
SEXUAL DEVIATIONS. CONSIDERATIONS REGARDING PEDOPHILIA - MITH AND REALITY

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Abstract

Taking to consideration the antropology venues, the medical disclosures regarding paraphilia, centered on pedophilia, the present paper tries to make an introduction review on the topic under discussion. However, regardless the type of studies made over the time, whether they consisted in questionnaires and forums where people were invited to comment upon this sexual disorder or deviation, to more complex medical research involving MRI scans and DNA analysis, none of them proved their effectiveness, or found a real cause.

Keywords: paraphilia, pedophilia, child abuse, menthal disorder, sexual deviation.

INTRODUCTION

Sexual deviation or paraphilia is primary a general term used for a menthal-sexual disorder, accepted on a large scale as beeing used for a sexual practice not approved by the social norms, an abnormality or a sexual perversion and characterized by getting sexual arousal from an object, strange situation, fantasy, etc.

Among the most known sexual disorders we find *voyeurism, exhibitionism, fetishism, frotteurism, sadism and masochism, pedophilia, telephone scatologia, necrophilia, partialism, coprophilia, klismaphilia and urophilia*, etc.

Some of the sexual deviated behaviours imply the use of psychological or physical violence (pedophilia, sadism-masochism), while others imply the use of abnormal objects or other beings (zoophilia, necrophilia), most of them having even a criminal involvement.

From the psychiatric perspective, in the beginning the paraphilias were classified as

cases of „*psychopathic personality with pathologic sexuality*”.

One of the most studied paraphiliac disorders is the **pedophilia**, as it has the most criminal implications, the most innocent victims and is one of the most stigmatized mental disorders.

The word pedophilia comes from the Greek word *παῖς, παιδός* (*paîs, paidós*), meaning „child”, and *φιλία* (*phília*), „friendly love” or „friendship”.

Medical perspective

Nowadays, pedophilia is a psychiatric disorder in which an adult or older adolescent (at least 5 years older than the victim), experiences a primary or exclusive sexual attraction to prepubescent children. *Infantophilia* is a sub-type of pedophilia; it is used to refer to a sexual preference for children under the age of 5 (especially infants and toddlers), other sub-type being the *hebephilia* (sexual interest for children between 11-14

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years old) although this term is not accepted by the DSM 5 specialists.

It is known that the pedophilia usually emerges before or during puberty and is stable over time.

Although a lot of research has been done over time, none of them has found a real explanation for what causes it or maintains it, many specialists link it to childhood abuse.

Starting from questionnaires and forums where people were invited to comment upon this sexual disorder or deviation, to more complex medical research involving MRI scans and DNA analysis, none of them proved their effectiveness, or found a real cause.

In some recent researches, based on neurological grounds, the specialists have tried to investigate the mechanisms of sexual attraction to children, using the MRI scans but afterwards have reported many contradictory or non-replicated findings. Additionally with the results the specialists related the level of bilateral activation in the above-mentioned regions to be positively correlated with ratings of perceived sexual arousal elicited by Visual perception of explicit pictures with children. The new findings disclosed those regions as possible candidate areas mediating sexual arousal in patients with pedophilic disorder.

Another study revealed aberrant neuroanatomy and lower intelligence as a potential core feature underlying child sexual abuse behavior by pedophiles.

Other recent studies and researches with genetic implication have determined that the hormonal androgen system is closely linked to sexual development and behavior. The study revealed there are alterations of the androgen system on a prenatal and endocrine level, but the people sample examined were sexual child offenders, so the study cannot be specific for pedophilia, because it is a major difference between the two terms. While the child sexual offenders have the mental disorder of pedophilia, is not necessary that one pedophil to sexual abuse a child.

These findings made the connections to the theories of testosterone-linked abnormalities in early brain development in delinquent behavi-

or and suggested possible interactions of testosterone receptor gene methylation and plasma testosterone with environmental factors.

Although at the beginning of every study were found little differences between healthy and paraphilia suffering people (different levels of androgen, estrogen, prolactin, corticotrophin, serotonin, and oxytocin), after running multiple different tests No associations remained significant, resulting that the pedophilia involves a complex of biological mechanism which affects the adult sexual interest in children. Still there were some researchers who stated that a very small effect sizes characterized the findings and several polymorphisms related to different hormonal functioning were initially related to the phenotype.

But even so, a psychiatrist, Paul Fedoroff, of the University of Ottawa, recently published a paper entitled: „Can pedophilia be changed? Yes, It can!“

Fedoroff's perspective is that pedophilia is not a sexual orientation and he characterizes it as a form of „sexual interest“ or something that a person happens to want to have sex with. In his opinion, sexual interest is something we gain through education, experience and observation and, as such, „can change throughout life“ and that every person can educate the same way they educate their eating preferences - however, he does not claim that one can change the own sexual orientation.

