

Brief Report

Sex Offenders: Treat or Punish? (Community Quick Survey on Sex Offenders)

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The aim of this study was to collect data of what ordinary people think on chemical castration and the proper punishment for sex offenders. An online survey was conducted through a questionnaire ($N = 36$; 19 males and 17 females). Average age was between 19 and 61; all participants have heard and known about sexual harassment. Results showed that 21% of respondents concluded that the Internet was the main cause, 36% accused the pornographic films, 18% said that the harassment was due to how the victims behave and dress themselves, and 21% said that psychopathological factors also played a role. Most of the respondents advised that the proper punishment should be death penalty (47%), while 29% chose the chemical castration and 20% chose imprisonment. Since psychotherapy (in this context cognitive-behavioral therapy) combined with pharmacological therapy has shown better outcome compared to monotherapy, the author considers to involve cognitive behavioral therapy as part of rehabilitation, so psychotherapy should be part of punishment in lieu of chemical castration. Causes underlying the sexual harassments especially the psychological aspects are discussed.

Keywords: sex offender, media, chemical castration, punishment

Tujuan studi ini adalah menggambarkan pendapat umum masyarakat tentang kebiru kimia dan opini publik tentang hukuman yang tepat bagi penjahat seksual. Sebuah survei daring terdiri atas kuesioner pendapat umum tentang kebiru kimiawi dan hukuman yang tepat bagi penjahat seksual mendapat respons cepat dan tepat para responden ($N = 36$; 19 laki-laki dan 17 perempuan). Usia responden berkisar antara 19-61 tahun dan semuanya telah mengenal, mendengar dan mengetahui kasus kekerasan seksual. Hasil menunjukkan bahwa 21% responden menyimpulkan Internet sebagai penyebab, 36% menyalahkan film porno, 18% berpendapat bahwa kekerasan seksual terjadi karena cara korban berpakaian dan/atau berperilaku, dan 21% mengatakan bahwa faktor psikopatologi juga berperan. Sebagian besar menyatakan bahwa hukuman yang tepat bagi para pelaku adalah hukuman mati (47%), sementara 29% memilih kebiru kimiawi dan 20% memilih hukuman penjara. Psikoterapi atau terapi perilaku kognitif (*cognitive behavioral therapy*) dikombinasi dengan farmakoterapi memberi hasil yang baik dan lebih baik daripada monoterapi saja, maka psikoterapi dipandang perlu sebagai bagian dari hukuman dibandingkan dengan kebiru kimiawi. Didiskusikan sebab-sebab yang melatarbelakangi terjadinya kekerasan seksual terutama aspek psikologinya.

Kata kunci: pelecehan seksual, media, kebiru kimia, hukuman

Sex offenders are considered as scums of the society and therefore they warrant the harshest con-

demnation. The term sex offender refers to an individual who was convinced of a sex offense. Sex offense is further defined as any violation against established legal or moral codes with respect to sexual behavior. They can vary from non-contact offenses such as exhibitionism, voyeurism, and Inter-

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net related (online) sex offences to contact offences such as sexual harassment, child and adult molestation and rape. Sex offender is different from pedophilia or paraphilia. The fact that makes distinction is the action. While pedophilia or another type of paraphilia is just thinking about pleasure of bizarre sexual preference, sex offender is a person who makes this thought into action. The person can be opportunistic offender, who offends based on certain circumstances or chances. Further, there is a possibility to be a predator offender, who continuously seek out victims and always try to engage in sex offending.

Method

The author performed a review of literature about pedophilia, sex offender and chemical castration. We also performed a quick community survey involving 36 participants who responded to an online survey. The aim of this study was to get a description about what ordinary people think on chemical castration and public opinion toward deterrent punishment for sex offenders. The survey conducted, consisted of an online questionnaire about opinion concerning chemical castration and the proper punishment for sex offenders.

Causes

For the underlying paraphilia, there are several theories but they still need more research to have a better understanding of cause and effect. There are always a biological, psychological, and a social factor as potential contributor. The improvement of medical imaging technology such as MRI can be used for research concerning pedophilia, paraphilia and possibility to be an offender. In pedophilia, there are specific structural differences that indicate decreased grey matter in regions including the bilateral ventral striatum orbitofrontal cortex (Schiffer et al., 2007) and decreased volumes of white matter in two neural fiber bundles superior fronto-occipital and arcuate fasciculus (Cantor et al., 2008). Amygdala also showed abnormal activation in pedophiles (Sartorius et al., 2008).

