

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 1  
SPEAKING ADULTS



**UiT** The Arctic University of Norway

Faculty of Health Sciences – Department of Psychology

**Examining paraphilia and emotional regulation with Norwegian speaking adults**

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Main thesis, Cand. Psychol.

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## **Preface**

Before we began the process of writing, we were going back and forth trying to find an interesting and suitable topic for our main thesis. However, as soon as we were informed about Centre for Research and Education in Forensic Psychiatry Tromsø (SIFER) and the possibility of writing a thesis for them about paraphilia, we were certain that this was something we wanted to look further into.

We were informed about the lack of research on paraphilia in general, and we thought that this would be an interesting research topic. SIFER lack specific norm data when administrating questionnaires with patients in treatment, therefore we sought to conduct this study to provide a reference distribution to clinicians who actively use these questionnaires. We would like to express great gratitude to all participants who took part in this study. Writing this thesis would have been impossible without your contribution.

We want to serve a thank you to our supervisor Matthias Mittner from Department of Psychology at UiT the Arctic University of Norway, for helping us with conducting our analyses and interpreting our results. We also want to thank Matthias for assisting us with methodological challenges. Furthermore, we are grateful for our supervisor Thomas Grov Eilertsen from SIFER Tromsø who has served us many interesting research papers and articles, and through meetings giving us a better understanding of the field of paraphilia to this day. Thank you for giving us greater knowledge in this field, and, not least, increased interest and curiosity. It has been a pleasure for us to work with both of you. Once again, thank you for the cooperation and exchange of great knowledge. Both candidates have contributed equally to this thesis with a few sections consisting of individual work. Results and conclusions have been interpreted and discussed between the two candidates.

It is our hope and aspiration that this study can contribute to paraphilia research and aid the clinical work of organizations like SIFER.

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 3  
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### **Abstract**

Exploration of paraphilia has become an interesting topic for researchers the latest years. Norway lacks sufficient research on paraphilia. Current literature has shown distinct sex differences with men reporting more interest in paraphilia than women. Emotional regulation is suggested from research as a plausible psychological factor that could affect paraphilia. We started a collaboration with SIFER to explore paraphilia and emotional regulation from a non-clinical Norwegian-speaking sample. Two questionnaires were administered: The Paraphilia Scale and DERS-18. Data material was collected through an online study. 313 participants ( $N = 114$  males, 191 females) took part in our study with age from 18 to over 50 years old. To simplify our analysis, The Paraphilia Scale was divided into 13 themes. Findings indicate evident sex differences when looking at paraphilic interests. Masochism and Sadism were the two most popular paraphilic themes for both male and female participants. The least popular themes were found to be Pedohebephilia and Zoophilia. The following paraphilic themes demonstrated sex differences: Biastophilia, Cro/Urophilia, Exhibitionism, Fetishism, Frotteurism, Pedohebephilia, Sadism, Somnophilia and Voyeurism. Male participants reported higher interest on these paraphilic themes. There were no sex differences when only assessing paraphilic behaviors. The relationship between paraphilic interests and paraphilic behaviors showed correlations that were moderate to strong on Biastophilia, Eroticized Gender, Masochism, Sadism, Telephone Scatologia and Voyeurism. The two questionnaires provide evidence showing only one significant association between emotional regulation and paraphilic interests. Implications of our results for research and clinical purposes on The Paraphilia Scale and DERS-18 are discussed.

*Keywords:* paraphilia, SIFER, emotional regulation, the paraphilia scale, DERS-18, Norway, sex differences

### **Examining paraphilia and emotional regulation with Norwegian speaking adults**

Paraphilia is a hypernym defined as atypical sexual interests and behaviors (Benestad et al., 2022). Some elements of paraphilia could involve harmless, consensual sexual interests/behaviors, while other parts can involve illegal or compulsive interests/behaviors, which can cause harm. DSM-5 primarily distinguishes between what is called normophilic (normal) and paraphilic (anomalous) sexual interests/behavior (American Psychiatric Association, 2013; Joyal, 2015). A sexual interest is paraphilic if it is outside of what is referred to as “interest in genital stimulation or preparatory fondling with phenotypically normal, physically mature, consenting human partners” (APA, 2013, p. 685). Paraphilias are considered anomalous methods to gain sexual arousal and pleasure (Benestad et al., 2022). It could be unusual in that it can be linked to specific objects, sexual activities, or situations.

To explain the term paraphilia and further specify, DSM-5 provides a distinction between the mental disorder and anomalous sexual interests/behaviors (American Psychiatric Association, 2013). Mental disorders involve psychological distress and impairment, while atypical sexual interests/behaviors do not. Characteristics of paraphilic disorder involve feeling personal distress about their sexual interests or having a sexual desire that involves another person’s psychological distress, injury, or death. There are eight variations of paraphilic disorders in the DSM-5, which include: voyeuristic (i.e., arousal from watching unsuspecting strangers while they undress), fetishistic (i.e., arousal for objects that are inanimate), pedophilic (i.e., arousal for children), sexual masochistic (i.e., arousal from experiencing pain), sexual sadistic (i.e., arousal from causing pain), transvestic (arousal from imagining themselves as the opposite gender), frotteuristic (i.e., arousal from rubbing themselves against nonconsenting people) and exhibitionistic (i.e., arousal from exposing their genitalia) disorder.

Paraphilias in general are not necessarily indicative of being a disorder (American Psychological Association, 2013). Merely having paraphilic interests or behavior does not necessarily lead to the dysfunction of behavior, cognition or emotional regulation associated with mental disorders. Indicating that the characteristic disturbance in paraphilia is only prevalent when regarded as a disorder (Moser, 2019). For parts of paraphilia to be considered a disorder, it must, as stated earlier, include distress or impairment of the person (American Psychological Association, 2013).

### **Prevalence**

Exploration of paraphilia has attracted the attention of researchers in recent years (Seto et al., 2021). The prevalence of atypical sexual interests and/or paraphilia in a nonforensic, nonclinical population, can vary (Schippers et al., 2021). In a study from the Czech population, the findings suggested that 22% of their participants have at least one paraphilic preference (Bártová et al., 2021). However, Joyal et al., (2015) found that approximately 50% of college students in Canada reported interest in unusual sexual fantasies within paraphilic interests like Sadism and Masochism. Therefore, the prevalence of atypical sexual interest shows indications of variations based on the sample or the country in which the research was conducted.

In a study of paraphilic sexual interests and sexually coercive behavior in Finland, findings suggest that paraphilic behavior among young adults in the general population has an association with sexual offending risk (Baur et al., 2016). In their study, they found strong to moderate associations between the paraphilic behaviors of Sadism, Masochism, Voyeurism, Exhibitionism, and sexual coercion. However, paraphilic behaviors related transvestic fetishism was not associated with sexually coercive behavior. This indicates that some paraphilic behavior by itself can be predictive of sexual crimes and not necessarily any paraphilic diagnosis (Moser, 2019). The prevalence rates of different paraphilic interests are

overrepresented among registered sex offenders compared to the general population (Baur et al., 2016).

Due to prevalence rates of paraphilic interests being overrepresented among registered sex offenders, there is lack of sufficient research on pedophilia in the general population (Gannon, 2021). Here, the pedophilia prevalence is estimated to be around 1% among males. This has not yet been calculated among females, and research on female pedophilia is almost non-existent. Awareness of female sex offenders can be of importance to facilitate good practice to create a gender-responsive approach towards female sex offenders (Ashfield et al., 2013).

Prevalence in Scandinavia is scarce, with little to no mapping studies on the totality of paraphilia in the general population. There are, however, a few studies on prevalence from specific parts of paraphilia. In Sweden, a few studies found indications of paraphilia in non-clinical samples, with one study suggesting transvestic fetishism (2.8% of men and 0.4% of women) (Långström & Zucker, 2005) and another indicating a prevalence of voyeuristic (7.7%) and exhibitionistic (3.1%) (Långström & Seto, 2006) behavior. Additionally, Seto et al., (2015) found a prevalence of 4.2% viewing child exploitation material amongst a sample of young men (17-20 years) in Sweden.

When looking at prevalence rates in Norway, two Norwegian surveys conducted by “UngVold” show that there has been a slight decrease in the numbers of committed sexual offences in Norway (Mossige & Stefansen, 2016). Later studies, however, indicate that the proportions of Norwegian inmates with sexual offense convictions are rapidly increasing (Friestad et al., 2021), and there is a high need for expertise in the field. The increase of inmates convicted for sexual offences is likely a result of case prioritizing from the police, and more severe sentences from the criminal court (Kriminalomsorgen, 2022).

## **SIFER**

In Norway, there is a unit named SIFER (Centre for Research and Education in Forensic Psychiatry) working with development of treatment programs with focus on sexual offenders for research purposes and professional development to both prevent and treat sexual offences (SIFER, 2019). They wish to increase the competency among forensic psychiatry, prison psychiatry and security psychiatry in Norway. They are organized throughout the country, divided into four regions, corresponding with the health regions: west (Bergen), south-east (Oslo), mid-Norway (Trondheim), and in the northern regions (Tromsø).

Under the field of forensic psychiatry, SIFER are also offering a risk-reducing treatment program for prehabilitation of people who might sexually offend. “Det Finnes Hjelp” is a national low-threshold out-patient service for people over the age of 18, who experience sexual attraction to children, or have a self-identified risk for committing sexual offence towards children or young people (Helsedirektoratet, 2020). Their aim is to reduce the risk of harmful actions, based on a holistic, strength-based treatment approach.

