidivism risk factors
- ▶ Can the client meet paraphilic interests in healthy ways?
 - ▶ Consensual, non-harmful behaviors
 - ▶ Mitigate risk

Edgar

- ▶ Convicted of Sexual Assault:
 - ▶ Met a woman at a party who was intoxicated
 - ▶ Woman fell asleep in a back bedroom at the party
 - ▶ Edgar entered the room while she was sleeping and sexually assaulted her
- ▶ Has an intense and persistent interest in seeing and smelling women's underwear
- ▶ Has kept underwear given to him by ex-girlfriends
- ▶ Denies problems or distress about his interest in women's underwear
- ▶ Has only engaged in activities involving underwear with consenting partners

Diagnostic Considerations

- ▶ Criterion A - Nature of Paraphilia:
 - ▶ Timeframe (“over a period of at least 6 months, recurrent and intense sexual arousal from...”)
 - ▶ Fantasies, Urges, or Behaviors
- ▶ Criterion B - Negative Consequences:
 - ▶ Distress
 - ▶ Impairment
 - ▶ Harm (Acted with a Non-Consenting Person)

Why It's Hard for Clients to Acknowledge Paraphilias

- ▶ Shame / Negative perceptions / Further Stigma
- ▶ Misunderstandings
- ▶ Lack of awareness
- ▶ Concerns that talking about paraphilias will lead to:
 - ▶ Restrictions
 - ▶ Assignments
 - ▶ Legal problems (Stephens et al., 2021)

Treatment Provider Tasks

- ▶ Assist client in preventing future sexual offending
- ▶ Make it safe to talk about sexual interests
- ▶ Better understand client's sexual interests and goals
- ▶ Assist client in achieving their goals related to healthy sexuality
- ▶ As Needed:
 - ▶ Help client better understand their sexual interests
 - ▶ Motivate client to avoid problematic sexual behaviors
 - ▶ Teach client skills to:
 - ▶ prevent problematic sexual behaviors
 - ▶ achieve healthy sexuality goals

Part 2: Helping Clients Identify and Understand Paraphilias

Greg

- ▶ Convicted of Indecent Exposure:
 - ▶ A woman discovered Greg masturbating in his car in a grade school parking lot
 - ▶ Greg had smiled at the woman and asked if she liked what she saw
 - ▶ Greg stated he had committed the offense because he had no privacy at home and he believed no one would see him
 - ▶ Greg stated that he had tried to joke with the woman because he felt awkward about being discovered
- ▶ Arrested 1 year ago for exposing himself to women in a mall parking lot
 - ▶ Stated he had been adjusting his pants and not realized that he was exposed
- ▶ Few prior romantic relationships, all of which were short-lived and chaotic
- ▶ Expresses anger at women for over-reacting and being up-tight about sex
- ▶ Demonstrates problems with impulse-control
- ▶ Very focused on sexual topics

Is This Client:

- ▶ Willing to discuss their sexual interests?
- ▶ Aware of their paraphilic interests?
- ▶ Motivated to not engage in problematic behaviors related to paraphilic interests?
- ▶ Interested in consensual activities and targets?

Andy

- ▶ Convicted of Child Pornography: Possession and 2 counts of Sexual Abuse of a Minor
 - ▶ Viewed CSEM involving 3 to 12-year-old boys for 2 years
 - ▶ Sexually touched a 6-year-old and an 8-year-old boy on multiple occasions
 - ▶ States that he was viewing/collecting CSEM to better understand his own experiences of abuse as a child
 - ▶ Minimizes the impact of his contact offenses
- ▶ No prior romantic relationship history
- ▶ Minimal social connections
- ▶ Feels hopeless about his future

Education

Behavior	Interest	Disorder

Education

Behavior	Interest	Disorder
Rape		
BDSM		
Consensual Intercourse		
Child Molestation		
Indecent Exposure		

Education

Behavior	Interest	Disorder
Rape	Non-consent, force	
BDSM	Causing pain	
Consensual Intercourse	Men	
	Women	
Child Molestation	Prepubescent children	
Indecent Exposure	Exposing to non-consenting person	

Education

Behavior	Interest	Disorder
Rape	Non-consent, force	
BDSM	Causing pain	Sexual Sadism Disorder
Consensual Intercourse	Men	
	Women	
Child Molestation	Prepubescent children	Pedophilic Disorder
Indecent Exposure	Exposing to non-consenting person	Exhibitionistic Disorder

What leads to problematic sexual interests?

- ▶ Prenatal factors, such as parental risk factors and congenital malformations
- ▶ Social learning / Early childhood experiences, including early exposure and trauma
- ▶ Excitation transfer between emotions and sexual arousal
- ▶ Conditioning
- ▶ Problems with “normative” sexuality

(Babchishin et al., 2019; Schippers et al., 2024)

Sexual Interest Exercise

- ▶ Who:
- ▶ What:
- ▶ How Much:
- ▶ Attitude:
- ▶ Has this interest caused problems for yourself or others?
- ▶ What do you want to do about this interest?