Testosterone is a major hormone associated with libido and sexual function and several studies have reported that violent sexual offenders have higher levels of androgens than do nonviolent comparison group and androgen levels correlate positively with

prior violence and severity of sexual aggression (Joo & Kang, 2013). The serotonergic system is involved in the development of many psychiatric disorders such as depression and anxiety. Depression and anxiety are comorbid of pedophilia and other paraphilias. The similarities between pedophilia and other cognitive disorders is that all these conditions were influenced by different psychological factors in any individual, meaning that every single case requires their own unique form of therapy.

Sexual dysfunction is typically influenced by a variety of factors, namely: Predisposing factors, Precipitating factors, Maintaining factors, and Contextual factors. In sexual abuse cases or pedophilia cases, the most important is predisposing factors including both constitutional and prior life experiences that contribute to a person's vulnerability for dysfunction. This factor varies and may include a history of childhood or adult sexual abuse or violence, anatomical deformity, or chronic illness. These factors alone are rarely sufficient to create sexual dysfunction. Gender conformity throughout childhood is an early developmental marker for adolescent heterosexuality (Althof et al., 2010).

Childhood gender nonconformity predicts adolescent and adult homosexuality with greater accuracy in boys than it does in girls (Althof et al., 2010). Sexually atypical adolescents may indicate adult homosexuality and in extreme instances may be diagnosed as having a gender identity disorder (transsexualism) or a paraphilia, such as voyeurism, exhibitionism, fetishism, sadism, masochism, or pedophilia (Althof et al., 2010).

Social factors such as childhood abuse, can be a result of Internet pornography as potential contributing or identifying factor for pedophilia and sex offending (Beech, Elliot, Birgden, & Findlater, 2008).

Treatment for Sex Offenders

Surgical castration. Surgical Castration has been shown to significantly decrease the offense tendencies as a result of low testosterone level due to removal of the testes, the main producers of testosterone.

Chemical castration. In the US, surgical castration is considered as a cruel method and chemical castration is widely accepted. In some European countries, chemical castration has shown significant reduction of recidivism. In 2011, Korea started to use chemical castration as punishment. Chemical castration can be done by using medroxyprogesterone

terone acetate, cyprosterone acetate, later Luteinizing hormone releasing hormone (LHRH) such as leuprolide acetate and goserelin (Joo & Kang, 2013). In Indonesia, President Joko Widodo has signed a decree as an amendment for the previous law. The decree authorized chemical castration for convicted child sex offenders and requiring those re-leased on community to wear electronic monitoring devices (Lewis & Kwok, 2006). Although this action was done as a response to the what people consider a crisis situation, its benefits and disadvantages are still argued especially by doctors. The idea of chemical castration has become a public issue as punishment for sex offender. There are still misunderstandings about chemical castration, its indication and effects. No doubt that chemical castration can decrease a man's libido especially sex offenders but whether it will act as an effective deterrent for sex offenders is still questioned.

Cognitive behavioral therapy. Cognitive Behavioral Therapy has also shown reduction in recidivism rate and community risk (Anonymous, 2004). World Federation of Societies of Biological guidelines suggest that combined psychotherapy is associated with better efficacy compared with either treatment as monotherapy (Thibaut, De La Barra, Gordon, Cosyn, & Bradford, 2010).

Pharmacotherapy. SRI and other psychoactive drugs such as tricyclic antidepressants and benzodiazepine can be used to treat paraphilia in combination with psychiatry. Antidepressants can be used to reduce libido and delay ejaculation especially in people with mood disorders and obsessive compulsive behaviors. SSRI offer advantages because of its simple monitoring process (Silvani, Mondaini, & Zucchi, 2015).

Sex Offenders and the Media

Although the cases are indicating a form of iceberg phenomenon, but once exposed the problem of pedophilia is certainly being paid more attention to. The media constantly brings reported cases to public attention and therefore as a subject of discussion on all levels, legal social, moral medical and scientific (Silvani et al., 2015).

Approximately 80-90% of sexual offences are never reported, but once it happened and garnered media attention, it becomes public issue. Media has framed our conceptualization of offender and influenced legal decision and legislation. The media highlighted sex offenders as monsters or predators that

always seek the victim and a moral panic has developed in the community. This creates public pressure on legislator to make strict law and punishment for sex offenders (Cucolo & Perlin, n.d.).

Where do the Andrologists Take Place?