## **Sex differences**

Research suggests significant sex differences in paraphilia, where women report significantly more repulsion or less arousal to most paraphilic interest compared to men (Dawson et al., 2016). Research that has been conducted on nonclinical samples for men and women show a tendency where paraphilic interests are more common for men (Bouchard et al., 2017). Another study from a non-clinical sample showed that 13.6% of women and 31.3% of men reported at least one paraphilic preference, and 5% of the women and 15.5% of the men had more than one paraphilic preference (Bártová et al., 2021). In Joyal & Carpentier (2017) study however, they found that levels of interest in fetishism and masochism indicated no sex differences. Nonetheless, most of these findings provide strong indications of distinct gender differences in paraphilic interests.



Dawson et al., (2016), however, hypothesized that there might be an underlying male-bias when conducting research on paraphilic interests, this because most clinical studies being conducted on male offenders due to the lack of female offenders. They argue that paraphilic interests can be associated with what is seen as different gender roles for men and women, where men are more likely to prefer acts of sadism as part of stereotypical “male strength”, whereas women are more likely to attract to masochistic behaviors due to the stereotype of “less strength”.

Some studies have indicated that many unusual sexual fantasies are in fact more common than initially thought (Joyal et al., 2015). Considering unusual sexual fantasies, it could be of interest to explore unusual sexual behaviors/experiences. A sample from the general population in Canada found that half of the participants had paraphilic interests, while 1/3 of the participants had experienced these interests at least once (Joyal & Carpentier, 2017). According to Seto et al., (2021), paraphilic interests are positively and significantly correlated with behavior regardless of gender. It is specified however, that the associations were strongest for Sadism/Masochism and weakest for Pedohebephilia and Frotteurism. They argue that paraphilic behavior, like paraphilic interests, show significant gender effects. Female participants reported fewer paraphilic behaviors across most of the scale as compared to male participants, apart from masochistic behaviors.

Paraphilic interests and behavior need to be distinguished. For instance, one study showed that 15.9% of male and female respondents reported sexual fantasies about behaviors associated with Masochism, Fetishism, Voyeurism and Frotteurism and stated that they did not want to experience this type of act in real life (Joyal & Carpentier, 2017). This indicates that the mere presence of a paraphilic fantasy (i.e., dominating a sexual partner) is not directly indicative of paraphilic behavior when looking at nonclinical samples.

Interestingly, some research has shown that participants can have high sexual

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 10 SPEAKING ADULTS

satisfaction with a paraphilic interest without the corresponding behavior (Mundy & Cioe, 2019). Some people with a paraphilic interest rarely felt negatively affected in terms of life or sexual satisfaction. In fact, people with legal paraphilic interests had higher levels of sexual satisfaction if they had disclosed to their partner compared to those who had not. Criminal or illegal paraphilic interests, however, had lower levels of sexual satisfaction when not engaging in that paraphilic behavior.

Despite participants with illegal paraphilic interests experiencing lower levels of sexual satisfaction, the act is not always followed by the interest (Smid & Wever, 2019). Whether the act upon itself happens, is suggested to be influenced by disinhibition (Kärgel et al., 2017). Meaning, that the relationship between interest and behavior can be complex and psychological factors, like disinhibition, can have an effect.

### **Emotional regulation**

Smid & Wever (2019) examined sexual offending behaviors through an incentive motivational model of sexual deviance. According to the model, sexual arousal is described as an emotion, which indicates a bidirectional relationship between emotional self-regulation and sexual arousal. This suggests that their sexual motivation can be used to regulate emotions. Furthermore, this could also indicate that by regulating emotions, one could regulate sexual motivation to inhibit sexual inappropriate and offending behaviors. Emotional regulation is therefore an area of interest to understand problematic sexual behavior.

For some people, their sexual fantasies, urges or behavior can feel out of control or overwhelming, making sexual behavior problematic (Blum et al., 2018). Experiencing problematic sexual behavior is associated with lower quality of life, high rates of psychological distress, occupational dysfunction, and impairment in familial relationships. The problems arising from problematic sexual behavior are likely related to traits of impulsivity, low self-esteem, and problems with emotional regulation. With emotional

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 11 SPEAKING ADULTS

regulation in mind, the lack of ability to self-regulate emotions can consequently lead to psychological distress (De Castella et al., 2013). One study found that factors like higher life satisfaction, monetary income and higher socioeconomic status can lead to better emotional regulation (Côte et al., 2010). This is in line with the associated problems stated earlier with problematic sexual behavior.

Emotional regulation can be referred to as intrinsic and extrinsic processes that monitor, evaluate, and modify emotional reactions (Thompson, 1991). Therefore, in cases of stress or negative affect, problematic sexual behavior can arise with the motivation to regulate these emotions. This can create difficulties with self-control in cases of emotional distress, leading to negative consequences and lower quality of life (Blum et al., 2018). In order to see sexual behavior and actions as diagnostic, it must cause subjective feelings of distress and/or impairment in the individual's functioning (Wiederman, 2003).

Additional evidence suggests that impulsive sexual behavior is associated with lower ability to regulate emotions (Garofalo et al., 2016). In addition, according to Wittström et al., (2020), participants diagnosed with Pedophilic disorder (DSM-5) scored lower compared to controls on impaired self-regulation, making a deficit in self-regulation a risk factor for sexual offending behavior. Rottenberg & Gross (2003) proposed that psychopathology in general is highly associated with emotional regulation deficits. In addition to this, compelling results from behavioral genetics suggest a heritable approach, stating that some individuals are born with poorer regulatory mechanisms that can function as a risk factor for later development of psychopathology (Pedersen et al., 1988). In a study conducted on 95 men convicted of sexual offences, results were significantly indicative that regulatory mechanisms were associated with paraphilic behaviors (Stinson et al., 2008). When looking at these findings, it is evident that deficits within regulatory mechanisms indicate a plausible risk factor when looking at sexual offending behaviors.

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 12 SPEAKING ADULTS

Exploring paraphilia can be difficult because many paraphilic interests and behaviors are associated with illegal activities. In general, the topic touches many sensitive subjects that can cause discomfort for respondents. Therefore, the most appropriate way to acquire participants would be as anonymously as possible. When it comes to paraphilic interests and behaviors, research suggests that the most effective way to examine this field is through the Internet (Joyal & Carpentier, 2017).

Some studies have used what is called the “telephone approach”, which is phone-based, and has generated a high rate of response in studies examining paraphilic interests (Richters et al., 2008). However, Internet-based questionnaires are seemingly more efficient due to anonymity when responding to topics regarding sensitive information (Kreuter et al., 2008; Link & Mokdad, 2005). Interestingly, Mulder & de Bruijne (2019) found in one study that Internet-based questionnaires are the most popular surveys among younger participants up to the age of 44 years. Additionally, they found that the higher the educational level, the more likely they were to respond to these kinds of surveys.

### **Overview and hypotheses**

As of today, there is not enough information about paraphilic interests and behaviors (Joyal & Carpentier, 2017). When looking at different prevalence rates regarding paraphilia, Baur et al., (2016) proposed that there is a very high overrepresentation in the studied paraphilic behaviors among sex offenders compared to individuals from the general population. In Scandinavia there are a few studies exploring parts of paraphilia. Nonetheless, there is lack of studies looking into the whole scale of Paraphilia with all the interests and behaviors in mind (Långström & Zucker, 2006; Långström, & Seto, 2006; Seto et al., 2015).

In this thesis, we are interested in assessing and exploring different areas of paraphilia. In collaboration with SIFER, we were presented with a multitude of different questionnaires, among them DERS-18 and The Paraphilia Scale (see Method for more information). We

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 13 SPEAKING ADULTS

came to terms with them to utilize these two questionnaires with the intent of looking at the prevalence of paraphilia in the Norwegian-speaking, non-clinical population. Emotional regulation has been an area of interest for SIFER, and how this could possibly relate to paraphilic behavior outside the clinic. We therefore chose to combine these two questionnaires to explore a possible interaction. SIFER also expressed an interest in research providing a reference distribution from the non-clinical population to better understand and evaluate the questionnaires in use. With these in mind, we will be assessing areas such as sex differences, interest and behavior within paraphilia, and emotional regulation and its relationship with paraphilia and associated behaviors.

We wish to explore sex differences within the area of paraphilia. As former research indicates, men report significantly more arousal to most paraphilic acts and a higher prevalence of paraphilic preferences compared to women. (Bártová et al., 2021; Dawson et al., 2016). Therefore, we predict that our male participants will report higher levels of paraphilic interests than our female participants (**H1**). This will be assessed through the Paraphilia Scale Part 1. Furthermore, Seto et al., (2021) reported findings that indicate significant gender effects for paraphilic behavior, with men reporting higher occurrence compared to women. Based on this, we predict that our male participants will report higher levels of paraphilic behavior in comparison to our female participants (**H2**). This will be assessed through the Paraphilia Scale Part 2.

A Finnish study found that paraphilic behavior in the general population is shown predictive of sexual crime recidivism (Baur et al., 2016), thus providing us great interest to assess paraphilic behavior in our research. As stated, one study found that 1/3 of their participants had experienced their paraphilic interests at least once (Joyal & Carpentier, 2017). Seto et al., (2021) found that paraphilic interests are significantly and positively correlated with all paraphilic behaviors when divided into separate themes. In our analysis we

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 14 SPEAKING ADULTS

will investigate if increased paraphilic interest is correlated with paraphilic behavior (**H3**).

