

Attitudes Toward People with Pedophilia

*Comparing the views of psychology students and
police trainees in Norway*

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Leveret som masteroppgave ved Psykologisk institutt

UNIVERSITETET I OSLO

Mai 2018

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Trykk: Reprosentralen, Universitetet i Oslo

List of Abbreviations

CSA: Child Sex Abuse

PWP: People with Pedophilia

WHO: World Health Organization

ISPCAN: The International Society for the Prevention of Child Abuse and Neglect
Diagnostic and Statistical Manual, 5th edition (DSM-5),

PDD: Prevention Project Dunkelfeld

BEDIT: Berlin Dissexuality Therapy

PPJ: The Berlin Project for Primary Prevention of Child Sexual Abuse by Juveniles

SSRI: Selective Serotonin Reuptake Inhibitors

CBT: Cognitive Behavioral Therapy

MTurk: Amazon Mechanical Turk

ATS: Attitudes towards Sex Offenders

Abstract

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Title: Attitudes toward people with pedophilia

Supervisor: Sidsel Schaller | **Co-supervisor:** Deborah Reas

Background: People with pedophilia (PWP) who never wish to commit sexual crimes against children are becoming a more widely-recognized group. Nevertheless, this population is faced with stigma and prejudice, stemming from both professionals and the public, which may prevent them from seeking adequate help and in turn, increase the risk of offending. To ensure that prevention and treatment programs can be successfully designed and implemented, professionals must adopt a supportive and non-stigmatizing outlook.

Objectives: The first aim was to examine differences in attitudes toward PWP held by psychology students and police trainees. The second aim was to assess if the level of familiarity with perpetrators would be linked to more positive attitudes toward PWP. The third aim was to investigate if the level of familiarity with perpetrators among psychology students would be associated with higher motivation to provide mental health services to PWP. **Methods:** Data were gathered independently using an online survey, and a mixed-method approach was used to gather quantitative and qualitative data. The sample consisted of 122 psychology students and 96 police trainees from Norway. Attitudes were measured using The Stigma Inventory, the Therapy Motivation Scale and a case vignette. **Results:** Findings indicated that police trainees held more stigmatizing attitudes towards PWP in general when compared to psychology students. While familiarity with perpetrators of child sex abuse was more strongly associated with negative attitudes toward PWP, it did increase the motivation by psychology students to work with this population, especially if no crime had been committed. However, results suggested that increased knowledge regarding the offender could also decrease some negative attributions, such as anger. The need for social distance from PWP was reported by most participants. **Conclusion:** This is the first study to assess and compare attitudes toward PWP among psychology students and police trainees in Norway. Stigma towards PWP by professionals, especially in the form of social distance, appears to be of concern. Moreover, both psychology students and police trainees had received limited education and training to work with either victims or perpetrators of sexual crimes, indicating a strong need for improvement in coursework and training.

Sammendrag

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Tittel: Holdninger til personer med pedofili

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Bakgrunn: Personer som har pedofili (PWP), men som ikke ønsker å begå seksuelle overgrep mot barn, har blitt en mer anerkjent gruppe. Likevel blir denne gruppen utsatt for stigmatisering og fordommer fra samfunnet, inkludert fagfolk, som kan hindre dem i å søke hjelp og derigjennom øker sjansen for å begå overgrep mot barn. For å sikre at forebyggingsprogram blir opprettet og implementert på en vellykket måte er det avgjørende at fagpersoner inntar en profesjonelt støttende og fordomsfri holdning. **Mål:** Det første målet var å undersøke om det var forskjeller i holdninger mellom psykologi- og politistudenter til PWP. Det andre målet var å undersøke om kjennskap til gjerningsmannen var knyttet til mer positive holdninger til PWP. Det tredje målet var å undersøke om psykologistudenter som var familiære med gjerningsmannen var mer motiverte til å tilby terapi til PWP. **Metode:** Studien er et selvstendig forskningsprosjekt. Det ble brukt en mixed-method tilnærming. Data ble samlet inn ved bruk av et nettbasert, anonymisert spørreskjema, egnet til å samle både kvantitative og kvalitative data. Deltakere var 122 psykologi studenter og 96 politi studenter i Norge. The Stigma Inventory, the Therapy Motivation Scale, i tillegg til en kasusvignett, ble brukt til å måle holdninger. **Resultater:** Resultater indikerte at politistudenter hadde mer negative holdninger til PWP sammenlignet med psykologistudenter. Nærmere kjennskap til overgriper var generelt mer knyttet til negative holdninger overfor personer med pedofili. Hos psykologistudenter med en nærmere kjennskap til overgriper var det i tillegg knyttet en motivasjon til å tilby terapi til denne gruppen. Motivasjon var sterkere hvis ikke det hadde skjedd noen forbrytelse. Nesten alle deltakere hadde stort behov for å markere sosial avstand fra personer med pedofili, men resultatene antydte at økt kunnskap om gjerningsmenn kunne redusere negative holdninger, som for eksempel sinne. **Konklusjon:** Dette er den første studien som vurderer holdninger til personer med pedofili blant psykologi- og politistudenter i Norge. Stigmatisering fra fagpersoner overfor personer med pedofili, spesielt i form av sosial avstand, kan være problematisk. I tillegg hadde både psykologi- og politistudenter fått begrenset opplæring i arbeid med både ofre og overgripere, noe som viser et klart behov for bedret kunnskaps- og kompetanseutvikling i utdanningene.

Acknowledgements

First of all, I would like to thank my supervisors, Sidsel Shcaller and Deborah Reas, for their encouragement, invaluable feedback and support. Thank you, Sidsel, for not laughing too hard at my 1st grade Norwegian, for sharing your knowledge and all your input on the thesis. Thank you, Deb for keeping me calm, on track and for all your input on the thesis and statistics. I have learned so much from you both and could not thank you enough.

Special thanks to everyone that helped send out the survey and granted me access to their students as well as to all the participants, I could not have done this without you.

Last but not least, I want to thank my family and friends (especially my children), for putting up with me during this time!

Table of contents

1	Introduction	0
1.1	Background	1
1.1.1	WHO Definition and Prevalence of Child Sexual Abuse	1
1.1.2	Pedophilic Disorder: Definition, Associated Features and Prevalence	3
1.1.3	Non-Offending Pedophiles	5
1.1.4	Prevention Programs aimed at Non-Offenders/People with Pedophilia	5
1.1.5	Treatment of Pedophilic Disorder	7
1.2	Review of the Literature on Public and Professional Attitudes toward Pedophiles	9
1.2.1	Public Attitudes toward Pedophiles	9
1.2.2	Attitudes by Professionals toward Pedophiles	12
1.2.3	Familiarity & Stigma Reduction Efforts	13
1.3	Relevance of the Present Study	14
1.4	Aims and Hypotheses	15
2	Methods	17
2.1	Participants and Procedure	17
2.2	Ethical Considerations	17
2.3	Measurement	17
2.4	Background Information	18
2.5	Self-report Questionnaires	18
2.5.1	The Stigma Inventory	18
2.5.2	Therapy Motivation Scale	19
2.5.3	The Case Vignette	19
2.6	Statistical Analysis	20
2.7	Qualitative Analysis	20
3	Results	22
3.1	Descriptive Statistics	22

3.2	Research Question 1: Do psychology students hold more positive attitudes toward PWP than police trainees?	24
3.3	Research Question 2: Does familiarity with perpetrators of sex abuse increase positive attitudes toward people with pedophilia?.....	26
3.4	Research Question 3: Does familiarity with perpetrators of sex abuse among psychology students increase their motivation to work with people with pedophilia?27	
3.5	Findings: The Case Vignette	29
4	Discussion.....	32
4.1	Strengths and Limitations	35
4.2	Future Research	36
5	Conclusion	37
	References	39
	Appendices.....	47
	Appendix A: The Stigma Inventory	47
	Appendix B: The Therapy Motivation Scale.....	48
	Appendix C: The Case Vignette	48

Tables and figures

Table 1.	Description of the sample.....	22
Table 2.	Proportion who reported familiarity, experience and training with perpetrators and victims of child sex abuse.	24
Table 3.	Descriptive analysis of The Stigma Inventory with t-test for group differences.	26
Table 4.	Comparison of attitudes between those with and without familiarity with perpetrators of CSA.	27
Table 5.	Motivation to provide therapy to PWP based on familiarity with perpetrators among psychology students.	29
Table 6.	Most frequently used words to describe “Jon“ and feeling towards him.....	30

1 Introduction

Over the past few decades, the public discussion regarding sexual crimes has altered, becoming more open and transparent. As a result, it has become clear that sexual abuse is a widespread problem in all communities. Despite this growing awareness, as well as increased availability of resources and greater channels of communication aimed at both perpetrators and victims, a high number of sexual offences remain untold and unreported. Individuals that commit sexual crimes are highly stigmatized by society-at-large, the nature of which is influenced by a variety of factors, such as the severity of the crime as well as perceived responsibility. Perpetrators of sexual crimes against children are typically viewed more negatively compared to other sexual offenders (Jahnke, Philipp, & Hoyer, 2015). Not much is known regarding the offending risk of people with a sexual interest in children, or “pedophiles,” as individuals can have a dominant sexual interest in children but wish never to commit any sex crimes (Stadtland et al., 2005), and importantly, not all sex crimes against children are committed by pedophiles (Schaefer et al., 2010). Even so, the term *pedophile* evokes the image of a monster, a predator child sex offender. Pedophilic disorder has become one of the most stigmatized psychiatric disorders, as evidenced by a desire for increased social distance, i.e. societal rejection of pedophiles across various levels of personal contact (Jahnke, Imhoff, & Hoyer, 2015; Jahnke, Philipp, & Hoyer, 2015). This can lead to social isolation and shame, making people with pedophilia (PWP) more likely to abstain from seeking help and thus, increasing the risk of offending or re-offending. Many have hypothesized that less stigmatizing attitudes by professionals, such as law enforcement officers and mental healthcare workers, could reduce risk of committing or re-committing an offense, and improve outcomes for people with pedophilia, as well for as society-at-large (Kjelsberg & Loos, 2008; Marshall & Marshall, 2011).

