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Sex offenders represent an heterogeneous sample of criminal subjects. They can be divided in child and adult sexual abusers, and any of them has some different characteristics from the other. They can also be divided in subjects who commit this kind of crime just few times and people who experience recidivism. The addiction field of Psychiatry is often involved, since sex offenders have a higher history of drug abuse than healthy controls. Half of them have a positive history for drug abuse, one quarter to half have an history of alcohol dependence and one quarter to half appear to be intoxicated at the time of the offence. Violent sex offenders are more prone to abusing of alcohol than non sexual violent offenders. Murderous sex offenders are in general more afflicted by Schizoid personality disorder and have a higher history of alcohol abuse than non murderous sex offenders, as well as sexual sadism and dysfunctions. Sex offender against adult women show an higher rate of addiction problems, impulsiveness and are younger at the time of the first offence than sex offenders against prepuberal females.

Juvenile sex offenders are more incline to aberrant behaviours (e.g. online pornography).

Regarding recidivism, people abusing three or more subjects have an higher score at Barratt Impulsiveness Scale and in Addictive behaviours.

In conclusion, addiction is strictly linked to sexual aberrant behaviours, and it can be used as an indicator of different types of sexual offenders.

Moreover, it could be seen as a part of sex offenders behavior since drugs and alcohol reduces inhibitions but meantime it might be included in the presentation of some psychiatric disorders associated with aberrant sexual behavior..