As studies indicate, self-regulation can play an important part in sexual behavior (Wittström et al., 2020). The lack of ability to regulate emotions can consequently lead to psychological distress (De Castella et al., 2013). Our study does not investigate any distress experienced from having unusual sexual interests or experiences/behaviors. Therefore, there is no knowledge of our respondents having a disorder or not (Seto et al., 2012). Hence, it could be interesting to investigate explicitly emotional regulation to The Paraphilia Scale; to further explore if there could be a link in a non-clinical sample, regardless of it being a disorder or not.

Through the usage of the incentive motivational model of sexual deviance, sexual offending behaviors are of significance (Smid & Wever, 2019). Some of the items from The Paraphilia Scale consists of sexual offending behaviors (Seto et al, 2012), making this a field of interest in our study. It was mentioned earlier in which the model indicates a bidirectional relationship between emotional regulation and sexual arousal. Consequently, we therefore predict that the participants that score high on Paraphilia Scale Part 1 will score likewise on DERS-18 (**H4**).

### Method

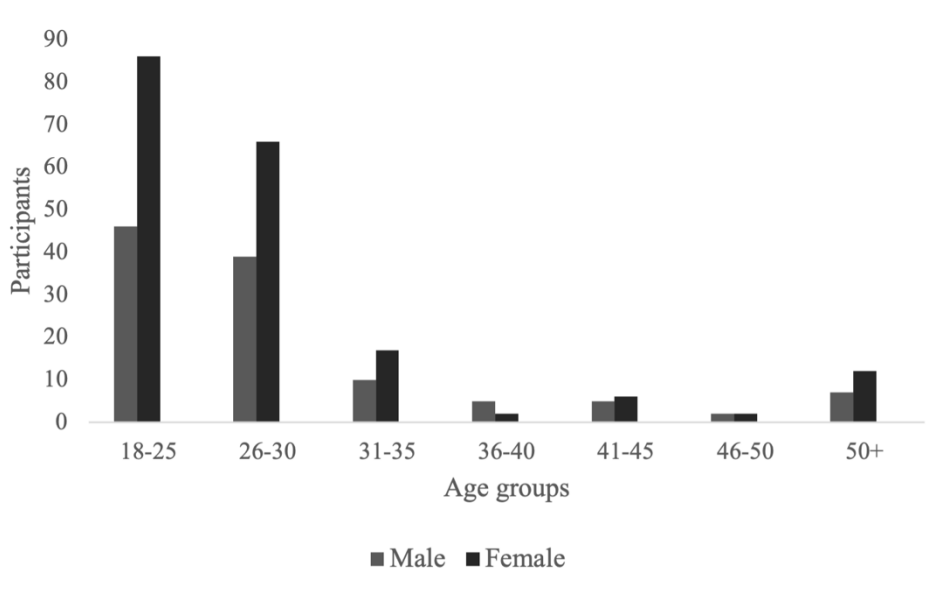
#### Participants

Three hundred and thirteen participants completed the questionnaires. The non-binary participants were excluded from the analysis due to their small size ( $N = 4$ ). 2 participants did not report their gender. However, they did complete the questionnaires, but it was essential for us to gather demographic information about the participants' preferred gender when conducting the analysis and therefore excluded. In total, 305 participants remained ( $N = 191$  female), that were distributed across age groups from 18 to over 50 years old (see Figure 1).

# EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 15 SPEAKING ADULTS

**Figure 1**

*Frequency of age groups*



*Note.* Number of males = 114, number of females = 191, total  $N = 305$ .

Research suggests that the internet approach has been seemingly efficient in cases containing sensitive information (Kreuter et al., 2008; Link & Mokdad, 2005). Therefore, the questionnaire was created online on the website Nettskjema (Nettskjema.no). To acquire enough participants, we sought to recruit participants through social media channels like Meta (Facebook & Instagram). In addition, we put them up on TV-screens throughout campus at UiT, The Arctic University of Tromsø.

Eventually to augment our participants, we had to use snowball sampling (Field, 2017) and a paid platform (Prolific,  $N = 48$ ). During the questionnaire, the participants had to answer questions concerning anonymous demographic information regarding age (18 or older) and most applicable gender (male, female, non-binary or other). We also gave the option for participants not to report their gender if desirable.

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 16 SPEAKING ADULTS

Subsequently, they had to answer questions regarding emotional regulation, paraphilic interests, and paraphilic activities (all specified in OSF; <https://osf.io/sgk8y>). To acquire a representative time usage on the questionnaire, and due to the large deviations for the duration of the questionnaires, the participants were split up. 296 participants used less than an hour on the questionnaire ( $M = 12.8$ ,  $SD = 7.2$ ), while the remaining 9 participants used more than an hour to complete the questionnaire ( $M = 264.8$ ,  $SD = 327.0$ ). Our assumption is that these latter participants started filling out the questionnaire but were at one point distracted and therefore decided to come back later to finalize it. We chose to include all participants who responded to all questions, irrespective of the time taken to respond.

### **Procedure**

In our study, we asked our participants to fill out the questionnaires *The Paraphilia Scale* and *DEERS-18 (Difficulties in Emotional Regulation Scale)* as described below. Our participants had to meet the following inclusion criteria: participants had to be adults above 18 years of age and fluent in the Norwegian language. Data collection started on the 1st of September and ended on the 14th of October 2022. Data was collected anonymously without recording any identifying information from the participants. All participants were informed about the study and processing of information in the consent form.

### **Measures**

#### ***Difficulties in Emotional Regulation Scale (DEERS-18)***

To measure emotion regulation among adults, Gratz & Roemer (2004) developed a scale to assess difficulties in emotional regulation. The scale consists of a self-report questionnaire with 36 items. These items assess and conceptualize awareness, understanding, acceptance of emotions and their capacity to behave preferably regardless of experienced emotion. The 36 items are divided further into six dimensions. These are (1) Awareness (being unaware of one's own emotions), (2) Clarity (not having clarity about one's own



## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 17 SPEAKING ADULTS

emotions), (3), Nonacceptance (lack of accepting one's own emotions), (4), Strategies (not having access to functional emotional regulation strategies), (5), Impulses (not being able to maintain impulses whilst experiencing negative emotions) and (6), Goals (lacking the ability to act in goal-intended behaviors whilst experiencing negative emotions).

Recent findings show indication of DERS having a good test-retest reliability, predicative validity, and high internal consistency (Victor & Klonsky, 2016). The questionnaire was also translated to Norwegian and validated in a Norwegian sample (Dundas et al., 2013; Visted et al., 2017). Additionally, DERS was shortened from the original 36 items to 18 items, containing the strongest items from each of the six subscales (Victor & Klonsky, 2016), which has shown excellent validity and reliability, performing similarly to the original DERS, to decrease participant burden and increase utility.

In our study we have included the translated short form (DERS-18). Participants had to complete questions about the psychological constructs involving goals ( $\alpha = .87$ ), nonacceptance ( $\alpha = .82$ ), impulse ( $\alpha = .78$ ), clarity ( $\alpha = .69$ ), awareness ( $\alpha = .70$ ), and strategies ( $\alpha = .77$ ) (Victor & Klonsky, 2016). Using a five-point scale, the participants had to rate each item from 1, *almost never*, 2, *sometimes*, 3, *about half the time*, 4, *most of the time*, to 5, *almost always*. All subscales from DERS-18 showed an acceptable internal consistency (Cronbachs  $\alpha = .84$ ).

### ***The Paraphilia Scale***

The Paraphilia Scale was developed to measure and assess paraphilias through a self-report questionnaire consisting of 80 items organized in two parts (Seto et al., 2012). It is a checklist of 40 items which describe behaviors containing paraphilic activities (both legal and illegal) or objects, plus items about sexual masochism, sadism, rape, fetishism, and mysophilia (Schippers et al., 2021; Seto et al., 2012). Vaskinn et al., (2021) translated the scale from English to Norwegian to accommodate the questionnaire for their patient group in

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 18 SPEAKING ADULTS

SIFER. It has not yet been conducted nor sampled on the non-clinical Norwegian-speaking population. Therefore, we wish to examine this and gain new insight into this field of interest. Participants were given the option of not responding to questions if they experienced any discomfort. For that reason, some items were left unanswered.

Due to an error, an item from The Paraphilia Scale 2 was not included in the online questionnaire. This item involved paraphilic behavior with feet and was corrected after 24 hours. To make sure our analysis was done thoroughly, we filled in the unanswered items with the mean imputation. As a reference point, common non-paraphilic items were included in the scale (having sex with a man/woman), but these were not included in the analysis. To check if any paraphilic interests were missed, the participants could list and rate a custom sexual interest not included on the original list. 65 items of sexual interests were listed. The most frequent items listed were (1) Anal sex ( $N = 5$ ), (2) Group sex ( $N = 4$ ), and (3) Public sex ( $N = 4$ ).

Paraphilia Scale Part One consisted of items concerning sexual interest while Part Two concerned sexual behaviors and/or experiences. The items were presented in a randomized order. Using a 7-point response scale, the participants had to rate each item from -3, *very repulsive*, -2, *somewhat repulsive*, -1, *mildly repulsive*, 0, *indifferent*, +1 *mildly arousing*, +2, *somewhat arousing*, to +3, *very arousing*. It was specified that the participants had to rate how sexually arousing or repulsive they currently found each activity, whether they had tried it or not. Part One showed excellent internal consistency (Cronbachs  $\alpha = .90$ ).

