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Journal Articles

Dimas, G. & Akuva, I. I. (2020). Leadership styles of Nelson Mandela as a pattern for African leaders. *Covenant University International Journal of Politics and International Affairs*, 8(1), 49-64.

Journal Article Accessed Online
Bayer, J. (2010). Customer segmentation in the telecommunications industry. *Journal of Database Marketing & Customer Strategy Management, 17*,247 – 256. doi: 10.1057/dbm.2010.21

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THERAPEUTIC MEASURES FOR PEDOPHILES: FINDINGS FROM DUTSE CUSTODIAL CENTRE, JIGAWA STATE

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Abstract:

This study examined the therapeutic measures employed for individuals convicted of child sexual offences at the Nigerian Correctional Service, Dutse Command. The research aimed to explore the forms of intervention available, inmate participation, and their perceived effectiveness. A qualitative design was adopted, and data were collected through unstructured interviews with 16 participants, comprising 12 incarcerated individuals and 4 correctional officers. The data were transcribed, translated, and thematically analyzed. Findings revealed four major themes. First, factors influencing offending behavior included poverty, unemployment, peer influence, poor upbringing, and childhood victimization. Second, therapeutic interventions such as counseling, religious sermons, moral support, and vocational training were perceived as transformative, fostering identity change and prosocial behavior. Third, barriers to rehabilitation included inadequate facilities, insufficient welfare support, limited cooperation from inmates, and the persistence of punitive practices. Finally, reintegration needs and aspirations centered on employment, education, family support, and community acceptance as conditions for sustaining desistance. Overall, the study indicates that therapeutic measures contribute to reform and reintegration but remain constrained by institutional, social, and resource limitations.

Background and Rationale of the Study

The history of incarceration in the whole universe dated as far back as 100 BC in the early historical civilization of Mesopotamia and Egypt. The early prisons were mostly detention centres built as underground dungeons. Offenders were held there until they were sentenced to either death or slavery in ancient Greece. Prisons were poorly constructed, with inmates chained by their feet using simple wooden blocks and confined under harsh conditions. In Nigeria, sporadic establishment of prisons could be traced to the pre-colonial days, when kings, emperors and warlords employed claustrophobic detention dungeons to lock up criminals or people that may be described or perceived as traitors or war captives. The origin of the modern prison began in Nigeria in 1861. That was the year when a Western-type prison was established in Nigeria (Aliyu, 2022). The name was changed from the Nigerian Prisons Service to the Nigerian Correctional Service in August 2019 by President Muhammadu Buhari (Punch, 2019). There are about two hundred and fifty-three (253) custodial centres in Nigeria (Tina, 2023) out of which eleven (11) are in Jigawa, under the Dutse Command (Maduawuchi, 2021).

Orakwe (2011) posited that murderers, burglars, killers, rapists, kidnappers, bandits, terrorists, those who commit fraudulent acts, those who violate the stated norms and laws of society, those who violate the stipulated rules and regulations, those who violate both civil and penal law, including individuals convicted of child sexual offences are also kept in correctional centres.

Pedophilic disorder is regarded as a psychiatric condition in which an adult or older adolescent experiences a primary or exclusive sexual attraction to prepubescent children (Gavin, 2014). According to the

DSM-5-TR, the individual must be at least 16 years old and at least five years older than the prepubescent child. However, many people have misconstrued the term "pedophilia" with rape. Although both involve sexual abuse, pedophilia refers specifically to sexual interest in minors, while rape means to force someone (young or old) to have sex against their will. For this reason, not all child sexual offenders are individuals with pedophilic disorder, and not all people with the disorder engage in sexual abuse of children (Barbaree & Seto, 2017; Weinrott & Saylor, 2011).

Like all other inmates, those convicted of child sexual offences have been subjected to various forms of inhuman treatment in different correctional centres in Nigeria. Even though the Prison Regulation of 1917 caters for the welfare of inmates, such people are not adequately catered for in terms of feeding, clothing, healthcare delivery, interpersonal relationships, and security. The official capacity of Nigerian custodial centres, for example, is fifty thousand (50,000) people, but all kinds of prisons are currently populated by eighty thousand, eight hundred and four (80,804) inmates (Tina, 2023). This shows that custodial facilities are overcrowded, culminating in other forms of inhuman treatment.

Officials of the Nigerian Correctional Service would like the citizenry to believe that they are performing their primary roles of "ensuring the safe custody, reformation and rehabilitation of offenders," and that they take the "treatment, resocialization and restoration of inmates" into society as the primary goals of the system. Much of these claims are questionable. They are made without sufficient understanding of the trio-concepts of treatment, reformation, and rehabilitation. In many countries, people who have been found guilty of committing sexual offences against children are obliged by law to meet with a psychologist (Chudzisz & Aschieri, 2013). In some countries, counselling options for people with pedophilic disorder, who have not necessarily transgressed against a child, exist as well. This study examined narratives from incarcerated individuals convicted of child sexual offences and correctional officials on the therapeutic measures employed by the Nigerian Correctional Service, Dutse Command.

