

VOYEURISM AS A PSYCHOSEXUAL DISORDER: A NEED OF THE HOUR¹

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ABSTRACT

Until recently, voyeurism did not have its own offence category, coming under the heading of 'breach of the peace' or, if a number of victims were involved, 'being a public nuisance'. Hence the statistics of this type of offence up till now are difficult to come by. Voyeurism, or scopophilia as it is sometimes called, is of theoretical interest beyond its forensic implications. First, there is a tendency for most people to look at sexually interesting scenes. In some, looking is preferred to actually participating, presumably because real contact is too threatening for one reason or another. This voyeuristic element is sometimes revealed in people's fantasies, in which they look at other people rather than participate themselves. This can be an important clue to their basic sexual problem.

KEYWORDS: Voyeurism, Peeping – Tom, Paraphilia, Sexual Disorder and Law.

1. INTRODUCTION

1.1. Meaning of Voyeurism

A 'voyeur' is generally defined as "a person who derives sexual gratification from the covert observation of others as they undress or engage in sexual activities. (Harpreet Singh Dalla, 'Cyber Crime – A threat to person, property, Government and Societies', IJARCSSE, Vol. 3 Issue 5, 2013)"

A 'Voyeur' is generally defined as "a person, who observes something without participating; one who gain pleasure by secretly observing another's sexual acts. (Prof. M.B.Walker, "Chamber's Dictionary of Science and Technology", P.1246, (Allied Chambers, New Delhi India, 2001).

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1.2. Meaning of Electronic Voyeurism

Voyeurism is the act of a person who, usually for sexual gratification, observes, captures or distributes the images of another person without their consent or knowledge. (*Bryan A. Garner, Black's Law Dictionary, P.1572, (West Group, USA,1999)* With the development in video and image capturing technologies, observation of individuals engaged in private acts in both public and private places, through surreptitious means, has become both easier and more common. Cameras or viewing holes may be placed in changing rooms or public toilets, which are public spaces where individuals generally expect a reasonable degree of privacy, and where their body may be exposed. Voyeurism is an act which blatantly defies reasonable expectations of privacy that individuals have about their bodies, such as controlling its exposure to others. Voyeurism is an offence to both the privacy as well as the dignity of a person, by infringing upon the right of individuals to control the exposure of their bodies without their consent or knowledge, either through unwarranted observation of the individual, or through distribution of images or videos against the wishes or without the knowledge of the victim. (*Rahul Anand, "Cybercrime Vs. Cyberlaw – It Is Just A Beginning*).

1.3. Meaning of Peeping Toms

It is a term used to refer to people who engage in acts of voyeurism. Derived from the French word 'voir', meaning 'to see', it is used to describe the act of observing unsuspecting people, which results in sexual gratification. The person being watched could be naked, undressing, urinating, or engaged in sex. Often, the voyeur records these acts for later viewing.

Often refers to as 'peeping tom', a voyeur does not initiate contact with whoever he is watching. The person being watched is not aware of being watched. More often than not, these instances occur in places where privacy is expected: bedrooms, bathrooms, hotel rooms and public toilets. (*Doctor Suresh Bada Math, a forensic psychiatric with Nimhans, says Voyeurism is a type of sexual deviancy. "It is a kind of Paraphilia.*)

1.4. Voyeurism: Sexual Deviancy

Doctor Suresh Bada Math, a forensic psychiatric with Nimhans, says Voyeurism is a type of sexual deviancy. "It is a kind of Paraphilia. They get arousal, complete ratification mainly by observing and less with the actual sexual act. They are very well aware of what they are doing, they plan it, they seek pleasure by doing, they avoid detection and they know it is against law so there actions should be punished," he explains.

Paraphilias are abnormal sexual behaviours all impulses characterised by intense sexual fantasies and the urge to gratify oneself with sexually deviant behaviour, he explains.

While he has never come across a patient seeking treatment for voyeurism, he says it can be treated with counselling and therapy. However, people having with this problem refuse to acknowledge the problem and rarely seek help, he suggests.

Medications can be introduced, not to cure but to reduce the voyeur's sex drive.

1.5. JUDICIAL PRONOUNCEMENT ON VOYEURISM AS A PSYCHOSEXUAL DISORDER

❖ **Name of the Case: Regina v. Turner 2006 EWCA Crim 63**
(In the Court of Appeal Criminal Division).

