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Women with Sexual Interest in Children – Results from an Online Survey Among a Non-Forensic Female Sample

Safiye Tozdan , Peer Briken  and Johanna Schröder 

Institute for Sex Research, Sexual Medicine and Forensic Psychiatry, University Medical Center Hamburg-Eppendorf, Hamburg, Germany

ABSTRACT

Little research has examined adult women's sexual interest in children, particularly in non-forensic samples. We aimed to describe characteristics of women with sexual interest in children by recruiting 52 women (mean age: 33.2 years) who have a self-identified sexual interest in children under the age of 14 years into an anonymous online self-report study. Measures of interest referred to general characteristics (e.g., age, education level), general sexuality (e.g., sexual orientation, masturbation), and sexual interest in children (e.g., exclusivity, motivation to change). Results showed that women with sexual interest in children are similar to non-forensic samples of men with sexual interest in children in previous studies and rather differ from women from the general population regarding the investigated characteristics in this study. Our results clearly indicate that women with sexual interest in children need to be taken into account in future research and clinical practice. Treatment programs preventing sexual offenses against children or the consumption of abuse material need to explicitly address females as well.

Introduction

Historically, paraphilic interests in females, such as pedophilic interest, have been neglected in research for a long time compared to paraphilic interests in males. Symptoms of a pedophilic disorder are described as recurrent, sexual arousal (accompanied by lasting sexual thoughts, fantasies, urgent needs or behaviors) by children before puberty over a longer time period to an intensive degree (World Health Organization, 2020). This includes sexual attraction to children generally aged 10/11 years or younger. Sexual interest in pubescent children (i.e., aged 11-13/14) is called “hebephilia” (Blanchard et al., 2009) which is not a formal diagnosis included in classification systems. In the present study, the term “sexual interest in children” includes pedophilic and hebephilic sexual interest but does not necessarily imply that diagnostic criteria are met.

Most of what is known about sexual interest in children arises from studies among men who have been incarcerated for sexual offenses against children (i.e., forensic male samples). Only a few studies examined sexual interest in children among population-based male samples (Dombert et al., 2016; Santtila et al., 2005). Only since the nineteen eighties, theories on female paraphilic interests have been published (e.g., Wellدون, 1988). These theories questioned the common assumption that female paraphilic interests are impossible since women do not have a penis. In the context of the development of sex research and its lack of focus on female paraphilic

interests, it seems plausible that sexual interest in children among women has not been researched in the way it is among men. A decade ago, research indicated that only case studies show that females with sexual interest in children exist (e.g., Seto, 2009). Due to this widely accepted notion that sexual interest in children is an exclusively male phenomenon the relevance of females in this research field is probably underestimated. It may even be assumed that a similar social taboo surrounds women with sexual interest in children as women who sexually offend against children (Tozdan, Briken, & Dekker, 2019). Thus, researchers might have a blind spot as they assume that sexual interest in children rarely exists in females. Consequently, women with sexual interest in children may still be overlooked or ignored in research as well as in clinical practice.

Research on women with sexual interest in children

In recent years, researchers attempted to assess the prevalence of sexual interest in children in females among non-clinical samples and reported varying rates ranging from 0.4 to 9.6% (Baur et al., 2016; Tozdan, Dekker, Neutze, Santtila, & Briken, 2020; Wurtele, Simons, & Moreno, 2014). Baur et al. (2016) investigated 3,898 Finish women (twins aged 18–33 years) from a population-based sample and found that only 17 females (0.4%) reported pedophilic sexual interest measured by sexual interests, masturbation fantasies, and sexual partners across two specific age groups (0–6, 7–12 years). Wurtele et al. (2014) examined 262 females from a convenience sample of whom 0.8% reported some likelihood of masturbation and sexual attraction regarding children, 1.5% reported some likelihood of having sex with a child if they were guaranteed they would not be caught or punished, and 3.4% stated some likelihood of viewing child pornography on the Internet. Tozdan et al. (2020) aimed to investigate the extent to which adult women indicate sexual interest in prepubescent and/or pubescent children by their use of online abuse material (directly measured) and their sexual fantasies involving prepubescent and pubescent children indirectly measured by the assessment of pictures showing different undressed bodies among a non-representative online sample. Results showed that women who indicated a sexual interest in children rather reported consuming abuse material involving adolescents (total sample: 5%) than child actors (total sample: 0.8%) and rather indicated that they sexually fantasize about pubescent (total sample: 9.6%) than prepubescent children (total sample: 7.0%; Tozdan et al., 2020). These results are in contrast to results found in men who have a sexual interest in children but have not been known to justice for sexual offenses against children (i.e., non-forensic male samples) since they indicated a sexual attraction to both prepubescent and pubescent children (Tozdan & Briken, 2015, 2019). A similar result to male samples was that females who participated in the study via a website directed to individuals with sexual interest in children tended to more frequently indicate a homosexual or bisexual orientation (Tozdan et al., 2020). However, based on the study design and measurements, current studies including women with sexual interest in children (Baur et al., 2016; Tozdan et al., 2020; Wurtele et al., 2014) are hardly comparable to studies investigating samples of men with sexual interest in children (e.g., Gerwinn et al., 2018; Tozdan & Briken, 2015, 2019). To our knowledge no study so far was directed solely to women who have a self-identified sexual interest in children to assess features referring to general characteristics, general sexuality, and sexual interest in children. The present study provides empirical data from an anonymous online survey assessing these characteristics among adult women with a self-identified sexual interest in children. In order to interpret our results in the context of the existing literature, we hereafter refer to research on non-forensic samples of men with sexual interest in children and to research on the general female population. Characteristics of men with sexual interest in children that have been researched in the past refer to general sample characteristics (e.g., education level), general sexuality (e.g., masturbation), and sexual interest in children (e.g., its exclusivity).