Fedoroff study involved analyzing 43 men whose overall arousal was assessed on two separate occasions. At each test session, participants listened to erotic scenarios describing children or adults, while changes in their erectile status were recorded with a penile plethysmography (a penis ring that measures blood flow changes). If at first testing all men indicated a pattern of pedophile arousal at the second test about half of these men (49%) showed a change in the pattern of arousal at subsequent testing: the arousal caused by children decreased, while that aroused by adults increased. The participants were chosen strictly based on the fact that they were tested twice, regardless of whether or not they received any treatment.

This unique study was severely criticised as it has no scientific grounds, moreover being known that a person could imagine a non sexual thing just to be cleared from a pedophile stigmat.

Most clinicians and researchers believe that paraphilic sexual disorder cannot be treated or altered, but that the therapy (both psychotherapeutic and pharmacological) can reduce the person's discomfort with their paraphilia and limit any criminal behavior, if present.

Sociological perspective

It is known that a pedophile most often chooses his careers that put him in direct contact with children, being often a respectable person, a teacher, a coach, etc. However, despite his jovial and friendly character he is or becomes aware that his sexual attitude, once discovered by others, can attract the oppression and anger of the society and a stigma for the rest of his life. To mask their vice, pedophiles often marry, to create the appearance of a normal state.

In the overwhelming majority of cases, pedophiles are recruited among men. Although the onset of pedophilia can be at any age, most pedophiles consulted by physicians are middle-aged men. There is no evidence that pedophiles have changed their preference, from adult partners to children, as they grow older. The preferences seem to be established from the beginning of the sexual life. Pedophilia, however, in rarer and less scandalous cases, also manifests itself among women.

Juridical perspective

Contrary to public perception, child sex offending and pedophilia are not the same.

The Romanian Criminal Code only sanctions acts against minors whom the law considers abusive, but not mere sexual inclinations. As long as a deviant sexual inclination remains only at the level of ideas, feeling, emotion, it does not fall under the influence of the criminal law.

From a statistical point of view only half of all cases of child sex abuses are motivated by pedophilic preference.

However, studies that investigated clinical factors accompanying and contributing to pedophilia so far, mainly relied on pedophiles with a history of child sex abuse.

Results indicated that psychiatric comorbidities, sexual dysfunctions and adverse childhood experiences were more common among pedophiles and child sex offenders than controls. Offenders and non-offenders differed in age, intelligence, educational level and experience of childhood sexual abuse, whereas pedophiles and non-pedophiles mainly differed in sexual characteristics (e.g., additional paraphilias, onset and current level of sexual activity).

According to a recent newspaper article statistical grounds show that even now, when we, as a society that supposed to be made up by intellectual evolved human beings and to protect the children, in Romania, there are judges who solved cases of child sexual abuse that considered the acts to be consensual if the victim did not disclose the fact to a close relative. One decision of the Appeal Court of Alba county stated: *"Based on these testimonies and the fact that the victim did not tell her parents about the alleged abuse, the court concluded that the sexual acts were always initiated by the applicant and rejected the theory that the victim was unable to express the will"*.

Even though the Criminal Code specifies the discernment is excluded until 14 years, these judges blatantly disregarded the legal provisions, judging only by their intimate conviction.

Moreover, even within the criminal code, some inaccuracies are strained, so although it is stipulated that until the age of 14 there is no discernment, these provisions apply only to the perpetrators, not to the victims. In case the victims were also applied, the correct legal classification would have been that of rape, because consent to a sexual act cannot be given if this consent is biologically lacking.

CONCLUSION

The etiology of pedophilia remains largely unknown, but the disorder is thought to be

caused by an undetermined distribution of psychological, sociological, biological and environmental factors. The relationships between biochemical and psychopathological signs suggest a role of biological mechanisms in the organization of abnormal sexual behavior.

The prevention consisting in the prompt intervention of the judicial system and society, by creating support centers for molested children would in the future diminish one of the causes found by the specialists as being responsible for the appearance of pedophilia.

If for ethical reasons it is not possible to intervene at the DNA level, not knowing too many details about this sexual deviance, social prevention could prove its utility on a large scale, especially since the number related to pedophiles who sexually molested children it is directly proportional to the abuses suffered by them in their own childhood, the deviant behavior representing one of the victimization states to which they have evolved at present.

