

RUNNING HEAD: PAEDOPHILIA AND TERROR MANAGMENT

**Exploring the Stigmatisation of Offending & Non-offending Paedophiles:
A Terror Management approach.**

Abstract

Paedophilic individuals are a highly misunderstood and stigmatised group, with the general public tending to equate paedophilia with child sexual abuse. Given that paedophilia is often conflated as a psychiatric/mental health disorder and an extreme violent offence, the current study examined whether the stigma towards paedophilic individuals is related to negative associations with severe mental illness and extreme violence. We also used the terror management theory to provide further insights into why paedophilia is so highly stigmatised. A sample of 126 participants were split into one of six conditions and provided punitive and moral character judgments, as well as salience of death thoughts. Conditions were divided into three main stigma conditions (Paedophilia vs. Schizophrenia vs. Homicidal ideation), which were further divided into two conditions (offending vs. non-offending). Results showed that judgments were harsher in the offending conditions than the non-offending conditions. Results also showed that the stigmatisation of paedophilic and schizophrenic individuals may be mediated by terror management processes. These findings suggest that paedophilia is believed to be associated with severe forms of mental illness where an individual is not able to control their own state of mind. Thus, addressing perceptions of dangerousness towards individuals with severe mental illness is a crucial step towards developing effective strategies to help reduce such stigma.

Keywords: Paedophilia, Nonsexual offense, Stigma, Terror management theory, Mortality salience

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Paedophilia is defined as a persistent sexual interest in prepubescent children (Seto, 2009) and is currently considered a mental disorder (American Psychiatric Association, 2013). According to the DSM-V (APA, 2013), it is not deemed pathological unless accompanied by other criteria, such as the person presenting recurrent, intense, sexually arousing fantasies, sexual urges, and distress. In paedophilic individuals, the age at which sexual attraction towards children becomes apparent is typically around 12 years old (Finkelhor, 2009). However, an individual cannot be classified as paedophilic until they are at least 16 years of age and they are at least 5 years older than the child/children they are sexually attracted to (APA, 2013). While some people with paedophilia act upon their interest by engaging in sexual contact with children, it is important to note that not all individuals who have a paedophilic interest do so (Marshall, 1997; O'Donohue, Regev, & Hagstrom, 2000). Indeed, child sexual abuse can be driven by other factors, such as offence-supportive beliefs, emotional dysregulation issues, and general antisociality (Ward & Siegert, 2002). Moreover, there are many people with paedophilia within the general population who have never acted upon their interests and have no desire to offend against children, referred to as non-offending paedophiles (Cantor & McPhail, 2016). Thus, using the terms 'paedophilia' and 'child sexual abuse' interchangeably is inaccurate and can lead to erroneous conclusions and viewpoints about people with paedophilia

In spite of this, paedophilic individuals are arguably one of the most misunderstood groups in modern society (Harrison et al., 2010), with the general public tending to equate

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paedophilia with 'child sexual abuse' (McCartan, 2010). This leads to perceptions that paedophilic individuals are a danger to children, amoral, and even 'evil' (Jahnke, 2018; McCartan, 2004). Maroño and Bartels (2020) showed that individuals suspected of committing a non-sexual, non-violent offence, unrelated to the harm of children, are at risk of being more harshly judged and sentenced if labelled as paedophilic. Further, labelling non-offending individuals as 'deviant' increases the likelihood of them engaging in deviant and criminal behaviour (Becker, 1963; Goffman, 1963; Lemert, 1951), possibly due to resistance to seeking help. This may subsequently put children at a higher risk of child sexual abuse (Jahnke & Hoyer, 2013). Before attempting to develop strategies to help reduce a particular stigma, it is crucial first to identify why stigmatising attitudes exist. As such, the current study aims to examine why the stigmatisation of paedophilia is so strong.

Media portrayal of paedophilic individuals

Stigma can be defined as 'an attribute that links a person to an undesirable stereotype' (Goffman, 1963, p. 11). Research conducted by McCulloch (2019) examined how the media contributes to the stigmatisation of paedophilic individuals, demonstrating that paedophilic individuals are often portrayed as criminals and threats to the public, perpetuating the negative stigma. The association between criminality and paedophilia is strengthened by the fact that public exposure to discourse on the subject is usually fuelled by the occurrence of a sexual abuse trial (Araji & Finkelhor, 1985; Theaker, 2015). Additionally, research has shown that the media portrays individuals who have sexually abused children as having paedophilic interest by using the term 'paedophile' as an interchangeable for the person who offended and by using derogatory words associated with paedophilia (Harper & Hogue, 2015). Thus, there is a failure to define paedophilia correctly and/or acknowledge that not all

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individuals with paedophilia engage in offending behaviour, which exacerbates the negative stigma (Ducat, et al., 2009; Harper & Hogue, 2015). Subsequently, this leads to misguided and incorrect beliefs about the legal and clinical nature of paedophilia (Harrison et al., 2010). Indeed, the negative media portrayal of paedophilic individuals as criminals has been shown to decrease the likelihood of these individuals seeking treatment (Feldman & Crandall, 2007).