The purpose of this study was to explore attitudes toward people with pedophilia (PWP) who have never committed a sexual offence among police and psychology students. These two professional groups were selected, as they are likely to come in contact with pedophiles in future work settings. Below, relevant definitions and prevalence estimates for child sex abuse and pedophilic disorder will be provided, followed by a brief overview of studies on the prevention and treatment of pedophilic disorder. Then, a review of existing studies on attitudes toward pedophiles and sexual offenders will be reviewed to contextualize the study aims.

1.1 Background

1.1.1 WHO Definition and Prevalence of Child Sexual Abuse

In the World Health Organization Consultation on Child Abuse Prevention (p.15) the following definition is formulated for sexual abuse:

Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violate the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. This may include but is not limited to (WHO, 1999):

- The inducement or coercion of a child to engage in any unlawful sexual activity.*
- The exploitative use of child in prostitution or other unlawful sexual practices.*
- The exploitative use of children in pornographic performances and materials*

Child sex abuse (CSA) is a worldwide threat to children, and their families, physical and mental health (Beier et al., 2016). CSA has been identified as a preventable risk factor that significantly contributes to the global burden of disease (WHO, 2009), and has been ranked as the 12th highest preventable risk factor contributing to the U.S. burden of disease (Murray, 2013). In a meta-analysis from 2011, it was revealed that the global prevalence of sexual abuse before the age of 18 years was estimated to be 18% for girls and 7,6% for boys. Data were gathered worldwide and included 331 samples with close to 10 million participants (Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011). These findings are consistent with other studies (Finkelhor, Ormrod, Turner, & Hamby, 2005; Steine et al., 2012). In a representative US survey, consisting of a sample of 2030 children regarding sexual victimization of children between the ages of two and 17, it was estimated that one in 12 children reported having been sexually victimized at least once during a 12-month period (Finkelhor et al., 2005). In a Norwegian study, slightly higher estimates were found compared to the meta-analysis by Stoltenborgh et al. (2011), as it was estimated that 24,3% of women and 12% of men reported having been sexually victimized before the age of 16.

The Norwegian sample consisted of 706 individuals from ages 18 to 80 years old, including 55% women and 45% men (Steine et al., 2012).

Aside from these estimates, however, global statistics relating to child sex abuse are lacking, as few countries have managed to establish adequate data to describe its prevalence, incidence, and cultural context. This could be due to the sensitive nature of the topic as well as legal issues and differing definitions. The International Society for the Prevention of Child Abuse and Neglect (ISPCAN) has published the World Perspective on Child Abuse every two years since 1982, offering valuable data gathered worldwide. In 2017, Dubowitz published aggregated data from 73 countries to provide a current status of issues related to child sexual abuse based on the ISPCAN survey. Data were gathered between September 2015 and February 2016. Participants were professionals specialized in the field of child protection asked about their countries' definition of abuse and neglect, laws, policies and programs meant to address and prevent child abuse. Countries were grouped together according to regions and level of income. The results indicated that different parts of the world differ greatly in their definitions of child abuse, with many countries lacking clear legal definitions (Dubowitz, 2017). This difference was most evident for high income countries compared to middle and low income countries, which did not differ significantly. There was agreement with all countries regarding certain types of CSA, such as abuse by parents or caregivers, while other aspect such as cultural context, e.g. child marriage, female circumcision/ genital mutilation and prostituting a child were less likely to be agreed upon as constituting child sex abuse (Dubowitz, 2017).

It was also evident from the ISPCAN report that treatment and prevention programs and services for child sexual abuse were lacking, and those available needed strengthening in both high- and low-income countries. For instance, only 22% of the countries reported having treatment programs for perpetrators of child sex abuse. Services such as treatment programs and out-of-home care were available for those who had been sexually abused in about 50% of the countries (Dubowitz, 2017). Only half of the countries reported having available prevention strategies, and they were often found to be ineffective at preventing abuse. Advocacy for children's rights and the prosecution of offenders were the most reported prevention strategies, and these were found to be relatively effective. About 75% of countries reported using other strategies, such as professional training, improving and providing mental health and substance abuse services, and viewed them as being somewhat effective. However, these strategies had rarely been thoroughly tested and evaluated. The barriers most commonly identified to successfully preventing child abuse were lack of trained professionals

and limited government recourses, in addition to systematic problems such as a decline in family life and lack of a support system (Dubowitz, 2017).

The demand for prevention programs for child sex abuse is, however, increasing. Prevention strategies are categorized as primary- (i.e. fully preventing CSA from occurring), secondary- (i.e. identifying CSA and stopping it) and tertiary preventions (e.g. minimizing the damage after CSA has occurred and preventing re-offences) (Simeonsson, 1991). Most prevention programs are designed to teach potential victims to report and protect themselves from sex abuse, or how parents and individuals working with children can minimize the risk of CSA and how to recognize signs of CSA. However, these approaches do not address perpetrators and few recognize that perpetrators can be under the age of 18 (Letourneau, Eaton, Bass, Berlin, & Moore, 2014; Letourneau, Schaeffer, Bradshaw, & Feder, 2017). The following section covers the definition and prevalence of pedophilic disorder and related terms, followed by an overview of existing prevention and treatment approaches for pedophilic disorder.

1.1.2 Pedophilic Disorder: Definition, Associated Features and Prevalence

“Pedophilia” is a general term used to describe a paraphilia for which individuals have an intense and persistent sexual interest in children. In this thesis, the term “people with pedophilia” (PWP) will be used as a general and de-stigmatizing term when referring to pedophiles. A “pedophile” refers to individual with pedophilia, regardless of whether they have committed child sexual abuse or meet the full criteria for pedophilic disorder.

“Pedophilic disorder” is a formal diagnosis specified in the Diagnostic and Statistical Manual, 5th edition (DSM-5) (American Psychiatric Association, 2013) and is classified as a paraphilic disorder.

The diagnostic criteria for pedophilic disorder can be applied to both individuals that admit their condition, as well as those unwilling to disclose any sexual attraction to pre-pubescent children. The disorder is characterized by a persistent sexual interest in children who are prepubescent, generally under the age of 13. These interests can be found to be greater than or equal to sexual interest in physically mature, or adult, individuals. To meet the criteria of pedophilic disorder, sexual fantasies, urges or behaviors towards prepubescent children must have been present over a period of at least six months, where the individuals has either acted on these urges or felt psychosocial distress or interpersonal difficulties.

It is also important to distinguish between the terms “pedophilic sexual orientation” versus “pedophilic disorder”. If *no* offences have been committed, and the condition causes *no marked distress or interpersonal difficulty*, then the individual is considered to have a pedophilic sexual orientation but not a pedophilic disorder. To meet the criteria for pedophilic disorder, the individual must be at least five years older than the child or children and have reached the age of 16. The diagnosis must be further specified whether the individual is exclusively attracted to children (*Exclusive type*) or if he/she is sexually attracted to others (*Non-exclusive type*), if sexual attraction applies to males, females or both, and if the urges are limited to incest (American Psychiatric Association, 2013).

The causes of pedophilic disorder are debatable, and proposed factors include an interaction of temperament, genetics, environmental and psychosocial factors (American Psychiatric Association, 2013). Individuals with pedophilia generally have been found to share some commonalities, such as experiencing childhood emotional, physical and sexual abuse themselves, as well as family dysfunction and behavioral problems. These elements can be considered as risk factors for sexual interest in children (Grattagliano et al., 2015; Lee, Jackson, Pattison, & Ward, 2002). Common comorbidities include antisocial personality disorder, alcohol and substance use disorders, obsessive-compulsive disorder, depressive, bipolar, and anxiety disorders as well as other paraphilia disorders. However, these comorbidities may not apply to those who have never committed an offence (American Psychiatric Association, 2013).

Some believe that pedophilia should be considered as a sexual preference that manifests during adolescence and remains stable throughout the lifespan (Beier et al., 2013), and even suggest that it is impossible to prevent sexual impulses towards children from arising (Beier et al., 2013; Seto, 2013). Adult men with pedophilic disorder have stated that they have been aware of their sexual interest towards children since puberty. Pedophilia is typically considered a lifelong condition, while symptoms of pedophilic disorder can increase or decrease over time (American Psychiatric Association, 2013). Extremely little is known regarding the epidemiology of pedophilic disorder. The prevalence of pedophilic disorder in the general population is unknown, but could be as high as 3-5% in the male population, and the statistics regarding women are even more unclear, but are likely lower compared to men (American Psychiatric Association, 2013; Seto, 2009).

1.1.3 Non-Offending Pedophiles

It is important to clarify that not all sex crimes against children are committed by pedophiles. It has been estimated that about 50% of those who sexually abuse children have pedophilic disorder (Schaefer et al., 2010). Individuals can have a dominant sexual interest in children, and therefore labeled as pedophiles or people with pedophilia (PWP), but wish never to commit any sex crimes against children. This group has been termed “non-offending pedophiles” and can be contrasted with “perpetrators” of CSA and child sex offenders, which refers to all individuals that have committed child sex abuse, regardless of if they are pedophiles or have pedophilic disorder or not.

The prevalence of non-offending pedophiles is still unclear. In a self-selected sample consisting of 8718 men, 2,4% reported having sexual fantasies involving children without ever actually having had sexual contact with a child. However only six men of these 2,4% felt they should seek help for their urges (Dombert et al., 2016). Results from a German sample (N= 367) showed that 15,5% men reported sexual fantasies involving children, and of these men, 5% reported distress as a result of these fantasies while 26% found these fantasies to be highly arousing (Ahlers et al., 2011). A study by Mitchell & Galupo (2016) showed that non-offenders and those who had committed a sex offence against a child reported similar levels of arousal and enjoyment when imagining sexual contact with a child. However, non-offenders were less likely to report a desire to engage in sexual contact with a child compared to those who had committed such offences. Although research is still limited, this group of individuals has been receiving increasing attention. Many online support groups have emerged where self-identified pedophiles can seek and share support. This group, therefore, represents an at-risk group whose risk of offending may be potentially modifiable via prevention efforts.

