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***Introduction by Juliet Grayson***



Have you ever had a client who, after a few sessions, revealed that they had been looking at child abuse images? Every year, we hear this scenario from more and more therapists. The committee at The Specialist Treatment Organisation for the Perpetrators and Survivors of Sexual Offences (StopSO) have dedicated this issue of *The Psychotherapist* to the topic of sexual offending. Some therapists may not feel comfortable to work with these issues themselves but want to know where they can refer these clients. Other therapists will see the importance of working with this client group, and will equip themselves with the specialist skills and understanding required.

The scale of the problem is huge. In 2016-7, there were 64,667<sup>i</sup> police-recorded sexual offences against children across the UK. ‘We are dealing, unequivocally, with the tip of the iceberg,’ Chief Constable Simon Bailey, the National Police Chiefs’ Council Lead for Child Protection, told BBC 2’s *Panorama* (When Kids Abuse Kids)<sup>ii</sup>

We are dealing, unequivocally, with the tip of the iceberg. We know that only one in eight reports are actually coming through to the police, so one victim in every eight is having the confidence and the courage to come forward.

By this reckoning, the true scale of child sexual abuse is likely to be around 517,336 sexual offences against UK children every year — or a staggering 9,949 a week, which is nearly one new child being sexually abused every minute!. Please help StopSO to raise awareness of this by tweeting and joining the #1417stopso campaign.

I was talking to Glyn Hudson-Allez, a forensic psychologist, and Ruth Hallam-Jones, a UKCP registered psychosexual therapist. Both had been working with active and potential sex offenders for decades. “None,” was the reply. “If they are an internet offender looking at child abuse images, then they can attend a group programme through the Lucy Faithfull Foundation (LFF), but *only* if they have been arrested, charged or convicted by the police. For those who have fantasies about fondling children but have not yet touched one, there is the LFF StopItNow! helpline. Beyond that there is no therapeutic help at all. For people who have voyeuristic urges, exhibitionists or those who offend against adults, there is absolutely no help until they have been imprisoned. And even if they get convicted, they are often released before attending an SOTP (Sex Offender’s Treatment Programme). Many are released into the community without having had any help to change their behaviour.” They went on, “The roots of sexual offending often lie in childhood trauma and attachment injuries, such as: a parent dying, alcoholic parents, neglect, witnessing violence, being the victim of violence, bullying, sexual abuse etc.”

Soon after this, a mixed group of men and women got together to brainstorm some solutions to the problem of sexual abuse. Many of us knew people who had struggled with sexually inappropriate

behaviour, and had tried to find help to stay law-abiding. We shared horror stories of non-offending paedophiles seeking therapeutic help and not finding it, or worse, being shamed by over-reactive and frightened therapists. In some cases, these clients had vowed never to reach out for help again.

We recognised that one way to reduce child and adult sexual abuse was to ensure that perpetrators who want to stop, know where to access help. We decided to create a UK-wide network of therapists who would be open to working with people who commit sexual offences of all types and at all stages: from having troubling thoughts, to acting out. Thus, in 2011, The Specialist Treatment Organisation for the Prevention of Sexual Offending was born. Recently the trustees: Trudy Hannington, Dana Braithwaite and I decided to expand the service in 2018, so StopSO will not only work with perpetrators of sexual abuse, but also with those people who have been sexually abused. This led to a new name: The Specialist Treatment Organisation for the Perpetrators and Survivors of Sexual Offences. (You can read more about StopSO in the final article).

It turns out that most sex offenders know they are different when they are young. An online anonymous questionnaire<sup>iii</sup> asked, "At what age did you know you had a problem with inappropriate sexual thoughts or behaviour?" Eleven per cent know by the time they are ten years old, and a further forty per cent realise between the ages of eleven and sixteen. By the age of twenty-five years old, a total of seventy-two per cent of sex offenders know they have inappropriate sexual thoughts or behaviour. Yet most sexual offenders do not offend until they are in their early thirties. This gives a window of opportunity for education and therapeutic interventions targeting young adults.

However, we need a culture change, to make it publicly acceptable to acknowledge a sexually inappropriate attraction, and safe enough for people of any age to ask for help. One thing that would be helpful is more care in our use of language. Most of us mistakenly use the term paedophile when talking about a child molester. The definition of a paedophile is someone who has a primary or exclusive sexual interest towards prepubescent children (generally 11 and under). It is about the attraction. There are many non-offending paedophiles who never act illegally. There are also many people who commit *contact* offences with a child, but don't fit the clinical definition of a paedophile, as their primary sexual interest is in adults. You could call them child molesters<sup>iv</sup>.