Paraphilia Scale Part Two contained the remaining 40 items. All the items were presented in a randomized order. The participants were asked to quantify their level of personal experiences using a 5-point scale, from 1, *never*, 2, *once or twice ever*, 3, *once a year or more on average*, 4, *once a month or more on average*, and 5, *once a week or more on average*. It was specified how frequently the participants had engaged in the activities in

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 19 SPEAKING ADULTS

their lifetime. Part Two had an acceptable internal consistency (Cronbachs  $\alpha = .83$ ).

To simplify our analyses, we followed Seto et al., (2021) way by placing 34 (40) different items into 13 themes/categories accordingly. These themes are (1) Biastophilia ( $\alpha = .63$ ), Cro/Urophilia ( $\alpha = .76$ ), Eroticized Gender ( $\alpha = .81$ ), Exhibitionism, Fetishism ( $\alpha = .71$ ), Frotteurism, Masochism ( $\alpha = .70$ ), Pedohebephilia ( $\alpha = .84$ ), Sadism ( $\alpha = .85$ ), Somnophilia, Telephone Scatologia, Voyeurism and Zoophilia. The label Eroticized Gender applies to the items related to autoandrophilia, autogynephilia and transvestic fetishism (Seto et al., 2021).

Six items were not included. These items were (1) You are having sex with an adult woman, (11) You are having sex with an adult man, (9) You are treating someone as an animal, (32) You are being treated as an animal, (20) You are being forced by someone into sexual activity and (40) You are having someone pretend to rape you. The analysis we were interested in did not include arousal or experience of normophilic behavior (American Psychiatric Association, 2013; Joyal, 2015), and therefore item number 1 and 11 were removed. Item number 9, 32, 20 and 40 were ambiguous, making it unclear as to which theme/category they would fit, and therefore removed from the analysis. See Table 1 for a summary and description of the categories.

**Table 1**

*Thirteen themes from The Paraphilia Scale*

Paraphilia	Item on The Paraphilia Scale	Description
Biastophilia	30, 36	Arousal for nonconsenting people
Cro/Urophilia	7, 24, 25, 38	Arousal for feces or urine
Eroticized Gender	12, 16	Arousal for imagining themselves as the opposite gender

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 20  
SPEAKING ADULTS

Exhibitionism	34	Arousal for exposing one's penis to an unaware/nonconsenting person
Fetishism	2, 4, 8, 10	Arousal for objects that are inanimate (i.e., gloves)
Frotteurism	27	Arousal for rubbing themselves against nonconsenting people
Masochism	6, 14, 21, 31, 33, 37	Arousal from experiencing pain or humiliation, such as being whipped or choked
Pedohebephilia	3, 17, 23, 28	Arousal for children that are not of sexually reproductive age, or have recently become pubescent (14 years and younger)
Sadism	13, 15, 18, 19, 26, 29	Arousal for causing someone else pain or humiliation
Somnophilia	22	Arousal from engaging in sex with someone asleep or unconscious
Telephone scatologia	39	Arousal from making sexual calls to nonconsenting people
Voyeurism	33	Arousal from viewing an unaware person undressing
Zoophilia	5	Arousal from having sex with animals (nonhuman)

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*Note.* Themes are listed alphabetically. Missing items = 1, 11, 9, 32, 40 and 20.

# EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 21 SPEAKING ADULTS

## **Ethics**

Before the participants could gain access to the questionnaires, they had to read the instructions given and sign a consent form on the website. With regards to our project, there are ethical challenges when it comes to maintaining anonymity for our participants and to ensure that no data will be stored that could lead to any information about the respondents. As written in the consent form and our social media post, there are several items in our questionnaires that can be perceived as discomforting, shocking and grotesque. All participants were given the option to withdraw from the study at any time. Therefore, we applied for approval from the institutional review board at the institute for psychology, UiT – The Arctic University of Norway for this study, in which we were granted (see Appendix D). Based on this, we considered that the questionnaire was within reason and the research was carried out.

However, we provided no follow-up option for our participants. In retrospect, linking a source for help could have been a useful alternative to participants who might have felt uncomfortable during the study. In cases where participants admit to having sexual interest in children, a follow-up with a link to “Det Finnes Hjelp” (Helsedirektoratet, 2020) should have been offered.

## **Results**

### **Descriptive statistics**

As part of our analysis, we wanted to explore The Paraphilia Scale to assist SIFER with a reference distribution. Therefore, we used this data to examine descriptive statistics by analyzing the most popular item in each of the thirteen themes from The Paraphilia Scale Part 1 as shown in Table 2. The amount of responding participants and percentage for each of the most popular items for men and women can be shown in Table 2. As described in our methods, participants were given the option to respond to all items from value –3 (repulsion)

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 22 SPEAKING ADULTS

to +3 (arousal). To quantify how many respondents expressed an interest in any of the categories, we decided to only analyze answers with positive values, omitting neutral or negative values. For the most popular paraphilic interest, a greater proportion of the participants reported interest in sexual acts associated within the themes of masochism, involving “you are being controlled or dominated by a sexual partner” ( $N = 202$ ,  $SD = 0.48$ ) and the theme of sadism, with the most popular item “you are controlling or dominating someone” ( $N = 184$ ,  $SD = 1.68$ ).

Among the least popular paraphilic interests, we found the categories of Pedohebephilia and Zoophilia showing the lowest values. We found these to be the least popular themes of paraphilia with three or less respondents reporting sexual arousal to either one. For the theme Zoophilia the item “You are having sex with an animal”, there were only 3 respondents reporting values 1 or above ( $N = 3$ ,  $SD = 0.42$ ). For the theme Pedohebephilia, the item “You are having sex with a girl (age 12-14) was the most frequent ( $N = 2$ ,  $SD = 0.08$ ).

### Table 2

*Descriptives of the most popular item in each paraphilic theme*

Theme	$N$	%	Item
Blastophilia	23	7%	You are pretending to rape someone
Cro/Urophilia	23	7%	You are being urinated on by someone ("golden showers")
Eroticized gender	33	11%	You are imagining yourself as someone of the opposite sex
Exhibitionism	4	1%	You are exposing your penis to a stranger who is not expecting it
Fetishism	36	12%	You are having your feet kissed, fondled, and touched
Frotteurism	12	4%	You are touching or rubbing a stranger who is not expecting it
Masochism	202	65%	You are being controlled or dominated by someone

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 23 SPEAKING ADULTS

Pedohebephilia	2	1%	You are having sex with a girl (age 12-14)
Sadism	184	59%	You are controlling or dominating someone
Somnophilia	5	2%	You are seeing someone unconscious or unable to move
Telephone scatologia	20	6%	You are making obscene calls to someone who is not expecting it
Voyeurism	74	24%	You are watching an unsuspecting stranger while they undress
Zoophilia	3	1%	You are having sex with an animal

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*Note.* Percentage indicates respondents reporting 1 or higher when assessing arousal level for each item.

### **Sex differences**

#### ***The Paraphilia Scale Part 1***

To assess the prevalence and sex differences from the Paraphilia Scale, we examined differences in mean ratings (for a visualization of the mean ratings, see Appendix C). Due to the non-normality in the distribution of the data from the Paraphilia Scale (because most paraphilic interests are unusual by definition), non-parametric Mann-Whitney U tests were used to examine the sex differences for each theme on Part 1 and Part 2 of the Paraphilia Scale. The dependent variable was The Paraphilia Scale Part 1 and was ordinal. The independent variable was gender and consisted of two categorical independent groups (male/female). They were also independent of observations and therefore the assumptions were met for the statistical method (Laerd Statistics, n.d.). Mean ratings of self-reported paraphilic interests for both genders are shown in Table 3.

Examining sex differences between men and women in terms of paraphilic interests provided interesting results as seen in Table 3. In line with **H1**, 11 out of 13 paraphilic themes show that our male participants report significantly more arousal in the Paraphilia Scale part 1 than female. According to Cohen's classification of effect sizes (1988), Cohens *d* around 0.2 are considered small, 0.5 are considered medium and Cohens *d* around 0.8 are considered

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 24 SPEAKING ADULTS

large. The strongest significant effect size was found for Sadism,  $U = 6120.5$ ,  $p < .001$ , Cohens  $d = 0.37$ , indicating a small effect. Only the items Eroticized gender,  $U = 10335$ ,  $p = .451$ , Cohens  $d = 0.04$  and Masochism,  $U = 1650.5$ ,  $p = .751$ , Cohens  $d = 0.02$  were not found to be significantly different for both genders.

Furthermore, the mean rate of arousal or aversion, showing that the lowest degree of arousal was reported for the items (1) Pedohebephilia and (2) Zoophilia for both men, ( $M = -2.91$ ,  $SD = 0.43$ ), ( $M = -2.91$ ,  $SD = 0.43$ ) and women, ( $M = -2.99$ ,  $SD = 0.06$ ), ( $M = -2.95$ ,  $SD = 0.42$ ). After Bonferroni corrections were performed, only the Mann Whitney U-values with significance level of  $<.003$  were acceptable. Therefore, the themes Telephone Scatologia,  $U = 8961.5$ ,  $p = .008$ , Cohens  $d = 0.15$ , and Zoophilia,  $U = 10341$ ,  $p = .033$ , Cohens  $d = 0.12$  were no longer significant. 9 paraphilic themes remained significant after Bonferroni corrections: Biastophilia, Cro/Urophilia, Exhibitionism, Fetishism, Frotteurism, Pedohebephilia, Sadism, Somnophilia and Voyeurism.