1.1.4 Prevention Programs aimed at Non-Offenders/People with Pedophilia

Prevention project aimed at this group of non-offenders are limited, but have been emerging. Leading examples include the German-based Prevention Project Dunkelfeld (Dunkelfeld meaning “dark field” and refers to all undetected criminal behavior; PDD) and the U.S. based program “Help Wanted” (Cantor & McPhail, 2016). The German prevention program offers preventive treatment to men with pedophilic urges over the age of 18 (Beier et al., 2016). The project was initiated in 2005 and sought participants through media

campaigns (Beier et al., 2009). The program is aimed at both offenders and non-offenders, providing both primary and tertiary prevention. Prevention efforts are offered as both group and individual therapy and can include psychological and pharmacological interventions. The treatment consists of a year-long program based on a multimodal program which takes use of pharmacological, psychological and sexological intervention strategies, coined Berlin Dissexuality Therapy (BEDIT). The program focuses on elements such as motivation for change, coping strategies, mindfulness, self-regulation, social function and empathy for children subjected to sexual abuse (including exploitation materials i.e. porn).

To test feasibility of the prevention, preliminary research focused solely on how to successfully reach participants and if they were genuinely interested in participating in such a program. In the first 18 months 476 individuals expressed interest in participation, 286 completed a phone screening and 204 completed full assessment, including clinical interviews. The 286 that participated in the phone screening had become aware of their sexual preference during early adulthood, on average 22 years old but about 60% had become aware before the age of 20. Approximately 50% feared that they might sexually abuse a child. A total of 241 individuals completed clinical interviews, and of these individuals, 58% were diagnosed as pedophiles (Beier et al., 2009).

The Berlin Project for Primary Prevention of Child Sexual Abuse by Juveniles (PPJ) provides youth between the ages of 12 to 18, with a sexual preference for children, diagnostic and therapeutic help. The therapy is voluntary. The project aims to prevent CSA in all forms. Individuals and their legal guardians are reached through media campaigns encouraging them to seek help anonymously. The project was launched in 2014. PPJ provides individual and family therapy using an adapted version of Berlin Dissexuality Therapy (BEDIT) designed for Prevention Project Dunkelfeld. The goals of the family therapy are to increase functionality within the family, encouraging family members to show support, prevent social isolation and encourage responsibility for actions. Juvenile therapy focuses on acceptance and one's self-concept, encouraging behavioral control and lastly to identify risk factors. Research on the program consisted of 49 participants, 48 males and 1 female between the ages of nine to 19 years old (mean age=15,2), of these 49 82,5% had showed sexually abusive behavior towards children. However only 27 participants completed the diagnostic assessment, 48% had sexually abused a child, 15% admitted to viewing child abuse images, 18,5% had done both while 18,5% reported no offenses. Most showed sexual interest in the prepubescent body only, and 67% were sexually interested in girls, 15% in boys and 18% in both genders. Therapy was offered to 20 males, and 11 entered therapy. The program was

still ongoing at the time of publishing. The preliminary findings of PPJ suggest that sexual preferences can be assessed during adolescence, and that youth should be viewed as a target group for preventative approaches.

1.1.5 Treatment of Pedophilic Disorder

Pedophilia is not considered curable, however several treatment options are available for those who want to control and withhold their attraction. These treatments include psychotherapy, pharmacological, surgical castration, and help telephone lines aimed towards self-identified pedophiles (Stone, Winslade, & Klugman, 2000). Some of these treatments are often made mandatory after a sexual offence has occurred. With surgical castration, testes are removed to lower the produce of certain hormones (e.g. testosterone), thus lowering sexual drive. However, sex hormones are still produced, and many individuals are able to live full sex lives after castration. Severe side effects are associated with this procedure, both physical and mental such as depression, suicidal tendencies, metabolism changes, loss of protein and calcium content of bones (Stone et al., 2000). Psychotherapy and behavioral treatment include individual and group therapy, cognitive therapy, cognitive behavioral therapy and behavioral treatments such as covert sensitization and hypnosis. Other approaches include relapse prevention, meant to increase self-control by teaching individuals how to identify triggers and adapting coping mechanisms to keep from offending or re-offending (Stone et al., 2000). Pharmacological treatment includes hormones, SSRI and Anti-androgens intended to reduce sexual drive and in turn deviant sexual behavior. Side effects vary between medication (Stone et al., 2000). Not all treatments are suitable and no specific form of treatment has not been consistently found to be more effective than others (Stone et al., 2000). Without any help or treatment, child sex offenders are more likely to continue violating the basic human rights of children (Beier et al., 2016; Jahnke, Philipp, et al., 2015; Marshall & Marshall, 2011).

Little treatment outcome evidence exists, yet subsequent research from the German Dunkelfeld program that compared those who had committed CSA offenses (but were undetected by the legal system, known as Dunkelfeld perpetrators) versus non-offending pedophiles, found that the Dunkelfeld perpetrators had 3.2 victims on average, and were more likely to fear sexually abusing children compared to non-offending pedophiles. However, non-offending pedophiles were more likely to report severe distress (74%) related to their sexual fantasies compared to Dunkelfeld perpetrators (44%) (Schaefer et al., 2010).

On average, both Dunkelfeld perpetrators and potential offenders reported being aware of their sexual preference for children around age 20 years of age. At the time of screening, potential offenders were 18 to 64 years old (mean = 34 yrs) and Dunkelfeld perpetrators were between the ages of 20 to 63 (mean = 37 yrs).

Seen together with results by Schaefer et al., (2010), research suggests that both non-offending pedophiles and Dunkelfeld perpetrators are middle-aged, educated and have a higher social status compared to detected perpetrators of CSA. In a study by Beier et al. (2015), the treatment program of PPD was assessed using non-randomized waiting list control design, with 53 in the treatment group and 22 in the control group receiving no treatment. No changes were noted in the control group in pre- or post-test, while for the treatment group emotional deficits and support of offending decreased, and sexual self-regulation increased post-test. Treatment consisted of weekly three-hour therapy sessions over the course of approximately 50 weeks. Following treatment, participants in the treatment group reported less loneliness and sexual preoccupation, fewer CSA-supportive attitudes and reported higher empathy towards victims and greater coping skills. Those who had committed mixed child sex crimes, both sex abuse and used exploitation material, showed the most improvement, however relapse rates were relatively high, ranging from 20% to 91%. Also, 24% of those who had never used child pornography before reported doing so for the first time during treatment. However, these are encouraging findings suggesting that treatment may be effective in increasing emotional support, self-regulation, and increasing empathy, at least over the short-term.

The idea of rehabilitating sex offenders has gained increasing attention within the field of clinical psychology with the emphasis on creating a supportive client-therapist relationship, regardless of the treatment approach itself, e.g. cognitive-behavioral therapy (CBT), psychotherapy and person-centered approaches (Blow, Sprenkle, & Davis, 2007). In particular, and of relevance to this thesis, positive attitudes toward sex offenders have been linked to the belief that the offender is capable of change and is able to keep from re-offending (Beech & Hamilton-Giachritsis, 2005; Blagden, Winder, & Hames, 2016). Beech & Hamilton-Giachritsis, (2005) found that sex offenders partaking in group therapy were more cohesive if they felt that their therapist was supportive, which in turn was associated with greater treatment effectiveness. A study by Marshall & Marshall (2011) suggested that CBT therapists would benefit from paying less attention to negative aspects and more towards positive strategies, which could include assisting perpetrators with identifying positive self-aspects, setting future positive goals and decreasing the amount of avoidance

tactics. The authors argued it was much more important to introduce perpetrators to their strengths and build self-esteem, rather than focusing on their deficits. In light of findings on the importance of a supportive and positive therapist-client relationship, the literature reviewed below summarizes existing knowledge regarding attitudes and beliefs held by the public-at-large and professionals who work with pedophiles.

1.2 Review of the Literature on Public and Professional Attitudes toward Pedophiles

1.2.1 Public Attitudes toward Pedophiles

The term “attitude” can be defined as an expression based on favorable or unfavorable evaluation on a subject, which can be further divided into three distinct components; *cognition* (e.g. beliefs and stereotypes), *affect* (e.g. emotional responses), and *behavior* (e.g. how people act) (Breckler, 1984). Research has shown that public attitudes toward convicted sexual offenders are overwhelmingly negative, which may be partially due to a variety of myths held towards sex offenders. These myths suggest that all sex offenders are socially-deprived men, that abuse others as a result of childhood maltreatment or that they have too much testosterone. Other misconceptions include the notion that sex offenders have uncontrollable urges to commit sex crimes, cannot be treated, and lie to avoid treatment (Sample & Bray, 2003). One of the most important and widely-held myth is that all sex offenders are the same. However, placing all sex offenders in the same category suggests that all perpetrators can be treated in the same way, and that they all share the same motives and characteristics. Another common belief is that the community will be safer if public notifications of sex offenders are released. Support towards the requirement of publicly listing the names and addresses of known sex offenders has been found to be high in America, for example, as well as for restricting where they can live. About 97% of Americans believe that incarceration is the most appropriate punishment for sexually assaulting children under the age of 17 years. The results were slightly lower when asked about indecent exposure, distribution and possession of child pornography (Mears, Mancini, Gertz, & Bratton, 2008).

Public attitudes are often uninformed and based on emotions resulting in negativity and fear. This hinders the process of former offenders’ ability to re-enter society after having

served their criminal sentence (Willis, Levenson, & Ward, 2010). For example, negative attitudes toward sex offenders attempting to re-enter society have been linked to difficulty obtaining stable living arrangements, finding employment and forming personal relationships (Kitzinger, 2008; Willis et al., 2010). Some have suggested that those who have a higher level of education hold less negative views towards sex offenders compared to those less educated (Harper & Hogue, 2015; Shackley, Weiner, Day, & Willis, 2014). For instance, students tend to express more positive attitudes toward sex offenders compared to the general public, although this may also attribute to younger age (Gakhal & Brown, 2011; Harper, 2012). However, differences in attitudes based on age have been largely inconsistent (Brown, 1999; Craig, 2005) with majority of research reporting no differences (Katz-Schiavone, Levenson, Ackerman, & Jay, 2008; Kjelsberg & Loos, 2008). Some studies have reported differences in attitudes based on gender, although these findings have been inconsistent between studies as well (Ferguson & Ireland, 2006; Willis, Malinen, & Johnston, 2013). Interestingly, studies have found no differences in attitudes between parents and childless individuals (Craun & Theriot, 2009), with the exception of findings from Levenson, Brannon, Fortney, & Baker, (2007), which suggested greater fear among parents compared to childless individuals, as well as showing less interest in locally-based rehabilitation centers.

