

2013

Paraphilias: Relevant Factors for Treatment Providers of Sexual Offenders

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Recommended Citation

Tungsvik, Darren, "Paraphilias: Relevant Factors for Treatment Providers of Sexual Offenders" (2013). *All Theses, Dissertations, and Other Capstone Projects*. 871.
<https://cornerstone.lib.mnsu.edu/etds/871>

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Paraphilias: Relevant factors for treatment providers of sexual offenders

By: Darren Tungsvik

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Minnesota Sex Offender Program

Overview

The Minnesota Sex Offender Program (MSOP) provides comprehensive services to individuals who have been court-ordered to receive sex offender treatment. Most MSOP clients have completed prison sentences. Clients are civilly committed by the courts and placed in treatment for an indeterminate period of time. A court may commit a person to MSOP to ensure public safety if a judge determines that the individual is a (sexual psychopathic personality)¹ or a (sexually dangerous person)² or both.

1: Minnesota law from 1939 for SPP.

2: Minnesota statute: 253B.02 from 1994 for SDP

Paraphilia: recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving 1) non-human objects, 2) the suffering of oneself or partner, or 3) children or other non-consenting persons that occur over a period of at least 6 months.

Paraphilic Disorder: a paraphilia that is currently causing distress or impairment to the individual or a paraphilia whose satisfaction has entailed personal harm, or risk of harm, to others.

Paraphilia is necessary but not a sufficient condition for having a paraphilic disorder, and a paraphilia by itself does not necessarily justify or require clinical intervention.

Purpose

- To educate clinical staff at MSOP of Paraphilic disorders and their factors related to the treatment of sexual offenders.
- Contribute to MSOP's mission of promoting public safety through providing comprehensive treatment and reintegration opportunities for civilly committed sexual offenders.
- Need exists at MSOP with a lack of educational training materials for clinical staff of Paraphilic disorders and their treatment.

