New Avenues in the Treatment of Sexual Self Regulation

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Sexual self-regulation problems are among the most prominent risk factors associated with sexual recidivism. Sexual self-regulation problems can be subdivided into the areas of *sexual preoccupation*, *sexual coping* and *sexual deviance* (Hanson, Harris, Scott, & Helmus, 2007). These factors form important targets in sex offender treatment. Medical treatment of sexual self-regulation problems targets sexual arousal in general, nonspecifically lowering the overall sensitivity of the sexual system. Cognitive behavioral therapy for sexual self-regulation problems is generally focused on strengthening behavioral inhibition, training sex offenders not to act on their deviant sexual interests. Behavioral therapy directly aimed at influencing the deviant interest itself, such as (de)sensitization therapy or masturbatory reconditioning, seems to have slowly gone out of fashion, due to the absence of empirical support beyond occasional case studies (Marshall & Fernandez, 2003). However, a recent meta-analysis on sex offender treatment (Gannon, Olver, Mallion, & James, 2019) suggests that treatment programs that include some form of “arousal conditioning” achieve (somewhat) better results than those that do not. This finding underscores the need to increase our knowledge on the nature of sexual self-regulation problems. It also urges us to search for ways to influence these problems. One way of exploring new treatment possibilities is to ‘borrow’ successful interventions from adjacent treatment fields (e.g. sexology, trauma, addiction) and adjust them for our purposes.

This symposium contains no less than three randomized controlled studies and a case study, all of which explore new avenues for the treatment of sexual self-regulation problems in sex offenders, specifically *sexual deviance* and *sexual preoccupation*. First, acquiring more insight into the etiology of sexual self-regulation problems seems useful - if not essential - for the development of effective treatment approaches. To start this symposium, the chair will provide a brief description of an Incentive Motivational Model (IMM) of sexual self-regulation (Smid & Wever, 2018) and indicate how this symposium’s presentations fit in this model. The first presentation reports the results of a controlled laboratory experiment testing a possible route for the emergence of deviant sexual interests, based on the IMM. Results suggest that, for some people, emotional stimuli may serve to enhance sexual arousal.

The second presentation focuses on a possible way to influence deviant sexual arousal. In trauma therapy, EMDR is often used to reduce the emotional charge of traumatic memories. It’s worth investigating if EMDR treatment could also be applied to sex offenders in order to reduce the emotional charge of sexually arousing deviant stimuli. This presentation includes the results of a randomized clinical trial of EMDR-treatment of...
exhibitionists and a case study of EMDR-treatment of a patient with an obsessive pedophilic interest.

The third and last presentation focuses on the assessment and treatment of sexual preoccupation. Addiction research has suggested the usefulness of an Approach Avoidance Task (AAT) for assessing an approach bias towards alcohol-related stimuli in alcoholics (Wiers, Rinck, Dictus, & Van den Wildenberg, 2009) as well as the possibility to reduce this approach bias by means of an AAT-training (Wiers, Rinck, Kordts, Houben, & Strack, 2010). It's worth investigating if an adjusted AAT could also be used to assess and re-train an approach bias towards sexual stimuli in sexually preoccupied sex offenders. This presentation includes the results of a randomized clinical trial studying AAT-assessment and AAT-retraining of approach bias towards sexual stimuli among outpatient sex offenders.

References
The Incentive Motivational Model (IMM; Smid & Wever, 2018) describes sexual arousal as an emotional reaction to a competent stimulus, comparable to other emotions. The interaction between this sexual emotion and other emotions may, consciously or automatically, serve as a means of emotional or sexual self-regulation. In one direction, sex may be used to influence other emotional states (i.e. sexual coping). In the other direction, other emotions may be used to influence sexual arousal. According to the model, deviant sexual interests may arise from the need to enhance sexual arousal by means of other emotional stimuli, a process referred to as “excitation transfer” (Barlow, 1983; Zillmann, 1996).