Treatment of pedophiles belongs to psychiatrist, psychologist and sexologist for many years. No doubt this case needs a multidisciplinary approach. The andrologist is the one who know the mechanism of action and the adverse effect of drugs that was used in chemical castration. As we know, GnRH agonist constitutes less of a risk than other pharmacological agents and represents the most promising treatment in pedophilic patients. From this point of view the andrologist is a highly specialized professional figure in position to assess any indication or contra-indications present in candidates as a part of a team of specialists who will consider whether or not treatment will be administered (Silvani et al., 2015).

Results

There were 36 respondents, consisted of 19 males and 17 females, age ranged from 19 to 61 years old, mostly 19-29 years old (69%). They came from various field of profession, 11% worked as government employees, 43% non-government employee, 28% worked in medical field, 20% worked as educators and the others had other kinds of jobs. Nine percent had completed elementary school, 6% had completed junior high, 33% had completed senior high, 48% had finished college and 4% were post-graduate master program. All of them have known about sex offenses among children, teenagers and adults and 29% reported sex offenses in their neighborhood. Most of them (57%) knew about the cases from TV and radio while the rest got information from magazines, newspapers and social media. Some respondents (21%) concluded Internet as the reason for sex offences; thirty six percent blamed erotic movies. There were 18% who consider the way the victim acts or dresses as the main cause of sex offenses and 21% inferred psychopathology as important factor for sex offenses.

Death penalty are the most chosen option as punishment for sex offenders (47%) while 29% chose chemical castration and 20% chose imprisonment.

Discussion

In 2016, the Indonesian president Joko Widodo introduced a presidential regulation allowing chemical castration to be handed down as punishment for sex offenders and pedophiles. The regulation alters the content of the 2002 law on child protection (Anonymous, 2016). It is said that chemical castration must be followed by rehabilitation. Some countries such as Korea use chemical castration as punishment. Chemical castration has some advantages and also disadvantages. It is true that chemical castration is preferable than surgical castration. The disadvantages such as testosterone and estrogen decline can lead to osteoporosis, cardiovascular disease and impaired glucose tolerance. If it is followed by rehabilitation, the libido and sex drive could return, this raises a question, would it be enough of a deterrent punishment for sex offenders? Since psychotherapy, in this context cognitive-behavioral therapy, combined with pharmacological therapy has shown better outcome compared to monotherapy, the author considered to involve cognitive behavioral therapy as a part of rehabilitation. We all have to remember that all cases must have one or more causes, history of childhood, child sexual abuse and sexual trauma in their early life. A trauma can be a single episode or process based trauma (ongoing behaviors) with the caregiver (Althof et al., 2010). The fact is that there must be a reason behind the offense, so the therapist must know the basic psychological causes as the root of the problem. The decision to treat or not to treat must be considered based on the risk of recidivism.

Conclusion

People nowadays are aware of sex offences in their surroundings. Although sex offenders are considered as criminals, they are unique in terms of their needs of treatment. As we remembered that not all paraphilia became sex offenders and for every offenses, there must be more than one factor involved. Numerous laws and policies have been implemented in some countries but most of them were not based on scientific research. Prevention and management based on scientific evidence will give a better result in efficacy and will create a system which guarantees security for the whole community and justice for the offenders as well.

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Appendix

Survey of People's Perception Towards Sex Offenders

Gender

- a. Male
- b. Female

Age

- a. 19-29 years old
- b. 30-40 years old
- c. 41-50 years old
- d. 51-60 years old
- e. 61 years and up

Occupation

- a. Civil servant
- b. Army /Police
- c. Non-government/entrepreneur
- d. Medical staff
- e. Teacher/lecturer)
- f. Other _____

Level of Education

- a. Elementary school or same level
- b. Secondary School or same level
- c. High school or same level
- d. Bachelor or same level
- e. Post-graduate degree (e.g. Masters, Doctorate, LLD, MD, etc)

Have you ever heard/know of sexual harassment case on children, adolescents, or adults?

- a. Yes
- b. No

Have you ever witnessed a sexual harassment case in your domestic environment?

- a. Yes
- b. No

(Appendix continues)

What is your source of information concerning sexual harassment?

- a. The media (newspaper, magazines)
- b. Social media (FaceBook, Twitter)
- c. Electronic media (TV, radio)
- d. Other _____

According to your judgment/evaluation what is the cause of the frequent sexual harassment incidents?

- a. Internet use
- b. Pornographic films
- c. Victim's dressing or behavior
- d. Offender's abnormal behavior
- e. Other _____

According to your judgment/evaluation what is the most appropriate punishment for sexual offenders?

- a. Criminalized
- b. Chemical castration
- c. Death sentence
- d. Other _____