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BIBLIOGRAPHY

1. "Paraphilic Disorders". Diagnostic and Statistical Manual of Mental Disorders (Fifth ed.). Philadelphia, Pennsylvania: American Psychiatric Publishing. 2013. pp. 685–686.
2. American Psychiatric Association, ed. (2013). "Other Specified Paraphilic Disorder; Unspecified Paraphilic Disorder". Diagnostic and Statistical Manual of Mental Disorders (Fifth ed.). American Psychiatric Publishing. p. 705.
3. Jahnke, S., Hoyer, J. (2013). "Stigma against people with pedophilia: A blind spot in stigma research?". *International Journal of Sexual Health*. 25 (3): 169–184. doi:10.1080/19317611.2013.795921;
4. Liddell, H.G.; Scott, Robert (1959). *Intermediate Greek-English Lexicon*. Oxford, England: Oxford At The Clarendon Press. ISBN 978-0-19-910206-8;
5. Gavin H (2013). *Criminological and Forensic Psychology*. SAGE Publications. p. 155. ISBN 978-1118510377. Retrieved July 7, 2018;
6. Greenberg, David M.; Bradford, John; Curry, Susan (1995). "Infantophilia—a new subcategory of pedophilia: a preliminary study". *The Bulletin of the American Academy of Psychiatry and the Law*. 23 (1): 63–71. PMID 7599373;
7. Cutler, Brian L., ed. (2008). "Pedophilia". *Encyclopedia of Psychology and Law*. 2. SAGE Publications, Inc. p. 549. ISBN 978-1-4129-5189-0.
8. Brain responses to pictures of children in men with pedophilic disorder: a functional magnetic resonance imaging study Fadwa Cazala, Véronique Fonteille, Virginie Moulrier, Mélanie Péligrini-Issac, Christiane De Beaurepaire, Marlène Abondo, Magali Bodon-Bruzel, Jean Cano, Florent Cochez, Taoufik Fouli, Catherine Thevenon, Bernard Dauba, Michel Pugeat & Serge Stoléru, www.pubmed.com <https://link.springer.com/article/10.1007%2Fs00406-018-0933-z>
9. Child sexual offenders show prenatal and epigenetic alterations of the androgen system. Kruger THC1, Sinke C2, Kneer J2, Tenbergen G2, Khan AQ2, Burkert A2, Müller-Engling L2, Engler H3, Gerwinn H4, von Wurmb-Schwark N5, Pohl A4, Weiß S6, Amelung T7, Mohnke S8, Massau C9, Kärgel C9, Walter M10,11, Schiltz K12, Beier KM7, Ponseti J4, Schiffer B9, Walter H8, Jahn K2, Frieling H2. <https://www.ncbi.nlm.nih.gov/pubmed/30659171>;
10. Genetic Variants Associated With Male Pedophilic Sexual Interest. Alanko K1, Gunst A2, Mokros A3, Santtila P4. <https://www.ncbi.nlm.nih.gov/pubmed/27114195>;
11. Michael Gelder, Denis Gath, Richard Mayon, *Tratat de psihiatrie OXFORD, ediția a II-a, Asociația Psihiatrilor Liberi din România și Geneva – Initiative on Psychiatry, București-Amsterdam, 1994, p. 458. ;*
12. <https://en.wikipedia.org/wiki/Paraphilia>
13. <http://www.revistadesociologie.ro/pdf-uri/nr.3-4-1999/MONICA%20%20PATRIOARA%20art10.pdf>;
14. <https://www.tolo.ro/2019/01/18/invinovatarea-victimelor-12-judecatori-romani-au-considerat-ca-daca-fetele-minore-violate-nu-au-spus-parintilor-tacerea-reprezinta-dovada-ca-si-au-dat-consimtamentul-pentru-sex/>
15. <https://www.libertatea.ro/stiri/postare-controverstata-a-judecatorului-cristi-danilet-in-contextul-prinderii-politistului-pedofil-explicatiile-magistratului-2100795>

16. <http://theconversation.com/the-causes-of-paedophilia-and-child-sexual-abuse-are-more-complex-than-the-public-believes-94915>
17. https://www.cambridge.org/core/services/aop-cambridge-core/content/view/51AD308E2CEE6EABE06B8930BCCBFDAC/S0924933800015480a.pdf/clinical_characteristics_associated_with_paedophilia_and_child_sex_offending_differentiating_sexual_preference_from_offence_status.pdf
18. <https://www.cambridge.org/core/journals/european-psychiatry/article/clinical-characteristics-associated-with-paedophilia-and-child-sex-offending-differentiating-sexual-preference-from-offence-status/51AD308E2CEE6EABE06B8930BCCBFDAC>
19. <https://www.psychologytoday.com/intl/conditions/pedophilia>
20. https://www.totuldesprename.ro/tu-mama/lumea-in-care-traim/dragi-parinti-atentie-la-minecraft-roblox-sau-fornite-copiii-pot-ajunge-pe-mana-pedofililor?fbclid=IwAR0WGteh5rzTY6BvtHEuT4xzU_PhRA_0MOo8PHIKoENoZF-IZI5BC69avXc
21. <https://www.vice.com/ro/article/mbzj5q/pedofilii-nu-pot-fi-vindecati>