

Profile of a Pedophile

So you've found yourself faced with the difficult task of having a conversation with your children or your students about stranger safety awareness and you aren't sure where to begin. The first hurdle to overcome is your anxiety. While this may not be a pleasant topic, it certainly is a necessary one. The best way to talk to children is to provide as much information in a way that does not promote fear but does build awareness that there are people who have an illness that causes them to be a danger to children. This illness is called pedophilia. It is important to remember that children are abducted for other reasons, such as custody battles, but for the purposes here we will focus on the pedophile. If children ask you questions during your conversation your best approach is to answer only the question they ask rather than try to provide information that they cannot understand or process.

The most common overt aspect of pedophilia is an intense interest in children. There is no typical pedophile. Pedophiles may be young or old, male or female, although the great majority are males. Unfortunately, some pedophiles are professionals who are entrusted with educating or maintaining the health and well-being of young persons, while others are entrusted with children to whom they are related by blood or marriage. According to the **Diagnostic and Statistical Manual of Mental Disorders**, fourth edition text revised, a person can only be diagnosed as a pedophile if they meet the following criteria:

- Over a period of at least six months, the affected person experiences recurrent, intense and sexually arousing fantasies, sexual urges or actual behavior involving sexual activity with a prepubescent child or children ages 13 or younger.
- The fantasies, sexual urges or behaviors cause clinically significant distress or impairment in social, occupational, or other important areas of daily functioning.
- The affected person must be at least age sixteen and be at least five years older than the child or children who are the objects or targets of attention or sexual activity.

Again it is important to remember that this represents only one group of child abductors. A problem with actually diagnosing this disorder is that most individuals who are pedophiles do not seek mental health treatment but are diagnosed after being caught and it has become a criminal issue.



Holmes and Holmes, in their book, **Profiling violent crimes:** An investigative tool, describe two main types of pedophiles, the first being the *situational child molester*. These individuals typically don't have a sexual interest in children but will experiment with children when stress is introduced into their lives. This type of pedophile will not focus exclusively on children but will also prey upon the elderly, sick, or mentally impaired. Within this category there are several sub-categories. The regressed child molester has a situational occurrence that causes them to turn to children. They tend to feel more comfortable with children and will use them as an outlet. This is usually only temporary. The Morally indiscriminate molester is an abuser of all people and children are just included in that grouping. They are sexual experimenters and are willingly to try anything or do anything. This could involve biological children or children by marriage because of the convenience. The inadequate molester usually suffers from some form of mental illness that makes it difficult for them to distinguish between right and wrong. They will typically not engage in sexual activity with children but will experiment with holding, kissing, fondling, or licking.

The second type of pedophile is the *preferential child molester*. These individuals prefer children as providers of personal and sexual gratification. They will seek out children for their needs and wants. Again there are sub-categories. The mysoped child molester and killer is a sadist who has made the connection between sexual gratification and personal violence. They are typically male and typically the victim is a stranger to them. They stalk their victim and may take them by force. Children are usually abducted from playgrounds, schools, shopping centers, and other places children gather. The ultimate goal is to cause harm and eventual death to the victim. The crime is premeditated and ritualized. The fixated child molester has little or no activity with people their own age. They are usually single and uncomfortable around adults. This person is childlike in his lifestyle and behavior. He "loves" children and doesn't want to harm them. Oral-genital sex is the norm.

Parents need to always make sure that their children are supervised, even if they are in their front yard. Adults should be aware of strangers and unusual behavior in the neighborhood. Police should be notified immediately if a child is unaccounted for. Children from the age of 3-5 years old can be victims of abduction, so it is never too early to help your child understand the importance of awareness. The best way to teach this to your children is to model it. Children will learn from example that they need to be vigilant.



Resources

American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. Fourth edition, text revised. Washington DC: American Psychiatric Association, 2000.

R.M. Holmes & S.T. Holmes, *Profiling violent crimes: An investigative tool* (3rd edition) (pp.158-171). Thousand Oaks, CA: Sage, 2002.

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