Statement of the Research Problem

There are numerous examples, among which includes: 21-year-old man, Julius Afuape, has been arrested by men of Ogun State Police Command for forcefully having carnal knowledge of a 13-year-old girl (name withheld). Oyeyemi said the suspect was arrested following a report by the aunty of the victim at Ayetoro Divisional Headquarters that she came back from work on September 30, 2020, at about 3:45pm to discover that her niece had been sexually abused by the suspect, who lives in the same neighborhood as them. Also in Benin City, Edo state, one Benjamin Bernard, 41 years old was arraigned for allegedly defiled his own seven years old daughter, at Benin magistrate court on March 16, 2016. Also, a 26-year-old teacher, Muhammad Suleiman who allegedly defiled a three-year-old girl, on Thursday appeared before a Kano chief magistrate court, Suleiman lives at Rimin- Gata quarter, Kano, is facing a count charge, but pleaded not guilty (vanguard online newspaper, 2018). This research investigated the therapeutic measures employed by the Nigerian Correctional Service, Dutse Command, to address the needs of incarcerated pedophiles. The study seeks to understand the impacts of these measures on inmates and identify challenges affecting their effectiveness.

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Conceptual Explanation and Theoretical Framework

In terms of sociology, prison is a site of confinement. It is a facility for the confinement of criminals. According to Dambazau (2009), the criminal justice system typically consists of three main components: law enforcement, the courts, and corrections. Corrections, which include custodial centres, oversee the final output of the criminal justice process. Maintaining custody entails taking measures to prevent prisoner escapes, such as erecting high walls or chain-linked fences, stationing armed guards, conducting constant cell checks, providing a system of passes for movement within the prison, constant surveillance, and other stringent measures that may be implemented from time to time to prevent escapes, riots, and similar incidents. The primary goal of establishing a modern prison system in Nigeria is to rehabilitate and reform offenders, as well as to safeguard inmates from each other and from external threats. According to Abdullahi (2012), the foundation for establishing the prison institution is built on four key purposes: punishment, deterrence, incapacitation, and the reformation and rehabilitation of offenders.

Prison is an old term that refers to the modern correctional center used nowadays. (Amali, 2018) posits that a correctional center is a place where both ATP and convicted inmates are made to live regimented with tall walls around them and armed officials to enforce and discipline acts like possible jail break. Correctional center is a location governed by the rule of the state and established to guarantee captivity and confinement of suspects or convicted persons for disrespecting the regulation of behavioral codes of the state (Orakwe, 2011). Murderers, burglars, killers, rapists, kidnappers, bandits, terrorists, those who commit fraudulent acts, those who violate the stated norms and laws of society, those who violate the stipulated rules and regulations, those who violate both civil and penal law, including pedophiles, the subject of this study, are all imprisoned.

Pedophilia (also spelled pedophilia) is a psychiatric disorder characterized by an adult or older adolescent's primary or exclusive sexual attraction to prepubescent children. Although girls typically begin puberty at the age of 10 or 11, and boys at the age of 11 or 12, pedophilia criteria extend the cut-off point for prepubescence to the age of 13. To be diagnosed with pedophilic disorder, a person must be at least 16 years old and at least five years older than the prepubescent child, according to the DSM-5-TR. The term pedophilia is derived from the Greek words (paîs, paidós) for "child" and (phila) for "friendly love" or "friendship". Individuals with a primary or exclusive sexual interest in prepubescent children aged 13 or younger are classified as pedophilic. Infantophobia is a subtype of pedophilia that refers to a sexual preference for children younger than the age of five (especially infants and toddlers).

People have been raped by pedophiles in several cases across the continent. The rape motive also differs across society, with adolescents being mistreated for the satisfaction of adults. Some people, for instance, have psychological issues or are experiencing spiritual persecution; after committing a crime, these people will claim that the devil was responsible; other people may have committed the crime because it was necessary for them to complete their ritual to become wealthy, all of which have a negative impact on the disorder in our society.

Therapeutic Measures for treating Pedophiles and Sexual Recidivism

Pedophilia, or sexual interest in prepubescent children is a disorder that continues to be of significant concern clinicians due to its inherent link to criminal sexual offences (Seto, 2009). Without treatment, pedophiles experience a significant higher potential for relapsing, compared to those that seeks treatment. In many cases, pedophiles that are convicted for crimes against

minor children are legally mandated to undergo treatment, including options such as psychodynamic psychotherapy, behavioural therapy, surgical interventions, and psychopharmacological therapy. Although pedophilia has been described as a disorder of sexual preference, phenomenologically like a heterosexual or homosexual orientation, can also be classified as a mental disorder, since pedophilic acts cause harm, and mental health professionals can sometimes help pedophiles to refrain from harming children. Pedophiles can be assisted to make positive adjustment in their behaviour through different therapeutic measures, although there is no evidence that pedophilia can be cured (Seto, 2009). Instead, most therapies focus on helping pedophiles refrain from acting on their desires (Lenning, 2020)

However**,** therapeutic measures can be seen as methods techniques that pertain Interventions, treatment, or prevention of diseases, disorders, or conditions. In a broad sense, therapeutic means serving and caring for the patient in a comprehensive manner, preventing diseases as well as managing specific problems. Some specific measures that are employed to treat specific symptoms like pedophilic disorder include the use of drugs and surgery to reduce sexual drives, and counseling or psychotherapy to enhance positive adjustment of the patient. Commenting on the effectiveness of therapeutic measures on personality adjustment of pedophiles, Seto (2009) observed that there is no evidence that pedophilia can be cured. Instead, most therapies focus on helping pedophiles refrain from acting on their desires (Barbaree and Seto, 2017). Some therapists do attempt to cure pedophilia, but there are no studies showing that they result in a long-term change in sexual preferences (Richard, 2008).