❖ **Justice Crane**

Fact:

The facts were that the appellant was employed as a manager at a sports centre. On 11th May 2005 a woman used the gym at the sports centre. After her workout she went to the female changing rooms and took a shower. During the time she was taking her shower she noticed that a roof tile above her was dislodged that there was a camera lens in that gap. She shouted. The lens moved. She ran out of the shower. Having covered herself with a towel, she ran to the reception area and reported the matter. She was very upset. The appellant came out of the male changing rooms, saying that he had been up a step ladder in those rooms when he heard a shout. He purported to take details of her complaint. He said to her, when she said that she wanted to involve the police: "This is going to make me look bad because I told you I'd been up there." The woman was persuaded to call the police.

The police searched the sports centre. They found a video camera in one of the lockers. They searched the appellant's office and his home address and recovered a number of video cassettes and other matters including computer equipment.

When he was arrested, he initially denied the offence but then admitted using the step ladder to climb up into the roof space of the male changing rooms, then leaning over the separating wall and moving a tile and filming the woman in the shower. He admitted filming other women to whom he was sexually attracted at the sports centre, either in the shower, or while they were using the sun beds 6 months earlier. Two more women were identified from the material seized. They were the subject of second and third offences. There was a fourth unidentified woman who was subject of the offence to be taken into consideration.

Argument by Appellant:

This appellant is 30 years old. He has no previous convictions. There was a pre-sentence report before the sentencing judge. He accepted that he had exploited his position of trust for his own sexual gratification. The council request for a psychiatric for his abnormal behaviour and appellant recommended Sex offender Group for counselling or in place of punishment sent to community mental health team to gain further insight into his behaviour.

Argument by Respondent:

The Psychiatric report found that the sexual relationships of the Appellant were unremarkable and concluded that there were no psycho sexual problems. It is not required to send him to mental health centre rather than a strict punishment because he is repeated offender and must register his name as a sexual offender.

Issue:

Whether the reason of psychosexual disorder of individual is exception to the Punishment for Voyeurism Practices?

Judgment:

Having pleaded guilty before the Magistrates Court on 8th July 2005, this appellant was committed for sentence in respect of three offences of voyeurism, contrary to section 67 of the Sexual Offences Act 2003. He asked for one further offence of the same kind to be taken into consideration. On 24th August, at the Crown Court at Derby, he was sentenced by His Honour Judge Wait to 14 months' imprisonment on the first offence, the other offences being taken into consideration but no separate penalty in fact imposed in respect of them. There was an order for the forfeiture and destruction of the relevant film and photographs. He appeals against sentence by leave of the Single Judge. We remind the media that the names of victims in this case cannot be reported.

In passing sentence the learned judge indicated that he took into account the plea of guilty at the very earliest possible opportunity. He accepted the expressions of regret by the appellant as real, but described the offence as grave. He noted that there was a breach of trust towards the people using the facilities. He pointed out that although he accepted that there was no

distribution of copies in this case, there was an understandable fear on the part of victims that is what would happen.

2. SEXUAL DISORDER: VOYEURISM VS. VOYEURISTIC DISORDER

Voyeurism refers to an interest in watching others. It might never progress beyond a fantasy. For example, someone might masturbate while fantasizing about watching someone from afar.

In other cases, voyeurism can become a Paraphilic disorder known as voyeuristic disorder. The word ‘paraphilia’ means a love of (*philia*) the beyond or irregular (*para*), and is used instead of those words which today have pejorative implications that are not always relevant. The term itself is used to describe people, usually men, with intense sexual urges that are directed towards nonhuman objects, or the suffering or humiliation of oneself or one’s partner, or more unacceptably, towards others who are incapable of giving informed consent, such as children, animals, or unwilling adults. People who are paraphiliacs often exhibit three or four different aspects, and clinical psychiatric conditions (personality disorders or depression) may sometimes be present. Paraphilic disorders involve having sexual fantasies or urges that cause distress.

2.1. Noncontact Offenses

These more unusual sexual offenses are mostly associated with paraphilic drive.