Public perceptions

Research has shown that, due to biased and negative media portrayals, individuals with paedophilia are often perceived by the public as dangerous and amoral (Harrison et al., 2010). In fact, in an examination into public perceptions, Theaker (2015) found that, for some individuals, the idea of having thoughts about engaging in sexual behaviour with children caused enough disgust and repulsion for it to be grouped into the same category as carrying out child sexual abuse. The author also found that people viewed paedophilic individuals as being untrustworthy and that they lie about claiming to have no intention to act upon their sexual thoughts.

In addition, the general public often conflates offending and non-offending. Thus, people with paedophilia are often stereotypically portrayed as violent criminals and are expected to engage in sexually abusive behaviour toward children (Diefenbach, 1997; Jahnke & Hoyer, 2013; Kitzinger, 2004). Given that public perception and judgements of violent offenders are highly negative (Fortney et al., 2007), misconceptions that paedophilia is the same as or coincides with child sexual abuse is likely to activate negative attitudes and discrimination, regardless of whether they have offended or not. In support of this, McCartan (2010) conducted a study in which individuals were asked what traits or characteristics come

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to mind when they hear the word paedophile. Results showed that most students mentioned "sexually abusing children" and stated that paedophiles are criminals or mentally disordered, and no positive traits were mentioned. This study is consistent with previous research demonstrating that there appears to be an inaccurate (media fuelled) representation of paedophilia, wherein it is viewed as a mental illness and/or an extreme violent offence (Imhoff, 2015; Kleinhans, 2002). Thus, the negative stigma towards paedophilic individuals is likely to be, in part, related to negative associations between these two groups.

Likewise, given that paedophilia is currently considered a mental disorder (American Psychiatric Association, 2013; Keegan, 2020), it is possible that the negative stigma associated with mental illness exaggerates the perceived dangerousness and criminality of paedophilic individuals. Indeed, it is well-established, within the literature, that stigma and discrimination exist towards people with mental illness (Angermeyer & Matschinger, 2003; Bradbury, 2020; Corker et al., 2013; Link et al., 2001). For example, people diagnosed with severe mental illness, particularly schizophrenia, are often perceived as violent and dangerous regardless of their actual behaviour (Crisp et al., 2000). Thus, the stigma towards paedophilia may be comparable with other mental illnesses. However, when comparing the discrimination of paedophiles and individuals suffering from a range of mental illness, people with paedophilia have been found to be the most highly rejected group (Feldman & Crandall, 2007). They have also been found to be more harshly stigmatised than people who have general antisocial tendencies (Jahnke et al., 2015b). These findings demonstrate the strength of the stigma towards people with paedophilia compared to other stigmatised groups.

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This stigma negatively impacts upon the mental health of people with paedophilic interests (Janke et al., 2015a), discouraging those wanting to come forward and seek help with their paedophilic interests when needed (Maroño & Bartels, 2020). For example, the fear of coming forward and asking for help has been shown to increase feelings of loneliness, isolation, and stress due to being associated with a stigmatised group (Jahnke et al., 2015a). As a result, such individuals are at an increased risk of experiencing psychological instability and of engaging in abusive behaviour (Jahnke & Hoyer, 2013). In other words, the stigmatisation of people with paedophilia increases the risk of offending and harm towards children. Evidently, therefore, it is imperative that further research is carried out to help understand stigma/negative attitudes and discrimination towards paedophilic individuals (Hirschberger, 2015). Compelling research has utilised the terror management theory to understand the psychological mechanisms underpinning the stigmatisation of certain groups (Wisman & Goldenberg, 2005; Zhou et al., 2008). We argue that terror management theory could provide further insights into why paedophilia is so highly stigmatised.

Terror management theory

Terror management theory (TMT) (Greenberg et al., 1986) argues that a fundamental psychological conflict results from the juxtaposition of death awareness and having a desire to live, leading to a state of terror. To defend against the potential death anxiety, people need to believe that they are in some way immortal. Believing that there is an afterlife, such as heaven, provides literal immortality, whereas extensions of the self that continue after death, such as a person's children or achievements, provides symbolic immortality (Martin, 1999). Central to the theory is the notion that the problem of death resides beneath consciousness.