Seto (2009) opined that attempt to cure pedophilia in adulthood are unlikely to succeed because its development is influenced by prenatal factors. Pedophilia appears to be difficult to alter, but pedophiles can be helped to control their behaviour and future research could develop a method of prevention (Seto, 2009). Hollin and Palmer (2016) explained that the first approaches to treating sex offenders in the late 1960s were mostly psychoanalytic. Although the goal was to help offenders identify and resolve early conflicts or trauma which were thought to be the cause of the offending behaviour, the results obtained were not adequate. This was the reason why part of the scientific community argued that the treatment of these individuals would be difficult or even useless (not working), leading to choosing aversive techniques, when it came to dealing with offenders (e.g punishing the offender using electric shock etc (McMurran, 2012).

In addition to strengthening punitive sanctions, psychological and pharmacological treatments for offenders have also gained status. Psychological treatment for sexual offenders had been widely studied, and the recidivism of sex offenders is one of the main results when evaluating its effectiveness (Barroso, Pechorro, Ramio, Figuetredo, Manita, and Goncalves, 2019). In the case of pharmacological treatment, it was found out that, it significantly reduces sexual drive and consequently sexual behaviour, including pedophilia (McMurran,2002). The technique was developed using the principle of Intervention of the reduction total and free testosterone in the endocrine system. Curiously, the (WFSBP) proposed that pharmacological Interventions should always be part of a more comprehensive plan e.g the Cognitive Behavioural Therapy (CBT), since the combination of the pharmacological and behavioral treatment, coupled with close legal supervision appears to reduce the risk of repeated offence (Barroso et al., 2019).

However, this study adopts Desistance Theory as its theoretical framework. Desistance refers to the process through which individuals with a history of offending gradually reduce or cease their criminal behavior over time. Originally advanced by Glueck and Glueck (1974) and further developed by Sampson and Laub (1999), desistance theory emphasizes that, in the absence of

significant neurological or biological impairment, offenders can mature, adopt prosocial identities, and disengage from crime. Recent scholarship highlights that desistance is not a singular event but a dynamic, multi-level process (McAlinden, Farmer, & Maruna, 2017). Desistance is commonly conceptualized in three stages. Primary desistance involves the initial decision to stop offending. At this stage, therapeutic interventions such as counseling, religious guidance, and cognitive-behavioral therapy (CBT) have been shown to foster awareness, motivation, and self-regulation that support early behavioral change (Olver, Marshall, & Marshall, 2020).

Secondary desistance represents the maintenance of this behavioral change and the adoption of a law-abiding identity. Here, interventions such as vocational training, skills acquisition, and pharmacological treatment like SSRIs or antiandrogens contribute to sustained self-control, provide pro-social alternatives, and help offenders manage risk factors associated with relapse (Vieira, Rose, & Craissati, 2020). On the other, tertiary desistance refers to the long-term consolidation of a non-offending identity and reintegration into society. This stage is reinforced by social therapy, community reintegration programs, and family or community support structures that nurture social capital and stable relationships (Smolinski, 2025).

By explicitly linking therapeutic measures to the stages of desistance, this study emphasizes that custodial interventions are not only corrective but also rehabilitative pathways. Evidence demonstrates that when CBT, pharmacological treatment, and psychosocial interventions are integrated, they foster both behavioral transformation and long-term reintegration, thereby reducing recidivism among individuals convicted of child sexual offences.

Methodology

Dutse Custodial centre has two halls namely Hall A and Hall B. Both the halls have 48 cells with a total capacity to accommodate 10 inmates per cell. Thus, the current number of inmates in the two halls are 478 comprising of both awaiting and convicted inmates. Out of this number, 412 are on awaiting trial while the remaining 66 are convicted inmates. Also, out of the said population, 3 are females while the remaining 475 inmates are males. To achieve effectiveness, 16 respondents were selected for study. The sample comprised 12 incarcerated pedophiles and 4 correctional officials. 16 respondents were purposively selected to give information qualitatively to obtain relevant information on the study. A sample of 16 respondents was deemed sufficient to reach thematic saturation, the point at which no new themes or insights are likely to emerge from additional data collection (Guest, Bunce, & Johnson, 2006). Moreover, including both inmates and correctional officers ensured triangulation of perspectives, thereby enhancing the credibility of findings (Patton, 2015). Qualitative method of data collection was used for the study. The method was executed via an in-depth interview. The data collected was processed and analyzed. In addition, transcription and translation were adopted in analyzing the data. Permission to conduct this study was obtained from the Office of the Controller of Corrections, Dutse Command, Jigawa State.

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Data analysis and interpretation

Socio-Demographic Characteristics of the Respondents

This section presents the socio-demographic characteristics of the respondents. It includes gender, age, marital status, religion and educational qualification.

Table 1: Respondents Gender Distribution

Gender	Frequency	Percent (%)
Male	16	100.0
Female	0	0.0
Total	**16**	**100.0**

Source: ***Field Survey,* 2023**

The data in table 1 show that all respondents were male (100%). This finding is consistent with national correctional statistics, which indicate that women constitute less than 5% of Nigeria's prison population (Nigerian Correctional Service, 2022). Both correctional officials and inmates in sexual offence cases are predominantly male, reflecting broader global patterns where men are disproportionately involved in sexual offending (Seto, 2009). The absence of female respondents, therefore, underscores the gendered nature of both offending and correctional employment in Nigeria.

Table 2: Age Distribution of the Respondents

Age	Frequency	Percent (%)
18-27 years	0	0.0
28-37 years	4	25.0
38-47 years	8	50.0
48 years and above	4	25.0
Total	**16**	**100.0**

Source: ***Field Survey, 2023***

Table 2 above shows the age distribution of the respondents, where the majority of respondents (50%) fell within the 38–47 age group, with smaller proportions in the 28–37 (25%) and 48+ (25%) brackets. None were between 18–27 years. This pattern reflects the tendency for sexual offending, particularly child sexual offences, to occur more frequently among middle-aged men (Craissati, 2018). The absence of younger offenders may also suggest that pedophilic offending often emerges later in adulthood rather than in early youth, consistent with studies showing a strong association between maturity, entrenched behavioral patterns, and sexual offending (Seto, 2009).

