

SUBMITTED AS BRIEF RESEARCH NOTES

An exploratory study of the wishes and fears of pedophiles – an Eriksonian perspective

Martin D r a p e a u

McGill University (Canada)

Summary

This descriptive exploratory study examined the nature of the arrest in the psychosocial development of generally fixated child abusers using the well-known model suggested by Erikson in 1985. Non-directive interviews with N = 18 pedophiles (N=18) were rated using the Wish & Fear List (Perry, 1996). Results suggest that the subjects had conflicts related to stage I (trust vs. mistrust) and stage II (autonomy vs. shame and doubt). More specifically, the subjects wished or needed to communicate needs and be understood, to be independent and autonomous, and to be near a significant other. They also feared being controlled or dominated, having distressing feelings, and trusting others.

Key words: child abuse, pedophilia, psychosocial development, Erikson, Wish & Fear List

One of the most often cited models of child molestation suggests that pedophiles can be divided into two broad categories. These categories are known as the regressed abuser and the fixated abuser [1–6]. The regressed abuser considers the child as an adult. His/her orientation towards children is not primary, and often results from some form of stress or another. As such, the regressed abuser substitutes a child for adult relationships which have become unfulfilling or conflictual. On the other hand, the fixated abuser is generally considered to have some type of arrested psychosocial development that leads him/her to identify with children and to seek their company. The main sexual object of the fixated abuser is the child, and contacts with age-mates are generally unusual. According to Groth and colleagues [1], the fixated abuser actually views him/herself as a child.

Although fixated abusers are considered to experience some form of arrested psychosocial development, few studies have examined their development in terms of psychosocial stages. One exception can be found in a study by Miner and Dwyer [5] which has shown that those who molest children are less mature than those who rape children in terms of psychosocial development. Using the life stages suggested by Erikson [7], Miner and Dwyer concluded that child abusers struggle with issues around trust vs. mistrust (stage I) and autonomy vs. shame and doubt (stage II). Aside

from the findings provided by this study, little is known about the nature of the arrest or fixation of abusers in terms of psychosocial development.

This exploratory study aims at examining the psychosocial development of child abusers using the well-known model developed by Erikson [7].

Method

Subjects

The sample included 18 extra-familial offenders. All subjects were between the ages of 32 and 45 years ($M = 37$ years; $SD = 5$ years) and had been convicted of child sexual abuse, including sexual exploitation of children, indecent proposal to minors, sexual abuse involving or not complete intercourse (vaginal/anal penetration), distribution of pedophilic pornography, and various sexual contacts with children. All subjects had had repetitive sexual contacts with minors involving full intercourse with vaginal or anal penetration in 49% of the cases.

Five subjects had abused only boys while eight had abused only girls. The remaining five had abused both boys and girls. Most victims were between 2 and 11 years of age at the time of the assault. None of the subjects had ever had significant relationships with age-mates. Although this was not systematically investigated, the subjects can be generally considered as mostly fixated and not regressed abusers.

Written informed consent was obtained from all subjects. The interviews, which lasted approximately one hour and a half, were non-directive [8, 9]. Most subjects talked about their history, their family, their sexual offense, their victims, and a treatment they had undertaken to deal with their sexual deviancy. The general idea of the interview was to influence the subjects as little as possible and to let them associate freely about whatever came to mind. This was done in order to avoid the interviewer having direct influence on the subjects' discourse.

Measure

The Idiographic Conflict Formulation (ICF [10, 11]) is an empirical method which is aimed at describing an individual's unique conflictual dynamic. Its final version, which introduced standard categories, allows a quantitative assessment of any form of interview. The ICF method is divided into 5 levels of interest: 1. the wishes, 2. the fears, 3. the resultants (symptomatic and avoidant outcomes), 4. vulnerability to specific stressors and 5. best level of adaptation to conflict. The first two elements of this method can be regrouped to form a separate method of dynamic assessment: the Wish & Fear List.