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This dissonance is then managed by death defences, such as embracing cultural or personal values, religion, or symbolic systems that act to provide life with meaning and value. TMT suggests that self-esteem is vital because it is used as a personal, subjective measure of how well an individual is living up to these values. If self-esteem is low, individuals are more likely to adopt more extreme views and values to increase self-esteem (Greenberg et al., 1990; Harmon-Jones et al., 1997; Solomon et al., 1991). Conscious contemplation of death is managed differently through more rational means, such as denying vulnerability to physical death or focussing on one's state of good physical health (Burke et al., 2010; Pyszczynski et al., 1999).

An essential paradigm that TMT researchers use to explore the impacts of this internal conflict is known as the death-thought accessibility (DTA) hypothesis. The DTA hypothesis states that if one is motivated to avoid cognitions about death, they will show more death-related cognitions when cultural values are threatened, compared to when no threat is perceived. Likewise, when exposed to death-related thoughts, people are more likely to embrace more extreme views and reject those who hold conflicting views. Research has supported this by demonstrating that salience of death-related thoughts increases conformity to one's cultural standards (e.g., Greenberg et al., 1992), as well as negative evaluations and aggression towards individuals that criticise one's cultural beliefs (Dechesne et al., 2000; McGregor et al., 1998).

Additional research has argued that the sense of symbolic immortality may shield against the terror of death (Florian & Mikulincer, 1998; Lifton, 1973) and offspring act as a death-anxiety buffering mechanism, enabling people to achieve symbolic immortality as well as literal immortality through the survival of their genes (Zhou et al., 2008). Children also act

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as a means of transmitting cultural values across generations (Fritsche et al., 2007). In support of children as a death-anxiety buffer, Wisman and Goldenberg (2005) found that reminding people of their death led to an increase in the number of children they reported intending to have. Offspring also enhance one's self-esteem by providing perceived meaning, security, and value to one's life, thus those without children are often perceived by others as lacking fulfilment or purpose (Baumeister, 1991). Therefore, exposure to information about a paedophilic individual may threaten one's sense of symbolic immortality due to the perception of danger or harm to one's child or other's children. Considering this, the present study argues that the TMT may provide a novel, innovative, and additional insight into why paedophilia is so highly stigmatised by the general public.

Present Study

The main aim of the current study was to build upon prior research showing that people with paedophilia are stigmatised to greater extent than: (a) people with other (non-paraphilic) forms of mental illness (Feldman & Crandall, 2007) and (b) people with antisocial tendencies "who continuously disregard other people's rights" (Janhke et al., 2015b). Specifically, we examined the level of stigmatisation towards paedophilic individuals relative to those with a severe mental illness (schizophrenia). Feldman and Crandall (2007) found that social distance ratings (on 1-7 Likert scale) for people with paedophilia were greater ($M = 5.91$) than people with paranoid schizophrenia ($M = 4.57$) and disorganised schizophrenia ($M = 4.47$), indirectly suggesting that paedophilic individuals are perceived as more dangerous. Thus, we extended upon this by examining whether community participants: (1) report harsher stigmatising attitudes (i.e., greater dangerousness and punitiveness ratings) towards

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people with paedophilia on a stigma questionnaire than towards people with schizophrenia, and (2) whether a non-offending person with paedophilia (described in a vignette) would receive harsher punitive and moral character judgements than someone with paranoid schizophrenia. For this latter aim, we also examined whether or not judgements were harsher if the person in the vignette committed a related offence (i.e., child sexual abuse or symptom-driven violence).

Jahnke et al. (2015b) found that people with pedophilia also receive more negative judgements and social distance ratings than people with antisocial tendencies, which was recently replicated by Lehmann et al. (2021). We extended upon by examining whether people with paedophilia receive harsher stigmatising attitudes and punitive/moral character judgements than people with an extreme antisocial inclination (i.e., to commit murder). In a study by Bastian et al. (2013), a 'child molestation' case was rated with greater disgust, anger, and contempt than a violent case of murder that included child victims. Based on this, we argue that people with paedophilia would be more harshly stigmatised than people with homicidal ideation. Again, we also tested whether punitive and moral character judgements were affected by whether the person in the vignettes engaged in the corresponding offence (i.e., child sexual abuse and homicide).

