

THE COMORBIDITY OF PARAPHILIC DISORDERS AND RAPE IN INDIVIDUALS INCARCERATED FOR SEXUAL OFFENCES

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Abstract: *Objectives.* Rape is one of the most traumatic experiences a person can go through. Rape is included in the category of paraphilic disorders, together with numerous other disorders. Moreover, studies show that individuals who commit rape present comorbidities with other paraphilic disorders.

Methods. This study aims to identify the comorbidity of rape in a sample of inmates incarcerated in Romanian prisons for committing rape. Thus, applying the Questionnaire for the Evaluation of Paraphilic Disorders on 105 male inmates, we have identified 60 individuals with high scores in the “rape” subscale. Subsequently, by using chi-squared descriptive analyses, we compared their scores with 19 other subscales.

Results. The results were satisfactory, as significant correlations have been found. Thus, the results of this study contribute to a better understanding of the reasons behind certain sexual offenses as well as to offering a more efficient treatment plan.

Conclusions. This study aimed to test paraphilic comorbidity with rape in sexual offenders, and this was confirmed with frotteurism and hebephilia. We believe that the implications of these results will help better understand the reasons behind certain offenses reaching a more accurate diagnosis and a more efficient treatment.

Keywords: sexual offences, rape, paraphilic disorders, paraphilic comorbidity.

INTRODUCTION

Dictionaries define rape as a violent act imposed by force, threat or deceit on subjects who either cannot or will not give consent to a sexual act, due to a state of physical or emotional submissiveness. Rape is a paraphilic disorder, defined by the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-V, 2013), as being “a paraphilia which causes an individual emotional discomfort or dysfunction in the present, or a paraphilia the satisfaction of which involves self harm or the risk of harming other individuals”. Paraphilias are defined by DSM-V (2013) as “any intense and persistent sexual interest other than the sexual interest for genital stimulation or foreplay with human, phenotypically normal, physically mature and consenting partners.”

There are several studies confirming paraphilic comorbidity in rapists, such as the one by Abel *et al.*

(1988), who discovered the following in a research on 126 subjects who had raped an adult female: 44% had also been involved in non-incestuous paedophilia with a female, 28% had exhibitionist interests, 24% had also been involved in incestuous paedophilia with a female, 18% in voyeurism, 14% in non-incestuous paedophilia with a male, 11% in frotteurism, 10% in sadism and the rest were included in other types of paraphilic disorders. In another study involving 561 male subjects, of which 53.6% being adults who had committed sexual offences and declared the onset of deviant sexual interests before the age of 18, each subject claimed two different paraphilias and an average of 38.2 sexual offences committed before reaching adulthood. Similar information from adolescent sexual offenders (younger than 18) showed that each such individual had on average 1.9 paraphilias and had committed on average 6.8 sexual offences, with child molestation and rape being 54.1% of these deviant sexual acts (Marshall

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et al., 2013). The history of sexual offenders clearly indicates the fact that one may have multiple paraphilic interests throughout one's lifetime (Abel *et al.*, 1988). Other two studies which confirm the comorbidity of paraphilic disorders and rape are those carried out by Freeman-Longo (1985), who discovered that 23 rapists had committed other 319 sexual offences on children, while 30 men who had molested children claimed that they had sexually assaulted 213 adult females, and by Weinrott and Saylor (1991), who, in a sample of rapists, identified 32% of males who admitted they had molested a child, while 12% of those who had molested children also admitted having raped an adult. The results in the table below show that, regardless of the category of specific paraphilia, the members of a specific category were interested in other paraphilic categories. These data contradict conventional literature, which claimed that paraphilics have a single specific category of sexually deviant behaviour. The results presented above reflect the opposite: individuals with a single paraphilia are unusual, and most paraphilics are or were interested in several specific paraphilic disorders. Moreover, one can note the comorbidity of paraphilic disorders in rapists, which is also confirmed by our study. Thus, some individuals may go as high as 10 paraphilic disorders in comorbidity with rape.

This article contributes to a better understanding of the reasons behind certain sexual offences and to providing a more efficient treatment plan, by confirming the comorbid disorders of rapists.

MATERIALS AND METHODS

Participants

The sample contains 105 (N=105) male adult participants, incarcerated for sexual offences, of which 60 (N=60) met the criteria for the paraphilic disorder of rape. The average age of the sample was 37.24 (SD=8.72), and the average education level was 11.35 grades (SD=1.71). The study was applied on men incarcerated in Romanian prisons (Table 1).