The Wish & Fear List is based on the notion that behavior is motivated. These motives can be both biologically and psychologically determined in varying degrees and consist, in their simplest form, of Wishes and Fears [12]. According to Perry [12] (p.15), "a dynamic Wish differs from a simple desire by playing a causal role in a variety of behaviors, fantasies and experiences". A Fear can be defined as "a negative belief, expectation, or aversive experience which the subject wishes to avoid"

(p.16). In accordance to psychoanalytical theory, these motives can be partially or fully conscious or may remain unconscious, and conflicts among these motives are considered to lead to different problems for the individual. When such conflicts are salient or frequent and appear to be irresolvable, they often lead to resultant symptoms or to problematic behavior.

The Wish & Fear List encompasses notions of Erikson's developmental stages [7] and of self-psychology and reintroduces an object-relations perspective via an interest for motives. Such a perspective, although avowedly psychodynamic, has the advantage of being free of strict psychoanalytic jargon and of not violating any basic propositions from the learning theory. The method includes 40 wishes and 40 fears assigned to the eight levels of development suggested by Erikson (see: Table 1). Details about the validity and reliability of the method can be found elsewhere [10, 11, 13, 14, 15].

The manual provided with the system includes clear definitions of each wish and fear as well as rating instructions. This method was used to assess the transcripts of the interviews with the subjects.

Results

Data analysis was exclusively descriptive. More specifically, the proportion of each developmental stage (8 for wishes and 8 for fears; see: Table 1), and of each individual wish (x 40) and individual fear (x 40) was calculated.

The most prevalent stage wish was Wish 2 (Autonomy vs. Shame and Doubt; $M = 0.36$; $SD = 0.11$), followed by Wish stage 1 (Trust vs. Mistrust; $M = 0.32$, $SD = 0.15$), stage 4 (Industry vs. Inferiority; $M = 0.13$, $SD = 0.05$), stage 3 (Initiative vs. Guilt; $M = 0.11$, $SD = 0.08$), stage 5 (Identity vs. Identity confusion; $M = 0.08$, $SD = 0.05$), stage 7 (Generativity vs. Stagnation; $M = 0.007$, $SD = 0.001$), stage 6 (Intimacy vs. Isolation; $M = 0.002$, $SD = 0.006$), and stage 8 (Integrity vs. Despair; $M = 0$, $SD = 0$).

The five most prevalent individual wishes were Wish 4 (to communicate needs; $M = 0.13$, $SD = 0.06$), Wish 9 (be independent and autonomous; $M = 0.09$, $SD = 0.06$), Wish 7 (be near significant other; $M = 0.08$, $SD = 0.09$), Wish 26 (relationships develop self; $M = 0.07$, $SD = 0.02$), and Wish 23 (succeed and achieve goals; $M = 0.07$, $SD = 0.04$).

For the fears, the most prevalent stage was stage 1 (Trust vs. Mistrust; $M = 0.53$, $SD = 0.16$), followed by Fear stage 2 (Autonomy vs. Shame and Doubt; $M = 0.33$, $SD = 0.13$), stage 3 (Initiative vs. Guilt; $M = 0.09$, $SD = 0.10$), stage 5 (Identity vs. Identity confusion; $M = 0.04$, $SD = 0.04$), stage 4 (Industry vs. Inferiority; $M = 0.05$, $SD = 0.02$), stage 6 (Intimacy vs. Isolation; $M = 0.006$, $SD = 0.01$), stage 7 (Generativity vs. Stagnation; $M = 0$, $SD = 0$), and stage 8 (Integrity vs. Despair; $M = 0$, $SD = 0$).

The five most prevalent fears were Fear 15 (being dominated and controlled; $M = 0.17$, $SD = 0.11$), Fear 10 (distressing feelings; $M = 0.13$, $SD = 0.06$), Fear 9 (trusting others; $M = 0.09$, $SD = 0.08$), Fear 13 (loss of self-control; $M = 0.08$, $SD = 0.06$), and Fear 1 (physical harm; $M = 0.06$, $SD = 0.07$)

Discussion

These preliminary findings suggest that fixated child sexual abusers have very basic motives. For both the wishes and the fears, the two most prevalent stages were related to issues around trust versus mistrust (stage I), and autonomy versus shame and doubt (stage II). Stage I (trust vs. mistrust) is a period where the child, if well handled, nurtured and loved, develops feelings of trust, security, and basic optimism. On the other hand, as may be the case in this sample, if the basic physical and emotional needs of the individual are not met, he may develop mistrust toward the world, especially toward interpersonal relationships.