Table 3: Marital Status of the Respondents

Marital Status	Frequency	Percent (%)
Single	10	62.5
Married	6	37.5
Divorced	0	0.0
Total	**16**	**100.0**

Source: ***Field Survey,* 2023**

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Table 3 above indicates the marital status of the respondents where majority of the respondents are single represent by 62.5% and the remaining 37.5% are married hose married. The findings of the study show most of the respondents were single. This finding is significant because existing literature suggests that social isolation, unstable family life, and weak intimate relationships are risk factors associated with sexual offending (Mpofu, Athanasou, & Rafe, 2018). The predominance of single individuals may indicate limited family or community support structures, which are essential for both prevention and rehabilitation. Married respondents, however, still engaged in offending, showing that marital status alone is not protective, but the quality of family and relational bonds matters more than legal status.

Table 4: Educational Qualification of the Respondents

Educational Qualification	Frequency	Percent (%)
Primary	6	37.5
Secondary	4	25.0
Tertiary	2	12.5
Others	4	25.0
Total	**16**	**100.0**

Source: ***Field Survey*, 2023**

Table 4 above shows the educational qualification of the respondents where majority of the respondents had primary qualification which represent 37.5%, secondary with 25.0%, tertiary with 12.5%, and others with 25.0%. Those with primary qualifications are the majority because they are the most prevalent in Dutse Custodial centre. The relatively high proportion of respondents with minimal education highlights the intersection between socioeconomic disadvantage and offending behaviors in Nigeria. Education has also been shown to play a protective role in reducing recidivism, as offenders with higher education are more likely to desist from crime when provided with vocational or rehabilitative opportunities.

Substantive Issues

This section presents findings from interviews with 20 incarcerated pedophiles at Dutse Custodial Centre, Jigawa State. The analysis focused on four themes (Factors Influencing Offending Behaviour; Therapeutic Interventions and Perceived Benefits; Barriers to Rehabilitation; Reintegration Needs and Imminent Aspirations.

Theme 1: Factors Influencing Offending Behaviour

Respondents consistently linked their offences to complex personal, social, and structural factors. They highlighted poverty, peer influence, weak moral upbringing, and childhood victimization as primary drivers that shaped their offending pathways.

In an in-depth interview, one respondent revealed:

I was accused to have committed child rape, I was playing with a girl while we were watching television. Her brother approached me, and he started shouting that he caught me sexually assaulting his sister. I was apprehended by the police. (IDI with Respondent A, 2023).

Another participant emphasized a different perspective, describing prolonged involvement in child sexual abuse and acknowledging a lifetime sentence as the outcome of his actions, illustrating entrenched offending behaviors rather than isolated incidents. He revealed thus:

Homosexuality is my alleged offence that led to my incarceration. For quite a long period of time, I have committed the act, and I can't say the exact number of children I influence into

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homosexuality. Thus, I was found guilty by the court after been caught and sentenced to life imprisonment. (IDI with Respondent B, 2023).

Other respondents stressed how early exposure to abuse created conditions for reoffending, highlighting the cyclical nature of victimization where prior experiences of exploitation became linked with later engagement in offending behaviors. The inmate posits that:

I have been in the Custodial centre for almost seven years. I committed the act due to various reasons including peer influence and lack of moral teachings. This is because, during my younger age, one man who happens to be a pedophile used to give me sweet and will utilize the opportunity to have anal intercourse with me. (IDI with Respondent D, 2023).

Convicted inmates further described long-term offending patterns, acknowledging repeated misconduct and manipulative strategies to exploit children, showing that their behaviors developed over time rather than being single or impulsive events. Two inmates respectively revealed that:

Yes, I was convicted. I have been committing the act for quite a long period of time. Court sentenced me to correctional facility over alleged pedophile, and I really do commit the act. (IDI with Respondent E, 2023).

Yes, I have been convicted for the past four years. I was convicted after been caught by the community members having carnal knowledge of two children. I used to give the children money, sweets and biscuits, for them to comply with my intention and that is how I have been doing it for quite a long period of time. (IDI with Respondent F, 2023).

When asked directly about reasons for offending, two convicted inmates pointed to structural vulnerabilities such as unemployment, illiteracy, and weak family or religious guidance, reinforcing the broader socioeconomic context of offending behavior. They said thus:
Poverty, unemployment and peer influence are the reasons for committing such an act. Other factors that influence me to commit the act include moral decadence and illiteracy. These all predispose me into committing the act. (IDI with Respondent B, 2023).

There are various factors that influence me to pedophile. Poor moral upbringing, lack of financial support from family members, lack of religious teaching inculcated in me, and bad company predisposes me into pedophile. (IDI with Respondent G, 2023).

Custodial officials also confirmed these narratives, framing illiteracy, moral breakdown, and lack of religious commitment as underlying causes that contributed to offending among incarcerated individuals convicted of child sexual offences. The official posits thus:

Moral decadence and illiteracy are the major factors responsible for pedophiles. Other factors include lack of religious commitment and illiteracy are all factors responsible for pedophiles. (IDI with Respondent 2, 2023).

