



Sexual interest and sexual self-control in men with self-reported sexual interest in children – A first eye tracking study



Kirsten Jordan^{a,*}, Peter Fromberger^a, Isabel Müller^b, Martina Wernicke^b, Georg Stolpmann^a, Jürgen L. Müller^{a,b}

^a Department for Forensic Psychiatry and Psychotherapy, Clinic of Psychiatry and Psychotherapy, University Medical Center, University of Goettingen, Goettingen, Germany

^b Asklepios Forensic Psychiatric Hospital, Goettingen, Germany

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ABSTRACT

Sexual child abuse is one of the most destructive events for child development. One possible approach to avert it is the preventive treatment of individuals with a sexual interest in children. The aim of the current eye tracking study was to compare people with a self-reported sexual interest in children who participate in the outpatient preventive treatment project “PsM”, pedophilic forensic inpatients, and a non-pedophilic control group. Groups were compared with respect to sexual interest and attentional control in the presence of sexual stimuli, both assessed independently of self-report. Two approaches were applied, namely the initial orientation approach for measuring sexual interest, and a sexual distractor task for measuring attentional control. Our data showed for the first time that outpatients with a self-reported sexual interest in children differed from pedophilic forensic inpatients with respect to attentional control but not with regard to sexual interest. Outpatients showed similar sexual interest in children as pedophilic forensic inpatients. They demonstrated significantly better attentional control than pedophilic forensic inpatients in the face of adult sexual stimuli, but the difference regarding child sexual stimuli did not reach significance. This might reflect a higher capacity for self-control and self-regulation in these patients. Nevertheless, child stimuli remain to be important distractors for them. Our results provide valuable additional information for the diagnosis and therapy of outpatients with a self-reported sexual interest in children. Obviously, these data are preliminary and further studies with larger groups should examine if they are replicable.

1. Introduction

Sexual child abuse has a massive negative impact on the development of a child. Preventive treatment of people with a sexual interest in children could be one approach to reduce numbers of sexual child abuse. In recent years, several treatment approaches have been developed, e.g. the projects “Stop It Now”, “Protection of Victims” (BIOS-BW e.V.), “Prevention of Sexual Abuse” (PsM), the prevention network “Kein Täter Werden”, the forensic Institute Ostschweiz’s “forio”, and the “The Hamburg Model of Outpatient Group Therapy for Pedosexual Men”. Some attempts at characterizing individuals who participate in those programs have been published, for instance with respect to demographic variables, sexual preference, sexual fantasies, sexual self-regulation, offense-supportive cognitions, and social functioning (e.g. Beier et al., 2015; Grundmann et al., 2016; Schulz et al., 2013; Stolpmann et al., 2017). However, the vast majority of these published

results rely on self-reports, which are susceptible to denial or faking on the part of patients. Especially regarding diagnostic clarification, approaches to measure sexual interest independently of self-report could yield valuable additional information. In addition, both a sexual interest in children and problems with sexual self-regulation (i.e. sexual preoccupation) have been identified as important risk factors for sexual reoffending (Hanson and Morton-Bourgon, 2005). A promising approach for measuring sexual self-regulation, or at least some aspects of it, is the assessment of attentional control in the presence of sexual stimuli (Jordan et al., 2016b). However, all known studies which measured sexual interest and attentional control independently of self-report are based on data from incarcerated sex offenders, forensic inpatients, and healthy controls (Schmidt et al., 2015; Jordan et al., 2016b). To our knowledge, there are no such data about participants from the above-mentioned preventive treatment programs to date.

Those studies measuring sexual interest and attentional control

* Corresponding author. Department for Forensic Psychiatry and Psychotherapy, Clinic of Psychiatry and Psychotherapy, University Medical Center, University of Goettingen, Rosdorfer Weg 70, 37081 Goettingen, Germany.

E-mail address: kirsten.jordan@medizin.uni-goettingen.de (K. Jordan).

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independently of self-reports have applied varying cognitive approaches, one of which is the measurement of eye movements (for review see: Schmidt et al., 2015). Eye tracking approaches use eye movements to measure attention processes towards sexual stimuli (Wenzlaff et al., 2015). The human ability to identify fine details is limited to two degrees of central vision (the foveal region of the retina) (Rayner and Pollatsek, 1992). This limitation of acuity of the human visual system makes it possible to identify the features most interesting to the viewing subject by using eye movements (Fromberger et al., 2012b). One typical eye movement parameter is the fixation latency, the time between the beginning of a trial and the first fixation on a specific stimulus. It is thought to represent attentional bias owed to early, automatic shifts in attention, especially if it represents the very first fixation in a trial (Armstrong and Olatunji, 2012). Making use of this potential informational value of eye movements, the **initial orientation** approach uses eye tracking technology in order to measure sexual interest (Fromberger et al., 2012b). It is therein based on the information processing concept by Spiering and Everaerd, which assumes that evolutionarily important, sexually relevant features of a stimulus are preattentively selected and automatically induce focal attention to these aspects (Spiering and Everaerd, 2007). In the experimental design, two sexual images are simultaneously presented and the initial orientation response is measured, which is operationalized as fixation latency towards (one of) the stimuli. Using the **initial orientation** approach, previous research has shown that forensic pedophilic inpatients and non-pedophilic subjects can be classified with high diagnostic accuracy (Fromberger et al., 2012b). A second approach – a **sexual distractor task** – rests on the assumption that controlled information processing of sexual features which are presented along with a cognitive task interfere with the processing of said task. This effect is also known as sexual content-induced delay (SCID) (Geer and Bellard, 1996): Based on the underlying broader concept of a limited attention capacity during controlled information processing (Kahneman, 1973), sexual features and the cognitive stimulus compete for the limited attentional capacity. Further, working on a cognitive task while being potentially distracted by sexual stimuli, requires control functions to focus on the task. One potential parameter to measure these control functions could be the latency of the first fixation towards each of the two stimuli. Using this parameter in a **sexual distractor task**, our group found an impaired attention control in pedophilic forensic inpatients compared to a non-pedophilic group. Classification accuracy for both groups was good (Jordan et al., 2016b).