Stage II (autonomy vs. shame and doubt) is normally a time for developing autonomy. At this point, the child struggles with a sense of self-reliance and a sense of self-doubt related to his need to explore, experiment, and test limits. If the parents promote dependency, the child's autonomy is inhibited and his capacity to deal with the world and feel elated with control and pride is hampered, as is the case in this sample.

The struggle of the abusers with such basic issues can also be seen in their most prevalent individual wishes and fears. The three most prevalent wishes of the subjects are related to stages I and II, while the five most prevalent fears are also related to those same two psychosocial stages. More specifically, the subjects first wished or needed to actively communicate their needs and be understood (Wish 4). Second, a clear conflict was seen in the next most prevalent wishes: 1. to be near a significant other (Wish 7), and 2. to be autonomous and independent (Wish 9). This hesitation in being close or distant from significant others can also be seen in the subjects' fears. For instance, their fears included a fear of being dominated and controlled by others (Fear 15), a fear of distressing feelings, i.e. being incapable of tolerating distress and of being soothed (Fear 10), a fear of trusting others (Fear 9), and a fear of being physically hurt or dying (Fear 1). Finally, the subjects also feared losing self-control, which was closely associated to acting-outs involving the sexual abuse of children.

Conclusion

This exploratory study suggests that fixated child abusers have basic core issues or conflicts with trust vs. mistrust, and autonomy vs. shame and doubt. As such, these preliminary results shed some light on the nature of the arrest or fixation of abusers in terms of psychosocial development. They also suggest that the Wish & Fear List is a potentially interesting instrument for assessing child abusers. Its most obvious advantage is in the way it could help clinicians discern and understand conflicting motives underlying patients' complaints and symptoms. The clinician could therefore work with the patient by making him or her aware of salient motives, conflicts and their effects on everyday life. The method could also be useful in a long term follow-up perspective. Because it clearly integrates Erikson's eight developmental stages, the Wish & Fear List could be helpful in tracking developmental maturation of motives as well as in assessing adaptation to existing motives. Finally, the method could potentially help

clinicians and researchers better differentiate types of child abusers. For instance, it could be used to examine and compare the motives of fixated and of regressed child abusers. Clearly, more research is needed on these topics.

References

1. Groth AN, Hobson WF, Gary TS. *The child molester: clinical observations*. J Soc Work Hum Sex. 1982; 1: 129–44.
2. Hudson SM, Ward T, France KG. *The abstinence violation effect in regressed and fixated child molesters*. Annals Sex Res. 1992; 5: 199–213.
3. Johnston FA, Johnston SA. *A cognitive approach to validation of the fixated-regressed typology of child molesters*. J Clin Psychol. 1997; 4: 361–68.
4. Knight RA. *An assessment of the concurrent validity of a child molester typology*. J Interpersonal Violence. 1989; 2: 131–50.
5. Miner MH, Dwyer SM. *The psychosocial development of sex offenders : differences between exhibitionists, child molesters, and incest offenders*. Intern J Offender Ther Comp Criminol. 1997; 1: 36–44.
6. Proulx J, McKibben A, Lusignan R. *Relationships between affective components and sexual behaviors in sexual aggressors*. Sex Abuse. 1996; 4: 279–89.
7. Erikson EH. *The Life Circle Completed: a Review*. New York: WW Norton; 1985.
8. Kandel L. *Réflexions sur l'usage de l'entretien, notamment non directif, et sur les études d'opinion*. Épistémologie Sociologique. 1972; 13: 25–46.
9. Legras D. *Quelques contributions à la méthodologie de l'entretien non-directif d'enquête*. Bulletin du C.E.R.P. 1971; 2:131–41.
10. Perry JC. *Assessing psychodynamic patterns using the idiographic conflict formulation*. Psychother Research. 1994; 3: 239–52.
11. Perry JC. *The Idiographic Conflict Formulation method*. In: Eells, TE, editor. *Handbook of Psychotherapy Case Formulation*. Washington DC: American Psychological Association; 1997. p. 137–65.
12. Perry JC. *The Wish & Fear List. Manual*. Cambridge Hospital, MASS, USA. 1996.
13. Perry JC. *Scientific progress in psychodynamic formulation*. Psychiatry. 1980; 3: 245–49.
14. Perry JC, Luborsky L, Silberschatz G, Popp C. *An examination of three methods of psychodynamic formulation based on the same videotaped interview*. Psychiatry: J Study Interpers. Process. 1989; 3: 302–23.
15. Perry JC, Augusto F, Cooper SH. *Assessing psychodynamic conflicts: reliability of the Idiographic Conflict Formulation*. Psychiatry. 1989; 3: 289–301.