Attitudes toward sex offenders have also been linked to familiarity with victims and perpetrators, i.e., knowing a victim or perpetrator or not, showing mixed findings on negativity and positivity in attitudes. While familiarity with victims has been found to increase positive attitudes toward perpetrators (Ferguson & Ireland, 2006; Nelson, Herlihy, & Oescher, 2002), most studies have reported no such differences (Katz-Schiavone et al., 2008; Sahlstrom & Jeglic, 2008; Willis et al., 2013). Sahlstrom & Jeglic, (2008) did find more positive views towards perpetrators by those familiar with an offender. Attitudes could be more negative in general, when compared to attitudes toward specific cases that do not reflect the stereotypical image of a sex offender (Harper, Hogue, & Bartels, 2017; King & Roberts, 2017). In a study conducted by King & Roberts (2017), they tried to identify if information given about the perpetrator and the context of the offence could impact attitudes by the public. Scenarios depicting violent offences, male offenders, older offenders and younger victims were judged more negatively, while, for example, scenarios involving a perpetrator and victim who had a previous relationship were perceived less punitively. Other studies reported similar findings, where older perpetrators were judged more negatively (Harper, 2012; Sahlstrom & Jeglic, 2008), as well as male perpetrators versus female (Gakhal & Brown, 2011). Similarly, Rogers, Hirst, & Davies (2011) reported more negative attitudes

when the victim was a child and the offender had not entered a treatment program. Other influencing factors include personal information about the offender, whereas an individual with a “bad reputation” would be judged more negatively compared to an individual described as “a gentleman” (Gakhal & Brown, 2011).

Many in the public overestimate the extent to which pedophilia can be controlled, i.e. that sexual attraction to children is something that individuals can choose, and in turn that pedophilia should not be considered as a mental disorder (Jahnke et al., 2014). In two comparative studies by Jahnke et al. (2014) comparing a large German sample to an English-speaking sample, a large proportion of participants felt that people with pedophilia should be incarcerated despite having committed no crime, i.e., respectively 39% of the German sample versus 49% of the English speaking sample. Furthermore, 14% and 27% felt that PWP would be better off dead. Specifically, in the study of 854 Germans, participants were asked about their attitudes toward people who abuse alcohol versus people with a dominant sexual interest in children using measures which assess controllability (Controllability scale), dangerousness (Dangerousness scale), emotional reactions and social distance (Social Distance scale). Participants were between the ages of 18 to 86 years old, 52% female, 46% had children and thereof 15% had children younger than 14 and most participants had completed high school. In the American sample, 201 English-speaking individuals recruited through a U.S.-based internet marketplace, Amazon Mechanical Turk (MTurk). Participants were between the ages of 18 to 68 years, 43% were female, 22% had children under the age of 14 and about 43% had obtained a Bachelor’s degree. The same measurements were used as in the first study, to assess attitudes toward people with a dominant sexual interest in children (pedophilia), and people with a dominant sexual interest in inflicting physical pain on others (sexual sadism) and people with continuously disregard other people’s rights (antisocial tendencies). The goal of these two studies was to assess the extent of stigma towards PWP compared to alcohol abuse, sexual sadism and antisocialism.

Results indicated that PWP were more likely to be stigmatized than people who abuse alcohol, sexual sadists and people with antisocial tendencies. PWP were perceived as highly dangerous to children and adolescents despite never having committed a crime compared to those who abused alcohol. About 30% also felt that PWP posed as a danger to adults. Participants expressed higher levels of anger, 80% reported feeling angry when thinking of PWP as well as expressing a stronger desire for social distance towards PWP compared to people with antisocial tendencies, even intending to withhold all personal contact, e.g. talking to, living next, etc. Many participants were also under the impression that PWP were in

control over their sexual desires, which is not considered accurate according to empirical data (Hall & Hall, 2007; Seto, 2008). However, considering the differences between the two samples, these findings should be interpreted with caution and cannot be considered to represent attitudes of the general public of Germany nor the USA. To date, little is known about attitudes toward PWP in Norway and it is unclear whether these findings can be generalized to a Norwegian societal context.

1.2.2 Attitudes by Professionals toward Pedophiles

Few studies have investigated professionals' attitudes toward pedophiles, and most have focused on law enforcement and mental healthcare professionals. However, this line of research is important as negative attitudes may limit professionals' willingness to offer prevention and treatment, which may lower risk of offending and increase social and emotional support, self-regulation, and empathy, for instance. Research has suggested that many law enforcement and healthcare professionals view sexual perpetrators more negatively than they view other types of offenders (Craig, 2005; Harnett, 1997). Weekes, Pelletier, & Beaudette (1995) found that correctional officers perceived sex offenders as more aggressive, dangerous, unchangeable, violent and irrational compared to other types of offenders. Hogue (1993) hypothesized that different professional groups of individuals would demonstrate contrasting attitudes toward sex offenders, primarily based on their profession. He found that law enforcement officers held the most negative view towards sex offenders while psychologists held more positive views. Other groups included in the research were probation officers and prison officers. These results suggest that the closer professionals work with sex offenders, the more positive attitude they will develop.

A negative attitude towards sex offenders has been linked to longer sentencing options. In a study by Hogue & Peebles, (1997), 50 professionals completed the Attitudes towards Sex Offenders (ATS) questionnaire and were then asked to make a hypothetical decision about sentencing. All participants had either been victims of sexual assault, worked with sex offenders, or both. Those who held negative attitudes were more likely to choose harsher punishment, such as jail rather than probation. The authors, however, did not report whether there were group differences in sentencing preferences. Using a sample of 264 professionals either working with sexual offenders or victims of sexual crimes, Fortney, Baker, & Levenson, (2009) found that both groups had similar ideas on which methods of treatment were effective in reducing sexual abuse against children. Their opinions differed on

the mental status of sexual perpetrators, where professionals working with victims thought of perpetrators as more mentally unstable and more likely to reoffend compared to those working directly with the offenders. Professionals' willingness to offer child sex offenders treatment such as therapy, could be hindered by stigmatizing views as well as decreasing motivation to work with this group of patients. Some research suggests that familiarity with perpetrators can improve attitudes toward sex offenders, possibly due to exposure, and opportunity to challenge negative attitudes and stereotypes. Below, a brief summary of studies to reduce stigma is provided, which highlights that attitudes toward people with pedophilia can be successfully modified, although much remains unknown regarding the long-term effects of changing attitudes on actual professional behavior.

1.2.3 Familiarity & Stigma Reduction Efforts

Stigma is a negative attribution towards those considered different from the norm, stigma can be cognitive (i.e. stereotypes), emotional (i.e. prejudice) and behavioral (i.e. discrimination) (Rüsch, Angermeyer, & Corrigan, 2005). Those stigmatized often suffer from low self-esteem and reduced quality of life (Link, Struening, Neese-Todd, Asmussen, & Phelan, 2001; Rosenfield, 1997). Stigma prevention programs towards mental illness have proven to be successful, mainly focusing on mental illness in general while few have focused on people with pedophilia specifically (Dalky, 2012). In general, anti-stigma programs focus on protest, education, challenging stereotypes and myths (Corrigan et al., 2001) and establishing contact, which has shown to be most successful. Those familiar with an individual with a mental disorder, including pedophilia, typically report a more positive attitude towards this group (Angermeyer & Dietrich, 2006). When comparing the attitudes of 60 professionals working with sex offenders and 71 school teachers towards sex offenders using the Stereotypes of Sex Offenders Questionnaire, Attitudes Towards Sex Offenders Scale and Knowledge of Child Abuse Questionnaire, experienced professionals had more positive attitudes toward sex offenders and did not endorse negative stereotypes of sex offenders compared to the teachers, who were considered to be inexperienced (Sanghara & Wilson, 2006). This suggests that working with perpetrators can improve attitudes toward sex offenders, possibly because professionals are no longer bound to common myths and stereotypes.

Jahnke et al., (2015) developed a 10-minute online stigma reduction intervention consisting of written educational material and a video displaying an individual with

pedophilia. Attitudes toward PWP were measured pre-test, post-test (directly after the intervention) and as a follow up (less than two months after the intervention) using The Stigma Inventory, and the Therapy Motivation Scale. The intervention proved to be successful in reducing stigmatizing attitudes, negative affective responses and social distance towards child sex perpetrators in a sample of psychotherapist in training (N=68) compared to a control group (N=69). The control group consisted of psychotherapists who received information about violence free parenting. About 37% of the anti-stigma group felt that the program highly improved their knowledge, while 34% reported a moderate improvement and 29% low or no improvement. Furthermore, 72% of participants found the written information to be highly interesting, and 86% found the video highly interesting. Negative emotional reactions, social distance and agreement with stereotypes were significantly reduced with the anti-stigma group post-test. The magnitude of the difference was, however, less during follow-up. Motivation to work with these patients did not improve or differ between groups but was moderately positive towards providing treatment. Close to 20% reported having worked with PWP despite a short professional career, suggesting a sampling bias. The study did not demonstrate actual behavioral change, but these results could indicate that even low-cost interventions could be successful in establishing more positive outlooks towards people with pedophilia. In comparison, Johnson, Hughes, & Ireland (2007) found that police officers held more positive attitudes toward sex offenders compared to the general public. Interestingly, attitudes displayed by the police officers became more negative following an awareness training on sex offenders.

1.3 Relevance of the Present Study

Pedophilia is one of the most stigmatized mental disorders (Feldman & Crandall, 2007). It is likely that many in society do not find the need to justify their negative attitudes toward pedophiles, because the nature of the sexual preference, i.e. a sexual interest in children, is so repulsive that they will not sympathize with the discrimination PWP face. Negative and unwarranted attitudes toward sexual offenders can lead to societal rejection, leading to increased likelihood of re-offending (Bogle, Chumney, Advisor, & Dula, 2006). Thus, it is of great importance that PWP can seek help as early as possible. However, fear of stigma may lead to shame and social isolation of PWP, and decrease the likelihood of seeking professional help, resulting in elevated chances of offending (Jahnke, Imhoff, et al., 2015; Seto, 2013).