Research on non-forensic samples of men with sexual interest in children

Research has shown that men with sexual interest in children report a higher rate of bisexual attraction compared to men without sexual interest in children which may be explained by the fact that the child's body of a boy and a girl look more similar than the adult body of a man and a woman and may therefore be equally attractive to individuals who have a sexual interest in children (Bailey, Hsu, & Bernhard, 2016). Gerwinn et al. (2018) investigated different samples of men, and those from non-forensic samples showed a higher education level than those who have a history of sexual offenses against children (i.e., forensic male samples) with or without a sexual interest in children. Furthermore, compared to men without sexual interest in children, men with sexual interest in children demonstrated a higher rate of sexual activity than individuals without sexual interest in children measured by the average weekly number of orgasms derived from all types of sexual activity, e.g., masturbation, petting, intercourse (Gerwinn et al., 2018). Other researchers also reported that a heightened general sexual interest is related to sexual attraction to children in men (Wurtele, Simons, & Parker, 2018). Gerwinn et al. (2018) further indicated that the average age at first masturbation in non-forensic male samples with sexual interest in children was 11.38 years ($SD = 2.02$). In forensic male samples with sexual interest in children it was 12.01 years ($SD = 2.35$), in forensic men without sexual interest in children it was 13.81 years ($SD = 8.14$), and in healthy control males it was 12.91 years ($SD = 2.47$) (Gerwinn et al., 2018). These results are in line with research showing that early sexual experiences, e.g., early masturbation or early exposure to pornography, are related to sexual interest in children (e.g., Wurtele et al., 2014, 2018). In contrast, Martyniuk and Dekker (2018) found that females from the general population first masturbate at approximately 15 years. This study further shows that females' first contact with pornography depended on their age cohort: younger females reported an average age of 16 to 17 years and older females even reported an average age of 25 to 28 (Martyniuk & Dekker, 2018). Gerwinn et al. (2018) also reported that about 27% of non-forensic male samples with sexual interest in children and about 26% of forensic male samples with sexual interest in children indicated any other paraphilia. Bradford, Boulet, and Pawlak (1992) also suggested that few individuals show symptoms of more than one paraphilia at the same time. In terms of psychiatric comorbidities, research, for example, revealed that 30–56% of men with sexual interest in children had been diagnosed with major depression during their life (Kafka, 2012). Further disorders found in men with sexual interest in children include bipolar disorder, dysthymic disorder, and social phobia (Kafka, 2012). Tozdan and Briken (2015) investigated men from a non-forensic sample who were in treatment due to their sexual interest in children. About 44% of participants indicated to be in a steady relationship. A few years later, similar results were found examining another non-forensic sample of men who were in treatment due to their sexual interest in children (Tozdan & Briken, 2019). In both studies, the results of men from non-forensic samples who were in treatment due to their sexual interest in children and the results of men who participated in the study via an online platform directed toward individuals with sexual interest in children that explicitly advocates against acting on sexual interest in children were comparable (Tozdan & Briken, 2015, 2019). In both studies participants mainly reported being sexually attracted to both prepubescent and pubescent children and few participants indicated a sexual interest in prepubescent children only. Regarding exclusivity of their sexual interest in children, the vast majority (80–90%) also reported being sexually attracted to adults. The age of onset of their sexual interest in children had mean values between 17 and 20 years and medians between 14 and 16 years. The motivation to change the sexual interest in children was highest among non-forensic men who were in treatment due to their sexual interest in children and was moderate high among participants who participated via an online platform that explicitly advocates against acting on sexual interest in children (Tozdan & Briken, 2015, 2019). Bailey et al. (2016) also investigated a non-forensic sample of men being sexually attracted to children ages 14 and younger recruited via the Internet ($n = 1,189$). Regarding the age of onset, participants recalled that they first realized their sexual

interest in children at an average age of 14.24 years ($SD = 5.36$). They began to suspect that their sexual interest in children was unusual at an average age of 16.11 years ($SD = 5.24$), and they finally knew their sexual interest in children was unusual at an average age of 18.12 ($SD = 5.89$). Finally, research on sexual interest in children often refers to the use of abuse material, i.e., media presenting the sexual abuse of children or adolescents. Recent research has shown that the majority of non-forensic men who are in treatment due to their sexual interest in children (about 70–85%) stated using abuse material (Kuhle, Oezdemir, & Beier, 2018; Lampalzer, Tozdan, von Franqué, & Briken, 2020).

The present study

The present study aimed to describe characteristics of women from a non-forensic sample who have a self-identified sexual interest in children under the age of 14 years. We analyzed data from an online self-report study mainly conducted on multiple internet platforms directed toward individuals with sexual interest in children. Measures of interest concern general characteristics (e.g., age at data collection), features of general sexuality (e.g., sexual orientation), and features of sexual interest in children (e.g., age of onset of sexual interest in children).

Method

Procedure

The data was gathered via an online survey from July to December 2020. At the beginning of the survey, we collected data among German participants via one study link generated with Qualtrics (www.qualtrics.com). Some participants soon informed us that our survey could not be conducted via browsers guaranteeing a maximum of anonymity (e.g., “Tor Browser”). Therefore, we also started collecting data among German participants via a study link generated with LimeSurvey (www.limesurvey.org) as it allows participants to conduct the survey via browsers guaranteeing a maximum of anonymity. To further increase the sample size, we had our survey professionally translated into English by someone whose first language is English from a translation company and started collecting data among English-speaking participants via a study link generated with the software LimeSurvey in August 2020. The study links were mainly spread on websites directed toward individuals with sexual interest in children.¹ The German study links were also spread via the Homepage of the research project, the Instagram account of the University Hospital Hamburg-Eppendorf, emails to the German psychotherapist’s chambers, and several general websites.² In addition, the German study links were given to staff members of the outpatient treatment center of the Institute for Sex Research, Sexual Medicine, and Forensic Psychiatry at the University Hospital Hamburg-Eppendorf and the counseling center “Wendepunkt e.V.” for minors and young adults with sexually conspicuous behavior in Hamburg.