The final aim of the present research was to examine whether TMT could provide an insight into why these groups, particularly people with paedophilia, are so highly stigmatised. Thus, we examined whether the vignettes increased the salience of death-related cognitions across all conditions. We also included a single word-completion task related to children to help examine if exposure to the vignettes increased access to child-related thoughts. Considering that children may buffer one's fear of death because they represent both literal

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and symbolic immortality (Zhou et al., 2008), the exposure to the topic of paedophilia is likely to increase the salience of death-related cognitions. Examining the effects across the three conditions helped to examine the extent to which salience to death-related thoughts may be due to perceptions of deviant and dangerous behaviour, rather than a direct result of threatening offspring as a death-anxiety buffering mechanism. It should be noted that we are not stating that the severity or nature of these three conditions are relatable or comparable, rather each group is highly stigmatised. Of course, there are likely to be additional issues regarding the clinical and legal stigma associated with individuals with paedophilia that go beyond the scope of this article. However, before attempting to develop strategies to help reduce a particular stigma, it is crucial first to identify why stigmatising attitudes exist. Thus, the results of the current study may provide some insight into the psychological processes that underpin negative judgments about people with paedophilia, relative to those with a mental illness and extreme violent ideation.

Based on the above, several findings were expected:

1) Ratings of dangerousness and punitiveness will be similar across all three targets (paedophilia vs. schizophrenia vs. homicide). However, based on previous research (Bastian et al., 2013; Feldman & Crandall, 2007), we expected these ratings to be harsher towards individuals with paedophilia than individuals with schizophrenia and homicidal ideation.

2a) Sentencing and moral character judgments will be harsher in the non-offending paedophilia condition than in the other two conditions. 2b) Judgements in all offence-related vignette conditions will be harsher than those in the non-offending vignette conditions for each target (paedophilia vs. schizophrenia vs. homicide).

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3) Participants allocated to the paedophilia conditions will show an increase in reporting death-related words after being shown the vignette compared to the schizophrenia and homicidal ideation conditions. We also expected this effect to be increased in relation to offending targets compared to the non-offending targets.

Methods

Design

This study used a 3 x 2 between-subjects design, whereby punitive and moral character judgments, as well as salience of death (and child-related) thoughts, were compared across the six conditions. Conditions were divided into three main stigma groups (Paedophilia vs. Schizophrenia vs. Homicidal ideation), each of which were further divided into two offending conditions (offending vs. non-offending).

Participants

A priori power analysis (using G*power; Faul et al., 2007) indicated that a minimum sample of 120 participants was required to attain a power of 0.8 assuming an error rate of $\alpha = .05$. Accordingly, 126 adult participants with a mean age of 27 (range = 19-57) were recruited online via Qualtrics, advertised via the university SONA system, social media platforms such as Twitter and Facebook, and word of mouth. Ninety participants identified as female, 35 as male, and one opted not to say. Forty-six participants were students, 74 were employed, and 6 were neither or would rather not say. Due to the nature of the research,

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participants below the age of 18 were unable to sign up, which was made clear in the consent form.

Materials

Dangerousness and Punitiveness Scale. To assess punitive attitudes and perceptions of dangerousness, the Punitive Subscale from the Paedophilia Stigma and Punitiveness Scale (Imhoff, 2015) was used. This subscale includes 13 items that measure existing punitive attitudes towards paedophiles (e.g., 'paedophiles should be chemically castrated'). The scales were identical across all three conditions, but with the target being adapted to the condition. For example, in the homicidal ideation condition, the question was adapted to 'homicidal individuals should be chemically castrated'. Each item was rated on a 7-point Likert scale ranging from 1 (Strongly disagree) to 7 (Strongly agree). Greater scores indicated greater punitive attitudes. In the present study, the Punitive Subscale showed excellent internal consistency ($\alpha = .98$).

Vignettes. Six simple vignettes were created, one for each condition. These provided a very brief description of an individual and their offending history. Vignettes fell into three main categories: paedophilic, schizophrenic, or homicidal. Each category was further divided into offending or non-offending. These detailed a case file of an individual containing simple and behaviour characteristics and, in the offending condition, it was clarified that the target had previously offended. In the non-offending condition, it was clarified that the individual did not wish to offend, nor had they ever offended. Examples of vignette for the offending conditions are provided below:

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“John is an adult male who has paedophilia. He is sexually attracted to young children and often experiences sexual feelings when he sees a child. John also has thoughts about children that ‘pop into his head’. These thoughts are sometimes of a sexual nature.

Recently, John sexually abused a child. “

“John is an adult male who has schizophrenia. He is often convinced that people are spying on him and that they can hear what he is thinking. John also hears voices even though no-one else is around. These voices tell him what to do, which can sometimes include physically harming others. Recently, John physically attacked someone.”

“John is an adult male who has homicidal thoughts. He often feels the desire to kill someone and experiences thoughts about murder that just ‘pop into his head’. John also has daydreams about taking someone else’s life, which can involve planning out a murder.