Exploring attitudes of individuals that are likely to work with people with pedophilia who have not committed a sex crime, has been much neglected. The importance for effective prevention programs aimed at people with pedophilia are crucial in terms of preventing sex crimes against children. If professionals are negative towards working with people with pedophilia, prevention programs are unlikely to be beneficial. Psychologists, as well as police officers, play an important role in the treatment of child sex offenders, as well as those who have urges but never committed such an offence. Law enforcement officers are often the first to encounter the perpetrator, making first impressions and shaping the initial attitudes the alleged perpetrator faces, as well as influencing how the case and evidence are subsequently presented to others, including health professionals and the public-at-large. Psychologists are often an integral part of the rehabilitation and treatment of child sex offenders and can influence decisions regarding their placement and incarceration. Understanding the attitudes of future police officers and future psychologists is therefore of vital importance. Prior research has largely grouped psychologists and police officers together with other professions, despite the considerable differences in professional training, roles, and education (Hogue, 1993). Overall, few studies of professionals' attitudes toward PWP have been conducted, especially in Norway, and little attention has been paid to understanding attitudes of psychologists and police officers, despite the importance of these professional groups for this population.

1.4 Aims and Hypotheses

The main aim of the present study is to investigate attitudes toward people with pedophilia among police trainees and psychology students using self-report scales and a case vignette assessing stereotypes (controllability and dangerousness), emotional responses (sympathy and anger) and discriminatory intention (social distance). This study will examine whether attitudes toward PWP differ according to professional background and personal characteristics, including the respondent's gender, age, whether they have children, prior experience and familiarity with sex offenders, and sexual abuse victims. Additionally, the level of motivation to provide therapy to PWP among psychology students will be assessed. Qualitative material will be used to shed light on participants' understanding of offending risk and individuals with pedophilic disorder. Based on the literature review, it is hypothesized that:

1. Psychology students will generally hold more positive attitudes toward people with pedophilia compared to police trainees.
2. Professionals who are familiar with perpetrators of CSA will hold more positive views towards people with pedophilia compared to those who are unfamiliar with perpetrators of CSA.
3. Psychology students who are familiar with perpetrators will be more motivated to work with people with pedophilia compared to those who are unfamiliar with perpetrators of CSA.

2 Methods

2.1 Participants and Procedure

The sample was comprised of police trainees at Politihøgskolen in Oslo, and clinical psychology students from the University of Oslo, the University of Bergen and the University of Tromsø who were recruited between October 2017 and January 2018. Students were recruited via mass e-mailings at their respective university as well as via social network websites and student organizations. All police trainees and clinical psychology students over 18 years old who spoke Norwegian were eligible for participation. All data were gathered using Nettskjema, which is an online survey software designed and operated by Universitets senter for informasjonsteknologi (USIT) at the University of Oslo.

A total of 215 individuals answered the survey. The overall gender distribution was 63% female and 37% male. The sample consisted of 93 police trainees (48% female) and 122 clinical psychology students (75% female). Most participants were between the ages of 18-25 (70%). The majority (93%) of participants did not have children.

2.2 Ethical Considerations

All participants were provided with information about the study and its purpose. Along with the informed consent, a trigger warning and contact information of the project supervisors was presented, due to the sensitive nature of the subject. To avoid making participants identifiable, personally-identifiable information was not required, such as age, name of institution and detailed information on their level of education. Participation was voluntary, and no compensation was offered in exchange for participation. All answers were anonymous and untraceable. This survey was approved by the Department of Psychology's Research Ethics Committee at University of Oslo.

2.3 Measurement

The online survey consisted of demographic questions, self-report measures and a case vignette. Each participant was required to answer the survey items with the exception of *the Therapy Motivation Scale*, which was only presented to psychology students, and the open-ended questions, for which responding was optional.

2.4 Background Information

The following sociodemographic information was assessed: gender, age, professional background, having children, and familiarity with victims and/or perpetrators of child sex abuse (“Do you know anyone that has been convicted of child sex abuse?”, “Have you, or anyone you know, been a victim of child sex abuse (under the age of 14)?”, “Have you worked with sex offenders?”, “Have you worked with victims of sex abuse?”, “Have you received training in working with sex offenders?” and “Have you received training in working with victims of sex abuse?”).

2.5 Self-report Questionnaires

2.5.1 The Stigma Inventory

The Stigma Inventory, developed by Jahnke, Imhoff, & Hoyer (2015), is a recently developed self-report measure, consisting of 15 items which are intended to measure the following domains: stereotypes (controllability and dangerousness), affective responses (sympathy and anger) and discriminatory intention (social distance) which are considered the main aspects of stigma against people with pedophilia. The scales are meant to represent the individual’s agreement with the beliefs that pedophilic interest is intentional (controllability), that people with pedophilia are dangerous (dangerousness), as well as affective responses (sympathy and anger) towards PWP, and lastly desired social distance towards PWP. Items are rated on a 7-point Likert scale (0-6), ranging from *do not agree at all* to *completely agree* (see appendix A for items). Higher scores reflect stronger intentionality or dangerousness beliefs, affective responses, and social distance. The scale was developed by Jahnke, Imhoff, & Hoyer (2015). The subscales assessing controllability (i.e. intentionality) and social distance were previously used in a study by Jahnke et al., (2014), and showed high reliability (Cronbach’s $\alpha \geq .82$). The subscale dangerousness has showed low to acceptable reliability in pre-test, post-test and follow up ($\alpha = .70; .66; .61$) (Jahnke et al., 2015). The subscale sympathy and anger consist of only one item. In this current research, the subscales assessing controllability and social distance showed high internal consistency ($\alpha = .93; .79$), respectively, the subscale for dangerousness however showed low internal consistency ($\alpha = .54$). The scale was originally developed in English and then translated into Norwegian and

back-translated into English by the researcher, Karolina Gunnarsdottir, and supervisors, Sidsel Schaller and Deborah Reas.

2.5.2 Therapy Motivation Scale

The Therapy Motivation Scale was developed by Jahnke et. al. (2015) is meant to assess therapists' willingness to provide PWP with therapy. The scale consists of three items (See appendix B). The first item assesses willingness to give treatment to PWP that have *never* committed a sex crime against a child. The second item assesses willingness to treat PWP that *have* committed such an offence. The third item asks if individuals are interested in learning more about possible treatments for PWP. All items are rated on a 7-point Likert scale (0-6), ranging from *do not agree at all* to *completely agree*. The scale has showed high internal consistency through pre-test, post-test and follow-up data ($\alpha = .85, .83, .84$) (Jahnke et al., 2015), in this current research the scale showed high consistency as well ($\alpha = .80$). The scale was originally developed in English and then translated into Norwegian and back-translated by the researcher, Karolina Gunnarsdottir, and supervisors, Sidsel Schaller and Deborah Reas.

2.5.3 The Case Vignette

The case vignette involved a short description of a 31-year old male with pedophilic interest, "Jon," who had not acted on his urges. The vignette described his characteristics, including employment and relationship history, as well as his pedophilic interests (see appendix C). The vignette was written in first person format and based on self-descriptions by self-proclaimed pedophiles, including elements from examples provided by a clinical psychologist, with extensive clinical experience with people with pedophilic interests. A series of questions followed to assess participants' emotional reactions and attitudes toward Jon. First, participants were asked to select five words which best described their feelings toward Jon (*hope, anger, pity, sadness, respect, concern, worry, disgust, sympathy, discomfort, understanding*). Participants were then asked to choose five words to best describe Jon (*lonely, dishonest, confused, nice, self-absorbed, dangerous, self-disciplined, low will-power, honest, manipulative, sensitive, reliable*). Other items assessed whether participants felt Jon should be imprisoned or should receive treatment, and whether Jon would commit sexual crimes in the future. Participants were also asked whether they would live next to Jon, worked with him, or have Jon as a friend.

2.6 Statistical Analysis

Data was analyzed using IBM SPSS Statistics edition 25. Descriptive statistics were used to derive means, standard deviations and frequencies for all descriptive analyses. Data were checked for possible outliers, and homogeneity of variance. Due to low percentage of participants over the age of 26, the remaining age categories were grouped into one category, resulting in two age categories (18 to 25 years old and over the age of 26). All variables regarding familiarity with, experience in working with and whether participants had received any training in working with either perpetrators or victims were computed to estimate overall familiarity variable, for which a positive answer to any of these questions meant perceived *overall familiarity* with perpetrators or victims.

Mean scores were calculated for each subscale of *The Stigma Inventory*, negative items were reversed. The subscale for *controllability* consists of item 1, 2 and 3, the subscale of *dangerousness* consists of items 4, 5, 6 and 7, the subscale of sympathy consists of item 8, the subscale of anger consists of item 9 and lastly the subscale for *social distance* consists of items 10, 11, 12, 13, 14 and 15. Additionally, the mean score was calculated for *the Therapy Motivation Scale*. Internal consistency was assessed by Cronbach's alpha coefficients. For categorical variables, a chi-square goodness-of-fit test was used to test if proportions between groups were significant. Independent samples t-tests were carried out to investigate group differences in attitudes, and by age, gender, professional category and level of familiarity, in addition to t-test to assess therapy motivation by level of familiarity. Significance values were set at $p < .05$. Effect sizes were calculated by means of Cohen's d , following the guidelines by Cohen (1988), effect sizes > 0.2 were interpreted as small, > 0.5 as medium and > 0.8 as large.

2.7 Qualitative Analysis

Two items, "*Do you think John should be incarcerated?*" and "*Do you think John will commit child sex abuse in the future?*" were followed by open-ended questions for those answering "yes" to further explain their opinion. Themes were derived from their answers using *Thematic analysis (TA)*, a qualitative method meant to identify, analyze and describe specific themes (i.e. patterns) in the data (Braun & Clarke, 2006). Since few theories exist on why, or if, pedophilic individuals should seek treatment or on the likelihood they will commit CSA, thematic analysis can provide a freedom from constricting theories, giving more room

for interpretation for such a complex topic. Themes were developed using an inductive analysis, without having pre-determined themes allowing the analyses to be driven by the data itself.