Process

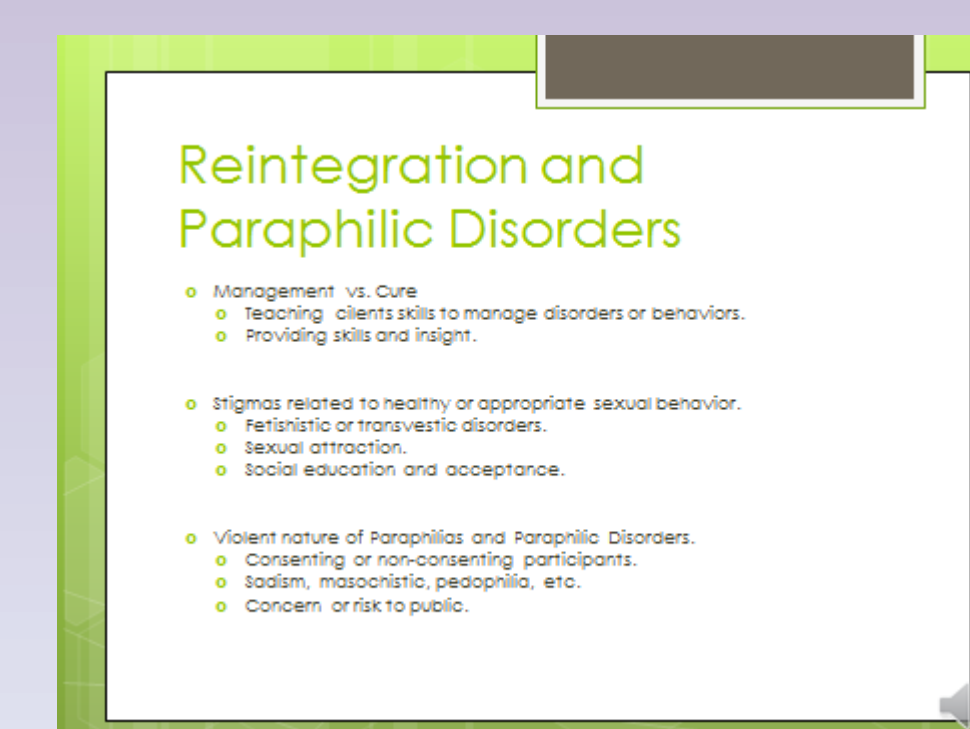
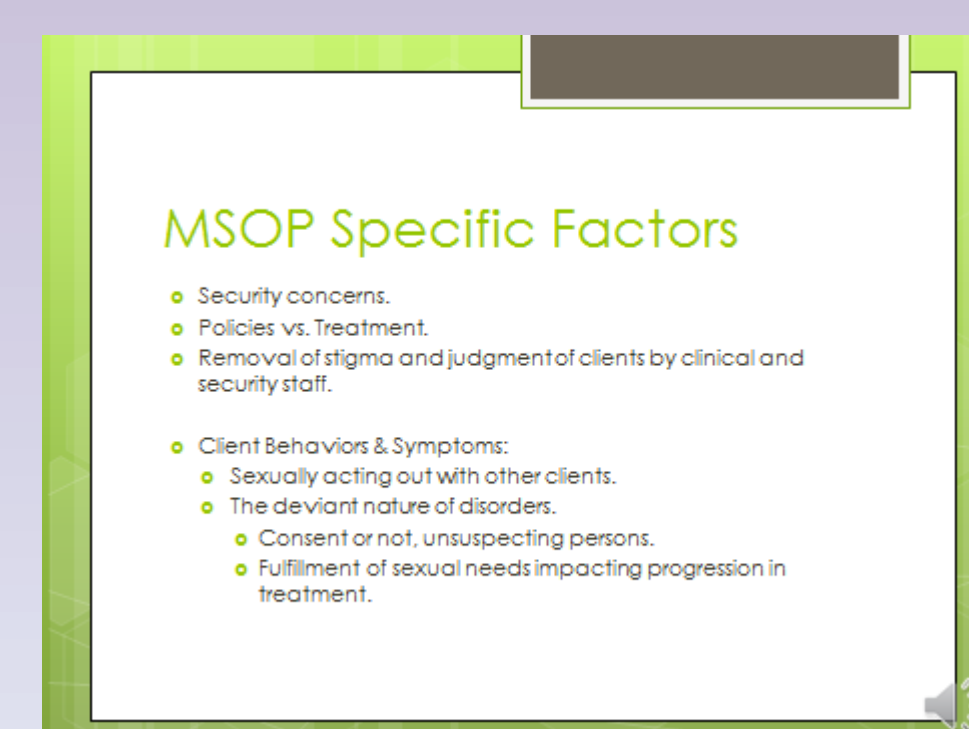
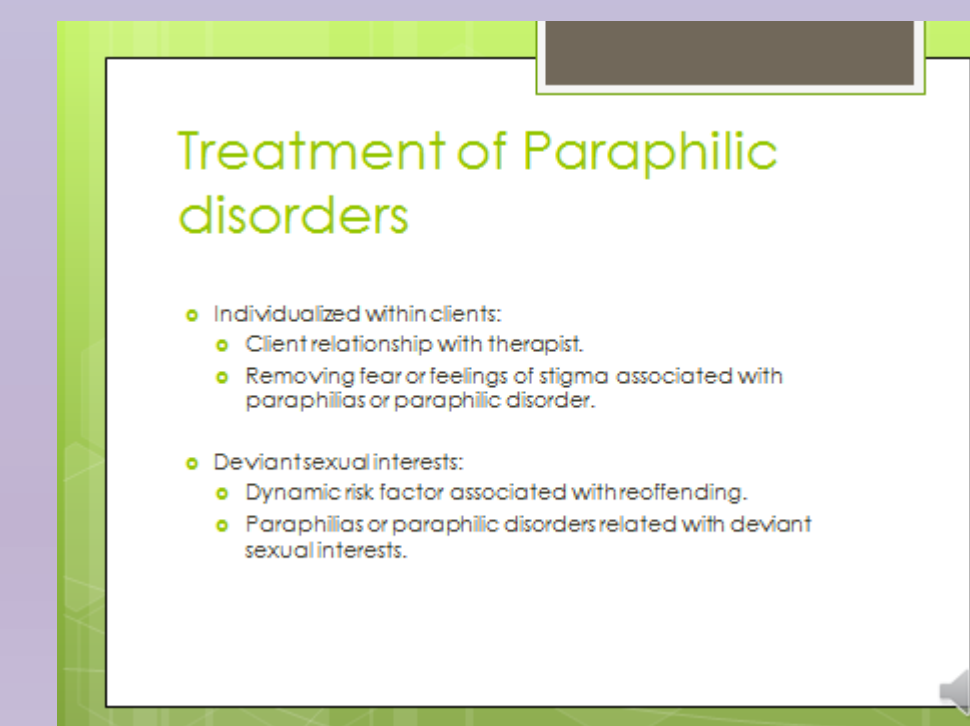
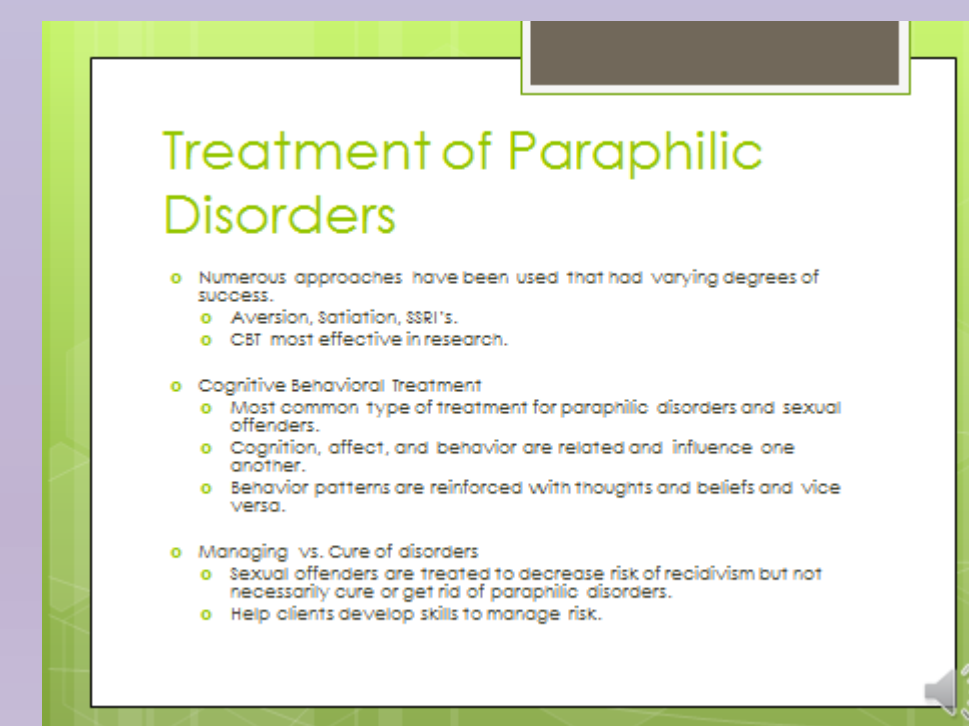
- Literature review conducted. Research related to:
 - Description of each Paraphilic Disorder:
 - Voyeuristic Disorder, Exhibitionistic Disorder, Frotteuristic Disorder, Sexual Masochistic Disorder, Sexual Sadism Disorder, Pedophilic Disorder, Fetishistic Disorder, Transvestic Disorder, Specified Paraphilic Disorder, Unspecified Paraphilic Disorder
 - Onset, Symptoms, Behaviors.
 - Deviant factors.
 - Implications for treatment settings.
 - Treatment options and factors.
 - Factors related to reintegration of clients.
- Interview with MSOP Psychologist.
- Creation of Training Program.
 - Development of PowerPoint.
 - Created script for audio in PowerPoint and presentation to clinical staff.
 - Converted PowerPoint using ISpring Program.
- Presentation to clinical staff at MSOP.
- Training PowerPoint added to CBT section for staff development content on MSOP website.

Key Content in Training

- Diagnostic criteria for Paraphilic disorders.
- Relevant considerations for cultural and gender differences within diagnostic criteria for Paraphilic disorders.
- Changes in diagnostic criteria: DSM IV. to DSM V.
- Types of treatments and their effectiveness for Paraphilic disorders.
- MSOP specific factors, concerns, and issues for clinical staff to be aware of related to Paraphilic disorders.
- Factors for clinical staff to know related to reintegration of clients.

Implications / Recommendations

- Fulfillment of MSOP's mission of providing effective treatment for sexual offenders.
- Increase in knowledge and awareness for clinical staff of the associated factors related to Paraphilic disorders in a treatment setting.
- Recommendation for individualized treatment applications for clients with Paraphilic disorders.
- Management of Paraphilic disorders vs. cure of Paraphilic disorders.
- Management of symptoms and behaviors related to Paraphilic disorders for clients is necessary for community reintegration.
- Clinical staffs knowledge of their clients and issues related to Paraphilic disorders is critical for successful client reintegration into the community.



With support provided by and sincere thanks to:
Brenda Todd-Bense, Field Instructor
David Beimers, Academic Advisor, and Michelle Alvarez, Field Liaison