This proposed mechanism of excitation transfer was researched in a feasibility- and a pilot study. In the feasibility study, we explored which settings are optimal to induce genital and emotional responses in healthy subjects in a laboratory setting. Subsequently, in the pilot study, we assessed whether it is possible to enhance low-level genital sexual arousal in men by simultaneously inducing other emotions. The sample consisted of healthy male volunteers (age 18-40): 10 participated in the feasibility study and (currently) 10 have participated in the pilot study. Subjects viewed neutral film clips and film clips inducing four different emotions: aggression/dominance, fear, disgust and endearment. Genital arousal was induced by erotic film clips and vibro-stimulation and was assessed by penile circumference as well as by subjective ratings. The feasibility study served to approximate the optimal experimental settings.

Difference scores will be calculated between participants’ baseline penile circumference and penile response to the stimuli. These difference scores will be compared across blocks (neutral, fear, disgust, aggression, endearment). Preliminary results indicate that enhanced reactions can be measured when watching emotional film clips as opposed to watching a neutral film fragment. If the pilot study further supports these findings, this will pave the way for a larger scale investigation of excitation transfer as a meaningful mechanism in the etiology of deviant sexual interests.

References

1 NB: At the time of submission of this abstract, we have completed the feasibility study (N = 10) and included 10 subjects in the pilot study. Analyses will be finished by the summer.
Learning Goals:
After the presentation participants will know:
• The core assumptions of the Incentive Motivational Model of sexual self-regulation
• The many technical problems that may arise while conducting research with PPG assessment
• The mechanism of excitation transfer and its possible role in sexual deviance

EMDR Treatment of Deviant Arousal:
A Randomized Controlled Trial and a Case Study

Nina ten Hoor, MSc
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Eye Movement Desensitization and Reprocessing (EMDR) is known foremost as an evidence-based treatment for traumatic memories (Bisson et al., 2007). Through a desensitization process, negative emotions that are linked to traumatic memories decrease. There are indications, mainly from clinical case studies, that EMDR can also be applied to reduce unwanted positive emotions that are linked to problematic behavior, such as alcohol and nicotine addiction (Hase, Schallmayer, & Sack, 2008), gambling addiction (Bae, Han, & Kim, 2015), internet addiction (Bae & Kim, 2012) and sex addiction (Cox & Howard, 2007). Currently there are several EMDR protocols available for the treatment of impulse control disorders, which include the desensitization of urges and triggers. The Dutch EMDR and Addiction Protocol by Hornsveld and Markus (2014) pooled these different protocols and integrated them into a comprehensive protocol with ten different modules.

The current paper first examines whether EMDR can be used to reduce deviant sexual arousal in persons with exhibitionistic disorder. Nineteen participants with exhibitionistic disorder were randomly allocated to either an experimental EMDR treatment condition or a control condition offering cognitive behavioral therapy specifically targeting deviant sexual arousal. Physiological measurements, questionnaires and subjective ratings regarding deviant arousal were gathered prior to the treatment sessions, after completion of the treatment sessions, and again after a two-month follow-up period. After completion of the experimental/control sessions, treatment as usual was continued. Results show a trend towards effectiveness of both treatments, reducing self reported deviant arousal. However, EMDR treatment showed reduction of attractiveness while concurrently increasing negative feelings towards the deviant stimuli.
A case study will then be presented of the EMDR treatment of a pedophilic child molester. This patient reported a strong sexual attraction specifically towards 9-year-old girls who reminded him of the little girl with whom he gained his first sexual experiences when he himself was of similar age. Because his sexually deviant attraction was so strongly attached to specific childhood memories, it was hypothesized to be a suitable target for EMDR treatment. The course of the treatment and the short- and longer-term effects will be discussed.

References


Learning Goals:
*After the presentation you will know:*
- The basics of how EMDR works
- The possible use of EMDR in the treatment of exhibitionism
- The possible use of EMDR in the treatment of a pedophilic patient
Using an Approach Avoidance Task for the Assessment and Treatment of Sexual Preoccupation: A Randomized Controlled Trial

Wineke Smid, PhD
Van der Hoeven Kliniek

Addiction research has suggested the usefulness of the Approach Avoidance Task (AAT) for assessing an approach bias towards alcohol-related stimuli in alcoholics (Wiers, Rinck, Dictus, & Van den Wildenberg, 2009) as well as the possibility to reduce this approach bias by means of an AAT-training (Wiers, Rinck, Kordts, Houben, & Strack, 2010). The reaction times as measured with the assessment-AAT indicate whether someone shows an approach bias towards certain stimuli. Participants are asked to pull certain images (digitally) towards themselves or push them away. For alcoholics, it appears to be easier to pull stimuli towards themselves that depict alcoholic beverages than stimuli that depict non-alcoholic beverages: Hence, they show an approach bias towards alcohol. For re-training an approach bias, a training-AAT can be used. This AAT requires participants to systematically push away specific stimuli (e.g. alcoholic beverages), to train the participant in showing an avoidance reaction towards these stimuli. Such an increased avoidance reaction may augment the effect of addiction treatment (Wiers et al., 2010).