3 Results

3.1 Descriptive Statistics

Table 1 shows the demographic breakdown of the sample according to professional category. Psychology students (N=122) accounted for 57% of the sample. Overall, the majority of the total participants (N=215) were women (63%). Age was categorized into two groups, 18-25 years old (70%) and over 26 years old (30%). In terms of professional category, gender was more evenly split for the police students (48.4% female), whereas the majority (74.6%) of psychology students were women. Only 7.4% had any children (data not shown).

Table 1. *Description of the sample.*

	Psychology students		Police students		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Gender						
Female	91	74.6	45	48.4	136	63.3
Male	31	25.4	48	51.6	79	36.7
Total					215	100.0
Age						
18-25	81	66.4	69	74.2	150	69.8
26+	41	33.6	24	25.8	65	30.2

In terms of potential gender-or age-related differences in attitudes toward PWP, the results showed no significant gender differences in perceived controllability, dangerousness, social distance, or affective responses between males and females. Similarly, there were no differences in attitudes toward PWP between the younger versus older participants, with the exception of perceived controllability. Specifically, individuals between 18-25 years held stronger beliefs about controllability ($M=1.61$, $SD=1.38$) compared to those over the age of 26 ($M=1.21$, $SD=1.13$), $t(146)=2.22$, $p<.05$. The magnitude of the differences in the means was small (eta squared = .02). Only 6% of participants over the age of 26 believed that a PWP had taken a deliberate decision to have these interest, compared to 13% of those between 18 to 26 years old.

Table 2 shows the level of familiarity with child sex abuse victims and perpetrators, as well as training and work experience with both these populations. As shown, of the

psychology students, 19% knew someone convicted of CSA whereas 44% knew a victim of child sex abuse. For the police students, 23% knew an individual convicted of CSA and 17% knew a victim of child sex abuse. Overall for the total sample, 20% knew a perpetrator of child sex abuse and 33% knew a victim of child sex abuse. In terms of work experience with these populations, only 2.5% of psychology students had experience working with CSA perpetrators, whereas 36.6% of police students had worked with perpetrators. A total of 27% of psychology students had worked with victims, and 43% of police students had prior work experience with abuse victims. In terms of formal training, very few psychologists had received training in working with either perpetrators (0%) or victims (15.6%), whereas a higher percentage of police students had received training with these populations (14% and 29%, respectively).

Table 2. *Proportion who reported familiarity, experience and training with perpetrators and victims of child sex abuse.*

	Psychology students		Police students		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Familiarity with perpetrators						
Yes	23	18.9	21	22.6	44	20.5
No	91	74.6	65	69.9	156	72.6
Not sure	8	6.6	7	7.5	15	7.0
Familiarity with victims						
Yes	54	44.3	16	17.2	70	32.6
No	46	37.7	61	65.6	107	49.8
Not sure	22	18.0	16	17.2	38	17.7
Experience working with perpetrators						
Yes	3	2.5	34	36.6	37	17.2
No	119	97.5	59	63.4	178	82.8
Experience working with victims						
Yes	33	27.0	40	43.0	73	34.0
No	89	73.0	53	57.0	142	66.0
Training in working with perpetrators						
Yes	0	0.0	13	14.0	13	6.0
No	122	100.0	80	86	202	94.0
Training in working with victims						
Yes	19	15.6	27	29.0	46	21.4
No	103	84.4	66	71.0	169	78.6

3.2 Research Question 1: Do psychology students hold more positive attitudes toward PWP than police trainees?

As shown in Table 3, police students expressed *higher* levels of stigma towards PWP on all tested variables, and the majority of comparisons showed large effects according to the recommended guidelines by Cohen (1988). The largest group difference was found for perceived dangerousness ($\eta^2 = .20$), for which police students perceived PWP as

significantly more dangerous compared to psychology students. Furthermore, police students held stronger beliefs on controllability compared to psychology students, the magnitude in the differences in the means for controllability (mean difference $-.629$, 95% CI: $-.993$ to $-.265$) was moderately small ($\eta^2 = .05$). Police students expressed a stronger desire for social distance in comparison to psychology students, the magnitude in the differences in the means for social distance (mean difference $-.737$, 95% CI: -1.005 to $-.470$) was large ($\eta^2 = .16$). Police trainees had significantly lower scores on sympathy than psychology students, and the difference in the means (mean difference 1.27 , 95% CI: $.82$ to 1.72) was large ($\eta^2 = .13$). Lastly, psychology students had lower scores on anger than police trainees, the differences in the means (mean difference $-.73$, 95% CI: -1.18 to $-.27$) was small to moderate ($\eta^2 = .048$). Equal variance was not assumed for all variables, with the exception of sympathy and anger.

Descriptive analysis showed that 80% of psychology students agreed with (rated 4 or higher) the statement that many PWP could control their sexual behavior towards children, compared to 72% of police trainees, 20% of the police trainees felt that sexual interest in children was a deliberate decision versus 4% of psychology students. Police trainees were more likely to agree with the statement that PWP are “perverse sexual predators”, $\chi^2(6) = .432$, $p < .001$, with 41% agreeing with the statement compared to only 11% of psychology students. When asked if participants felt anger and sympathy when thinking of PWP, 60% of the total sample reported feeling angry while 26% reported feeling sympathy towards PWP. While only 3% in both groups felt that PWP would be better off dead, 19% of police trainees compared to 6% of psychology students felt that PWP should be incarcerated despite not having committed CSA. Furthermore, about 20% of psychology students would work with or have PWP as neighbors, while fewer than 5% of police trainees would want the same. About 70% of the total sample would talk to PWP while only 14% would accept them as neighbors and 11% would have them as friends.

Table 3. Descriptive analysis of The Stigma Inventory with t-test for group differences.

	Psychology students			Police students			t
	n	M	SD	n	M	SD	
Controllability	122	1.21	1.12	93	1.84	1.47	-3.41**
Dangerousness	122	1.59	.829	93	2.36	1.004	-5.99**
Social distance	122	2.57	1.10	93	3.31	.885	-5.43**
Affective reason							
Sympathy	122	2.77	1.75	93	1.51	1.515	5.55**
Anger	122	3.39	1.74	93	4.12	1.58	-3.15*

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3 Research Question 2: Does familiarity with perpetrators of sex abuse increase positive attitudes toward people with pedophilia?

Table 4 shows the comparison of attitudes toward perpetrators of CSA between participants who are familiar versus not familiar with someone who is a perpetrator of CSA. As shown in the table, those familiar with a perpetrator of CSA showed *higher* levels of stigma towards PWP on controllability, desire for social distance and sympathy, all comparisons showed small effects according to Cohen’s (1988) guidelines. The largest difference was noted with desired social distance (eta squared= .043), where those familiar with a perpetrator of CSA desired more social distance from PWP compared to those not familiar with perpetrators of CSA (mean difference .47, 95% CI: .175 to .769). Furthermore, those familiar with perpetrators of CSA held stronger beliefs on controllability compared to those not familiar. The magnitude in the differences in the means for controllability (mean difference .43, 95% CI: .037 to .836) was small (eta squared= .021). Those familiar with perpetrators had significantly lower scores on sympathy compared to those not familiar, the difference in the means (mean difference -.69, 95% CI: -1.18 to -.20) was small (eta squared= -.034). Levene’s test indicated unequal variances for controllability whereas equal variance was assumed for desired social distance and sympathy. The difference in the mean scores of perceived dangerousness and anger were not significant.

Of the total sample, 35% were familiar with perpetrators of CSA of which 65% were police trainees. Of those familiar with a perpetrator of CSA, 17% felt that a sexual interest in

children was something one could choose and 40% felt PWP were sexual predators even though 75% agreed that PWP could control their sexual behavior towards children. Those unfamiliar with perpetrators of CSA expressed more sympathy towards PWP compared to those familiar, 28% and 18%, respectively. About 70% of both groups would talk to PWP, nevertheless few would have PWP as friends, 14% unfamiliar and 5% of those familiar with perpetrators of CSA. Only 9% for both groups would accept PWP as neighbors. When asked if they would accept PWP as coworkers, 18% of those familiar would do so, while only 7% of those unfamiliar would do the same. Of those familiar 20% agreed that PWP should be imprisoned compared to 7% of those unfamiliar with perpetrators of CSA, few would rather want them dead, 5% and 2%, respectively.

Table 4. *Comparison of attitudes between those with and without familiarity with perpetrators of CSA.*

	Familiarity with perpetrators			No familiarity with perpetrators			t-test
	<i>n</i>	<i>M</i>	<i>SD</i>	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>
Controllability	76	1.77	1.53	139	1.33	1.17	2.16*
Dangerousness	76	2.08	1.1	139	1.84	.90	1.66
Social distance	76	3.2	.99	139	2.72	1.1	3.13 **
Affective responses							
Anger	76	3.88	1.81	139	3.61	1.65	1.11
Sympathy	76	1.8	1.73	139	2.47	1.74	-2.78**

* $p < .05$, ** $p < .01$, *** $p < .001$

3.4 Research Question 3: Does familiarity with perpetrators of sex abuse among psychology students increase their motivation to work with people with pedophilia?

As seen in Table 5, the overall motivation to work with PWP among psychology students varied according to level of familiarity with a CSA perpetrator. Namely, those who knew a perpetrator were more likely to be motivated to work with PWP. The magnitude in the

difference in the means between those familiar and unfamiliar with perpetrators of CSA (mean difference = -.49, 95% CI: -.8 to -.18) was moderately small (eta squared= .03). When looking at the variables independently, both “*willingness to treat PWP who have not committed a crime*” and “*willingness to attend a vocational course*” showed significant differences between being familiar with a perpetrator and being unfamiliar with a perpetrator of CSA. Those familiar with a perpetrator were more likely to express willingness to treat PWP compared to those who had no familiarity, the difference in the means (mean difference = -.30, 95% CI: -.55 to -.05) was moderately small eta squared= .04). Further those familiar with a perpetrator of CSA showed higher levels of willingness to attend a vocational course than those unfamiliar, the difference in the means (mean difference= -.71, 95% CI: -1.10 to -.32) was moderate (eta squared= .09). About 21% of psychology students were familiar with perpetrators of CSA, all (100%) were willing to provide treatment to an individual that had *not* committed CSA, while 8% would *not* treat an individual that had committed CSA. Participants who were unfamiliar with perpetrators were also less likely to express willingness to treat PWP that had committed CSA, 78% would provide treatment while 96% would treat PWP who had not committed CSA. Of the total sample, close to 90% would attend a vocation course. The Therapy Motivation Scale was only presented to psychology students.