Blocks to Acknowledging Interest

- ▶ What are the limits of confidentiality?
- ▶ What does this term mean to you?
- ▶ What would it mean if you did have a sexual interest in _____?
- ▶ How do you feel about talking to me/us about this interest?
- ▶ How can I/we support you in exploring this interest?

What contributes to the attraction?

- ▶ Physical Attractions
- ▶ Emotional Identification
- ▶ Courtship Disorders
- ▶ Cognitive Distortions
- ▶ Anger / Punishment
- ▶ Attraction to Pain
- ▶ Control
- ▶ Loneliness / Rejection
- ▶ Thrill-Seeking

Function of Behaviors

- ▶ Motivation vs Facilitation (Seto, 2019)
- ▶ What made _____ attractive/interesting/exciting?
- ▶ Acknowledging multiple motivations
- ▶ Why continue the behavior?
- ▶ What kept you from getting your needs met through _____?
- ▶ What if they were _____?
 - ▶ Younger / Different gender

Part 3: Helping Clients Manage Paraphilic Interests and Behaviors

What We Do with Problematic Sexual Interests

- ▶ Process
- ▶ Address Trauma
- ▶ Encourage Healthy Sexuality
- ▶ Safety Planning
- ▶ Arousal Management (Gannon et al., 2019; McPhail & Olver, 2020)
- ▶ Pharmacological Interventions (McPhail & Olver, 2020)

Processing Paraphilias

- ▶ Acknowledge persistent nature of paraphilias and instill hope (Blagden et al., 2018; Jahnke et al., 2023)
- ▶ Discuss client's goals
- ▶ Motivate behavioral change
- ▶ Address grief
- ▶ Address fear
- ▶ Develop support

Trauma

- ▶ Impact on Attachment Styles
- ▶ Impact on Sexuality
 - ▶ Is trauma contributing to harmful sexual behaviors?
 - ▶ Is trauma impeding healthy sexuality?
- ▶ Trauma-Informed Care: Transforming Treatment for People Who Have Sexually Abused (Levenson et al., 2017)
 - ▶ “What’s wrong with you?” or “What happened to you?”
 - ▶ Understanding and responding to problematic behaviors through the lens of trauma
 - ▶ Providing safety, empowerment, trust, and respect

Goals

Avoidance

- ▶ High Risk Situations
- ▶ Negative Influences
- ▶ Focus on Non-Consensual Fantasy

Approach

- ▶ Focus on Consensual Fantasy
- ▶ Developing Romantic Relationships
- ▶ Maintaining Romantic Relationships
- ▶ Meeting Needs in Non-Sexual Ways
- ▶ Consent
- ▶ Rejection
- ▶ Communicating Sexual Wants

Must paraphilic behaviors be avoided?

- ▶ Consider whether paraphilic interests can be met in healthy ways
 - ▶ Consensual
 - ▶ Mitigating risk
 - ▶ Moving client toward their goals
- ▶ Consider whether function of the behavior can be addressed in healthy ways

Healthy Sexual Scripts

- ▶ What would a satisfying consensual sexual scenario look like for you?
- ▶ How do you bring this to life / make it more exciting?
- ▶ How do you make this more likely to happen?
 - ▶ Where would you meet this person?
 - ▶ How would you start a relationship?
 - ▶ How would you know about their sexual interests?
 - ▶ How would you tell them about your sexual / relationship wants?
 - ▶ What skills/qualities would make you more appealing to this person?

Safety Planning

- ▶ External Risks: people, places, and situations to avoid
- ▶ Internal Risks: mood states, thought distortions
- ▶ Positive Social Support: specific people and their contact info
- ▶ Coping Skills: clear, specific
- ▶ Environment Structuring: setting up situations to make risks or offenses less likely

Sexual Self-Regulation Techniques

- ▶ Thought-Stoppers
- ▶ Covert Sensitization
- ▶ Aversion Techniques
- ▶ Urge-Surfing

Greg's Self-Regulation Strategies

- ▶ Thought-Stoppers: “Jail” “Homeless” “Jenna leaving”
- ▶ Urge Surfing / Count to 10
- ▶ Talk to Jenna or Tony about urges
- ▶ Distract by calling my grandfather, reading my Bible, playing videogames
- ▶ Remind myself: “I don’t need this.” “I’m in control of my actions.” “It’s not worth it.”

Andy's Self-Regulation Strategies

- ▶ Covert Sensitization
- ▶ Switching to Healthy Masturbation Script
- ▶ Olfactory Aversion

Pharmacology

- ▶ May reduce sex drive
- ▶ May alleviate intensity or frequency of sexual arousal to children
- ▶ May include antiandrogen medications or SSRI's

QUESTIONS?

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