Recently, John murdered someone.”

For each of the non-offending conditions, the information for each condition is consistent, except from the last sentence which instead states that John has never committed an offence or physically harmed anyone.

Judgement Questions. Judgement questions were the same as described in Maroño and Bartels (2020). To measure sentencing judgments, participants responded to the question

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‘If found guilty, what type of sentencing should the suspect receive for his actions?’ using a single semantic differential scale ranging from 0 (Punishment) to 10 (Rehabilitative). Thus, greater scores signified more rehabilitative judgments. To assess moral character judgments, participants responded to the question ‘To what extent is this behaviour indicative of the suspect’s moral character?’ using a scale that ranged from 0 (Not at all Indicative) to 10 (Very Indicative). Higher scores indicated more negative moral character judgments. These judgement questions have been effectively used in previous research to measure punitive attitudes towards non-offending paedophiles in relation to a non-sexual offense (Maroño & Bartels, 2020)

Word Stem Completion Task. The salience of death-related cognitions was assessed using a word-stem completion task, as used by previous researchers (e.g., Greenberg et al., 1994; Schimel et al., 2007). This task involved presenting 25 incomplete word-stems, of which seven could be completed with either a neutral or a death-related word. For example, GRA__ could be completed as GRANT or GRAVE, and SK__L could be either SKILL or SKULL. Also, like Fritsche et al. (2007), we included one extra word-stem (CHIL_ _ _) that can be completed as CHILDREN or CHILLING. This helped examine if people in the paedophilia condition also showed increased access to child-related thoughts. There were two versions of this presented; one prior to the vignettes being presented (control) and one following the vignettes (dependent).

Aggression Questionnaire. To measure whether past aggression mediated the effect of condition on death-related cognitions, we included the Aggression Questionnaire

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constructed by Buss and Perry (1992). The questionnaire measures aggression across four domains; Physical Aggression, Verbal Aggression, Anger, and Hostility. Confirmatory factor analysis of the factor structure of the aggression questionnaire has supported internal consistency and stability over time (Harris, 1995). In the present study, the Cronbach's alpha was .89.

Procedure

Qualtrics was programmed in such a way that when participants clicked on the study link, they were randomly allocated (evenly) into one of the six conditions. After reading the study brief and consenting to take part, participants were first asked to provide some basic demographic information (i.e., age, gender, occupation). Participants were unaware of the true aims of the study but were informed that the study was investigating perceptions of criminality. Key terms were also explained in the information sheet, such as 'homicidal ideation' meaning an individual who has recurring thoughts about committing homicide. However, we did not explain that paedophilia is not synonymous with child sex abuse. This is because the stigmatising view of paedophilia is largely driven by a misconception that paedophilia is synonymous with offending so, by defining it, we would have negatively affected the results.

Participants then completed the Punitive subscale associated with their main stigma condition (Paedophilia Stigma & Punitiveness Scale vs Schizophrenia Stigma & Punitiveness Scale vs Homicide Ideation Stigma & Punitiveness Scale). The experimental task first involved participants completing a word-stem completion task (control measure). Participants were then given a vignette for their condition. For example, the non-offending paedophile

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condition involved a case file of a paedophilic individual containing simple and behaviour characteristics, and it was made clear that this individual does not wish to offend, nor have they ever offended. In the non-offending schizophrenia condition, all the information was identical, but the target's status as an individual with paedophilia was removed. Instead, it detailed a diagnosis of schizophrenia. In the non-offending homicidal ideation condition, this information was replaced with a statement of homicidal ideation. As mentioned above, only the target's offending history and intent to offend was altered in the offending conditions for each stigmatised group.

Participants then completed a different word-stem completion task (dependent measure) to determine accessibility of death and child-related thoughts. Following this, participants provided punitive, affective, and moral character judgments. At the end of the study, participants were fully debriefed, received payment in the form of £5 or SONA points depending on the option chosen when they signed up, and thanked for their time. All materials presented to participants were in English. The study was approved by the ethics committee of the university at which the research was developed and conducted.

Results

1) Degree of Stigmatisation

Dangerousness and Punitive Judgments

Results from a one-way ANOVA revealed no significant differences in punitive attitudes between the paedophilia condition ($M= 44.57, SD= 23.99$), the schizophrenia

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condition ($M= 41.55, SD= 27.65$), or the homicidal condition ($M= 39.55, SD= 23.92$), $F(2, 125) = .41, p = .66, \eta^2 = .007, 95\% CI [0.00, 0.05]$. There was also no significant differences between the paedophilia condition ($M= 19.81, SD= 8.76$), the schizophrenia condition ($M= 17.64, SD= 10.66$), or the homicidal condition ($M= 17.9, SD= 8.89$) for perceptions of dangerousness, $F(2, 125) = .66, p = .52, \eta^2 = .011, 95\% CI [0.00, 0.06]$.