Table 5. *Motivation to provide therapy to PWP based on familiarity with perpetrators among psychology students.*

	Familiarity with perpetrators			No familiarity with perpetrators			
	<i>n</i>	M	SD	<i>n</i>	M	SD	<i>t</i>
Motivation to work with PWP	26	5.62	.54	96	5.14	1.16	3.11***
Willingness to treat PWP who have not committed CSA	26	5.88	.43	96	5.58	.93	2.37**
Willingness to treat PWP that have committed CSA	26	5.19	1.2	96	4.73	1.56	1.63
Willingness to attend a vocational course	26	5.81	.63	96	5.09	1.49	3.63***

* $p < .05$, ** $p < .01$, *** $p < .001$

3.5 Findings: The Case Vignette

As seen in Table 6, the five most frequently chosen words to describe Jon and feelings towards Jon differed slightly between professions. Overall, the words most seldom used to describe *feelings towards* Jon were *anger* (7.4%), *respect* (12.6%) and *disgust* (18.6%), and the words most seldom used to *describe Jon* were *dishonest* (1.4%), *selfish* (9.3%) and *manipulative* (2.8%). When asked if Jon was a bad person, over 90% in both groups did not consider Jon to be a bad person, however when asked if Jon was a good person about 50% of both groups felt that Jon was not a good person. In total, approximately half of the total participants would live next to Jon, including 50% of the psychology students and 36% of police students. Professional differences were more apparent when participants were asked if they would work with Jon. Specifically, 40% of psychology students answered “yes” compared to 24% of police trainees. Most participants, about 70%, would *not* have Jon as a friend, with 69% psychology students and 82% police trainees answering “no”.

Table 6. *Most frequently used words to describe “Jon” and feeling towards him.*

	Psychology		Police		Total	
	students		trainees			
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Feelings towards Jon						
Pity	101	82.8	75	80.6	176	81.9
Sadness	98	80.3	69	74.2	167	77.7
Worry	102	83.6	86	92.5	188	87.4
Discomfort	91	74.6	73	78.5	164	76.3
Compassion	65	53.3	27	29	92	42.8
Describe Jon						
Lonely	118	96.7	93	100.0	211	98.1
Confused	104	85.2	80	86.0	184	85.6
Compassionate	100	82	70	75.3	170	79.1
Honest	93	76.2	59	63.4	152	70.7
Self-disciplined	58	47.5	50	53.8	108	50.2

In terms of treatment and Jon’s future, close to 80% of the sample felt Jon should seek treatment for sex offenders, with 87% of the police trainees and 73% of the psychology students reporting that treatment was desirable. Police trainees considered Jon to be more likely to commit CSA in the future compared to psychology students (16% and 37%, respectively). Participants who believed that Jon *would* commit CSA in the future were presented with an open-ended option of explaining why. A total of 51 individuals provided further explanations. Certain words appeared more often than others, such as “*online support*”, “*easy online access*”, “*escalation*”, “*giving in*”, “*having needs*”, “*isolation*”, “*loneliness*”, “*treatment*” and “*not acknowledging the problem*”, these patterns lead to the six following themes; “online support” (N=4) and “easy access to exploitation material” (N=11), “Jon’s urges will escalate” (N=16), “Jon will eventually give in to his needs” (N=16), “Isolation and loneliness” (N=12) and “lack of treatment” (N=18). Four participants mentioned that online support would lead to a normalization of CSA behavior, for example; “his sexual interest will become more and more normalized online” and “he will come in contact with others ... where abuse is justifiable”. Some viewed his occupation as a contributor to “*easy online access*”, and rightfully viewed exploitation material such as online

pornography as child sex abuse; "... abusing a child online is a great risk because it is more hidden, and also because he works in IT". In several cases, answers contained more than one theme; "he seems lonely, and not willing to disclose his interests to others and his "admiration" will develop further...", "I believe he will eventually explore his attraction... Jon is lonely... he will seek others like-minded, and his threshold will become considerably lower". Lastly, many felt that Jon's urges were or would become uncontrollable; "the desire will exceed rationality, he will give in to the pressure" and "people have desires and it can be extremely difficult to control them forever".

4 Discussion

The main aim of the present study was to examine attitudes toward people with pedophilia among police trainees and psychology students. Exploring professionals' attitudes toward people with pedophilia, in particular those who have not committed a sex crime, has been a much neglected research area. If professionals who are likely to encounter this population, such as law enforcement officers and mental healthcare workers, hold stigmatizing beliefs and negative attitudes toward people with pedophilia, prevention and treatment programs are likely to be underutilized and not beneficial. Thus, this topic is of relevance for efforts to prevent sex crimes against children. Several main findings can be concluded based upon this thesis.

First, as hypothesized, psychology students held more positive views towards PWP compared to police trainees. Police trainees perceived PWP to be in more control over their condition than psychology students. About 20% of police trainees felt that people with pedophilia had taken a deliberate decision to have these interests. This finding is inconsistent with past literature, as according to Seto (2008), people with pedophilia cannot control their attraction towards children. Furthermore, police trainees perceived PWP as more dangerous, with 41% agreeing with the statement that PWP were "perverse sexual predators", as well as expressing a stronger desire for social distance compared to psychology students. In general, most participants expressed a need for social distance from PWP. Although the majority of the total sample would talk to PWP, few wanted PWP as their neighbor or friend. Similar results have been reported by prior studies, which found that individuals would not engage socially with PWP (Kitzinger, 2008; Willis et al., 2010), even in the absence of criminal behavior (Feldman & Crandall, 2007; Jahnke et al., 2014). Lastly, police students expressed higher levels of anger and little sympathy towards PWP in contrast to psychology students. However, descriptive analysis revealed both groups reported high levels of anger when thinking of PWP, 72% police trainees and 50% of psychology students express anger while 15% and 34%, respectively, felt sympathetic towards PWP. This is consistent with the findings of Jahnke et al., (2014) where individuals expressed high levels of anger even though the majority did not perceive pedophilia to be a controllable disorder.

Second, participants who were familiar with perpetrators of CSA held stronger beliefs on controllability, and desired more social distance and expressed less sympathy towards PWP compared to those who were unfamiliar with perpetrators of CSA. Few research studies have addressed this subject, however past evidence has suggested the opposite, i.e., that increased

familiarity with perpetrators increases positive attitudes (Sahlstrom & Jeglic, 2008). Only about a third of the total sample was familiar with perpetrators of CSA, and the vast majority were police trainees, which could suggest that their attitudes of PWP are colored by encounters with perpetrators of CSA. As mentioned above, police students held generally more negative attitudes toward PWP than psychology students, and thus, the findings may reflect the higher proportion of police who were familiar with perpetrators. Although psychology students were more likely to know a victim of abuse, police trainees had more experience working with both victims and perpetrators, as well as having received formal training to work with these populations. Although most of both professions would talk to PWP, strong social distance was desired by both groups, and few would accept them as neighbors, friends or co-workers. This could imply that while professionals could be willing to establish positive relationships in a therapeutic setting; they would simultaneously shy away from close personal relationships.

Additionally, the psychology students who were familiar with a perpetrator of CSA reported higher motivation to work with PWP compared to psychology students without any familiarity. Police trainees were not presented with questions regarding therapy motivation, given these items were most relevant for the psychology group. Among psychology students, familiarity with perpetrators of CSA was also found to increase motivation to work with those who had not committed CSA, as well as attending a vocational course to increase their knowledge on treatment for PWP. Psychology students showed less interest in providing treatment to PWP that had committed CSA, while almost all would treat PWP that had not committed CSA. However, it is worth noting that only a small proportion of the psychology students were familiar with perpetrators (20%) which further supports the idea that attitudes displayed by police trainees may be influenced by encounters with sex offenders. Another key aspect of the study was to explore the effect of demographic aspects, such as age and gender, on attitudes toward pedophilia. Although the effects were small, the results suggested that individuals under the age of 26 believed that PWP had more control over their sexual attraction to children compared to older participants. Consistent with other findings, gender did not influence stigmatizing view towards PWP (Ferguson & Ireland, 2006; Willis et al., 2013). Since most participants were childless, the effects of having children was not taken under consideration.

When participants were presented with a hypothetical case vignette which described an individual with pedophilia named Jon who had never acted upon his urges, they were less likely to express anger. While 60% agreed to feeling angry while thinking of PWP, only 7%

expressed feeling anger towards Jon. Participants were presented with a mixture of negative and positive words to describe Jon and their feeling towards him, the words chosen most often were mainly positive, in fact the five words most often chosen to describe Jon were all positive. Only 24% of the total sample felt sympathy while thinking of PWP, compared to pity (81%), sadness (78%) and compassion (43%) when thinking about Jon, and close to 80% even described Jon himself as compassionate. These findings appear consistent with King & Roberts (2017) who found that providing specific information regarding a perpetrator and the surrounding context can impact attitudes. While attitudes toward Jon seem more positive compared to attitudes toward PWP, however, participants still expressed a desire for social distance from Jon, most would not work with him, have him as their neighbor or as a friend. Though most participants would not describe Jon as a bad person, only half described him as a good person. Many participants feared that Jon would eventually give in to his urges and commit CSA, and most suggested he seek treatment for sex offenders. Those who believed Jon would commit CSA in the future worried that Jon's easy access to online communities supporting CSA could lead him to child pornography, and due to isolation and lack of treatment Jon would continue to push boundaries and eventually be unable to restrain himself from physical contact with children. The qualitative data implied that while some respondents seemed to lack knowledge of pedophilia and myths and misconceptions regarding the condition, others had greater knowledge of the topic.