Theme 2: Therapeutic Measures and Perceived Benefits
Respondents widely acknowledged that rehabilitation, reformation, counseling, and moral guidance offered meaningful benefits. These interventions were described as fostering self-

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reflection, reducing criminal tendencies, and supporting behavioral change within the custodial centre environment.

In an in-depth interview, one inmate explained:
Rehabilitation and reformation are the corrective measures received by inmates in the custodial centre. Through their rehabilitation and reformation programmes, a lot of inmates including me myself have become better people and we are still trying to cope with the new changes inculcated in our behaviors. (IDI with Respondent B, 2023).

Other participants emphasized the practical benefits of counseling, moral support, and vocational training, stressing how such measures provided tools for rethinking choices, strengthening personal discipline, and encouraging social responsibility among inmates, as an inmate exposed that:

Moral support, counseling and skills acquisition training are the corrective measures received by inmates in the custodial centre. These measures aided a lot in reshaping our criminal mind and in changing us to better persons. (IDI with Respondent H, 2023).

Two respondents expressed the need for specific forms of therapy, such as counseling and social therapy, highlighting that tailored psychological support was central to character reform and emotional well-being within the correctional setting. They revealed thus:

Counseling is the other therapeutic measure received by the inmates in the custodial centre. These measures help in reshaping our attitudes and in relieving the criminal tendencies associated with most inmates and I is inclusive. (IDI with Respondent C, 2023).

I need social therapy. I think it will help me with my character molding. It will serve as the most effective therapeutic measures given to us by the custodial centre and the measure is good in reforming and rehabilitating inmates. (IDI with Respondent I, 2023).

Correctional officers confirmed these practices, identifying counseling, reformation, religious sermons, and social therapy as structured interventions provided. They explained that collaboration with religious leaders helped shape inmate attitudes, promoting accountability and moral reform through spiritual reinforcement. These officials respectively posit thus:

Counseling and reformation are therapeutic measures provided to pedophiles upon taking custody of these categories of inmates. These therapeutic measures provided to pedophiles upon taking custody and help a lot in reforming and reintegrating the inmates. (IDI with Respondent 3, 2023).

Social therapy and religious sermons are therapeutic measures provided to pedophiles upon taking custody of these categories of inmates. An Imam uses to attend the custodial centre every Saturday to preach on the negative implications of pedophile, such his act helps in reforming many inmates in the centre. (IDI with Respondent 4, 2023).

The effectiveness of these measures was also highlighted, with officials describing how counseling, social therapy, and reformation reshaped attitudes and offered relief, while promoting a gradual transition from harmful to prosocial behaviors.

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The measures are effective in therapeutic character molding of pedophilic. Counseling, social therapy and reformation are therapeutic measures provided to pedophiles upon taking custody of these categories of inmates. Counseling is a way of watching the inmates do better. Social therapy is the act of listening to the inmates to get relief from their criminal experience. While reformation is a way of changing their criminal behavior to good behaviors. (IDI with Respondent 3, 2023).

Two inmates themselves echoed this sense of impact, citing the value of psychological and moral support provided by correctional officers as essential in reshaping character, fostering reintegration, and instilling renewed moral direction.
Yes, we do receive both psychological and moral support from correctional officials. The psychological and moral support we do receive help in reshaping our character and moral way behavior. (IDI with Respondent J, 2023).

The psychological and moral support from correctional officials is effective. They help in reforming and reintegrating us back to good citizens of the community. They also help inculcate good character in use. (IDI with Respondent K, 2023).

Sermons and counseling sessions were also described as transformative, with respondents two inmates emphasizing how spiritual and psychological engagement inspired intentions to desist and adopt reformed identities within and beyond the custodial setting.

Yes, I engage myself in counseling and sermon with correctional officials. The pastor does preach the word of God to us, and it changes some part of me and wanted me to change to a better person and not wanting to commit any criminal offence. (IDI with Respondent L, 2023).
Yes, I do, and the counseling really helps, and it has a great impact on me. This is because it makes me feel better now, it also makes me feel like I don't want to commit any form of criminal act. (IDI with Respondent D, 2023).

Nevertheless, three convicted offenders concluded that therapeutic measures offered within the custodial centre had changed their outlook and reduced their criminal tendencies, preparing them for possible reintegration into society.

The therapeutic measures as inculcated on me by the penitentiary institution are good in rehabilitating me. This is because, it aided a lot in changing my criminal tendencies into good behavior. (IDI with Respondent E, 2023).

Yes, I am highly reformed. This is because at this moment, I considered myself as a reform individual and I would not like to do anything that will influence me to commit the act again. (IDI with Respondent F, 2023).

Yes, because I engage me to many things that will help if I am opportune to get out of this center. For instance, I am into cap making and have been observing my five prayers. (IDI with Respondent G, 2023).

Theme 3: Barriers to Rehabilitation
Although rehabilitative measures were widely acknowledged, both inmates and officers identified significant obstacles limiting their success. These barriers included resource

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shortages, limited cooperation, welfare challenges, and a persistent emphasis on punishment within custodial practices.

One inmate stressed that punitive approaches often overshadowed rehabilitation, pointing out that punishment sometimes became the central method of correction rather than sustained counseling or structured reform programmes.

Strict and severe punishment are measures put in place by the Nigeria Correctional Service to ensure that the inmates did not go back to the same crime. Other measure is adequate counseling which is an effective measure put in place by the Nigeria Correctional Service to ensure that the inmates did not go back to the same crime. (IDI with an Inmate, 2023).

Custodial officers confirmed these challenges, particularly highlighting insufficient cooperation among inmates and shortages of rehabilitation facilities, as well as welfare constraints that limited the effectiveness of intervention programmes.