**Table 3**

*Mean ratings, SD, Mann Whitney U, Z-values and effect size for Paraphilia Part 1*

Theme	Men		Women		U	Z	d
	M	SD	M	SD			
Biastophilia	-2.23	1.21	-2.81	0.53	7409***	-6.037	0.35
Cro/urophilia	-2.47	0.82	-2.81	0.50	8475***	-4.032	0.23
Eroticized Gender	-1.37	1.43	-1.51	1.35	10335	-0.754	0.04
Exhibitionism	-2.30	1.11	-2.75	0.75	7969***	-4.544	0.26
Fetishism	-0.74	0.90	-1.36	0.97	6965***	-5.284	0.30
Frotteurism	-2.15	1.31	-2.70	0.81	8292***	-4.573	0.26
Masochism	-0.76	1.12	-0.71	1.31	10650.5	-0.318	0.02



EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 25  
SPEAKING ADULTS

Pedohebephilia	-2.91	0.43	-2.99	0.06	9739***	-3.591	0.21
Sadism	-0.39	1.25	-1.33	1.08	6120.5***	-6.404	0.37
Somnophilia	-2.15	1.37	-2.77	0.72	8249***	-5.139	0.29
Telephone scatologia	-1.74	1.36	-2.09	1.30	8961.5**	-2.668	0.15
Voyeurism	-0.37	0.89	-1.82	1.51	7969***	-4.544	0.26
Zoophilia	-2.90	0.46	-2.95	0.42	10341*	-2.133	0.12

*Note.* The respondents' options were -3 (very repulsive), -2 (somewhat repulsive), -1 (mildly repulsive) 0, (indifferent), +1 (mildly arousing), +2 (somewhat arousing), +3 (very arousing).

\* $p < .05$ , \*\* $p < .01$  \*\*\* $p < .001$ .

***The Paraphilia Scale Part 2***

To assess the prediction of male participants reporting higher levels of paraphilic behavior than female participants (**H2**) and to determine the differences in the distributions, Mann-Whitney U test of Paraphilia Scale Part 2 was conducted. The Paraphilia Scale Part 2 was the dependent variable and was ordinal. The independent variable was gender and consisted of two categorical independent groups (male/female). They were also independent of observations and therefore, the assumptions were met for the statistical method (Laerd Statistics, n.d.). The mean ratings, Mann-Whitney U statistics, Z-values, p-values and effects sizes for Part 2 can be seen in Table 4.

For Part 2, examination revealed over half of categories/themes showing significant sex differences. Consistent with our hypothesis, women reported significantly less activity than men on most of the paraphilic activities. The themes Cro/Urophilia, Eroticized Gender, Fetishism, Somnophilia, Telephone Scatologia and Zoophilia indicate no significant sex differences. However, none of the categories show significant sex differences after correction for multiple comparisons (Bonferroni), henceforth failing to find support for our hypothesis.

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 26  
SPEAKING ADULTS

Since the results were only non-significant after correction, gender differences should be treated with care not to overstate the findings.

**Table 4**

*Mean ratings, SD, Mann Whitney U, Z-values and effect size for Paraphilia Part 2*

Theme	Men		Women		U	Z	d
	M	SD	M	SD			
Biastopophilia	1.18	0.04	1.03	0.16	9222**	-4.33	0.25
Cro/Urophilia	1.06	0.39	1.05	0.19	10618.5	-0.70	0.04
Eroticized gender	1.45	0.93	1.32	0.88	9872	-1.94	0.11
Exhibitionism	1.17	0.55	1.01	0.10	9835.5**	-3.60	0.21
Fetishism	1.51	0.65	1.45	0.51	10803	-0.11	0.01
Frotteurism	1.25	0.61	1.10	0.41	10044*	-2.16	0.12
Masochism	1.72	0.67	1.88	0.68	9238.5*	-2.22	0.13
Pedohebephilia	1.01	0.06	1.00	0.00	10600.5*	-2.25	0.13
Sadism	1.94	0.84	1.48	0.54	7439**	-4.69	0.27
Somnophilia	1.21	0.60	1.11	0.40	10121.5	-1.93	0.11
Telephone scatologia	1.14	0.53	1.05	0.31	10511.5	-1.345	0.08
Voyeurism	1.51	0.77	1.26	0.61	9092**	-3.23	0.18
Zoophilia	1.00	0.00	1.01	0.14	10830	-0.77	0.04

*Note.* Alternatives for responses were 1 (Never), 2 (Once or twice ever), 3 (Once a year or more on average), 4 (Once a month or more on average), and 5 (Once a week or more on average). \* $p < .05$ . \*\* $p < .01$ .

**Examining the correlation between interests and experiences for Paraphilia Scale**

To examine the interests and activities among the Norwegian-speaking population and test **H3**, we examined the correlations between corresponding items from part 1 and part 2 of

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 27 SPEAKING ADULTS

the Paraphilia Scale (see Appendix A). Our analysis consisted only of responses from part 1 that were larger than zero (indifferent to very aroused) to examine the association. We excluded themes for which little interest was evident from our data (themes with fewer than ten respondents indicating a positive score were excluded, see Table 5). Because of the non-normality in the themes, the non-parametric Kendall Tau b correlations were used and are reported divided into themes. The variables had a monotonic relationship and were ordinal, hence meeting the assumptions for the statistical method.

Individually, most of the items from part 1 were low to moderately correlated with part 2 for both males and females (see appendix A). A great majority of correlations between Part 1 and Part 2 divided into themes were positive and moderate to strong. However, after Post-Hoc analysis with Bonferroni corrections, only the correlations with a significance level of  $<.003$  were adequate (see Table 5). Therefore, the remaining significant themes were Biastophilia, Eroticized Gender, Masochism, Sadism, Telephone Scatologia and Voyeurism. The theme with the highest correlations ( $N = 303$ ) was Eroticized Gender, ( $\tau_b = .38, p < .001$ ), showing a strong correlation (Van den Berg, 2021).

The lowest significant correlation ( $N = 303$ ) was the theme Biastophilia, ( $\tau_b = .24, p < .001$ ), indicating a moderate correlation. Depending on the specific themes, some of them fail to find support for our hypothesis with 7 of the themes either not having an acceptable significance level ( $<.003$ ) or lacking enough data to perform the analysis. The remaining 6 themes are in line with our predictions (**H3**), whereas 6 of the themes positively correlate on interest associated with behavior.

### Table 5

*Correlations between Paraphilia Part 1 and Part 2, divided into respective themes*

Theme	<i>N</i>	<i><math>\tau_b</math></i>	<i>p</i>
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EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 28  
SPEAKING ADULTS

Bistophilia	13	.24***	< .001
Cro/Urophilia	3		
Eroticized Gender	86	.38***	< .001
Exhibitionism	23	.11*	.044
Fetishism	61	.14**	.005
Frotteurism	25	.16**	.005
Masochism	86	.32***	< .001
Pedohebephilia	2		
Sadism	60	.26***	< .001
Somnophilia	32	.14*	.015
Telephone Scatologia	57	.31***	< .001
Voyeurism	108	.28***	< .001
Zoophilia	3		

*Note.* Kendall Tau b correlations are reported.

### **DERS-18 and Paraphilia Part 1**

To examine emotional regulation and their relationship with paraphilia we conducted a bivariate correlational analysis. Because of the nonnormality in the themes and subscales, Kendall Tau b correlations are reported (Table 6). Assumptions for the statistical method were met with the variables being ordinal and having a monotonic relationship (Van den Berg, 2021). Although some correlations show significant associations, all correlations are relatively weak (<.21) The strongest significant correlation ( $N = 304$ ) was between Masochism and Goals, ( $\tau_b = .158, p < .001$ ). The weakest significant correlation ( $N = 303$ ) was between Masochism and Strategies, ( $\tau_b = .094, p = .026$ ). Post-hoc analysis indicates that only the association between Masochism and Goals was significant after correction for

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 29  
SPEAKING ADULTS

multiple comparisons (Bonferroni) and the rest were non-significant. These results are in contradiction with our predictions (**H4**), and we therefore failed to reject **H0**.

**Table 6**

*Correlations between subscales (DERS-18) and themes (Paraphilia Scale Part 1)*

Variables	Awareness	Clarity	Goals	Impulse	Nonacceptance	Strategies
Bistophilia	.112*	.070	.022	.080	-.003	.053
Cro/Urophilia	.104*	.061	-.036	-.001	-.043	.004
Eroticized Gender	-.021	-.022	-.014	-.060	-.055	-.054
Exhibitionism	-.042	-.082	-.050	-.070	-.096*	-.050
Fetishism	-.007	-.074	-.068	-.080	-.104*	-.038
Frotteurism	.001	-.069	-.058	-.024	-.107*	-.063
Masochism	-.025	.042	.158***	.006	.056	.094*
Pedohebephilia	.064	.024	-.069	-.053	.024	-.039
Sadism	.009	.066	.099*	.045	-.003	.009
Somnophilia	.084	.009	-.036	-.064	-.023	-.002
Telephone Scatologia	-.040	.043	-.017	-.023	.051	.089
Voyeurism	.065	-.016	.043	.015	-.062	-.038
Zoophilia	.026	.085	.027	.008	.070	.010

*Note.* p-values. \*p < .05, \*\*\* <.001.