Author's Address:

Martin Drapeau
ECP – McGill University
3700 McTavish
Montreal, Quebec
H3A 1Y2
Canada
tel.: +514-398-4904
fax: +514-398-6968

Table 1

The Wish & Fear List standard categories (Perry, 1996)

WISH	FEAR
Stage I: Trust vs. Mistrust	
1. Survive	1. Physical harm
2. Be protected from harm	2. Others won't tolerate
3. Have needs met	3. Abandonment
4. Communicate needs, elicit needs	4. Being alone
5. Be comforted, soothed	5. Unable to communicate
6. Find others trustworthy	6. Depend ent upon others
7. Be near significant other	7. Disappointment
8. Have others contain me	8. Deprivation
	9. Trusting Others
	10. Distressing feelings
	11. Strange, unfamiliar
Stage II: Autonomy vs. Shame and Doubt	
9. Be independent, autonomy.	12. Fragmented by feelings
10. Privacy respected	13. Loss of self-control
11. Control one's feelings	14. Criticism, punishment
12. Retaliate, get revenge	15. Being dominated, controlled
13. Do whatever one wants	16. Being powerless, helpless
14. Control, dominate others	17. Loss of independence, freedom
15. Be spontaneous, carefree	
16. Be perfect, avoid shame	
Stage III: Initiative vs. Guilt	
17. Assert oneself	18. Not being admired, accepted
18. Relief from guilt feelings	19. Losing in competition
19. Be admired, special	20. Failure to achieve
20. Compete and win	21. Hurting others, guilt
21. Cooperate and be helpful	22. Sexual wishes, acts
22. Fair treatment, reparation	
Stage IV: Industry vs. Inferiority	
23. Succeed, achieve goals	23. Adult responsibilities
24. Gain esteem for actions	24. Being without friends
Stage V: Identity vs. Identity Confusion	
25. Attention from opposite sex	25. Social/gender role failure
26. Relationships develop self	26. Identity Confusion
27. Mentor, role model	27. Aimless, no goals
28. Belong, fit in social group	28. No mentor, guide
29. Attract others, have friends	29. Accepting guidance, advice
30. Meaning, purpose	30. Being unattractive
31. Sexual gratification	

(Table 1 continued...)

Stage VI: Intimacy vs. Isolation	
32. Intimacy, love, be loved	31. Intimacy, closeness
33. Mutual satisfying relation	32. Sexual relationships
	33. Not changing relationship patterns
Stage VII: Generativity vs. Stagnation	
34. To procreate	34. Being uncaring, bad parent
35. Be a good parent	35. Being poor model, provider
36. Be a good mentor, model	36. Lacking creativity, imagination
37. Create, innovate	37. Inability to procreate
38. Cope with moral dilemmas	
Stage VIII: Integrity vs. Despair	
39. Self-assessment and change	38. Social disconnection with age
40. Accept personal limits	39. Selfishness, losing dignity
	40. Loss of hope, faith in ideals