Instruments

We applied the Questionnaire for the Evaluation of Paraphilic Disorders (Delcea C, Siserman C, 2020). This is an instrument for the evaluation of a

wide range of paraphilic disorders. It is a comprehensive instrument, with 163 items and 20 scales: frotteurism, voyeurism, exhibitionism, public masturbation, sexual sadism, sexual masochism, fetishism, transvestic fetishism, paedophilia, hebephilia, rape, urophilia, clinical comorbidity, klismaphilia, coprophilia, necrophilia, telephone scatologia, zoophilia, social desirability and denial.

Work procedure

Selection criteria

The participants involved in the study had to meet the following criteria: to be aged between 18 and 90, to be currently incarcerated for having committed a sexual offence and to be from various cities in Romania.

Data collection

Notices were sent to ANP (the National Administration of Prisons), by which we requested approval for carrying out this study. ANP suggested several prisons in the country. The participants were informed of the study and gave their consent to take part in the evaluation and testing. The participants were assisted in filling out questionnaires and the necessary support and information was provided.

Data processing

The participants filled in the questionnaire with 163 items. The raw data was manually input in the database, and, after manual interpretation and delimitation, evaluation scales were introduced and used in order to create the database for SPSS 25. Subsequently, the data were analysed using non-parametric chi-square analyses, and the Bonferroni correction was applied.

RESULTS

Descriptive data

Following descriptive analysis, the following data was obtained: frotteurism (n=105, M=1.84, ST=0.370); voyeurism (n=105, M=1.70, SD=0.458); exhibitionism (n=105, M=1.99, SD=0.098); public masturbation (n=105, M=1.87, SD=0.342); sexual sadism (n=105, M=1.91, SD=0.281); sexual masochism (n=105, M=1.99, SD=0.098); fetishism (n=105, M=1.98, SD=0.137); transvestic fetishism (n=105, M=1.99, SD=0.098); paedophilia (n=105, M=1.01, SD=0.98); hebephilia (n=105, M=1.85; SD=0.361); rape (n=105, M=1.43, SD=0.497); urophilia (n=105, M=1.99, SD=0.098); clinical comorbidity (n=105, M=1.70, SD=0.458), klismaphilia (n=105, M=2, SD=0.000); coprophilia (n=105, M=1.99, SD=0.98); necrophilia

Table 1. Descriptive statistics

	N	Mean	Std. Deviation
Age	105	37.24	8.728
studies	105	11.35	1.710
Valid N (listwise)	105		

(n=105, M=1.99, SD=0.98); telephone scatologia (n=105, M=1.99, SD=0.98); zoophilia (n=105, M=1.98, SD=0.137); social desirability (n=105, M=1.85, SD=0.361); denial (n=105, M=1.85, SD=0.361) (Table 2);

Table 2. Graphic representation of descriptive data.

	<i>N</i>	<i>Mean</i>	<i>Std.Deviation</i>
Fr	105	1.84	0.370
V	105	1.70	0.458
Ex	105	1.99	0.098
Pm	105	1.87	0.342
S	105	1.91	0.281
Ma	105	1.99	0.098
Fe	105	1.98	0.137
Tf	105	1.99	0.098
P	105	1.01	0.098
H	105	1.85	0.361
U	105	1.99	0.098
Cc	105	1.70	0.458
K	105	2.00	0.000
C	105	1.99	0.098
N	105	1.99	0.098
Ts	105	1.99	0.098
Z	105	1.98	0.137
Y	105	1.85	0.361
Neg	105	1.85	0.361

Descriptive chi-square analyses

In order to establish the extent to which paraphilic disorders correlate with rape in the subjects included in our study, we used chi-square descriptive analyses. The Pearson correlations presented in the table below show significant correlations between rape and: frotteurism, hebephilia and the social desirability and denial scales (Table 3).

Table 3. Pearson correlations with the Rape subscale (R)

<i>Subscale</i>	<i>Value</i>	<i>df</i>	<i>p</i>
Fr	17.055	1	0.000**
V	0.549	1	0.459
Pm	0.000	1	1.000
H	19.964	1	0.000**
Cc	0.549	1	0.459
Y	14.157	1	0.000**
Neg	19.964	1	0.000**

**p* < .05
***p* < .001

Subsequently, for the correlations which had the expected count, lower than 5, Fisher’s Exact Test was used. However, as can be seen below, no significant correlation was found. No correlation could be performed between klismaphilia and rape, since there

were no subjects who met the criteria for this subscale (Table 4).