### Discussion

Our study has yielded interesting findings that can be seen in the context of previous studies on paraphilia. Descriptives show the most popular items from our sample, with a prevalence of 65% on the most popular theme for both sexes. Results indicate significant sex differences on most paraphilic interests (Part 1), while paraphilic behavior (Part 2) shows no

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 30 SPEAKING ADULTS

sex differences. Additionally, partial themes of paraphilic interest correlate moderately or strongly with paraphilic behavior. Results regarding DERS-18 and The Paraphilia Scale (Part 1) show that there was only suggestion of one significant association between emotional regulation and paraphilic interests.

### **Sex differences**

Our findings show that both men and women report relatively high preference (65%) for the paraphilic act of being controlled or dominated. Indicating that for both sexes, the theme Masochism was in fact, the most popular among both sexes when looking at the five most popular paraphilic interests. Regarding the least popular theme, Pedohebephilia was found to be the most aversive, with 3 or less respondents reporting any interest in the item belonging to this theme.

When dividing the scale into 13 distinct themes, the big majority of them were found to be statistically significant on arousal when looking at sex differences. The 4 themes Eroticized Gender, Masochism, Telephone Scatologia and Zoophilia did not show any evidence of statistical significance. This is consistent with our hypothesis (**H1**), suggesting that men in general report higher degree of arousal to these paraphilic interests compared to women. It was formerly hypothesized that there might be an underlying male-bias when conducting research on paraphilic interests. This due to the lack of female participants from most studies done on paraphilias and deviating sexual interests in clinical samples (Dawson et al., 2016).

Furthermore, it was additionally argued that paraphilic interests could be associated with different gender roles for men and women, suggesting that men are more likely to prefer acts of sadism as part of stereotypical “male strength”, whereas women are more likely to attract to masochistic behaviors due to the stereotype of “less strength”. Interestingly, our findings contradict these hypotheses. Our results indicate no significant sex differences on the

theme Masochism, which is also consistent with Joyal & Carpentier (2017) findings. In addition, most of our participants identified as female ( $N = 191$ ), whilst still indicating findings of males reporting higher levels of arousal on The Paraphilia Scale, contradicting these hypotheses. Therefore, our findings suggest that this sample of the Norwegian-speaking population are less likely to abide to the stereotypical acts of “male strength” or “less strength”.

When seeking out gender differences in terms of paraphilic behaviors, our findings suggest that there were no sex differences after correction for multiple comparisons (Bonferroni) in contradiction with our hypothesis (**H2**) and former literature (Seto et al., 2021). Other studies have researched paraphilic behavior without gender in question and found rates of one-third of their sample having behaved in a paraphilic matter at least once, while half expressed interest in at least one paraphilic category (Joyal & Carpentier, 2017). Paraphilic interests could therefore be more likely in a non-clinical sample compared to paraphilic behaviors. This can explain the lower prevalence of behavior. This is consistent with our results from paraphilic behavior showing that the vast majority of  $M$  responses are close to 1 (response for never experiencing specific parts of the Paraphilia Scale) apart from Masochism and Sadism, respectfully. Findings on paraphilic interests shows more heterogenous responses, which could explain the higher indications of sex differences in our sample. This has not been examined thoroughly in our study, however, and could be of interest in future research.

### **The correlation between interests and behavior for Paraphilia Scale**

The link between interests and experiences of The Paraphilia Scale has not yet been explored on a non-clinical sample from the Norwegian-speaking population. When looking at the concordance of this sample, our results suggest that interest positively and significantly correlates with behavior on 6 of the themes used in this study; Biastophilia, Eroticized

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 32 SPEAKING ADULTS

Gender, Masochism, Sadism, Telephone Scatologia and Voyeurism. All these themes show moderate correlations except for Eroticized Gender, showing a strong correlation, partly in line with **H3**.

Our findings can be interesting considering that for paraphilic behavior to be acted out, a compatible partner is needed. Research had indicated that acting out the interest was not needed for high sexual satisfaction when it was disclosed to the partner (Mundy & Cioe, 2019). Thus, the behavior is not necessarily needed for high sexual satisfaction. Despite that, our results show to some extent a correlation, indicating a likelihood of paraphilic behavior. Consequently, our results can suggest that participants have been able to find compatible partners based on their paraphilic interests. However, this does not apply to Eroticized Gender as it is not essential to have a partner to dress up as the opposite sex. This can explain the strong correlation from our findings.

According to Seto et al., (2021) paraphilic interests were positively and significantly correlated with behavior regardless of gender in their non-clinical sample, with the strongest associations for Sadism/Masochism and weakest for Frotteurism and Pedohebephilia. Our findings are consistent with the theme Masochism and Sadism. The theme of interest in our findings concerns Eroticized Gender showing the highest significant positive correlation. Studies suggested that paraphilic behavior is strong to moderate associated with sexually offending behavior (on Exhibitionism, Masochism, Sadism and Voyeurism), meaning that paraphilic behavior can be of interest while assessing sexual offending risk (Baur et al., 2016).

However, transvestic fetishism (this is referred to as Eroticized Gender in our study; see Table 1) was not associated with sexual coercive behavior (Baur et al., 2016). Suggesting that although some paraphilic behavior can be found in our sample, the highest association from our findings is the theme least likely to predict sexual offending behavior. Our findings



## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 33 SPEAKING ADULTS

indicate that this sample of the Norwegian-speaking population are more likely to behave in a sexual way dressing up as the opposite sex or imagining themselves as the opposite sex if aroused by this type of paraphilia. Ultimately, there is no need for assessment of sexual offending risk on *this* matter due to the lack of predictive effect on the theme Eroticized Gender. Nonetheless, the remaining findings are of interest.

Furthermore, our findings indicated significant positive associations of the themes Biastophilia, Telephone Scatologia and Voyeurism. Meanwhile some of the positive significant correlations in our findings consists of legal unusual sexual interests/behavior, Biastophilia, Voyeurism and Telephone Scatologia is not considered legal (Smid & Wever, 2019). Considering how our sample was acquired (snowball sample; Field, 2017) and the size of it, discovering a moderate positive correlation on these themes is intriguing. The prevalence of illegal paraphilic behavior in our sample is unexpected.

Nevertheless, the theme Biastophilia consisted of 2 items in which one can be considered as a consensual act if done correctly. This item is “you are pretending to rape someone”, meaning the act of pretend can make it legal if both sexual partners consent to it. Therefore, in our analysis, it could have been discovered for this specific item because of its popularity (see Table 2) within the theme of Biastophilia. Nonetheless, it does not explain the significant positive correlation for the themes Voyeurism and Telephone Scatologia. This provides us with fascinating results, in which our findings suggest a moderate correlation of paraphilic behavior within Biastophilia, Masochism, Sadism, Telephone Scatologia and Voyeurism if interest is initially there.

For the themes Frotteurism and Pedohebephilia regarding Seto et al., (2021) findings, we did not have enough data to draw conclusions. Although, since the analysis *is* done on a non-clinical sample, it is expected to have little to no data on illegal behaviors like Pedohebephilia and Frotteurism (Gannon, 2021). However, as stated, we did have results

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 34 SPEAKING ADULTS

indicating correlations on illegal behavior with Biastophilia, Telephone Scatologia and Voyeurism. Additional research suggests that legal paraphilia like Masochism and Sadism were associated with sexually coercive behavior (Baur et al., 2016). Therefore, our results are areas of interest for clinical matters (see Implications for more).

Since some of the results were only non-significant after correction, the concordance between interest and behavior should be treated with care not to overstate the findings. This could indicate that if not for Bonferroni corrections, all the found correlations would be significant, in line with Seto et al., (2021) findings. However, this had to be done as a precautionary measure due to the number of themes used in this study, to ensure that our correlations were reliable enough to assess the results.

### **Sexual arousal as an emotion**

Sexual offending behaviors have been studied through an incentive motivational model of sexual deviance, in which sexual arousal is used as a method to emotionally regulate (Smid & Wever, 2019). With the suggestion of sexual motivation as a strategy to regulate emotions, we wished to investigate the field of emotional regulation (DERS-18) and paraphilic interests (The Paraphilia Scale Part 1). Our findings, however, contradict these studies and our hypothesis (**H4**), suggesting almost all associations as non-significant association between DERS-18 and Paraphilia Scale Part 1. There was one exception with a significant association between Masochism and Goals (Van den Berg, 2021), indicating a weak link between lack of goal-directed behavior and Masochistic interest. This can suggest that participants interested in Masochism are likely to have some difficulties with concentration, getting work done and focusing on other things, although weakly (Victor & Klonsky, 2016). However, since the results show only 1 (out of 78 potential correlations) significant correlation, emotional regulation should be treated with care not to overstate the findings.

