

INTRODUCTION

This new edition represents a critical review and integration of many active lines of research on pedophilia, hebephilia, sexual offending against children, incest, risk assessment, and treatment. My aim is to provide an accessible and scholarly book that summarizes the evidence to drive better research, policies, and practices, to prevent sexual offenses against children and to improve the lives of persons with pedophilia or hebephilia.

Some readers may be surprised that helping persons with pedophilia or hebephilia is part of my aim in this book. I ask you to imagine, whatever your sexual preferences are, that social norms and laws prohibited you from expressing your sexuality in the way you would like. Very serious consequences could result if you did express your sexual interest, including loss of employment; social ostracism; estrangement from family and friends; long prison sentences; and then a range of legal restrictions regarding residence, movement, and public notifications about you postsentence. Even if you never expressed your

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Pedophilia and Sexual Offending Against Children, Theory, Assessment, and Intervention, Second Edition,
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sexual interest, you would live in anxiety and fear because of the severe stigma associated with your sexual interest, so that it would be very difficult if not impossible to disclose to family members, friends, and others around you. That is the situation that persons with pedophilia or hebephilia currently face.

The 2008 and 2013 books I have written have some overlap with this edition, but this edition is the most current and comprehensive overview. This edition also draws heavily from a number of theory and review publications that I have written over the years. This includes contributions to the *Archives of Sexual Behavior* on conceptualizing *chronophilias* (sexual preferences for different age/maturity categories) as sexual orientations with regard to age (just as sexual orientation is usually considered with regard to gender), arising from my favorite scientific meeting, the Puzzle of Sexual Orientation Conference held every 5 years at the University of Lethbridge (Seto, 2012, 2017b); a critical presentation of the motivation–facilitation model of sexual offending, first described in full in the 2008 book; and a long list of collaborations with students and colleagues since the 2008 edition.

This is not a clinical how-to book, as that involves more direct and intensive training involving clinical case examples, supervision, and workshops. Instead, this is intended to be an academic but accessible book for readers interested in learning more about pedophilia and sexual offending, including psychologists, psychiatrists, social workers, lawyers, law enforcement, criminal justice officials, and students across these disciplines. I have tried to strike the balance so that this book is a good primer for those who are relatively new to the study of pedophilia and sexual offending against children while still being a useful resource for those with a great deal more knowledge and experience. I believe this book is suitable for senior undergraduate, graduate, and professional training programs in the social sciences, health sciences, law, and medicine.

I also broaden the scope of the previous edition by weaving in research on *hebephilia* (a sexual attraction to pubescent children), which has been the subject of research going back decades but has not always been clearly distinguished from *pedophilia* (see Stephens, 2015). For example, many studies of sex offenders against children have combined offenders with victims who are likely to be prepubescent and those who are likely to be pubescent. Also, as discussed in later chapters, significant numbers have offended against victims in both maturity categories. The literature is more difficult to interpret because victim age, rather than sexual maturity status, is usually reported, and age is an imperfect proxy for sexual maturity because of variation in the onset of puberty and the pace of development. I recognize that hebephilia was considered for inclusion in the *Diagnostic and Statistical Manual of Mental Disorders* (fifth ed. [DSM–5]; American Psychiatric Association, 2013) but was not accepted by the American Psychiatric Association; it can still be

diagnosed as Paraphilia Not Otherwise Specified (Blanchard et al., 2009). Because indicators of pedophilia and hebephilia overlap substantially, I sometimes use the term *pedohebephilia* to refer to findings that capture both age preferences.

I want to again be clear here about the important distinction between pedophilia and sexual offending, where some pedophilic individuals have not sexually offended and some sexual offenders do not have pedophilia. These groups are additionally heterogeneous; one myth worth dispelling up-front is the idea that persons with pedophilia or hebephilia are very similar to each other or that persons who have sexually offended against children are very similar to each other. Case examples are given in Exhibit 1.1 in Chapter 1. The one exception, as I discuss in Chapter 3, is gender: Most persons with pedophilia or hebephilia and most sexual offenders against children are male.

In a sense, there are two books here, one about pedophilia, which is sometimes expressed through child pornography use or sexual offenses against children, and a second about sexual offending against children, which is sometimes motivated by pedophilia or hebephilia. As much as possible, I continue to make this distinction clear and acknowledge that what is known about pedophilia still mostly is through clinical and forensic research, although that is slowly changing. I focus on pedophilia, referring to the paraphilia, but recognize that the *DSM-5* is currently in place in Canada and the United States and that the *DSM-5* distinguishes between pedophilia and pedophilic disorder (when the paraphilia is associated with clinically significant distress or impairment; American Psychiatric Association, 2013). I also strive to use person-first language in this book, consistent with the publication guidelines of the American Psychological Association: No one is defined by a single psychological trait or characteristic, no matter how important, and so I try to use terms such as *person with pedophilia* or *pedophilic individuals* rather than *pedophile(s)*.

