

Exploring perceptions of sexual addiction, preoccupation and compulsivity from the offenders' perspective

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Background

- Sexual preoccupation is the most frequently occurring 'strongly present' risk factor in sex offenders (Hocken, Winder & Grayson 2014¹)
- Many terms are used for those offenders who have 'excessive levels' or 'out of control' sexual thoughts and behaviours
 - Pre occupation, Hyper sexuality, Compulsivity, Impulsivity
- There is a reluctance to define this behaviour as sex addiction or treat with addiction therapies

1. Hocken, K., Winder, B., Grayson, A., & Andrews, M. (2014). An investigation into the relationship between IQ and dynamic risk factors for sexual offending using the Structured Assessment for Risk and Need for Sexual Offenders. *Manuscript in preparation.*

Background

- Is it **accurate** and is it **useful** to consider some sexual offenders as sex addicts?
- How do offenders themselves perceive their thoughts and behaviours?

Background

- Inconsistent definitions in the literature
- DSM V did not include sex addiction or hypersexuality
- Others have defined it based on DSM criteria for addiction e.g. Goodman (1998)²

2. Goodman, A. (1998). *Sexual addiction: An integrated approach*. International Universities Press Inc.

Aims

- What are sexual offenders' perceptions of sexual addiction?
 - What do they think it is?
 - How do they perceive their own experiences/journey in regards to this?
- *Do participants descriptions of their experiences fit with our definitions of addiction?*

Method

➤ Aim

- What are sexual offenders' perceptions of sexual addiction?

➤ Participants

- 9 incarcerated male sexual offenders, mean age 50 (range 31-67)
- Recruited via advertisement within prison
- All but 1 had been through psychological treatments

➤ Data collection

- Focus groups – semi structured
- Analysed using thematic analysis

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Results and discussion

➤ Main themes

1. Addiction as part of the journey

- a) Early self diagnosis: overcoming denial
- b) The ongoing journey

2. Any term will do

- a) Using terms interchangeably
- b) Unless you feel misdiagnosed
- c) Terms are secondary to motivation

3. Public/professional divide

- a) Hide from professionals: seen as dangerous
- b) Seen positively by layperson

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Addiction as part of the journey

➤ Early self diagnosis: overcoming denial

- Common to many was an early self diagnosis as addicted
- Characterised as a positive step in recognition of a problem/overcoming denial

P5: "...I mean for me being, having labelled myself as addicted to pornography helped me realise that I needed to do something about it, but if I didn't want to do anything about it I would never have labelled myself like that..."

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Addiction as part of the journey

➤ The ongoing journey

*P2: “I can remember **I don’t think I hold that view now**, but I can now that you mention a sexual addiction as a term, I can remember having it in my head that I did have a sexual addiction when I was and we’re talking a number of years ago, but I could remember thinking well maybe I have a sexual addiction.”*

*P3: “I got keep the groups and the idea of addiction separate, because I got a lot out of the groups, particularly extended, but when I paired it with the realisation that I was an addict, it made that much more sense and **took me a stage further in my journey**, that’s not to say I hadn’t made any progress because I had, but it enabled me to take that further step put it in to context and then deal with it”*

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Any term will do

- **Using terms interchangeably**
- There was some recognition of differences between pre occupation, compulsivity and addiction
- Some participants described themselves as addicted (or less commonly as obsessed) but even so most discussed themselves and their experiences using various terms interchangeably
- Most perceived they had benefited from treatment (where the term addiction is not used)

Any term will do

➤ Unless you feel misdiagnosed

P4: "... to actually label someone as being pre-occupied. A lot of people in the group did actually go back to their cell and they looked up the word pre-occupied, especially if they weren't that clued up on what it meant, and just to be to have sex on your mind all the time, when that clearly wasn't the case in many instances in the group and to have that label to myself and I know that isn't the case"

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Any term will do

- **Terms are secondary to motivation**
- Most participants felt that in terms of treatment, motivation to change was more important than terminology

*P9: “We’re all sex offenders that is never ever going to change it’s what we do about it er to make sure it doesn’t happen again so erm **to be labelled as a either erm addicted to sex or even obsessed or erm of of sex erm to me it doesn’t it wouldn’t bother me because I’m the attraction I have will always be there for the rest of my life it’s what I put in place and what I do about it erm that makes the difference”***

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Public/professional divide

- **Addiction seen negatively by professionals**
- **Fear to describe oneself as addicted because it might 'go against you'**

*P2: "A lot of it's fear factor on the groups though I've found in terms of you careful what you say because it's going to be recorded, and it's going to be put in a report **it's going to be held against you at your next hearing, your next parole**"*

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Public professional divide

➤ Addiction seen negatively by professionals

*P3: When I saw that notice upstairs by the chapel advertising your research, and it immediately struck a chord with me because I'd long recognised the addictive factor, but **I felt a lone voice in the wilderness**, and suddenly here*

...

R2: Oh ok, are you saying then ... you were thinking of yourself as a sex addict but you didn't think that anyone else thought that way?

P3: I, yeah I've always kept it quiet and dealt with it myself and not talk about it in groups"

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Public professional divide

➤ Addiction seen more positively by layperson

P2: “See how I see it is that erm with me having.... as maybe having a sexual obsession right, well now I can go to my partner and say that I have a sexual obsession and how are we going to deal with this you know

R2: Yeah

P2: You know how can we create you know you know stop all the risk factors and everything else so actually to me that’s a highly positive thing is actually having a diagnosis of whether it’s obsession whether it’s addiction or whatever“

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Results and discussion

- Given the context and background for the study
- No mention of sex addiction being used or seen as an excuse in self or others
- No views that addiction meant abdicating control
- The discussion centred on addiction and so may have skewed who participated and how those participants were thinking about their behaviours

Conclusions

- **Relevance to treatment providers?**
- **Accessibility:** Is addiction an 'in' to relating to the problem of excessive or out of control sexual behaviour. Treatment providers could make use of this? Or at least acknowledge it
 - Prisoners concern about addiction is not being addressed because of their fear to express it
- If Ps engaged successfully with treatment then do we need to change or include any addiction treatments?
 - Unknown because not measured addiction in Ps, or had any comparison of treatment experiences