

# **INTERNET PORNOGRAPHY AND CYBERSEX**

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## DISCLOSURE OF OFF-LABEL USE

All use of prescription medications for the treatment of sexually aggressive, sexual offending, and paraphilic behaviors in the United States is off-label use, meaning it is not approved by the United States Food and Drug Administration for that use.



# CASE PRESENTATION

- 17-year-old high school student
  - Failing grades
  - Socially isolated
  - Seemingly depressed
  - No prior mental health history
  - No legal history
  - No substance abuse history



# NORTH AMERICA INTERNET USERS AND POPULATION STATISTICS

<u>NORTH AMERICA REGION</u>	Population ( 2008 Est. )	% Pop. of World	Internet Users, Latest Data	Penetration (% Population)	Usage % of World	Use Growth ( 2000-2008 )
<u>North America</u>	337,167,248	5.1 %	<b>248,241,969</b>	73.6 %	17.0 %	129.6 %
<u>Rest of the World</u>	6,338,953,040	94.9 %	<b>1,215,390,392</b>	19.2 %	83.0 %	380.6 %
<b>WORLD TOTAL</b>	6,676,120,288	100.0 %	<b>1,463,632,361</b>	21.9 %	100.0 %	305.5 %

Statistics for North America were updated for June 30, 2008. (2) Population is based on data contained in the [US Census Bureau](#) Miniwatts Marketing Group.

- More than 60% of U.S. households have at least one PC
- About 55 % of households have Internet access
- US Census Bureau. Computer and Internet Use in the United States: 2003. Washington, DC: US Department of Commerce, Economics and Statistics Administration, US Census Bureau, 2005 Oct 2



○ Use of Internet for:

- Games
- Gambling
- Messages
- Porn or cybersex
- Etc.



# CYBERSEX ("CYBERING")

- Virtual sex encounter in virtual spaces or cyberspaces
- 2+ persons connect remotely via a computer network
  - exchange of sexually explicit messages
  - role-playing
  - masturbation
- Enhanced by use of webcams - transmission of life videos



- Easy access
- Affordability
- Exploration of a wide range of paraphilic and paraphilic-like fantasies and/or behaviors
- Low risk of apprehension



○ Appearance of:

- Safety
- Intimacy
- Anonymity



# ○ Problematic Internet Usage & Etiology



# PROBLEMS

- Relationship
  - Separation and/or divorce
- Greater risk for STDs.
  - Solicitation of high-risk sex partners
  - Misrepresentation about HIV status
- Predators may seek out underage victims



- Possible explanations for problematic Internet use are:
  - Addictions (similar to addictive disorders)
  - Compulsion
  - Impulse-control problems
  - Mood disorders
  - Anxiety disorders
  - Paraphilic or paraphilia-like disorders



# INTERNET CRIMES INVOLVING YOUTH

- Internet harassment (bullying)
- Online enticement of children for sexual acts
- Unwanted exposure to online pornography
- Sending of unsolicited sexual material to a child.
- Unwanted online sexual solicitations (e.g., conversations).
- Child pornography

(Burgess et al. 2008; National Center for Missing & Exploited Children, 2008).



- **Mitchell et al (2007)** studied **prevalence** and **characteristics** of juveniles who receive requests to make and send sexual pictures of themselves over the Internet.
- Data were gathered as part of the Second Youth Internet Safety Survey in the United States (# 1,500 Internet users, ages 10-17 years).
- 4% reported an online request to send a sexual picture of themselves during year preceding survey (1 youth complied).
- Risk factors for receiving such a request:
  - Being female
  - Being black ethnicity
  - Having a close online relationship
  - Engaging in sexual behavior online
  - Experiencing physical or sexual abuse offline



- Incidents were more likely to occur when youth was:
  - In the presence of friends
  - Communicating with an adult
  - Someone who attempted or made some form of online contact with the youth
  - Someone who had sent a picture to the youth



# CHILD PORNOGRAPHY

- Child pornography = child sexual abuse
  - Abuse & exploitation of children
  - Pornographic images, audio, and video
  - Children under age 18
  
- Definition of what constitutes child pornography vary
  - Legislation/jurisdiction



- In the year after July, 2000, about 1, 713 arrests for internet crimes involving possession of child pornography in US.
  - 83% had images of prepubescent children
  - 80% had images of sexual penetration
  - 21% had images of sexual violence.