Yes, I experience problems in providing these therapeutic measures for the inmates. They include among other poor cooperation from inmates, shortage rehabilitation facilities and poor welfare package. (IDI with Officer of Custodial Centre, 2023).

However, not all officers described such obstacles. One officer highlighted positive inmate engagement, suggesting that cooperation and openness to therapy could reduce the challenges often associated with correctional rehabilitation in resource-limited contexts.

No, I didn't experience any problem in providing these therapeutic measures for the inmates. This is because, most of the inmates took me as a counselor and they are willing to cooperate and be better people. (IDI with Officer of Custodial Centre, 2023).

When asked about possible solutions, an official emphasized below that, government support, improved funding, and community involvement as necessary to strengthen rehabilitation efforts and enhance the capacity of custodial centres to address offending behaviors effectively.

The possible solutions to the problems of providing therapeutic measures for the inmates include adequate government intervention, adequate funding and provision of rehabilitation facilities. Other possible solutions include adequate engagement of religious scholars, nongovernment organization and community leaders by way of donation and many more support. (IDI with Respondent 1, 2023).

Another officer reinforced below that the importance of inmate cooperation alongside structural reforms, suggesting that long-term solutions must integrate improved facilities, financial support, and curriculum-based reforms tailored to rehabilitating individuals convicted of child sexual offences.

To address the problems of providing therapeutic measures for the inmates there is the need for efficient cooperation by the inmates, good rehabilitation facilities and sufficient funding. There is also the need for timely planning of curriculum aimed at reforming the pedophiles. (IDI with Respondent 4, 2023).

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Theme 4: Reintegration Needs and Imminent Aspirations

Respondents frequently emphasized that life after incarceration would require structural and emotional support. Employment, financial stability, education, and family acceptance were consistently highlighted as critical factors in preventing relapse into offending behavior.

One inmate directly linked crime prevention to economic empowerment, stressing that access to job opportunities and financial assistance would reduce vulnerability to reoffending by fostering responsibility and long-term personal stability.

Job opportunity and financial support is what I need to prevent me from committing crime. This is because, if I have the finance and job to do, it will make me committed and involved, thereby reducing my criminal tendencies of committing the pedophile act. (IDI with Respondent H, 2023).

Other respondents focused on family and emotional support, stressing that strong moral guidance and relational bonds were necessary to rebuild self-worth, reduce loneliness, and prevent association with negative influences after release.

I need moral and emotional support from my family members. First and foremost, I lack the moral and emotional support and that is what make me bored and resort to looking for company of others and I ended up associating with pedophiles. But in a situation where I receive strong bond with my family, such will resist me from engaging in the criminal act of pedophile. (IDI with Respondent G, 2023).

When discussing abstinence, many expressed willingness to avoid reoffending. For some, the harsh experience of incarceration itself served as motivation to commit to change and remain law-abiding after release. For instance, an inmate revealed that:

Yes, I am ready to abstain from the crime that I am sentenced for. I am willing to stay away from it, because I cannot withstand the correctional premises and I am not willing to come back to the correctional center. (IDI with Respondent J, 2023).

However, not all respondents agreed. A particular inmate denied responsibility for their offences and felt unjustly incarcerated, indicating that denial and unresolved grievances may act as barriers to successful reintegration. He posits that:

No, because I did not commit the crime in the first place, I was just frame. My friends accused me of committing the act and I was taken to court from then I am incarcerated as awaiting trial inmates for a period of one month's pending courts proceedings. (IDI with Respondent K, 2023).

Aspirations varied, with two convicted offenders emphasizing employment or entrepreneurship, while others viewed education and religious training as key pathways to sustained desistance and reintegration into community life.

By seeking a job or business. This is because, as soon as I am occupied with business or job, I will become committed and engage thereby preventing me from committing any form of crime including the pedophile. (IDI with Respondent L, 2023).

I am going to abstain by seeking education and going back to Islamic schools to gain knowledge. I will also find a shop to start selling goods to people to earn a living and get involved with routine activities. (IDI with Respondent D, 2023).

Discussion of Major Findings

This section deals with the discussion of the major findings based on the objectives of the study. The objectives of the study are to assess the therapeutic measures taken by the Nigeria Correctional Service, Dutse Command, for inmates convicted of child sexual offences, to examine the impacts of the therapeutic measures and to identify the challenges affecting the therapeutic measures given to inmates in the Nigerian correctional service, Dutse Command.

Demographic Profile and Its Implications

The demographic profile revealed patterns shaping offending and rehabilitation. All respondents were male, reflecting global trends in sexual offending (Seto, 2009; Nigerian Correctional Service, 2022). Most were middle-aged (38–47), consistent with evidence that offending peaks in adulthood before declining with maturity (Craissati, 2018). A majority were single, underscoring how weak family bonds increase vulnerability, while strong ties protect desistance (McAlinden, Farmer, & Maruna, 2017). Educational attainment was low, reinforcing links between poor schooling, unemployment, and crime (Bonaventure et al., 2019). These demographics suggest rehabilitation should prioritize education, vocational training, and family reintegration to sustain desistance

Factors Influencing Offending Behaviour

Respondents attributed their offending to poverty, unemployment, peer influence, poor moral upbringing, and childhood victimization. These findings are significant because they demonstrate that sexual offending cannot be reduced solely to clinical or individual pathologies, but must also be understood in relation to structural and social deprivation. Mpofu, Athanasou, and Rafe (2018) identified similar patterns, noting that limited education, unstable family backgrounds, and socio-economic hardships create conditions of vulnerability. Seto (2009) also emphasized that while sexual attraction to minors may have psychological roots, environmental stressors such as poverty and lack of parental supervision amplify offending risks. Recognizing these drivers aligns with **primary desistance**, where individuals begin reflecting on personal and structural triggers for their actions. Implications include the need for correctional interventions that address not only cognitive-behavioral issues but also wider socio-economic inequalities, such as poverty alleviation and family-based prevention programs.