As the researcher, James Cantor<sup>v</sup>, says, "Paedophilia is a sexual orientation. It is something that we are essentially born with, does not appear to change over time and it's as core to our being as any other sexual orientation is." His research on people in prison shows that paedophiles tend to be up to 15 IQ points lower than average, 2.5cm shorter than the norm - which is double the effect of a mother smoking during pregnancy - and three times more likely to be left handed. These are characteristics that are generally determined during the third or fourth month of pregnancy - suggesting that for some people, paedophilia could be determined at the same time. A possible cause may be maternal stress or malnourishment.<sup>vi</sup>

Whilst some people are born with paedophilia, for others it is brought on by childhood trauma, neglect, or a blow to the head. As they say in Prevention Project Dunkelfeld, an organisation in Germany that offers 100% confidentiality (even if a child is about to be sexually abused) and free therapy to any child molester, internet offender looking at child abuse images, or non-offending paedophile: "You are not responsible for your sexual desire, but you are responsible for your sexual behaviour."

Most therapists know the devastating and often life-long consequences of sexual abuse on all levels: physical, mental, emotional, and spiritual. But given that it costs approximately £65,000 to put someone in prison for a year (including court costs and police time), offering therapy in the community to perpetrators provides a very cost-effective solution. Let's imagine for a moment, that the government funded StopSO's staffing and administrative fees and provided sufficient funds for

subsidised therapy through StopSO. If just *one* person out of every hundred and fifty people that asks StopSO for help, receives effective therapy, and as a result does not commit a crime, staying out of the criminal justice system, then StopSO is cost effective. If just one tenth of the (potential) perpetrators that have asked StopSO for help, would have gone to prison but haven't, then StopSO therapists have saved the UK tax payers almost £6 million! Yet so far StopSO has not been given any government funding. To thrive, StopSO needs £250,000 a year – less than the cost of putting four people into jail for one year. Please consider making a donation.

What the UK has offered up until now in relation to sexual offending has not worked. StopSO offers a new approach. In many instances therapy can make all the difference. By treating the early trauma that most sex offenders seem to have experienced, and working on strategies to help them stay law abiding, we can change their lives. When we change *their* lives, then we change the lives of those who *don't* become victims.

### **The articles in this special issue**

The first article is by Dr Terri Van-Leeson: *Calling all therapists. You could apply your skills to prevent child sexual abuse!* She encourages counsellors and psychotherapists to consider working with this client group, so we can address the issue of child sexual abuse in a preventative way, rather than a reactive way after the damage has been done.

*A letter to therapists* is from two 'virtuous' non-offending paedophiles who have never acted on their attraction to children and are completely law-abiding. They let us know what might stop paedophiles from coming forward to ask for help, and appeal to therapists to think carefully about the consequences of reporting someone, as well as the implications of not reporting.

William Ayot's poem touches on the experience of the perpetrators.

In *Reflections of an ex-paedophile cured by NHS psychoanalytic psychotherapy*, Jack Dawson writes from the perspective of someone cured of paedophilia through therapy. For the last 42 years he has lived with heterosexual attraction, and is now married, with step-grandchildren.

Dr Sarah Goode writes *Your twenty-year old son has just told you he is a paedophile. Now what do you do?* She describes a boy who told his mother that he was a paedophile, and her reaction. Then we hear from two other young paedophiles explaining why they decided not to tell their parents.

In *The Third Spotlight* Jonathan Rallings looks at another area that is rarely acknowledged, that of children who exhibit harmful sexual behavior.

Sara Rowbotham, was the co-ordinator of Rochdale's crisis intervention team, supporting vulnerable young people during the Rochdale child sexual abuse ring. She repeatedly raised concerns about dozens of girls at risk. She gives an insider's view to that experience.

In *Deeper into the darkness: From images to contact offending?* Michael Sheath debunks a myth, explaining that most viewers of child sexual abuse material (CSAM) will *not* go on to molest a child. He offers a model for understanding the causes of CSAM viewers' conduct that integrates sex offender and sex addiction theories.

In *Exploring the Unspeakable* Stuart Avery tells us about his study exploring therapists' perceptions of working with paedophilic clients. He suggests that a hopeful and compassionate therapist can offer a new perspective on paedophilia, creating change and potentially reducing offending.