Table 4. Fisher’s Exact Test scores

<i>Subscale</i>	<i>p</i>
Ex	1.000
S	0.493
Ma	1.000
Fe	0.505
Tf	1.000
P	0.429
U	1.000
C	1.000
N	1.000
Ts	1.000
Z	0.505

p < .05 *p* < .001

Bonferroni Correction

Given the multitude of statistic analyses being performed simultaneously, the Bonferroni correction was applied. As the table below shows, statistically significant correlations can be found between rape and: frotteurism, hebephilia and the social desirability and denial scales (Table 5).

Table 5. Bonferroni Correction

<i>Subscale</i>	<i>p</i>
Fr	0.00004
V	0.45930
Ex	0.38430
Pm	1.00000
S	0.41794
Ma	0.38430
Fe	0.21498
Tf	0.38430
P	0.24605
H	0.00001
U	0.38430
Cc	0.45930
K	1.00000
C	0.38430
N	0.38430
Ts	0.38430
Z	0.21498
Y	0.00017
Neg	0.00001

p < .05 *p* < .001

DISCUSSION

This study aimed to identify the comorbidities of rape with 17 other paraphilic disorders. Prior studies have confirmed the existence of comorbidity

with paedophilia, exhibitionism, voyeurism, sexual sadism and frotteurism (Abel *et al.*, 1988), and studies on adolescent sexual offenders (younger than 18) showed that each subject had 1.9 paraphilias and had committed on average 6.8 sexual offences, child molestation and rape being 54.1% of these deviant sexual acts (Marshall *et al.*, 2013). However, other studies have found evidence to the contrary: Woodworth *et al.* (2013), identified the fact that most of the time, rapists had no other paraphilic disorder. Our study was able to confirm comorbidity with frotteurism and hebephilia, with a strong correlation ($p < 0.001$), but insignificant correlations have been found with the other 15 paraphilic disorders. In order to eliminate the possibility of an error, given the multitude of statistical analyses performed at the same time, we used the Bonferroni correction, but this did not influence the results. A possible explanation for why other studies had found a higher number of comorbidities is given by the social desirability and denial scales. Our sample consisted of an incarcerated population, which suggests that the subjects had no motivation to be completely honest; even more, they felt that their honesty may leave them vulnerable to repercussions. This is evident by the fact that they repeatedly gave socially desirable answers and repeatedly manifested denial. This could be corrected in future studies by ensuring complete anonymity, thus making it impossible to identify the subject who filled in each questionnaire. Moreover, a reward could be offered at the end of the study, within our means, so that subjects be motivated towards a more active and honest participation.

In conclusion, taking into account the lack of comprehensive literature on the topic, this study aimed to investigate and confirm the presence of paraphilic disorders in comorbidity with rape in a sample of incarcerated sexual offenders. Rape remains one of the most traumatic experiences a person can go through, thus we believe that it is important to take into account as many variables as possible when we make inferences in the topic at hand. The implications touch both the victims, who, as mentioned by Kilpatrick *et al.* (1982), perceive assault as a humiliating experience, or as shown by Griffin (1977), consider a sexual assault to be “the most terrible and humiliating feeling” (p.65), and the judicial and treatment system. According to Marshall *et al.* (2013), the history of sexual offenders clearly indicates the fact that individuals can have multiple paraphilic interests throughout their lifetime. When a paraphilia disappears, another takes its place, and this

second one may have a higher frequency, surpassing the initial paraphilia and becoming the new main deviant behaviour. Thus, some sexual offenders have up to 10 paraphilic interest categories throughout their lifetimes. If treatment is only focused on the paraphilic interests for which the individual was arrested or which grabbed the attention of others, it is very likely that treatment directed to that one paraphilia be very efficient, but the same person may commit other sexual offences, related to the paraphilic interests which remained untreated.

This study aimed to test paraphilic comorbidity with rape in sexual offenders, and this was confirmed with frotteurism and hebephilia. We believe that the implications of these results will help better understand the reasons behind certain offences, reaching a more accurate diagnosis and a more efficient treatment. Prentky and Burgess (1988) showed that the costs involved for one inmate (arrest, investigation, prosecution and incarceration, in addition to victim evaluation and treatment) were approximately equal with the cost of treating 50 people a year. Therefore, economic as well as humanitarian implications can be found. Also, in order to underline material costs, it is relevant to look at the number of sexual offenders in American prisons. This has been on a steady rise, up to the point that, according to some investigators, “one in 7 inmates in the United States is currently serving a punishment for a sexual offence...” (Danni & Hampe, 2000, p. 490). Thus, it is crucial to study the variables involved in the sexual offenses of rapists, comorbidities being one of the most important and least studied factors.

Conflict of interest

The authors declare that they have no conflict of interest.

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