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 35 SPEAKING ADULTS

Regarding our study, findings can be explained by the low number of interest responses ( $<.00$ ) on certain problematic sexual behaviors like Zoophilia ( $N = 3$ ) and Pedohebephilia ( $N = 4$ ), which has shown to be an issue in studying paraphilia (Gannon, 2021). However, because our results had a floor effect (Field, 2017) it can suggest that emotional regulation has little to no relationship with The Paraphilia Scale. It can be explained by the acquisition of our sample, in which it is likely that due to this, most of our participants belong to a WEIRD (Western, Educated, Industrialized, Rich, Democratic) sample (Henrich et al., 2010). Meaning that emotional dysregulation is less likely in this type of sample, which explains the overall low  $M$  on DERS-18, apart from the subscale Goals (see Appendix B). This could be an area of interest for further studies, as we consider it important to examine whether there might be a possible association between paraphilic behaviors and emotional regulation.

For further studies, emotional regulation and paraphilia could be explored through acquiring more participants ( $N = 305$ ) or looking into specific parts of paraphilia that are problematic or illegal. This is because some parts of The Paraphilia Scale are considered common (Joyal et al., 2015), and is not necessarily problematic if it is done in the context of a consenting partner (e.g., Masochistic and Sadistic acts). Therefore, making the implications regarded from this link only necessary if found in illegal, problematic, or disordered parts of The Paraphilia Scale. This is because research indicates that dysfunction in emotional regulation only is present in paraphilia when it is regarded as a disorder (Moser, 2019).

Furthermore, we did not investigate distress experienced from having unusual sexual interests or experiences. This could be of interest due to the importance of emotional regulation and its relationship to distress (De Castella et al., 2013). Meaning, that having emotional dysregulation does not necessarily come from the paraphilic arousal/experience. This could be a consequence of dysfunction if the behavior in question is regarded as a mental

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 36 SPEAKING ADULTS

disorder. Consequently, distress from paraphilic arousal or behavior should be considered in further studies.

Another suggestion could be to examine emotional regulation and sexual behavior by creating direct inquiry of their association. This could be done with items that could look like i.e. “I feel emotionally better after I have masturbated” or “When I am upset, I prefer distracting myself in sexual ways”. In our study we explored emotional regulation passively through DERS-18 without the context of paraphilia, which could have made the participants respond to the questions in a different matter. Therefore, by creating direct inquiry, it could be possible to explore the plausible link and assess emotional regulation in the framework and context of paraphilia.

### **Implications and further measures**

After reviewing the literature and conducting our own research, the implications can be assessed. There is evidence suggesting that lower regulation of emotions associated with sexual behavior could lead to increased risk of impulsive sexual behavior (Garofalo et al., 2016). Wittström et al., (2020) proposed that challenges and impairment with self-regulatory mechanisms do make a clear risk factor for individuals with paraphilic interests. This is also in accordance with the findings of Stinson et al., (2008), suggesting that difficulties with self-regulation do predict inappropriate behavior among men with history of sexual offending. Interestingly, most of our findings suggest little to no association between emotional regulation and paraphilia, with the exception for Masochism and Goals. Former literature, however, shows the importance of emotional regulation when assessing sexual coercive behavior (Smid & Wever, 2019). Therefore, one implication with our study is that it provides valuable information about DERS-18. Specifically, in which it has shown to not be useful when assessing the link in a non-clinical sample. Therefore, DERS-18 should be reconsidered if used similarly in future studies and further studies could assess the usefulness of DERS-18

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 37 SPEAKING ADULTS

in a clinical sample, when considering problematic sexual behavior.

Research on female pedophilia is almost non-existent, and the prevalence of pedophilia among females is unknown (Gannon, 2021). Some of our results indicate a sex difference, as most of our female participants report relatively low on paraphilic interests and behavior. Regardless, it is of importance to integrate gender responsive approaches in treatment of potential sex offenders (Ashfield et al., 2013). Because even though most of the female participants did report low numbers, it does not signify that there are *no* potential female offenders, just that they are rare. Therefore, it could be of interest to implicate gender responsive approaches in treatment. Gender responsive approaches in treatment includes acknowledging gender in areas like decision making in their lives, intervention, and reintegration.

The mere presence of deviant sexual interests is not indicative of corresponding behavior (Smid & Wever, 2019). Some psychological factors can affect corresponding behavior if interest is initially there. Former research has shown that when behavior is followed by interest, it is likely influenced by disinhibition (Kärgel et al., 2017). Our findings suggest that parts of The Paraphilia Scale show moderate to strong associations between interest and behavior. The findings on disinhibition, however, were found in cases of Pedophilia. The lack of data on Pedohebephilia in our study, and lack of research on disinhibition on other parts of the Paraphilia Scale, makes the factor between interest and behavior still unknown. Therefore, disinhibition could be of interest for further measures.

Dawson et al., (2016) argue that men are more prone to engage in sexual offensive behaviors when they have higher impulsivity tendencies and engage in elevated risk-taking behaviors. Previous studies showed associations between paraphilia and sexual offending behavior (with both legal and illegal behavior) and the results from our sample indicate behaviors consistent with criminal or illegal intent (Baur et al., 2016). Although this research

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 38 SPEAKING ADULTS

also found associations on legal paraphilias like Masochism and Sadism, the priority should be on the illegal behaviors as it is known to cause harm. Therefore, it could be of interest to perhaps implicate ways to detect these paraphilic preferences in a non-clinical sample to help prevent them from developing into harmful behaviors. Systematic reviews have failed to find support for sex offender treatment programs, as they often focus on known perpetrators.

Therefore, SIFER is of great importance due to their treatment programs involved with (*potential*) sexual offenders (SIFER, 2019). Especially with programs like “Det Finnes Hjelp”, which has focus on prevention rather than offenses (Helsedirektoratet, 2020). “Det Finnes Hjelp” however, has specific focus on people at risk for committing sexual offenses against minors. Based on our findings and additional literature, we are therefore suggesting creation of new programs introducing treatment of other (illegal) paraphilias like Biastophilia, Telephone Scatologia and Voyeurism.

### **Limitations**

When conducting research, it is common to encounter a sampling bias (Field, 2017). A few factors can affect the sample when acquiring participants. A Dutch study found results showing slight differences in age when examining willingness to participate in online studies, in which younger age groups are more prone to take part in online surveys (Mulder & Bruijne, 2019). This is consistent with our sample, showing that the largest age group is from 18-25 years old, with the smallest age group in our sample consisting of participants 46-50 years old. Furthermore, it is common in Western, educated countries to acquire samples of what are called WEIRD samples - Western, Educated, Industrialized, Rich & Democratic (Henrich et al., 2010). Also, Côte et al., (2010) conducted two studies with the intent to investigate how individuals modified their emotional expressive behavior. In this study, findings indicated better emotional regulation among individuals with higher life satisfaction, monetary income and higher socioeconomic status.

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 39 SPEAKING ADULTS

Interestingly, our sample is consistent with these factors. The approach that was used when we recruited participants in the initial phase of our thesis was conducted through snowball sampling. Firstly, we obtained our sample through our own social media platforms (Facebook & Instagram), which consists of friends and acquaintances. These participants share several common demographic traits, in which the majority are between the age of 20-30 years and with a higher educational level.

We do consider that this constitutes a limitation in different ways. One way is that our sample consisted of semi-selected with highly educated individuals (WEIRD). Therefore, it could be inferred that they are associated with functional emotional regulation. In another way it was a limitation as it was something that prevented us from achieving a heterogenous sample in our study. Our study only requested demographic information from our participants regarding their preferred gender and age. This could be justified by safeguarding the anonymity of our participants.

During the creation of our questionnaire, there was an item from The Paraphilia Scale Part 2 that was not included in the questionnaires. This item was about paraphilic experiences/behavior with feet. Approximately 119 of our participants completed the questionnaires before this error was corrected. Therefore, only 194 participants were given the opportunity to answer this question. Because a lot of the items were left unanswered as stated earlier, they were filled in with the mean imputation of those items, including this first missing item. This could have impacted our data and affected the analysis. Therefore, this must be managed with caution.

However, participants were given the option to list other potential sexual behaviors in an open text box apart from the items listed in the questionnaires. If our participants had experienced paraphilic behavior with feet, they still had an opportunity to write this down despite the missing item.

## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 40 SPEAKING ADULTS

Prior to our data collection, we informed all participants that they would be presented with questions that could come across as discomfoting. We also informed about this in our social media post on Facebook and Instagram. When conducting studies that deal with controversial topics such as paraphilia and unusual sexual interests, it is not inevitable that participants answer the questionnaires in the context of societal norms (Nederhof, 1985). It is therefore likely that participants in our sample could have responded in favor of acceptable social norms as many of our items contain behaviors that are illegal (including minors, animals, etc.), or left them unanswered.

Other limitations could include misinterpretation of the questionnaire. Feedback was given regarding some of the items that the participants responded to in the questionnaires. For instance, the items regarding Pedohebephilia, i.e. “You have sexual intercourse with a boy (12-14 years old)”, could be a possible limitation as it can confuse the responder. Due to the nature of the question of Paraphilia Scale Part 2, in which the question is portrayed as such; “How often have you done each activity, ever, throughout your life”. Consequently, the items could be interpreted as: (1) did this action take place when the participant was the same age (12-14 or under 12) or (2): do you interpret this as an adult having sexual intercourse with a minor (illegal)?