# ONLINE SEXUAL PREDATORS

- chat rooms
- instant messages
- email
  - 89% of sexual solicitations were made in either chat rooms or instant messages
  - 1 in 5 youth (ages 10-17 years) has been sexually solicited online (JAMA, 2001).
- Considering that 25% of kids online participate in real time chat and 13 million use instant messaging, the risks of such children, either knowingly or unknowingly, interacting with a predator is alarming.

(Donna Rice Hughes at [protectkids.com](http://protectkids.com).)



# PARAPHILIA

- The term “paraphilia” derives from the Greek: *para-* (beside) + *philos* (love).
- Less pejorative than the term “perversion” (from the Latin “turning around”).
- Freud used the term but it was not in widespread use in the psychiatric literature until the 1950’s.
- DSM-IV-TR lists paraphilias under “Sexual and Gender Identity Disorders.”

# DSM IV-TR

Criteria A: Recurrent intense, sexually arousing fantasies, sexual urges, or behaviors involving:

- 1) nonhuman objects or,
  - 2) the suffering or humiliation of oneself or one's partner or,
  - 3) children or other nonconsenting persons,
- that occur over a period of 6 months.

Criteria B: Must cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

May be exclusive or nonexclusive

(APA, 2000)

# PEDOPHILIA

- A. Over a period of at least 6 months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving sexual activity with a prepubescent child or children (generally age 13 years or younger).
- B. The person has acted on these sexual urges, or the sexual urges or fantasies cause marked distress or interpersonal difficulty.
- C. The person is at least age 16 years and at least 5 years older than the child or children in Criterion A.
  - Do not include an individual in late adolescence involved in an ongoing sexual relationship with a 12- or 13-year-old.
  - Sexually attracted to males, females, or both
  - Limited to incest, exclusive Type (attracted only to children), nonexclusive Type

# COMORBIDITY

- With other paraphilic disorders (“Crossing”)  
“crossover” between paraphilias
- With psychiatric/neurological/ genetic disorders:
  - Mood disorders
  - Anxiety disorders
  - Substance abuse
  - Conduct Disorder/ADHD in adolescents

# PREVALENCE

- 50 named paraphilias in the sexological literature.
- Some appear to be quite rare while others, especially in their non-obligatory form, seem relatively common.
- Most frequently encountered paraphilias:
  - Pedophilia (which typically includes ephebophilia)
  - Voyeurism
  - Exhibitionism.