Participants were informed that the survey concerns sexual interest in children under 14 years and is directed to females who are at least 18 years of age. Before beginning the survey, informed consent was obtained from all participants. The ethics committee of the Local Psychological Ethics Committee of the University Medical-Center Hamburg (reference number: LPEK-0110) proved the study.

Participants

Inclusion criteria for the present study were (1) being born as a female or identifying with the female gender, (2) being at least 18 years old, and (3) having a self-identified sexual interest in children under the age of 14 years. Exclusion criterion was identifying solely with the male gender. Including all three study links, the survey was opened by 120 individuals. Of those, 59 individuals did not complete the survey, six indicated being male and identifying with the male

gender, two indicated to be under the age of 18 years, and one wrote that she does “not fantasize about children but participates just for fun” in a free text field during her participation. These participants were excluded from the sample. Thus, the total sample for the current study consists of 52 participants (German Qualtrics link: 37%, German LimeSurvey link: 44%, English LimeSurvey link: 19%). The first section of [Table 1](#) shows sample characteristics. A total of 48 participants reported that they were born as a female. Of those, six participants indicated that they identify with both male and female gender, two indicated that they identify with another gender without further specification, and two indicated that they identify with no gender. A total of three participants reported being born as a male. Of those, two participants indicated that they identify with the female gender and one indicated identifying with both male and female gender. One participant reported another gender at birth and indicated identifying with both male and female gender. For the total sample, participants’ ages at data collection ranged from 18–67 years (female born = 18–67; male/other born = 24–50). For the total sample, participants’ partner’s age at data collection ranged from 12 to 54 years (female born = 12–54). One participant indicated having a close relationship with a minor (aged 12 years). The mean age difference between participants and their partners was -1.42 years ($SD = 7.69$), indicating that, on average, participants were 1.42 years younger than their partners. The age difference ranged from -13 years to 17 years.

Measures

For replicable results, we describe the ascertained measures in detail in the following.

Age at data collection

Participants were asked “How old are you?” and specified their age in years.

Gender at birth

Participants were asked “What was your gender at birth?” and chose one of three response categories: (1) “Female”, (2) “Male”, or (3) “Other”. For specification for the latter category a free text field was provided.

Gender identity

Participants’ gender identity was assessed by the question “With which gender do you identify?” giving the response categories (1) “Female”, (2) “Male”, (3) “Both”, (4) “Other” (including a free text field for specification), and (5) “None”.

Education level

Participants were asked “What is your school-leaving qualification?” and chose one of five response categories: (1) “Did not graduate”, (2) “Lower school level/secondary school leaving certificate”, (3) “Middle school/graduation from intermediate school”, (4) “Technical diploma/‘Abitur’ certificate”, and (5) “Other school-leaving qualification” (including a free text field for specification). The ‘Abitur’ certificate is comparable to a high-school diploma that includes the general qualification for university entrance. For the current study, three education levels were operationalized with “Low” including the response categories (1) and (2), “Moderate” including the response categories (3) and (5), and “High” including the response category (4).

Table 1. General characteristics as well as descriptive statistics for variables on general sexuality and on sexual interest in children for the total sample as well as for female born and male or other born participants.

	Total sample (n = 52)	Female born (n = 48)	Male/other born (n = 4)
General characteristics	M ^a (SD ^b)/N ^c (% ^d)	Md ^e /N(%)	Md/N(%)
Age at data collection	33.2 (11.0)	32	27
Education level			
Low	13 (25)	12 (25)	1 (25)
Moderate	9 (17)	8 (17)	1 (25)
High	29 (56)	27 (56)	2 (50)
N/A	1 (2)	1 (2)	– (–)
Steady relationship			
No	28 (54)	25 (48)	3 (75)
Yes	24 (46)	23 (52)	1 (25)
Partner's age at data collection	32.7 (10.9)	32	23
Ever been diagnosed with a mental disorder			
No	32 (61)	29 (60)	3 (75)
Yes	20 (39)	19 (40)	1 (25)
General sexuality	M ^a (SD ^b)/N ^c (% ^d)	Md/N(%)	Md/N(%)
Sexually attracted to			
Males (exclusively or mainly)	14 (27)	13 (27)	1 (25)
Males and females	35 (67)	33 (69)	2 (50)
Females (exclusively or mainly)	3 (6)	2 (4)	1 (25)
Neither males nor females	– (–)	– (–)	– (–)
Masturbation			
Ever in life			
No	– (–)	– (–)	– (–)
Yes	52 (100)	48 (100)	4 (100)
Within the last twelve month			
Never	– (–)	– (–)	– (–)
Once or several times during the year	5 (10)	4 (8)	– (–)
Once or several times a month	15 (27)	13 (27)	1 (25)
Several times a week	33 (63)	31 (65)	3 (75)
Age at first masturbation	10.9 (4.0)	12	11.5
Pornography			
Used ever in life			
No	1 (2)	1 (2)	– (–)
Yes	51 (98)	47 (98)	4 (100)
Within the last twelve month			
Never	1 (2)	1 (2)	– (–)
Once or several times during the year	10 (19)	10 (21)	– (–)
Once or several times a month	22 (42)	21 (44)	1 (25)
Several times a week	18 (35)	15 (31)	3 (75)
N/A	1 (2)	1 (2)	– (–)
Age at first use of pornography	12.3 (4.0)	12	13.5
Kind of pornography (multiple answers possible)			
Adult actors (18 years or older)	40 (78)	37 (77)	3 (75)
Gay/lesbian couples	27 (53)	25 (52)	2 (50)
Violence/rape	17 (33)	16 (33)	1 (25)
BDSM ^f	20 (39)	18 (38)	2 (50)
Fetishes (e.g., latex, urine, diapers)	14 (27)	13 (27)	1 (25)
Animals	11 (22)	10 (21)	1 (25)
Others	10 (20)	9 (19)	1 (25)
Medium preferred			
Videos/photos	38 (73)	34 (71)	4 (100)
Audios	– (–)	– (–)	– (–)
Fictitious depictions (texts, drawings)	13 (25)	13 (27)	– (–)
N/A	1 (2)	1 (2)	– (–)
Sexual interest in children	M ^a (SD ^b)/N ^c (% ^d)	Md/N(%)	Md/N(%)
Use of abuse material ^g			
No	22 (42)	21 (44)	1 (25)
Yes	30 (58)	27 (56)	3 (75)
Sexually attracted to (multiple answers possible)			
Male Infants (0–4 years)	19 (37)	18 (38)	1 (25)
Female Infants (0–4 years)	21 (40)	19 (40)	2 (50)
Boys before puberty (5–10 years)	25 (48)	23 (48)	2 (50)
Girls before puberty (5–10 years)	30 (58)	28 (58)	2 (50)
Boys at puberty (11–13 years)	22 (42)	20 (42)	2 (50)
Girls at puberty (11–13 years)	16 (31)	14 (29)	2 (50)