2) Judgments Outcomes

Judgement data were analysed using a 3 (*Target*: paedophilia vs. schizophrenia vs. homicide) x 2 (*Status*: offended vs. never offended) independent ANOVA. Table 1 shows differences in sentencing and moral character judgments between Target and Status.

Sentencing judgments

A significant main effect of Status on sentencing judgments was observed, $F(1, 114) = 11.86, p = .001, \eta^2 = .092$. Lower scores for sentencing judgments indicate less rehabilitative attitudes, greater scores signified more rehabilitative judgments. Offending individuals (regardless of target) were judged as more deserving of punishment ($M = 5.10, SD = 3.53$) than non-offending individuals ($M = 7.13, SD = 2.88$). Participants in the offending paedophilia condition ($M= 5.20, SD= 2.96$) gave less rehabilitative judgments than those in the offending schizophrenia condition ($M= 5.3, SD= 3.5$), but not the offending homicidal ideation condition ($M= 4.78, SD= 3.62$). However, differences between targets were non-significant $F(1, 114) = 4.12 p = .52, \eta^2 = .004$. Regarding the non-offending targets, post-hoc pairwise comparisons (with Bonferroni corrections) revealed no significant difference between the paedophile condition ($M= 6.73, SD= 2.96$) and the schizophrenic condition ($M= 6.7, SD= 3.21$) ($p = 1$), or the homicidal condition ($M= 8.00, SD= 2.34$) ($p =$

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1.00). No significant difference was found between the schizophrenia condition and the homicidal ideation condition ($p = 1.00$).

Moral character judgments

A significant main effect of Status on moral character judgments was observed, $F(1, 107) = 27.65, p < .001, \eta^2 = .205$. Higher scores indicated more negative moral character judgments. Offending individuals were judged as more deserving of punishment ($M = 19.44, SD = 4.01$) than non-offending individuals ($M = 15.32, SD = 4.20$). Participants in the offending paedophilia condition ($M = 20.44, SD = 3.29$) gave harsher judgments than those in the offending schizophrenia condition ($M = 18.33, SD = 4.50$) and the offending homicidal ideation condition ($M = 19.55, SD = 4.01$). However, differences between targets were non-significant $F(1, 107) = 1.01, p = .32, \eta^2 = .009$. Regarding the non-offending targets, post-hoc pairwise comparisons (with Bonferroni corrections) revealed no significant difference between the paedophilia condition ($M = 16.2, SD = 4.35$) and the schizophrenia condition ($M = 14.38, SD = 4.95$) ($p = 1.00$) or the homicidal condition ($M = 15.2, SD = 3.37$) ($p = 1.00$). No significant difference was found between the schizophrenic condition and the homicidal condition ($p = 1.00$).

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3) Accessibility of death (and child-related) thoughts

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A one-way ANCOVA, controlling for past aggression, comparing the increase of death-related words after the vignette, compared to the control task, across targets revealed a statistically significant result, $F(2, 120) = 6.65, p = .002, \eta^2 = 0.1, 95\% \text{ CI } [.016, .200]$. Participants in the paedophilia conditions formed more death-related words ($M = .36, SD = .48$) than those in the homicidal conditions ($M = .05, SD = .22$) and those in the schizophrenia conditions ($M = .32, SD = .47$). Participants in the schizophrenia conditions showed a greater increase in death-related words than those in the homicidal conditions. There was a significant increase in death-related words being reported in the offending conditions compared to the non-offending conditions, $F(1, 121) = .073, p = .003, \eta^2 = .851, 95\% \text{ CI } [.009, .173]$.

A Bonferroni correction comparison showed a significant difference in the increase of death-related words after exposure to the vignettes in the offending paedophilia condition, compared to the offending homicidal condition ($p = .003$), the non-offending homicidal condition ($p < .001$), and the non-offending paedophilia condition ($p = .003$), but not compared to the offending schizophrenia condition ($p = .56$), and the non-offending schizophrenia condition ($p = .19$). There was no significant difference in the increase of death-related words after exposure to the vignettes in the non-offending paedophilia condition, compared to the offending schizophrenia condition ($p = 1.00$), the non-offending schizophrenia condition ($p = 1.00$), the offending homicidal condition ($p = 1.00$), and the non-offending homicidal condition ($p = 1.00$).