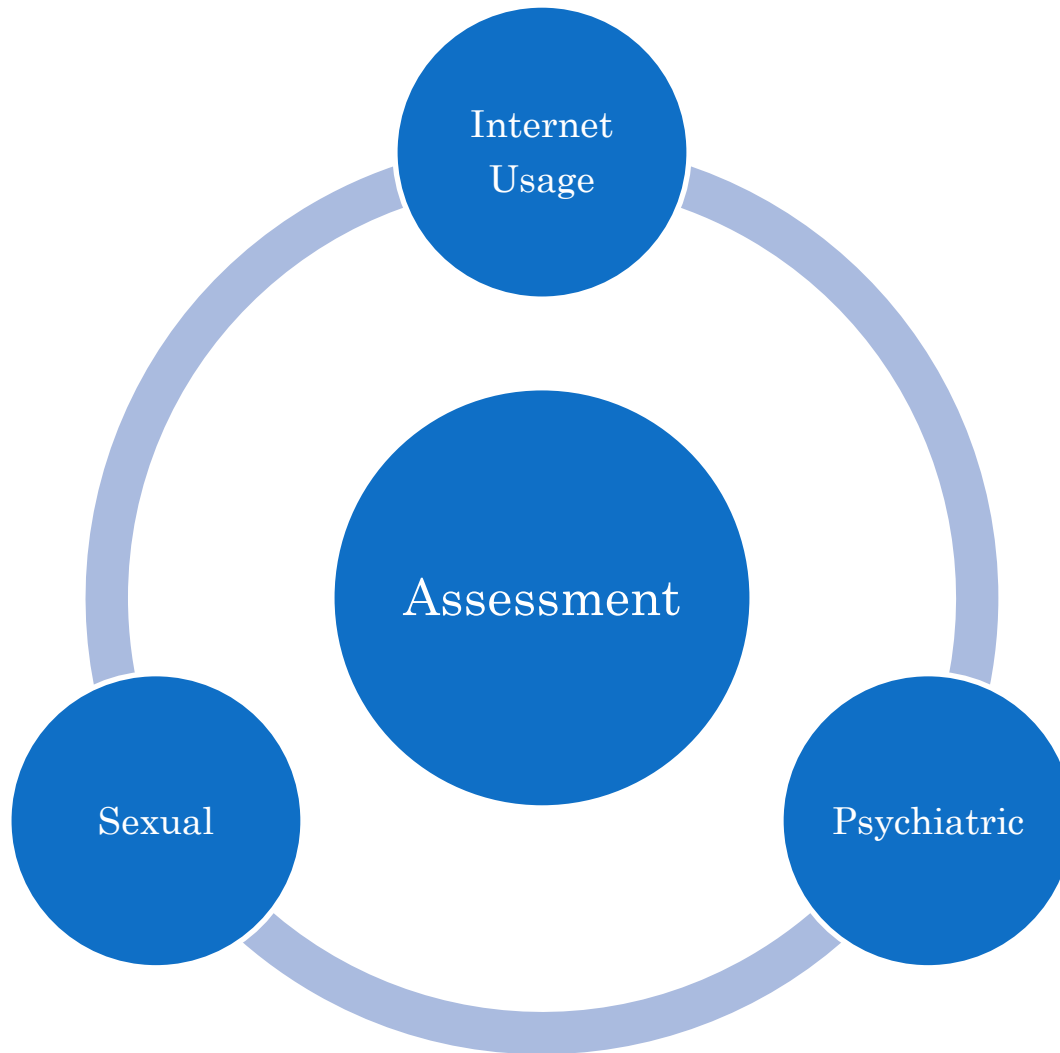
- Many adult sex offenders began offending at a young age (Groth, Longo, & McFadin, 1982).
- Juvenile sex offenders may present with paraphilic proclivities or even paraphilic disorders (e.g., pedophilia).



- Galli et al, 1998 studied prevalence of psychiatric disorders in adolescents males (#22) who had “sexually molested” other children.
  - age 13 to 17 years
  - All subjects had sexually molested  $\geq 1$  child
  - Structured clinical interviews for DSM-III-R Axis I disorders
  - All met lifetime DSM-III-R criteria for pedophilia (w/ the exception of the age requirement)



# ASSESSMENT





Forensic



Clinical



- Interview with patient
  - Denial/minimization
  
- Collection of collateral information
  - Transcripts of chat conversations
  - Significant others
  - Victim statements
  - Prior MH and medical records
  - DYS & police reports
  - Forensic reports
  - Etc.



- Review of sexual fantasies and behaviors (online and offline)
  - Distortions
  - Minimizations
  - Denial
  - Fantasies



# PSYCHOSEXUAL HISTORY

- Non-deviant behaviors/relationships
- Deviant & normophilic online/offline behaviors
  - Duration
  - Frequency/recency
  - Number and variety of behaviors
  - Specific factors that place individual at risk for offending and for becoming victim of sexual exploitation



# TREATMENT

- ❑ Individualized
- ❑ Multimodal
  
- ❑ Recognition and treatment of the underlying mental illness and/or co-morbid condition is important.
  - ❑ Therapy/counseling (individual and/or group)
  - ❑ Medications

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