Table 1. (Continued).

	Total sample (n = 52)	Female born (n = 48)	Male/other born (n = 4)
Sexually attracted to			
Only male infants/children	13 (25)	12 (25)	1 (25)
Only female infants/children	14 (27)	13 (27)	1 (25)
Both male and female infants/children	25 (48)	23 (48)	2 (50)
Indication of ICD-11 pedophilic disorder diagnosis			
No	21 (40)	19 (40)	2 (50)
Yes	31 (60)	29 (60)	2 (50)
Exclusivity: Sexual interest is			
Exclusively in children	5 (10)	5 (10)	– (–)
Mainly in children but also in adults	20 (38)	18 (38)	2 (50)
Equally in children and adults	12 (23)	10 (21)	2 (50)
Mainly in adults but also in children	15 (29)	15 (31)	– (–)
Age of onset	17.4 (6.7)	16	15
Motivation to change			
Low	30 (58)	28 (58)	2 (50)
Moderate	10 (19)	8 (17)	2 (50)
High	12 (23)	12 (25)	– (–)
Professional help due to sexual interest in children			
No	37 (71)	33 (69)	4 (100)
Yes	15 (29)	15 (31)	– (–)

^aMean value.^bStandard deviation.^cAbsolute share in the sample.^dPercentage share in the sample.^eMedian.^fMeaning bondage & discipline, dominance & submission, sadism & masochism.^gAssessed as pornography involving adolescent or child actors (about 13 years or younger).

Relationship

Two questions ascertained information on participants' relationships. A yes/no-question on the relationship status was asked initially ("Are you currently in a steady relationship?"). Participants who indicated that they are in a steady relationship were asked "How old is your partner?" and specified their partner's age in years.

Diagnosis of mental disorders

Participants were asked "Have you ever been diagnosed with a psychological disorder by a physician or psychologist?" and specified the diagnoses in a free text field if they chose the response category "Yes".

Sexual orientation

Sexual orientation was assessed by the question "Whom are you sexually attracted to?" giving the response categories (1) "Exclusively to male persons", (2) "Mainly to male persons", (3) "Male and female persons", (4) "Mainly to female persons", (5) "Exclusively to female persons", and (6) "Neither males nor females". For the current study, we summarized the categories (1) and (2) into "Males (exclusively or mainly)" and the categories (4) and (5) into "Females (exclusively or mainly)".

Masturbation

Information on participants' masturbation included three questions. Participants were initially asked "Have you ever masturbated in your life?". If participants answered "Yes" they were asked "How old were you when you masturbated for the first time?" and indicated the age in years. Afterwards they were asked "How often have you masturbated in the last twelve months?" and

chose one of four response categories: (1) “Never”, (2) “Once or several times during the years”, (3) “Once or several times a month”, (4) “Several times a week”.

Pornography and abuse material

Pornography was defined as media that primarily depict erotic and sexual activities, i.e., photos, films, clips, streams, online porn, texts, or drawings. Information on participants’ use of pornography included five questions. At first, participants were asked “Have you ever watched pornography in your life?”. If participants answered “Yes” they were asked “How old were you when you watched pornography for the first time?” and indicated the age in years. Then they were asked “How often have you watched pornography in the last twelve months?” and chose one of four response categories: (1) “Never”, (2) “Once or several times during the years”, (3) “Once or several times a month”, (4) “Several times a week”. Afterwards participants were presented with the multiple choice question “Which kind of pornography do you watch?” providing the response categories: (1) “Adult actors (18 years or older)”, (2) “Adolescent actors (about 13 years)”, (3) “Child actors (about 12 years or younger)”, (4) “Gay or lesbian couples”, (5) “Violence/rape”, (6) “BDSM (bondage & discipline, dominance & submission, sadism & masochism)”, (7) “Fetishes (e.g., latex, urine, diapers)”, (8) “Animals”, and (9) “Others” (including a free text field for specification). Finally, participants were asked “Which medium do you prefer for the above-mentioned type of pornography?” giving the response categories (1) “Videos/photos”, (2) “Audios”, and (3) “Fictitious (i.e., invented) depictions (texts, drawings)”. Participants who chose one or both of the pornography categories (2) “Adolescent actors (about 13 years)” and (3) “Child actors (about 12 years or younger)” were considered using abuse material. We consider the expressions “child actors” and “adolescent actors” not appropriate as they do not reflect the sexual abuse that occurs in the context of this material. However, we applied them for assessing the use of abuse material as we think that the barrier admitting the consumption of such material may be lower when the question includes the term “actor” instead of “victim”.

Sexual interest in children

Participants were presented with the multiple choice question “Which of the following age groups relates to your sexual interest?” giving the response categories (1) “Male infants and/or small children (at the age of 4 or younger)”, (2) “Female infants and/or small children (at the age of 4 or younger)”, (3) “Boys before puberty (between 5 and 10 years old, i.e., no pubic hair yet and children’s genitals)”, (4) “Girls before puberty (between 5 and 10 years old, i.e., no pubic hair yet and children’s genitals)”, (5) “Boys in puberty (between 11 and 13 years old, i.e., beginning growth of pubic hair and maturing genitals)”, and (6) “Girls in puberty (between 11 and 13 years old, i.e., beginning growth of pubic hair and maturing genitals)”. To report whether participants are sexually attracted to either males, females, or both, this measure was also analyzed explicitly regarding the chosen gender of infants/children.