Our thesis had a limited time of 5 months due to be completed with an additional need for approval from the institutional review board at the Institute of Psychology, UiT – The Arctic University of Norway. Because of this, the period of recruitment was significantly shorter than desirable. Our initial interest was to conduct factor analysis in hopes of clustering parts of The Paraphilia Scale together amongst the paraphilic interest in a Norwegian-speaking population and look at intercorrelations, creating factors. The acquired data, however, showed no promise, and with the lack of participants, we therefore had to reject the idea. For this reason and due to the important work SIFER conducts in Norway (SIFER,



## EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 41 SPEAKING ADULTS

2019), factor analysis is still of interest amongst studies of The Paraphilia Scale, especially amongst a Norwegian-speaking population.

### **Conclusion**

Consistent with Bártová et al., (2021) and Dawson et al., (2016), in this study we have been able to demonstrate sex differences in paraphilic arousal/interest across themes of Biastophilia, Cro/Urophilia, Exhibitionism, Fetishism, Frotteurism, Pedohebephilia, Sadism, Somnophilia and Voyeurism. The male participants reported significantly higher in paraphilic interests compared to female participants. We have however, not been able to demonstrate sex differences in paraphilic behavior, in contradiction with Seto et al., (2021). This can be explained by the low prevalence of paraphilic behavior in our sample compared to paraphilic interest.

The concordance between interest and behavior in our study has shown interesting findings as they have partially been in line with Seto et al., (2021) findings. They indicated positive and significantly moderate to strong correlations on 6 of the themes Biastophilia, Eroticized Gender, Masochism, Sadism, Telephone Scatologia, and Voyeurism. Our results show only suggestion of one significant association between emotional regulation and paraphilia, while the remaining were non-significant after corrections (Bonferroni). There is a probability that it can be explained by our sample likely belonging to a WEIRD (Henrich et al., 2010) sample, which could have affected the data. Suggestions for researching the link furthermore include distress, and direct inquiry.

To conclude, our findings contribute to Scandinavian research, further exploration of The Paraphilia Scale, and can aid the clinical work of organizations like SIFER. The results can suggest intriguing avenues for further research for The Paraphilia Scale, especially in areas like disinhibition, distress, and emotional regulation.

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EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 48  
SPEAKING ADULTS

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**Appendix A**

*Correlations between Paraphilia Scale Part 1 and Part 2*

<b>Item</b>	<b>R</b>	<b>p</b>
You are having sex with an adult man	0.71	< .001
You are restricting someone's breathing during sexual activity	0.62	< .001
You are verbally humiliating someone	0.61	< .001
You are having sex with an adult woman	0.59	< .001
You are having your breathing restricted during sexual activity	0.52	< .001
You are being spanked, beaten, or whipped by someone	0.51	< .001
You are spanking, beating, or whipping someone	0.51	< .001
You are being controlled or dominated by someone	0.47	< .001
You are being tied or handcuffed	0.46	< .001
You are having someone pretend to rape you	0.46	< .001
You are controlling or dominating someone	0.45	< .001
You are kissing, fondling, and touching someone's feet	0.45	< .001
You are having someone verbally humiliate you	0.44	< .001
You are tying or handcuffing someone	0.44	< .001

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 50  
SPEAKING ADULTS

You are imagining yourself as someone of the opposite sex	0.44	< .001
You are watching an unsuspecting stranger while they undress	0.43	< .001
You are cutting someone's skin	0.43	< .001
You are having your feet kissed, fondled, and touched	0.41	< .001
You are pretending to rape someone	0.40	< .001
You are being urinated on by someone ("golden showers")	0.40	< .001
You are urinating on someone ("golden showers")	0.40	< .001
You are being treated as an animal	0.38	< .001
You are having your skin cut	0.38	< .001
You are touching or rubbing a stranger who is not expecting it	0.36	< .001
You are being defecated on by someone ("scat")	0.36	< .001
You are dressing up as someone of the opposite sex	0.35	< .001
You are treating someone as an animal	0.35	< .001
You are having sex with an animal	0.32	< .001
You are exposing your penis to a stranger who is not expecting it	0.30	< .001
You are touching a material like rubber, PVC, or leather	0.24	< .001
You are making obscene phone calls to someone who is not expecting it	0.23	< .001

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 51  
SPEAKING ADULTS

You are seeing someone unconscious or unable to move	0.20	<.001
You are having sex with a girl (age 12-14)	0.13	0.02
You are touching an object like shoes, gloves, or plush toys	0.13	0.03
You are being forced by someone into sexual activity	0.10	0.07
You are forcing someone into sexual activity	0.023	0.68
You are having sex with a boy (age 12-14)		
You are defecating on someone ("scat")		
You are having sex with a boy below the age of 12		
You are having sex with a girl below the age of 12		

EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 52  
SPEAKING ADULTS

**Appendix B**

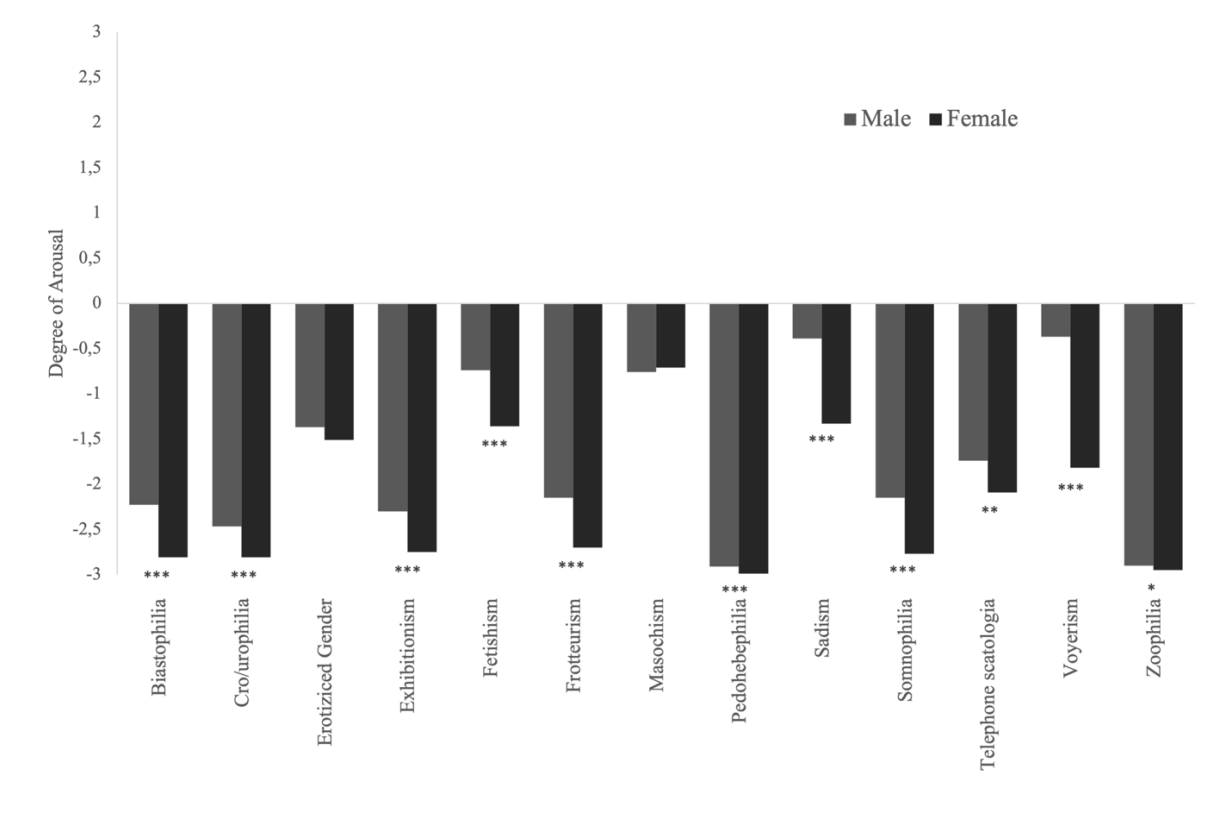
*Mean ratings for DERS-18*

Variable	Male ( <i>N</i> = 114)		Female ( <i>N</i> = 191)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Awareness	7.05	2.19	6.18	2.27
Clarity	5.63	2.17	5.43	2.17
Goals	8.15	3.03	8.82	3.01
Impulse	5.06	2.33	5.35	2.32
Nonacceptance	6.35	2.60	7.09	3.05
Strategies	4.93	2.28	5.35	2.62

*Note.* The subscales were clustered together, the lowest self-report for each subscale is 3, while the highest is 15.

### Appendix C

*Visualization of self-reported paraphilic interests as a part of Paraphilia Scale Part 1*



*Note.* Degree of Arousal from self-reported measures for men and women. \*\* $p < .01$  \*\*\* $p < .001$ .

# EXAMINING PARAPHILIA AND EMOTIONAL REGULATION WITH NORWEGIAN 54 SPEAKING ADULTS

## Appendix D



UiT Norges arktiske universitet

Institutt for psykologi

Arkiv ref.: 18/22/R1

Dato: 01.09.2022

offl. § 26,4

Matthias Mittner  
Department of Psychology  
UiT - The Arctic University of Norway

### Ethical evaluation of research project

Dear Matthias et al.,

Your application concerning your research project "*Paraphilia and emotional regulation*" has been evaluated and approved by the Department of Psychology's internal research ethics committee (IPS-REC) based on the received information.

on behalf of the Committee

A handwritten signature in blue ink, appearing to read 'Gabor Csifcsak'.

Gabor Csifcsak  
Member of IPS-REC

Vedlegg:

Kopi:  
John Vegard Bjørklund