Chi-square analyses showed that those in the paedophilia conditions formed the word 'children' more often (90.5%) than those in the schizophrenia conditions (45.2%), $\chi^2 =$

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19.70, $p = .001$, and homicidal conditions (27.5%), $\chi^2 = 41.52$, $p < .001$. Interestingly, the homicidal conditions made the word 'chilling' (72.5%) more often than those in the paedophilia (9.5%) and schizophrenia conditions (54.8%).

Discussion

The first aim of the present study was to examine perceptions of dangerousness and punitive judgments towards an individual with paedophilia, an individual with schizophrenia, and an individual with homicidal ideation. Assessing attitudes and judgments towards homicidal ideation will help to examine the extent to which people's judgments are driven by perceptions of violent behaviour, while judgments of schizophrenia will help explore the extent to which judgements are due to perceptions of severe mental illness. We expected these attitudes to be harsher in the paedophilia condition relative to the other two conditions. However, in contrast to this hypothesis, no significant differences were found between the three conditions. This may suggest that dangerousness and punitiveness attitudes for these three highly stigmatised groups are comparably severe. This is contradictory to previous research which demonstrated that, compared to individuals suffering from a range of mental illnesses, the discrimination against paedophiles was the most severe, second only to an antisocial personality (Feldman & Crandall, 2007). This finding raises questions regarding how individuals with paedophilia are perceived by the general public. It is possible that public attitudes have changed over time, considering the Feldman and Crandall (2007) study was conducted 15 years ago. Alternatively, there may be a third variable (which connects stigma towards mental illness, homicidal ideation, and paedophilia) driving this effect, such

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as feelings of disgust (Jahnke, 2018). Future research should examine this further to help unpack the psychological mechanisms underlying these attitudes.

The second aim was to examine whether sentencing and moral character judgements were harsher towards non-offending people with paedophilia and whether these judgements were harsher if the person in the vignette had offended. In contrast to the Hypothesis 2a, sentencing and moral character judgements in the non-offending paedophilia condition were not significantly harsher than those in the non-offending schizophrenia or homicide-related conditions. However, consistent with Hypothesis 2b, both sentencing and moral character judgements were harsher in the offending conditions than the non-offending conditions, regardless of target. This indicates that non-offending paedophiles are judged less negatively than those who have offended. It should be noted that, in the present study, it was made clear that the targets in the non-offending condition did not wish to offend nor had they ever offended. As such, the results indicate that participants' judgements were less harsh for targets who were not intending to act upon their state of mind or interests. Previous literature has shown that there exists a strong misconception in the general public that paedophilia is synonymous with 'child sexual abuse', leading to negative attitudes and perceptions of immorality (Maroño & Bartels, 2020; McCartan, 2010). That participants in the present study gave less harsh judgments towards the non-offending paedophiles, despite their predilections, suggest that it may be beneficial to educate individuals that not all paedophilic individuals offend, nor do they intend to offend, in order to reduce stigmatising views.

Terror managment theory

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The final aim of the present study was to test the hypothesis that exposure to information about a paedophilic individual would prime more death-related cognitions than information about an individual with schizophrenia or homicidal ideation. Our results supported this hypothesis, as significantly more death-related words were formed in the paedophilia conditions compared to the schizophrenia and homicidal conditions. When this was broken down according to the target's offending status, participants in the offending paedophile condition exhibited the greatest number of death-related words compared to the other conditions. This suggests that exposure to information about an offending paedophile led to mortality salience. However, there was no significant difference in death-related words in the non-offending paedophile condition compared to any of the offending conditions. As stated, those in the non-offending paedophile condition were made explicitly aware that the target did not intend to offend, suggesting they were not a threat to any children. In the offending paedophile condition, however, it was made clear that the target had offended and so may be a potential threat to children. Considering this, these results are consistent with TMT (Greenberg et al., 1986) and previous research suggesting that offspring act as a death-anxiety buffering mechanism (Zhou et al., 2008). Thus, it can be argued that the perception of dangerousness and harm towards one's offspring, associated with offending paedophiles, may threaten one's sense of symbolic immortality achieved through their offspring. This is further supported by the increased reporting of the word 'children' in the paedophilia conditions compared to the other two conditions. However, although more cognitions related to children were reported in both paedophilic conditions, only significantly more death-related cognitions were reported in the offending condition (i.e., where the target was a potential threat to children).