Indication of ICD-11 pedophilic disorder diagnosis

If participants chose one or more of the categories (1) to (4) at the question on “Sexual Interest in Children” (i.e., are sexually attracted to children under the age of 11 years), they were asked “Are you ever (i.e., now or in the past) repeatedly sexually aroused (accompanied by lasting sexual thoughts, fantasies, urgent needs or behaviors) by children before puberty over a longer time period (e.g., several months) to an intensive (i.e., strong) degree?”. This first yes/no question represents criterion A of the ICD-11 pedophilic disorder diagnosis (World Health Organization, 2020). If participants indicated “Yes” they were presented with a second and third yes/no questions: “Have you acted in accordance with these thoughts, fantasies or urgent needs?”

(For example, did you masturbate to these fantasies?)” and “Are (or were) you adversely affected by the thoughts, fantasies or urgent needs? (Did you suffer as a result of your fantasies, for example?)”. This second and third question represent criterion B of the ICD-11 pedophilic disorder diagnosis (World Health Organization, 2020). Participants who agreed with the first question and with one or both of the other two questions were considered having an indication of the ICD-11 pedophilic disorder diagnosis.

Exclusivity

We asked participants to complete the introductory statement “My sexual interest is...” providing the response categories (1) “... exclusively in children.”, (2) “... mainly in children but also in adults.”, (3) “... equally in children and adults.”, (4) “... mainly in adults but also in children.”.

Age of onset

The age of onset of sexual interest in children was operationalized as the age at which participants retrospectively felt that they had a sexual interest in children for the first time. They were asked “How old were you when you felt sexually attracted to children and/or adolescents for the first time?” and specified the age in years.

Motivation to change

We asked participants to rate the statement “I want to change my sexual interest in children.” on a scale: (1) “Does not apply at all”, (2) “Applies a bit”, (3) “Applies somewhat”, (4) “Applies mostly”, or (5) “Applies completely”. For the present study the categories (1) and (2) were summarized to the category “Low” and the categories (4) and (5) were summarized to the category “High”. The category (3) was called “Moderate”.

Professional help

Participants were asked “Have you ever sought professional help because of your sexual interest in children and/or adolescents (e.g., at information centers, from physicians or therapists)?” and specified where they had sought help in a free text field if their answer was “Yes”.

Data analyses and presentation

Data analyses were performed using IBM SPSS Statistics, version 22 (International Business Machines Corp., 2013). As mentioned above, four participants were not born female who may have an impact on the results. Therefore, we presented the results for the total sample and for the two subsamples, “female born” and “male/other born”. Although statistical differences between the two subsamples were considered informative, we did not conduct any comparison analyses as the “male/other born” subsample was too small. For continuous variables mean values, standard deviations and ranges were reported for the total sample. For the two subsamples the median and ranges were reported as the subsample “male/other born” only included four participants. In terms of the age of onset, we also reported the median for the total sample in order to be able to compare our results on the age of onset with previous results on men with sexual interest in children (Tozdan & Briken, 2015, 2019). For categorical and binary variables, absolute shares and percentage shares in the sample were reported.

Results

Results are shown in Table 1.

General characteristics

The 20 participants who reported having ever been diagnosed with a mental disorder specified one or more disorders ($M=2.5$, $SD = 1.32$, range = 1–5) including depression (75%), anxiety disorders (35%), posttraumatic stress disorder (30%), personality disorders (25%), obsessive compulsive disorder (15%), bipolar disorder (5%), schizoaffective disorder (5%), autism (5%), dissociative disorder (5%), eating disorder (5%), attention deficit hyperactivity disorder (5%), attention deficit disorder (5%), Munchhausen by proxy syndrome incl. Munchhausen by adult proxy syndrome (5%), and substance abuse (5%).

General sexuality

Participants' age at first masturbation ranged from 2 to 21 years (female born = 3–21; male/other born = 2–13). Their age at first use of pornography ranged from 5 to 25 years (female born = 5–25; male/other born = 8–15). "Other" pornography reported by our participants included "teenporn"; "incest"; "cartoons"; "books"; "fictional only, and I avoid excessively sexual content"; "pedophilic pornographic text chats"; "loli"³; "vore"⁴; "explicit written fiction about legal adults"; "rape-and-revenge movies, forced medication, feederism,⁵ enslavement, age play,⁶ acrotomophilia,⁷ mentally handicapped persons". The mean number of pornography themes was 3.7 ($SD = 2.2$, range = 1–13) for the total sample.

Sexual interest in children

Thirteen participants (25%) reported child actors (aged 12 years or younger), three participants (6%) reported adolescent actors (about 13 years), and 14 participants (27%) reported both. Thus, a total of 30 participants (58%) were considered using child sexual abuse material. Of those, six participants specified that they prefer fictitious (i.e. invented) depictions (texts, drawings), and 24 participants specified preferring videos/photos when watching pornography. The 31 participants who showed an indication of the ICD-11 diagnosis of pedophilic disorder agreed to the question on criterion A and on acting in accordance with their sexual interest in children. Of those, 18 participants also agreed to the question of being adversely affected by their sexual interest in children. Participants' age of onset ranged from 5 to 40 years (female born = 5–40, male/other born = 3–21) and had a median of 16 years. Participants who stated that they had sought help because of their sexual interest in children mainly had sought help from therapists (47%), psychologists (13%), and the German prevention program "Kein-Täter-Werden" (26%). One participant has sought help from her gynecologist (7%) and one from her family doctor (7%).