Therapeutic Interventions and Perceived Benefits

Respondents widely acknowledged the transformative impact of counseling, moral support, religious sermons, skills training, and rehabilitation programs. Many described themselves as "reformed," indicating that therapeutic measures enabled them to adopt new prosocial identities. This reflects **secondary desistance**, where individuals internalize new values and self-concepts. Olver, Marshall, and Marshall (2020) similarly found that prison-based CBT and RNR programs significantly reduce recidivism by reshaping cognitive patterns and building coping mechanisms. Vieira, Rose, and Craissati (2020) reported that psychological interventions reinforce non-criminal identities and facilitate long-term desistance. The incorporation of religious sermons in this study resonates with findings by Smolinski (2025), who emphasized the protective role of spirituality and counseling in promoting reform. The implication for practice is clear: correctional services should expand structured therapeutic programs that combine psychological, vocational, and spiritual interventions, as these have been shown to support both identity transformation and reintegration.

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Barriers to Rehabilitation

Despite positive outcomes, respondents identified significant barriers, including inadequate facilities, poor welfare support, limited inmate cooperation, and the persistence of punitive approaches. These findings are important as they highlight the systemic challenges that constrain rehabilitation. Barroso, Pham, Greco, and Thibaut (2019) similarly argued that treatment for sexual offenders is effective only when supported by adequate resources, trained staff, and consistent institutional commitment. Craissati (2018) warned that correctional systems overly focused on punishment rather than rehabilitation risk reinforcing criminal identities rather than dismantling them. Within the framework of desistance, these barriers slow progression from primary to secondary desistance, as resource shortages and punitive measures undermine the continuity of therapeutic interventions. For policy, this suggests the urgent need for increased government investment in correctional infrastructure, better training for custodial officers, and systematic integration of welfare and support services into custodial settings.

Reintegration Needs and Imminent Aspirations

Respondents consistently stressed the importance of employment, education, financial assistance, and family support as conditions for successful reintegration. Many directly linked economic empowerment to reduced reoffending, while others emphasized emotional and relational support as protective factors. These findings strongly resonate with the concept of **tertiary desistance**, where long-term reintegration requires not only identity change but also external social validation and structural stability (McAlinden, Farmer, & Maruna, 2017). Mihăilă et al. (2025) similarly demonstrated that vocational training and community engagement significantly reduce relapse risk among sexual offenders. The fact that some respondents denied responsibility for their offences also highlights the risk of incomplete desistance when reintegration supports are absent. These findings imply that correctional services must extend support beyond custodial walls, creating linkages with labor markets, educational institutions, and family reintegration programs. Without such continuity, inmates may relapse into offending behaviors despite positive changes during incarceration.

Conclusion

Conclusively, this study examines the narrative from incarcerated pedophiles and correctional officials on the therapeutic measures by Dutse Custodial centre. The study found that effective and efficient rehabilitation and reformation are measures put in place by the Nigeria Correctional Service to endure that the inmates did not go back to the same crime. The study also revealed that the measures put in place by the Nigeria Correctional Service are effective in therapeutic character molding of pedophilic. And finally, study revealed poor cooperation from inmates, shortage rehabilitation facilities and poor welfare package as the challenges affecting the therapeutic measures given to inmates in the Nigerian Correctional Service, Dutse Command. As such the study generally concluded by revealing efficient cooperation from inmates, provision of adequate rehabilitation facilities and good welfare package to serve as possible ways in addressing the challenges affecting the therapeutic measures given to inmates in the study area.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. Employment opportunities and vocational programmes are essential for crime prevention, as they reduce recidivism and support the reintegration of ex-offenders into society.

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2. The need for the widespread awareness program on the negative impacts of pedophiles: there should be awareness programs which is public awareness on the punishment sanctioned to pedophilia act if one is found guilty of the act to deter people from committing this act.
3. The inmate should be mandated to attend and participate in the therapeutic programs that take place in their centers; most inmates refused to participate, because of their life jail terms.
4. There should be adequate manpower: adequate manpower should be provided in the custodial centre; so that there will be quick dispensation of service and for it to operate efficiently and effectively.
5. Faith-based organizations should be engaged to provide moral and spiritual rehabilitation programs for inmates.
6. NGOs should also help in campaign awareness on the dangers of pedophiles.

References

Abé, C., Poeppl, T. B., Thiersch, C., Nitschke, K., & Walter, M. (2021). Brain structure and clinical profile point to neurodevelopmental factors involved in pedophilic disorder. *Acta Psychiatrica Scandinavica, 143*(4), 363–374.

Amali, S. E. (2018). Inmate incarceration and rehabilitation: a cross sectional study of rehabilitation programmes and facilities in correctional centres in North Western Nigeria. PhD thesis submitted to the dept of Criminology University of Fort Hare.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental Disorders* (5th ed.). American Psychiatric Association.

Ames, M. A., & Houston, D. A. (1990). Legal, social, and biological definitions of pedophilia. *Archives of Sexual Behavior, 19*(4), 409–423.