The project “Prevention of Sexual Abuse” (PsM, <http://www.ludwig-meyer-institut.de/de/prevention-of-sexual-abuse/we-are/>) is aimed at adults who have a sexual interest in children and/or adolescents, including people who fear that they might commit an act of abuse (e.g. because of sexual fantasies with children/adolescents), people who consume child pornography, and individuals who have committed sexual abuse. The project is funded by the Ministry for Social Affairs of Lower Saxony, the Asklepios Psychiatric Hospital Goettingen and the University Medical Center Goettingen. Clients are treated irrespectively of whether they have already been convicted for child sexual abuse/child pornography consumption or have never put their sexual interest into practice. The only relevant attribute is a self-reported sexual interest in children/adolescents associated with the danger/fear that they might abuse children/adolescents sexually (Schulz et al., 2013). A cognitive-behavioral therapeutic approach which integrates need- and resource-oriented concepts has been developed for this specific patient group (Schulz et al. 2017a, 2017b; Stolpmann et al., 2017). Despite the above-mentioned studies, several questions remain unclear regarding this group. For example, to the best of our knowledge, it is unclear if their reported sexual interest in children corresponds with attention

processes toward such stimuli in the same way as it does in pedophilic forensic inpatients. Notably, experiences gained in the PsM-project show that their self-reported sexual interest in children does not necessarily correspond with the diagnosis of pedophilia. Moreover, some patients report not only a sexual interest in children but also in adults. Others state that they do not know why they abused children. Not a few conclude that they should be considered as sexually interested in children merely due to their consumption of child pornography. Additionally, first data indicate that not all patients describe sexual fantasies with minors (see also Table 1 and method section). Hence, measuring attentional processes toward sexual stimuli independently of self-report could help clear up this issue.

Therefore, the aim of the current eye tracking study was to compare people with a self-reported sexual interest in children (participants from the PsM-project) to pedophilic forensic inpatients with respect to sexual interest and attentional control in the face of sexual stimuli, both assessed independently of self-reports. The two above-mentioned approaches were applied which had previously been developed by our group. The **initial orientation** approach was used to measure sexual interest (Fromberger et al., 2012b) and a **sexual distractor task** was applied to measure attentional control (Jordan et al., 2016b). In the current study, we were mainly interested in early attentional parameters.

2. Methods

2.1. Participants

This study is part of a larger project concerning the measurement of sexual interest using eye movements. Results concerning the forensic inpatients and the control group are published in Fromberger et al., (2012b); Fromberger et al., 2013; Jordan et al., 2016a, 2016b. Selected results concerning the PsM-patients are presented in Wernicke et al., (2016); Müller et al., 2017; Stolpmann et al., 2017. The outpatient-group consisted of eleven men with a self-reported sexual interest in children, who had been diagnosed and were being treated in the PsM-project. Out of these, one reported having consumed child pornography, two reported having committed sexual child abuse, five reported both, and one reported neither. According to self-reports, four patients had already been convicted for possession and distribution of materials containing child pornography and one patient had been convicted for possession and distribution of materials containing child pornography and for child abuse. Mean age of child victims for the seven patients with self-reported sexual child abuse was 9.82 (SE: 1.88, range: 3.9–16.0), and mean number of victims was 16.86 (SE: 13.88, range: 1–100). Although all 11 outpatients admitted their sexual interest in children, four negated ever having had sexual phantasies with minors. The inpatient group comprised 22 pedophilic forensic inpatients which had all been convicted for sexual child abuse. Their mean number of child victims was 6.05 (SE = 1.03, range: 1–22). Child victims were, on average, 9.03 years of age (SE = 0.47, range: 3.50–12.50). Note that comparability of the two groups was somewhat limited concerning sexual abuse. Information for forensic inpatients were based on file records which (in most cases) contained detected cases of child abuse only, but no further self-reported sexual abuse. Information for outpatients on the other hand were based solely on self-reports. Thus, the actual numbers of sexual abuse might have slightly differed from what was assessed. Sixty males without any sexual interest in children made up the control group. This group consisted of eight forensic inpatients (sex offenders without any history of sexual assault against children) and 52 healthy male control subjects. Data from this control group and the forensic inpatient group come from

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