Discussion

The present study aimed at investigating women who have a self-identified sexual interest in children under the age of 14 years. We analyzed data from an anonymous online self-report study mainly conducted on multiple internet platforms directed toward individuals with sexual interest in children. Measures of interest referred to general characteristics, general sexuality, and sexual interest in children. The sample consists of 52 participants who were considered female as they were born as a female and/or identified with the female gender. As there were no fundamental differences between participants who were born female and those who were born male or other, we discuss our results mainly regarding the total sample and only refer to

apparent differences between the two subsamples. However, we consider four participants not representative of the total population of individuals born male or other and identify with the female gender and have a sexual interest in children. Thus, the apparent differences found in this study may be a coincidence.

General characteristics

At the time of data collection, the total sample had a mean age of 33.2 years ($SD = 11.0$). Regarding the median age, female born participants were five years older than male/other born participants. Over half of all participants reported a high level of education (56%). This is consistent with findings on men with sexual interest in children from non-forensic samples (Gerwinn et al., 2018; Tozdan & Briken, 2015, 2019) and contradicts empirical data showing a relationship between pedophilia, lower IQ, and lesser education (e.g., Blanchard et al., 2007). About half of our participants (46%) stated that they are in a steady relationship similar to the results found in non-forensic male samples (Tozdan & Briken, 2015, 2019). One of our participants (aged 29 years) indicated that she is in a steady “relationship” with a minor aged 12 years. The rest stated that their partners are of age. This means that a substantial part of our female sample that reported a sexual interest in children under 14 years was in a relationship with an adult. The one male/other born participant who stated to be in a steady relationship reported that the partner was 23 years old whereas female born participants’ partners’ age had a median of 32 years. This is in line with the fact that the male/other born participants were younger and probably had younger partners than the female born participants. Most of the participants who had been diagnosed with a lifetime mental disorder reported the diagnosis depression (29% of the total sample). This is in line with research on comorbidities in individuals with sexual interest in children showing that 30–56% had been diagnosed with major depression during their life (Kafka, 2012). Other disorders reported by our participants were also found in men with sexual interest in children, including anxiety disorders (12–53%), attention deficit hyperactivity disorder (7–77%), bipolar disorder (42–52%), and substance abuse (10–55%) (Kafka, 2012). Considering sample characteristics our female participants demonstrated similar results to non-forensic male samples with sexual interest in children in previous studies.

General sexuality

Regarding general sexuality, our participants mainly reported that they are sexually attracted to males and females (67%). Although females from the general population show higher rates of bisexuality compared to men from the general population, such a high proportion of bisexuality is usually not observed in female general populations (e.g., Dekker, Matthiesen, Cerwenka, Otten, & Briken, 2020). In the context of a cross-national study (across 28 countries), Rahman, Xu, Lippa, and Vasey (2020) reported a mean prevalence of 7.2% for bisexual identity in women. Tozdan et al. (2020) also found that females who participated in their study via a website directed to individuals with sexual interest in children tended to more frequently indicate a homosexual or bisexual orientation (Tozdan et al., 2020) than did participants from general websites. According to (Bailey et al., 2016), this may be explained because male and female infants/children have a more similar physical appearance than adult men and women and are therefore equally attractive for individuals who have a sexual interest in children. Research also demonstrated that samples of men with sexual interest in children show a higher rate of bisexual attraction compared to men without sexual interest in children (Bailey et al., 2016). However, our female participants reported bisexuality at even higher rates than men with sexual interest in children. This indicates that there may be a difference between women and men with sexual interest in children regarding sexual orientation. Participants further reported ever having masturbated and almost all (98%) reported having watched pornography ever in their life. Within

the last twelve months, most of them reported having masturbated several times a week (63%) and most of them reported having used pornography at least once or several times a month (78%). Compared to population-based female samples this can be rated as a higher level of sexual activity in these domains (Martyniuk & Dekker, 2018). Our results are consistent with those found in men with sexual interest in children showing that they have a higher rate of sexual activity than individuals without sexual interest in children (Gerwinn et al., 2018; Wurtele et al., 2018). Furthermore, our participants indicated a mean age at first masturbation of 10.9 years (SD = 4.0) and a mean age at first use of pornography of 12.3 years (SD = 4.0). In contrast, previous representative surveys revealed that women generally indicate a higher average age at first masturbation and at first use of pornography (Martyniuk & Dekker, 2018). The average age at first masturbation reported by our female participants again rather matches with the average age found in men with sexual interest in children (Gerwinn et al., 2018). Hence, our results add to previous research showing that early sexual experiences, e.g., early masturbation or early exposure to pornography, are related to sexual interest in children (e.g., Gerwinn et al., 2018; Wurtele et al., 2014, 2018). It needs to be mentioned that there were participants who reported a very young age at first masturbation (e.g., two years) which might seem unrealistic to some readers. We decided not to exclude these participants from the sample as research has already shown that even infants show sexualized behavior (e.g., Rutter, 1971). Although we do not equate adult masturbation with childish curiosity, we think that our participants might perceive their early exposure to sexual arousal retrospectively as masturbation. We, therefore, assume that these participants seriously answered the question on first masturbation. Additionally, we reviewed the overall response pattern of these participants and found out that it was fully comprehensible and consistent. Indeed, participants who reported a young age at first masturbation also reported a young age at first use of pornography. This also proves consistency of the response pattern as both ages usually are relatively close to each other in the general female population that have a similar age as our sample (e.g., Martyniuk & Dekker, 2018). Regarding the kind of pornography, they used, most participants reported adult actors (78%). The second largest group constituted participants who watched pornography with gay/lesbian couples (53%). This is in line with the result that over one third of participants indicated to be attracted to both males and females suggesting further consistency of our data. A proportion of 20–30% of participants reported deviant pornography, e.g., violence/rape or animals. Assuming this to be an indicator for multiple paraphilic sexual interests our results are in line with research suggesting that few individuals show symptoms of one or more paraphilias at the same time (Bradford et al., 1992), and about one-fourth of men with sexual interest in children show indication of any other paraphilia (Gerwinn et al., 2018). In sum, in terms of general sexuality our female participants partly demonstrated similar results to men with sexual interest in children in previous studies.