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Additionally, there was a non-significant difference between the number of death-related cognitions in the offending paedophile condition and both schizophrenia conditions. Simply put, exposure to information regarding an individual with schizophrenia primed death-related words for both the offending target and non-offending target. This suggests that the stigmatisation of individuals with schizophrenia may also be mediated by terror management processes, although likely for different reasons to the individuals with paedophilia. In further support of this, the word completion task showed that those in the schizophrenia conditions made the word 'children' much less often than those in the paedophilia conditions. Although the results from the present study are unable to indicate why this effect was observed, it is possible that the fear of violence from persons with mental illness, as a result of negative stigmatisation, (Arboleda-Flórez, 2003; Pescosolido, Manago & Monahan, 2019), was enough to trigger mortality salience in participants. Future research should examine this further possibly utilising attribution theory to examine the specific judgements and associations underlying mental health stigmatisation.

Previous research demonstrating that perceptions of dangerousness exist towards individuals with severe mental illness, regardless of offending behaviour, may also offer a potential explanation for this (Corrigan et al., 2002; Crisp, Gelder, Rix, Meltzer, & Rowlands, 2000). Likewise, these findings may suggest a similarity in how individuals with paedophilia and schizophrenia are understood by laypeople. As such, it is possible that paedophilia is associated with severe forms of mental illness where an individual is not able to assess the external reality and control their own state of mind.

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Regarding the word-stem completion task, the word 'chilling' was most frequently reported in the homicidal conditions. This is not surprising considering that 'chilling' can mean 'horrifying' or 'frightening', which are two terms often used to describe the concept of murder or murderers (Ewing, 1997). A surprisingly large proportion of participants in the schizophrenia conditions also reported the word 'chilling'. This is consistent with previous research suggesting that stigmatising attitudes towards mental illness has led to public perception that those suffering are dangerous (even homicidal) and so should be feared (Corrigan & Watson, 2002). However, this finding could also be due to the word 'chilling' having other meanings. For example, 'chilling' can be used as a slang term for 'relaxing'. Given the increase in death-related cognitions in the schizophrenia conditions, we argue for the former explanation, although additional research is needed to examine this further.

Implications

Individuals who are highly stigmatised and labelled as 'deviant' are more likely to engage in delinquent or criminal behaviour (Becker, 1963; Goffman, 1963). In the current study, individuals labelled as paedophilic were highly stigmatised (albeit to a similar degree as people with schizophrenia and homicidal ideation), thereby, supporting the need to develop strategies aimed at the reducing this stigma so as to help prevent offending behaviour (i.e., child sexual abuse). This may also apply to other stigmatised groups that the public fear, given the non-significant differences between conditions. Also, participants gave less harsh judgments towards a paedophilic individual when informed that they had not offended. This supports the idea that educating the public about paedophilia (i.e., that not all people with paedophilia offend or intend to offend) may help reduce stigmatising attitudes and

judgements. Furthermore, the findings of the current study provide an advancement in the understanding of the underlying mechanisms that may influence and drive the stigmatisation of paedophilia. That is, increased mortality salience may contribute to harsher stigmatising perceptions towards people with paedophilia, as well as schizophrenia. Thus, research and strategies aimed at hindering or reducing feelings of mortality salience may help to further reduce negative stigmatisation towards people with paedophilia, as well as other (non-paraphilic) mental disorders.

Limitations and Further Research

Despite the important contributions this study has made to the existing literature, there are some limitations. For example, additional information about why judgements were made, or asking participants whether they think a non-offending paedophile is likely to harm a child after completing the attitude scale, would have provided a more in-depth insight into the current findings. While there is some controversy related to the use of Word Stem Completion (WSC) tasks (e.g., Soler, Dasí, & Ruiz, 2015), the current study provided much-needed insight into an important and under researched area using available methods for such a sensitive topic. Knowing more about participants and their own self-perceived personal vulnerability, social contact or self-identification may provide a greater insight into perceived effects. As one of the first studies to utilise TMT in this way, the findings provide important implications for future research. However, further work could also consider other factors of interest, such as Right-Wing Authoritarianism, social dominance orientation, controllability, or blame, which research suggests can highlight negative attitudes towards stigmatised others (e.g., Whitley, 1999; Duckitt, 2006).

Conclusion

Overall, the present study has offered some useful and novel insights for understanding why paedophilia is so highly stigmatised. Our findings showed that exposure to information about an offending paedophilic individual, as well as an individual with schizophrenia, led to increased mortality salience. This provides a new step forward in understanding the mechanisms that drive the stigmatisation of paedophilia, as well as other (non-paraphilic) mental disorders. Given that stigmatisation is highly associated, not only with moral judgements but also with therapeutic pessimism (Henderson et al., 2014; Knaak et al., 2017), this paper presents an important step towards developing effective strategies to help reduce such stigma, which could help towards encouraging individuals to seek help and treatment.

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