UPDATES IN THE SECOND EDITION

Defining Pedophilia

I discuss recent, encouraging public and policy discussions about prevention and early intervention. This includes media coverage, recent studies of stigma, and more research on self-identified individuals with pedophilia or hebephilia. We have learned more about individuals with pedophilia who have not offended, but we still know very little about the emergence of pedophilia in youth or about pedophilia in women.

Assessment

Advances in assessment include advances in the use of implicit tasks, drawn from the cognitive science field, to assess pedophilia or hebephilia. Conceptual and empirical advances have also been made in the factors that are relevant to sexual offending against children (e.g., offense-supportive attitudes and beliefs rather than “cognitive distortions,” emotional congruence with children).

Origins of Sexual Offending

I have updated the motivation–facilitation model first described in Seto (2008), explaining more about what is meant by (sexual) motivations, trait and state facilitation factors, and interactions with situational factors. Developmental criminology has also made important contributions regarding life course models, familial factors, and the recognition that much sexual offending is neither specialized nor evidence of paraphilia.

Etiology of Pedophilia

The past decade has seen substantial progress on the neurobiological underpinnings of pedophilia, including neuroimaging work by James Cantor, Jorge Ponseti, and others, as well as evidence of prenatal factors, as reflected in minor physical anomalies, non–right-handedness, and height. There is also some initial evidence regarding the heritability of pedophilia (or, more likely, the predispositions underlying pedophilia), including a behavior genetics study estimating heritability (Alanko, Salo, Mokros, & Santtila, 2013).

Incest

Incest continues to be a major puzzle despite accounting for a large proportion of sexual offenses against children. One could argue that the understanding of incest has not advanced as much as other areas covered here, including clinical assessment, risk assessment, etiology of pedophilia, and origins of sexual offending against children more generally. There is a divide between theoretical and empirical advances in incest research in the evolutionary social sciences and the less obvious progress in clinical and forensic social sciences.

Risk Assessment

Risk assessment has continued to make major advances, with a crowded landscape of empirically validated risk measures, evidence regarding the

advantages of actuarial risk assessment, the validation of dynamic risk measures such as the Stable-2007 (Hanson, Harris, Scott, & Helmus, 2007) and the incorporation of this information into actuarial risk assessment, and the development of risk measures for juveniles who have sexually offended (see Table 7.1 in Chapter 7, this volume) and for different subpopulations, such as child pornography offenders. The perspective on risk assessment is also more sophisticated, including research on risk-related decision making, risk communication, and an awareness that norms evolve over time and the notion that different reference groups are required to understand how well a risk measure is calibrated.

Intervention

This chapter has now been split into two, one summarizing where we are with sex offender treatment and the second, briefer chapter summarizing some exciting developments in the area of prevention, including the emergence of secondary prevention efforts and more attention to the welfare of individuals with pedophilia or hebephilia who are motivated to refrain from offending against children.

The debate about efficacy of sex offender treatment seems to have abated, with a steady stream of reviews and meta-analyses concluding—cautiously—that evidence indicates that treatment can reduce sexual recidivism, especially to the extent it matches what is known to work for treating general juvenile delinquency or adult offending (Borduin, Schaeffer, & Heiblum, 2009; Hanson, Bourgon, Helmus, & Hodgson, 2009). There have been no substantive advances in research on drug therapies, although there are now psychiatry guidelines for the pharmacological treatment of paraphilias (Thibaut, Bradford, et al., 2016; Thibaut, De La Barra, et al., 2010). There are still no recidivism outcome data on programs for women who sexually offend, or for special populations such as online child pornography offenders.

PLAN FOR THIS BOOK

My ambition is to present a scientifically consilient synthesis of available knowledge on pedophilia and sexual offending against children and thereby provide an accurate, up-to-date and useful resource for lawmakers, criminal justice officials, clinicians, and other stakeholders who are concerned about evidence-based policies and practices in dealing with pedophilia and sexual offending against children. By *consilient*, I mean a synthesis that integrates findings from different scientific disciplines that is coherent

across levels of analysis, from the social and cultural evidence of anthropology and other social sciences, to individual psychological factors and biological underpinnings (E. O. Wilson, 1998). I begin by defining pedophilia and hebephilia (Chapter 1) and describing how these sexual interests in children can be assessed, a fundamental starting point for their scientific study (Chapter 2). In Chapter 3, I discuss different ways of studying pedophilia and hebephilia, drawing from different populations: self-identified persons with pedophilia or hebephilia, clinical samples, and criminal justice samples of child pornography and contact sexual offenders with child victims. I discuss in Chapters 4 and 5 the origins of sexual offending against children and the etiology of pedophilia, respectively. I devote a chapter to the special puzzle of incest, a common form of sexual offending against children that surprisingly seldom involves pedophilia. The last three chapters are more focused on practical applications. In Chapter 7, I discuss what is known about how to assess risk of sexually offending, a central question for policies and practices. In Chapter 8, I discuss different intervention approaches, the latest evidence regarding efficacy, and highlight methodological issues in the evaluation of interventions. In Chapter 9, I summarize developments in prevention for at-risk individuals, including self-identified persons with pedophilia concerned about the possibility they may act on their sexual interests in children.