Sexual interest in children

Concerning sexual interest in children, more than half of participants (58%) indicated that they had consumed pornography involving child and/or adolescent actors. Of those, six participants stated that they prefer fictitious (i.e., invented) depictions (texts, drawings). Thus, 24 participants (47% of the total sample) can be considered using child sexual abuse material. Compared to that, non-forensic male samples show higher rates of child sexual abuse material consumption (about 70–85%) (e.g., Kuhle et al., 2018; Lampalzer et al., 2020). Perhaps some of our participants did not feel safe enough about the protection of their identity and therefore were not willing to disclose the use of abuse material. Another explanation might be that some women experience attractions to children but choose not to view abuse material for certain reasons (e.g., ethical reasons or personal discomfort). Independent of the actual proportion of women who consume abuse material, we would like to point out that current literature on abuse material barely addresses female consumers (e.g., Ly, Dwyer, & Fedoroff, 2018; Ray, Kimonis, & Seto, 2014). Our results

clearly indicate that female consumers of abuse material exist. Thus, treatment programs aiming to prevent abuse material consumption should also be explicitly directed also to females. Over half of our participants reported being sexually attracted to girls before puberty, and about half reported being attracted to boys before puberty. Fewer participants chose the other age groups. That is, our participants indicated to be sexually interested, primarily in children aged 5 to 11 years. However, most participants took the opportunity to choose more than one age group. This is in line with results on men with sexual interest in children who mainly reported to be sexually attracted to both prepubescent and pubescent children (Tozdan & Briken, 2015, 2019). In addition, the results are consistent with the result that the greatest group of our participants who use sexual abuse material indicated that they prefer both child actors aged about 12 years or younger (i.e., prepubescent children), and adolescent actors aged about 13 years (i.e., pubescent children). Nevertheless, our results are in contrast with the results on females who have been demonstrated to rather fantasize about pubescent than prepubescent children, and rather consume abuse material involving adolescent actors than child actors in previous studies (Tozdan et al., 2020). Typically, research on individuals with sexual interest in children differentiates between prepubescent and pubescent children when assessing features of sexual interest (e.g., Stephens, Cantor, Goodwill, & Seto, 2017). Our methodological approach included the differentiation between prepubescent and pubescent children as well as infants. By this, we were able to detect that over one third of our participants explicitly stated a sexual interest in infants aged 0 to 4 years. Although most of them also stated a sexual interest in other age groups, this specific sexual interest in infants had not been considered very well in past research very well. There might be differences regarding clinical implications for these individuals that should be targeted in future research. The gender of the infants/children to whom our participants were sexually attracted to is consistent with the result on their sexual orientation. That is, the greatest group indicated a sexual interest in both female and male infants/children. Remarkably, that no participant who received a diagnosis of a mental disorder has been diagnosed with pedophilic disorder although our results suggest that most of them (60%) tend to meet the diagnosis criteria of the ICD-11 pedophilic disorder. This suggests that there may be a barrier for professionals to diagnose a female client with pedophilic disorder due to the widespread assumption that sexual interest in children is a mainly male phenomenon. Most relevant, 18 participants (35% of the total sample) stated that they feel adversely affected by their thoughts, fantasies or urgent needs regarding children. These women seem to need professional help that focuses on their sexual interest in children. In addition, confirming on acting in accordance with sexual thoughts, fantasies, or urgent needs regarding children not only includes masturbation but also could reflect sexual offenses against children. For women who commit child sexual abuse, it would be even more crucial to provide professional help. The vast majority of our participants further reported that they are also sexually interested in adults. Only 10% stated that their sexual attraction is solely toward children. This is in line with the result that a substantial part of our sample reported being in an adult relationship. Previous studies on men revealed similar results, especially again for non-forensic samples and men who participated in the study via an online platform that explicitly advocates against acting on sexual interest in children (Tozdan & Briken, 2015, 2019). It appears that the majority of individuals with a sexual interest in children are also attracted to adults. This implies a great chance for individuals as the focus on adult sexuality may lead to a sufficient degree of sexual satisfaction and therefore may help prevent sexual offenses against children. The age at which our participants' sexual interest in children started had a mean value of 17.4 years ($SD = 6.7$), ranged from 5 to 40, and had a median of 16 years. This result is similar to the age of onset in the non-forensic male samples investigated by Tozdan and Briken (2015, 2019) and the age at which the men from the non-forensic sample examined by Bailey et al. (2016) began to suspect that their sexual interest in children was unusual. Just like previous results on men with sexual interest in children our results suggest that sexual interest in children does not generally occur from entering puberty onward and thus is not comparable to sexual orientation which usually occurs before the onset of puberty (e.g., McClintock & Herdt, 1996). We would like to notice

that an age of onset of five years may seem questionable to some readers as children can have a non-pathological sexual interaction with other children of their age. Nevertheless, some children may recognize their sexual interest in other children very early in life in the context of a childish curiosity (e.g., Rutter, 1971). Thus, our participants retrospectively may perceive their sexual interest in children as having started very early in life. Their motivation to change their sexual interest in children was mainly low. However, 42% indicated a moderate or high motivation to change, which may constitute a relevant resource in treatment. This proportion of motivation to change is similar to the motivation of male individuals who have participated in previous studies via an online platform that explicitly advocates against acting on sexual interest in children (Tozdan & Briken, 2015, 2019). Almost one third of our participants stated that they have sought professional help due to their sexual interest in children and mainly contacted therapists, psychologists, and professionals from prevention programs. This result does not only represent a willingness to engage in treatment but also expresses the relatively high level of suffering in these women. In order to disclose as a woman with sexual interest in children, our participants most likely needed to overcome individual barriers, including the likely existing societal taboo surrounding female pedophilia. That is why we assume that more women would seek professional help if treatment programs for individuals with sexual interest in children were explicitly also target women. Taking together, the women with sexual interest in children in the current study revealed similar characteristics to non-forensic samples of men with sexual interest in children in previous studies and those who have participated in previous studies via an online platform that explicitly advocates against acting on sexual interest in children. At the same time and in terms of characteristics of general sexuality, the women with sexual interest in children in the current study differ from women from the general population.