Barroso, R., Pechorro, P., Ramião, E., Figueiredo, P., Manita, C., Gonçalves, R. A., & Nobre, P. (2020). Are juveniles who have committed sexual offenses the same everywhere? Psychometric properties of the Juvenile Sex Offender Assessment Protocol–II in a Portuguese youth sample. *Sexual Abuse: A Journal of Research and Treatment, 32*(8), 1025–1048.

Blaney, P. H., Krueger, R. F., & Millon, T. (Eds.). (2012). *Oxford textbook of psychopathology* (2nd ed.). Oxford University Press.

Bonaventure, N., Sunday, L., David, M., & Amanda, U. (2019). *Efficacy of prison-based cognitive behavioural rehabilitation interventions on violent sexual behaviours among sex offenders in Nigerian prisons. Medicine, 98*(29), 1-7.

Cantor, J. M., & McPhail, I. V. (2016). Non-offending pedophiles. *Current Sexual Health Reports, 8(*3), 121–128.

Clarke, R. V. (2009). Situational crime prevention: Theoretical background and current practices.

In M. D. Krohn, A. J. Lizotte, & G. P. Hall (Eds.), *Handbook on crime and deviance* (pp. 259–276). Springer.

Cornish, D. D., & Clarke, R. V. (2013). Opportunists, precipitators and criminal decisions: A reply to Wurley's critique of situational crime prevention studies. *Journal of Criminal Justice Studies, 16*(2), 115–129.

Dennis, J., Khan, O., Ferriter, M., Husband, N., Powney, M., & Duggan, C. (2012). Psychological interventions for adults who have sexually offended or are at risk of offending. *Cochrane Database of Systematic Reviews, 2012*(12), 1-16.

Edwards, M., & James, M. (2018). Treatment for pedophiles: Treatment for sex offenders. *Paedophile Policy and Prevention, 12*(1), 45–59.

Frelick, J. D., Greenewald, J., & Mandala, M. (2019). Situational crime prevention and terrorism:
An assessment of 10 years of research. *Criminal Justice Policy Review*, *30*(9), 1234–1258.

Gannon, T. A. (2021). A compositional explanatory theory of pedophilia. *Aggression and Violent Behavior*, *61*, 101662. Retrieved from: https://doi.org/10.1016/j.avb.2021.101662

Green, A. H. (2009). Female sex offenders. In J. A. Shaw (Ed.), Sexual aggression (pp. 309–331). Washington, DC: American Psychiatric Press.

Grubin, D., & Beech, A. (2010). Chemical castration for sex offenders. *BMJ*, *340*, c74. Retrieved from: https://doi.org/10.1136/bmj.c74

Hankin-Elder, H., & Ward, T. (2020). Theory construction in the psychopathology domain: A multipurpose approach. *Theory & Psychology*, *30*(1), 56–79.

Hollin, C. R., & Palmer, E. J. (2016). *Offending behaviour programmes: Development, applications and controversies*. John Wiley & Sons.

Laws, D. R., & Marshall, W. L. (2019). A conditioning theory of the etiology and maintenance of deviant sexual preference and behaviour. *American Journal of Criminal Justice*, *44*(3), 299–314.

Marshall, W. L. (2020). *The pedophilias: Changing suit in the evolution of sexual interest paradigms*. Oxford University Press.

McAlinden, A. M., Farmer, M., & Maruna, S. (2017). Desistance from sexual offending: Do the mainstream theories apply? *Criminology & Criminal Justice*, *17*(3), 266–283.

McMurran, M. (2012). *Motivating offenders to change: A guide to enhancing engagement in therapy*. John Wiley & Sons.

Olver, M. E., Marshall, L. E., & Marshall, W. L. (2020). A long-term outcome assessment of a prison-based CBT/RNR sex offender treatment program. *Sexual Abuse*, *32*(7), 767–789.

Seto, M. C. (2008). *Pedophilia and sexual offending against children*. American Psychological Association. Retrieved from: https://doi.org/10.1037/11639-000

Seto, M. C. (2010). Child pornography use and solicitation in the diagnosis of pedophilia. *Sexuality & Culture*, *14*(4), 349–365.

Smolinski, T. J. (2025). *Beyond recidivism: Identifying protective mechanisms that promote desistance from sexual offending* (Doctoral dissertation, University of Canterbury). University of Canterbury Research Repository.

Soldino, V., & Carbonell-Vayá, E. (2017). Effect of treatment on sex offenders' recidivism: A meta-analysis. *Anales de Psicología*, 33(3), 417–424.

Tenbergen, G., Wittfoth, M., Frieling, H., Ponseti, J., Walter, M., Walter, H., ... & Poeppl, T. B. (2015). The neurobiology and psychology of pedophilia: Recent advances and challenges. *Frontiers in Human Neuroscience, 9*, 344. 1-9.

Thibaut, F., De La Barra, F., Gordon, H., Cosyns, P., & Bradford, J. M. W. (2010). The World Federation of Societies of Biological Psychiatry (WFSBP) guidelines for the biological treatment of paraphilias. *The World Journal of Biological Psychiatry*, 11(4), 604–655.

Vieira, C., Rose, R., & Craissati, J. (2020). The impact of a community psychological treatment programme on desistance in personality-disordered sexual offenders. *The Journal of Forensic Psychiatry & Psychology, 31*(5), 745–764.

Williams, T. J., Pepitone, M. E., Christensen, S. E., Cooke, B. M., Huberman, A. D., Breedlove,

N. J., Breedlove, T. J., Jordan, C. L., & Breedlove, S. M. (2000). *Finger-length ratios and sexual orientation. Nature*, 404(6777), 455–456