Dana Braithwaite, co-founder of StopSO, interviews three therapists who work with people who commit sexual offences, giving us an insight into the way they view their clients and the importance they attribute to this work.

Dr Andrew Smith talks about *Shame and sexual offending*, and the importance of helping offenders move from right brain shame to left brain guilt. He discusses the shame that therapists may feel, and the risk of 'vicarious traumatisation'.

The article *Where to train?* informs therapists about a variety of routes for training and CPD.

Donald Findlater in *Preventing child sexual abuse* offers a comprehensive framework for prevention, including helpful models and a variety of practical interventions.

Peter Jenkins explores the current legal responses to sexual offending, including sexting and sextortion in his article, *What's been did and what's been hid*.

An anonymous article, *On loving little girls* brings the voice of a survivor of sexual abuse. She explains why the abuse happened, her response, and her own ambivalence about reporting. She asks all adults to take responsibility for protecting all children and intervening when necessary.

The final articles, *Out of the Darkness*, are from the various charities and organisations in the UK that work with people who commit (or feel at risk of committing) sexual offences.

- Circles of Support and Accountability provides support for serious sex offenders who have come out of prison, to help them remain offence-free in the future.
- The Lucy Faithful Foundation protects children by offering services such as Parents Protect! and the Stop It Now! Helpline. Their online video campaign tackles the viewing of sexual images of children.
- The Marylebone Centre works using a variety of models of treatment for difficult and unwanted sexual behaviours.
- The Portman clinic in London works with issues of sexual violence, sadomasochism, exhibitionism and voyeurism, fetishism, compulsive use of adult and/or child internet pornography, paedophilia and incest.
- The Safer Living Foundation provides free treatment in Nottinghamshire, to individuals who are concerned that they may sexually offend.
- The NSPCC describe their 'Turn the Page' service for 5-18 year-olds who display harmful sexual behaviour.
- Barnados Harmful Sexual Behaviour Services have about 100 child sexual abuse services across the UK to identify and deliver early intervention work for children who demonstrate problematic sexual behaviours.
- StopSO: The Specialist Treatment Organisation for the Perpetrators and Survivors of Sexual Offences, offers therapy across the UK to anyone who feels at risk of committing, or who has committed a sexual offence of any kind, in the community, and their family members. In 2018 StopSO is setting up a service for people who have been the victims of sexual abuse.

## BIOGRAPHY OF JULIET GRAYSON

Juliet Grayson is a co-founder and chair of StopSO. She is a UKCP registered Psychotherapist, and author of *Landscapes of the Heart: The working world of a sex and relationship therapist* published by Jessica Kingsley Publishing. Juliet runs a group for sex offenders in South Wales using the Pesso Boyden System of Psychotherapy. She also offers a 12-day training for therapists called *How to Work With Couples* (accredited by COSRT). [www.therapyandcounselling.co.uk](http://www.therapyandcounselling.co.uk) juliet@stopso.org.uk

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<sup>i</sup> <https://www.nspcc.org.uk/what-we-do/news-opinion/child-sex-offence-recorded-every-8-minutes/>

<sup>ii</sup> Panorama (2017) When kids abuse kids. BBC 2, 2017, October 9 20.30 In T. Rahman (Producer), UK Retrieved from <http://www.bbc.co.uk/programmes/b098tgs1>

<sup>iii</sup> Stopso Statistics <https://www.stopso.org.uk/statistics2/> Retrieved 11<sup>th</sup> October 2017

<sup>iv</sup> Grayson, J. (2016, September 18). He is a paedophile, but that does not make him a child molester. *The Huffington Post*.

[http://www.huffingtonpost.co.uk/juliet-grayson/he-is-a-paedophile-but-th\\_b\\_12046562.html](http://www.huffingtonpost.co.uk/juliet-grayson/he-is-a-paedophile-but-th_b_12046562.html)

<sup>v</sup> James Cantor Retrieved 14 May 2017

[http://www.jamescantor.org/uploads/6/2/9/3/62939641/cantor\\_slides\\_pedophilia\\_and\\_the\\_brain.pdf](http://www.jamescantor.org/uploads/6/2/9/3/62939641/cantor_slides_pedophilia_and_the_brain.pdf)

<sup>vi</sup> <http://www.bbc.com/news/magazine-34858350> Retrieved 14 May 2017