Limitations

Although we attempted multiple recruitment pathways, our sample cannot be considered as representative of females with a sexual interest in children. Additionally, the present data was collected online. On the one hand, this implies a high degree of anonymity fostering participants' readiness to respond truthfully. On the other hand, there is a certain degree of unknownness about participants which need to be considered as limitation. It might be that males pretended to be females or that participants generally did not respond honestly as they might not have taken the survey seriously. The English version of the study was translated by someone whose first language is English from a translation company. The translation and cultural adaptation of a questionnaire should include a forward-backward translation by qualified translators as well as subsequent validation and harmonization processes. This is why the English version of the questionnaire might have some important meaning lost or distorted in translation. All outcome measures were based on the participants' self-reports. That is, we could not clarify and confirm pedophilic and/or hebephilic interests by objective measures. We also did not use validated questionnaires in the current study, and psychometric properties for our measures are not available. Moreover, we collected data via multiple study links. It is possible that individuals who visited one of these websites also know the other website. Therefore, there might be participants who had the possibility to participate more than one time in our study without our awareness. It further needs to be mentioned that three participants entered the survey via a German study link, but appear to not be German-speaking. Free text fields showed that one participant answered in English, one in Hungarian, and one in Portuguese. The response pattern of all three participants was fully complete and consistent, e.g., answers among free text questions fit the content of the questions. Therefore, we assume that these participants either understood the German questions but preferred to answer open questions in their first language or used a website translation program to participate in our study. In terms of the latter option, we cannot determine in retrospect whether the English, Hungarian and Portuguese version of our study was correctly translated and thus these

participants might have misunderstood parts of the study content. Nevertheless, the fact that these participants took the German study in English, Hungarian, and Portuguese perhaps reflects that this group of women wants to engage in research to be better understood and support better clinical offerings in the future. Our results are further limited because the fulfilling of diagnostic criteria cannot be appropriately assessed via an online study. Possibly, participants who have an indication for the pedophilic disorder in our study would not be diagnosed with pedophilic disorder among an extensively diagnostic interview. Another limitation is that we only included women who have a sexual interest in children aged 14 years or younger. Therefore, we excluded those who have a sexual interest in older children/adolescents aged 14/15 years. Moreover, research has shown that the use of online abuse material is an indicator of sexual interest in children and compulsive sexual behavior (Engel, Veit, & Sinke, 2019). Thus, certain participants may not have a sexual interest in children in terms of pedophilia but rather fulfill the diagnostic criteria of compulsive sexual behavior. Simultaneously, we cannot rule out females with obsessive-compulsive disorder including obsessions related to children that do not indicate a sexual interest in children in the sense of pedophilia (Bruce, Ching, & Williams, 2018). An argument for that is that three participants reported that they received the diagnosis obsessive-compulsive behavior in their life time. A further limitation is that the German education categories, which were also applied to the English version of the study, are not consistent with education systems of other countries, e.g., the UK or the USA. Additionally, our question on sexual orientation was not referred explicitly to adults or children, or both. Therefore, we do not know for which age categories participants answered the question on sexual orientation. Maybe the predominant bisexuality only refers to children and not to adults. Four participants (7.7% of the total sample) do not fit the traditional definition of women as being born female. In the context of current public debates on gender, we refused to exclude participants from our study who identify with the female gender. Even though it might be assumed that these participants are not comparable to the others, our results revealed no fundamental differences between the two subsamples. Therefore, we assume that the inclusion of these four participants did not severely distort the overall results. Finally, it might be that some of the participants do not have a genuine, persistent attraction to children but have this sexual interest due to the attraction of and/or pressure by their partner. The fact that 40 per cent of participants did not show an indication of a pedophilic disorder might support this assumption. All in all, the validity and generalizability of the present results are presumably restricted to a certain degree.

Conclusion

If sexual interest in children were a phenomenon barely found in women it would seem surprising that within half a year, we have reached 52 adult females who have a self-identified sexual interest in children in the context of an online survey that was conducted with no particular public advertisement. Compared to previous research, our results suggest that men and women have more in common than they do not concerning the characteristics examined in the current study. Although being sexually attracted to children cannot be equated with sexually abusing children, research among men has shown that sexual interest in children constitutes a risk factor for child sexual abuse (Hanson & Morton-Bourgon, 2005). Our results suggest that there are women who are sexually interested in children and may be at a risk for abusing children and/or may be in need of professional help. Assuming that a similar social taboo surrounds women with sexual interest in children as women who sexually offend against children (Tozdan et al., 2019), we consider the overcome of that social taboo by professionals in the health-care system fundamental. Consequently, treatment programs preventing sexual offenses against children or the use of abuse material need to address females explicitly.

Notes

1. www.gsa-forum.de, www.kinder-im-herzen.de, www.schicksal-und-herausforderung.de, www.paedoseite.home.blog, www.krumme13.org, www.virped.org.
2. www.gute-frage.net, www.paradisi.de, www.psychologie.gofeminin.de, www.urbia.de.
3. We assumed this to be an abbreviation of “lolicon” which implies pornographic mangas/animes involving young girls.
4. Fetish involving being eaten by or eating someone or something, real or imaginary
5. Fetish involving one partner feeding the other, both to obtain sexual arousal and to encourage weight gain in the fed person
6. Form of roleplaying in which an individual acts or treats another as if they were a different age
7. Fetish involving strong sexual interest in amputees or disabled persons

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Disclosure statement

The authors declare no conflict of interest.

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ORCID

Safiye Tozdan  <http://orcid.org/0000-0001-6645-3617>

Peer Briken  <http://orcid.org/0000-0002-1360-014X>

Johanna Schröder  <http://orcid.org/0000-0002-0751-4720>

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