The current paper presents a randomized controlled trial assessing the ability of the AAT to measure approach biases towards sexual stimuli in 41 sex offenders and the association of such approach biases with various self-report measures of sexual self-regulation. Results show that approach biases could be assessed, however, the magnitude of the approach biases was not linearly associated with self-report measures of sexual self-regulation. Self-reported sexual preoccupation (HBI-19; Reid, Garos, & Carpenter, 2011) as well as higher levels of self-reported sexual activity (ESF; Vroege, 1998) appeared to be associated with an approach bias in part of the subjects, while it was associated with the opposite, an avoidance bias, in another part of the subjects.

Subsequently, 26 subjects received an AAT-training to reduce existing approach biases towards sexual stimuli, while 15 subjects received a placebo-training. Results show that AAT-training significantly reduced-, while placebo-training increased approach biases towards sexual stimuli. The reduction of approach bias in the AAT-trained group was associated with a significant reduction in self-reported sexual preoccupation as assessed with the HBI-19. Although far from conclusive, the results warrant further investigation of the AAT as a possible additional tool in the assessment and treatment of sexual self-regulation problems among sex offenders.
References

Learning Goals:
*After the presentation you will know:*
- How the Approach Avoidance Task works and what it aims to assess
- Some of the difficulties of randomized research
- The effect of AAT-training on an approach bias
Kasia Uzieblo is senior researcher at the Forensic Care Specialists (the Netherlands) and visiting professor at Ghent University and at the Vrije Universiteit Brussel (Belgium). She is the founder and coordinator of the forensic division of the Flemish Association of Clinical Psychologists. She is also the past-president of the Dutch Chapter of the Association for the Treatment of Sexual Abusers (NL-ATSA). Her main research interests are psychopathy, sexual and domestic violence, and psychological assessment in forensic populations. She has published several national and international papers and has given numerous presentations on the aforementioned topics.

Eveline Schippers is a project manager at De Waag Utrecht (outpatient treatment facility of the Forensic Care Specialists) and PhD-student at mental health center inGeest and the Free University Amsterdam. As a project manager, she works on various topics regarding ambulatory forensic patients; for instance, the development of state of the art treatment programs, the implementation of these treatment programs, research to new and current treatment approaches in clinical setting, and the innovation of forensic care using e-health. As a PhD-student, she researches deviant sexual interests, including a lab study of the creation of low level sexual deviance, and a study of the efficacy of an outpatient sex offender treatment program in a clinical setting.

Wineke Smid is head of the research department at Van der Hoeven Kliniek (part of Forensic Care Specialists) in Utrecht, the Netherlands. She divides her time between conducting and supervising empirical research projects, carrying out individual (risk) assessments of residential high-risk sex offenders and providing feedback of state of the art knowledge to various stakeholders in Dutch society. Wineke Smid conducted a national study on Sex Offender Risk Assessment in the Netherlands and is currently involved in a number of research projects focusing on the assessment and treatment of sexual self-regulation risk factors for sex offenders (sexual deviance, sexual preoccupation, sexual coping) as well as fundamental sexological research on the Incentive Motivational Model.

Nina ten Hoor is a clinical psychologist, a licensed EMDR Europe practitioner, and member of the Dutch Association for Cognitive and Behavioural Therapy. Since 2006, she works in outpatient treatment facility De Waag (part of Forensic Care Specialists) in the Netherlands. She is interested in the applicability of EMDR in the treatment of sex offenders. In 2013, Nina published a case study of a sex offender whose cognitive distortions were treated with EMDR. She has conducted a Randomized Controlled Trial assessing the effectiveness of EMDR in reducing deviant sexual arousal in exhibitionists. Recently, Nina has started her PhD on the characteristics, risks and treatment of exhibitionists.