In sum, and consistent with the first hypothesis, psychology students generally held more positive attitudes toward PWP. Even though the level of familiarity with perpetrators of CSA was not significantly associated with a more positive attitude towards PWP, as was also hypothesized, relatively few participants reported familiarity with a perpetrator of CSA, and the majority of these were police trainees. Of note, participants did express a more positive attitude towards the case of "Jon", suggesting that increased familiarity with a pedophile who has *not* committed a crime, and providing specific information to describe that person and their life, could decrease negative or stigmatizing attitudes. Most concerning of the findings was the desire expressed for social distance from PWP regardless of their intention to commit CSA or not. Even individuals who held less stigmatizing beliefs desired social distance at a personal level. Whereas most participants were willing to talk to PWP, few wanted closer relationships. This could, however, imply that mental health professionals are motivated to provide treatment and establish a positive therapeutic relationship, despite avoiding proximity or communication under other circumstances.

4.1 Strengths and Limitations

This study is novel and adds to a very limited literature investigating attitudes toward people with pedophilia among professionals likely to encounter them in future work settings. To date, this study represents the first which has investigated this topic in Norway. It is considered strength that data was collected anonymously, and furthermore, answers were retrieved in a web-based format to prevent participant to give socially desirable responses. Even so, it must be taken into consideration that psychology students might be more likely to express non-judgmental and empathetic views towards mental disorders to appear more qualified as mental health practitioners. Additionally, while multiple scales exist that are used to measure attitudes toward sex offenders in general (Hogue, n.d.; Shelton, Stone, & Winder, 2013), no scales, to the researchers best knowledge, exist that measure attitudes specifically towards child sex offenders. Moreover, only one instrument has been developed which measures attitudes toward PWP that have not committed a sexual crime against children (Jahnke & Hoyer, 2013; Jahnke et al., 2014). Though The Stigma Inventory is not very well-established, internal consistency in this study was adequate, and the scale provides a new perspective and insight to the emerging population of non-offending pedophiles. Furthermore, this research has no conflict of interest.

Some other limitations and strengths of this research must be taken under consideration. First, The Stigma Inventory has only been used by the developers and lacks psychometric research. Some items vary between research studies, as different versions have been used in the literature (Jahnke et al., 2014, 2015). Second, the present study may lack generalizability to other professions, or students from other educational institutions or countries. All participants were Norwegian students and thereby cannot represent the views of all licensed psychologists and law enforcement officers in Norway. However, this study provides initial knowledge and valuable insight to attitudes in two important student groups which are likely to encounter PWP. Additionally, to ensure anonymity, level of education and additional personal details were not collected to maintain privacy. Most of the background items assessed familiarity, experience and formal training with both victims and perpetrators, which was in line with the study's scope and aims. A richer battery of demographic questions and greater diversity in the sample would have enabled a better assessment of associations between attitudes and participant characteristics. Furthermore, those who are more familiar with sex abuse or otherwise interested in the topic may have been more likely to respond to the survey, increasing the chance of sampling or response bias due to self-selection. Lastly,

before answering the survey, it was not specified clearly that people with pedophilia have *not* necessarily committed an offence, and the use of terms should be expressed more clearly in future research.

4.2 Future Research

Future research could focus on establishing a scale to assess attitudes toward PWP that have not committed an offence, as assessment options are lacking. Moving forward, richer and more psychometrically established instruments are needed to further establish the relationship between level of familiarity and attitudes toward PWP, to inform prevention efforts and increase motivation by therapists to provide treatment. Further, assessing the difference in attitudes toward PWP that either have or have not committed an offence, as an example by using two randomized case vignettes, could help differentiate between stigma associated with child sex abuse and stigma towards pedophilia itself. Some have suggested that therapists who work with pedophilic individuals are more susceptible to face stigma themselves, which could discourage students to seek training and provide treatment to both offenders and non-offenders. Additionally, stigma towards juvenile PWP (those under 18 years of age) is of great importance, as many individuals that are sexually attracted to children have expressed having felt sexual urges, or even acted on them, at an early age (Finkelhor et al., 2005). Lastly, very little research focuses on female sex offenders, and even less on female pedophiles, but there is reason to believe that existing assessment tools, treatment and prevention programs may not apply to them, as they are based on male perpetrators (Chow & Choy, 2002; Cortoni, Sandler, Freeman, & Kozlowski, 2011).

5 Conclusion

The purpose of this research was to assess attitudes toward people with pedophilia who have not committed a crime among psychology students and police trainees, as these professional groups are likely to come in contact with this population in future work settings. The findings from this research suggest that police officers generally hold more stigmatizing attitudes towards people with pedophilia compared to psychology students. Specifically, police trainees more strongly believed that people with pedophilia are more in control of their sexual attraction and pose more danger, while also expressing a greater need for social distance from this population. Additionally, police trainees expressed more anger and appeared less sympathetic towards people with pedophilia than psychology students did, although anger was a common reaction from both groups. The findings regarding level of familiarity were mixed. Generally, findings suggested that greater familiarity with perpetrators of child sex abuse could lead to more negative views on pedophilia, as those who were *unfamiliar* with perpetrators were more sympathetic towards people with pedophilia. Those familiar with PWP were more likely to minimize social contact and believed pedophilic interest to be a choice. Other findings based on a case vignette suggested that personal knowledge of a specific individual with pedophilic interest could increase sympathy and decrease negative reactions such as anger. Even so, participants did not appear to want to form a close personal relationship with PWP. Among psychology students, the findings indicated that greater familiarity with perpetrators of child sex abuse could increase motivation to work in a therapeutic context with people with pedophilia, especially if the PWP has not sexually abused a child.

Very few participants had received formal training in working with either victims (21%) or perpetrators of sex abuse (6%), and of these, a higher proportion had experience working with victims (34%) than perpetrators (17%). Police trainees, in fact, had received more training in working with either victims or perpetrators compared to the psychology students. However, the vast majority of students were willing to attend a vocational course to increase their skills and abilities to work with PWP. This is an encouraging finding, yet nevertheless, it does not change the fact that the vast majority of participants have not received any formal training or education despite being likely to come in close contact with sexual abuse victims or perpetrators. These results express a clear need of increased training and education for both psychology students and police trainees.

The prevention of sex crimes against children should be considered a public health issue, and prevention efforts designed for individuals at risk of offending should be a priority, before a crime is committed. People with pedophilia who have not committed a crime are becoming increasingly more recognized as a distinct population which should not be subjected or put in the same category as actual perpetrators of child sex abuse. These individuals must be able to feel safe seeking help without facing judgement and stigma. To do so, a shift in attitudes from both the public and professionals is needed. It is hoped that the present study adds unique knowledge to an understudied and stigmatized topic, and that future research will continue to investigate professionals' attitudes to ultimately improve the success of efforts to prevent the occurrence or re-occurrence of child sexual abuse.

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Appendices

Appendix A: The Stigma Inventory

B) Instruksjoner:

Nedenfor er 18 utsagn om personer med seksuell interesse for barn. Vennligst velg det tallet fra skalaen som best beskriver hvordan du føler eller hva du tror. 0 står for ”ikke enig i det hele tatt” og 6 står for ”fullstendig enig”. Det er ikke noe riktig eller feil svar, bare din mening. Selv om du ikke har generell kunnskap om problemet, vennligst gi svar på hvert spørsmål likevel.

NB: Vær oppmerksom på at ordet ”dominant” referere til ideen om at disse personene i hovedsak er mest seksuelt interessert i barn, men kan også vise interesse for voksne.

1. En dominerende seksuell interesse for barn er noe man kan velge.
2. Personer med dominerende seksuell interesse for barn har tatt en bevisst beslutning om å ha disse interessene.
3. Folk kan velge om de har en dominerende seksuell interesse for barn eller ikke.
4. Mange mennesker med en dominerende seksuell interesse for barn har aldri seksuell kontakt med et barn.
5. En som har en dominerende seksuell interesse for barn er et perverst, seksuelt rovdyr.
6. En dominerende seksuell interesse for barn vil før eller senere føre til seksuelt misbruk av barn.
7. Personer med dominerende seksuell interesse for barn kan kontrollere sin seksuelle oppførsel mot barn.
8. Når jeg tenker på en person med en dominerende seksuell interesse for barn, føler jeg sympati.
9. Når jeg tenker på en person med en dominerende seksuell interesse for barn føler jeg meg sint.
10. Jeg kunne hatt disse personene som venner.
11. Jeg ville godtatt disse personene i mitt nabolag.
12. Jeg ville akseptert disse personene som kollegaer på jobb.
13. Jeg ville snakket med dem.

14. Disse personene skal være fengslet.
15. Disse personene burde heller være døde.

Appendix B: The Therapy Motivation Scale

1. Jeg er villig til å tilby psykoterapi til personer med en dominerende seksuell interesse for barn som aldri har begått en seksuell forbrytelse.
2. Jeg er villig til å tilby psykoterapi til personer med dominerende seksuell interesse for barn som har begått en seksuell forbrytelse.
3. Jeg vil gjerne delta på yrkesfaglige kurs for å behandle personer med seksuell interesse for barn.

Appendix C: The Case Vignette

C) Instruksjoner:

I denne siste delen presenterer vi en vignett som beskriver en person som har seksuell interesse for barn. Vennligst les vignetten og svar deretter på spørsmålene som følger, basert på ditt inntrykk av personen.

Vignett:

Jeg heter Jon. Jeg er 31 år gammel og bor alene rett utenfor Oslo. Jeg jobber innen IT i et stort selskap. Jeg har noen venner gjennom forskjellige nettsamfunn. Vi møtes noen ganger, men ikke så ofte. Noen ganger besøker jeg foreldrene mine. Jeg liker å samle filmer og musikk, gaming og å svømme. Jeg har alltid følt meg usikker, spesielt rundt jenter. En stund på videregående hadde jeg en kjæreste, men det varte ikke lenge. Jeg har prøvd noen av datingsidene, men jeg vet ikke. Jeg har aldri hatt sex med noen. Jeg ser i hemmelighet på jenter når jeg er i svømmehallen, men de er kanskje 9 eller 10 år. Jeg er liksom mer tiltrukket av dem enn av damer på min alder. Blir kåt. Men jeg har aldri gjort noe med noen. Når jeg ser på porno, ser jeg også på asiatiske jenter. De ser liksom litt yngre ut. Tror jeg er annerledes på den måten, at jeg er født sånn. Derfor holder jeg mest for meg selv, folk ville ikke forstå det.