Voyeurism can lead to offenses such as ‘peep and pry’. *Zoophilia*, or sexual urges directed at animals will be prosecuted under bestiality offenses, and *necrophilia* (paraphilic disorder with attraction to dead bodies) with provisions against interference with corpses. Telephone *scatalogia* (sexual arousal derived from making obscene phone calls) will be considered under offenses of misuse of communications services. Other nonsexual offenses may have a sexual motive, such as repeated theft of underwear to satisfy a fetish disorder, or in some cases of stalking offenses where stalking has preceded a sadistic rape. They may involve inanimate objects, children, or unconsenting adults.

2.2. When does voyeurism become voyeuristic disorder?

If you’re aroused by the thought of watching someone undress or have sex from afar, you may have some voyeuristic interests. They aren’t anything to feel uncomfortable about.

However, casual voyeurism becomes problematic when you take steps that violate a person's right to consent or their expectation of privacy. These interests may also be problematic if you find yourself unable to control them.

They may be a cause for concern if you:

- violate a person's expectation of privacy in their home, a locker room, or a similar area
- watch a person engage in sexual activity without their consent
- begin filming or photographing another person without their permission
- enter an area illegally in order to watch people
- feel frustrated or stressed when you can't engage in these behaviours
- experience feelings of guilt after engaging in these behaviours
- can't get sexually aroused without watching others
- can't resist voyeuristic activities, even when they're detrimental to your well-being

2.3.Paraphilias and Voyeurism

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, the prevailing resource for diagnostic criteria of paraphilias, describes the essential feature of paraphilias as recurrent, intense, sexual urges and sexually arousing fantasies generally involving nonhuman objects, the suffering or humiliation of oneself or partner, or children or other non consenting persons.

The DSM-IV-TR diagnostic criteria for voyeurism are as follows: The patient has recurrent and intense sexual urges and sexually arousing fantasies involving the act of observing an unsuspecting person who is naked, in the process of disrobing, or engaging in sexual activity. The person must experience significant distress or impairment in social, occupational, or other important areas of functioning because of the fantasies, urges, or behaviors. When severe, the act of peeping constitutes the exclusive form of sexual activity. Onset usually is in persons younger than 15 years, and the disorder tends to be chronic. The wide extent of voyeuristic tendencies in the general population is evidenced in the common desire to indulge in exploitative activities such as live shows and pornography (see sexual addiction and pornography addiction).

2.4. The DSM-IV-TR list of other Paraphilias includes:

- Exhibitionism: the recurrent urge or behaviour to expose one's genitals to an unsuspecting person.
- Fetishism: the use of non-sexual or nonliving objects or part of a person's body to gain sexual excitement. Partialism refers to fetishes specifically involving nonsexual parts of the body.
- Frotteurism: the recurrent urges or behaviour of touching or rubbing against a non consenting person.
- Masochism: the recurrent urge or behaviour of wanting to be humiliated, beaten, bound, or otherwise made to suffer.
- Sadism: the recurrent urge or behaviour involving acts in which the pain or humiliation of the victim is sexually exciting.
- Transvestite fetishism: a sexual attraction towards the clothing of the opposite gender.
- Chronophilias such as Infantophilia: the sexual attraction to infants, Pedophilia: the sexual attraction to prepubescent children, Gerontophilia: the sexual attraction to the elderly.
- Other paraphilias: includes rarer behaviors such as telephone scatologia (obscene phone calls), necrophilia (corpses), partialism (exclusive focus on one part of the body), zoophilia (animals), coprophilia (feces), klismaphilia (enemas), urophilia (urine).

3. CONCLUSION

In cases of voyeurism and other paraphilias, where significant potential for negative consequences poses a concern, the need for long-term therapy and monitoring must be emphasized. For treatment to be successful, a voyeur must want to modify existing patterns of behaviour. This initial step is difficult for most voyeurs to admit and then take. Treatments for voyeurism typically include cognitive therapy, psychotherapy, behavioural therapy, psychoanalysis, and medication.

- Behavioural therapy is commonly used to try to treat voyeurism. The voyeur must learn to control the impulse to watch non-consenting victims, and just as importantly to acquire more acceptable means of sexual gratification. Outcomes of behavioural therapy are not known. There are no direct drug treatments for voyeurism.

- Cognitive therapy seeks to change the patient's behaviour without analyzing how and why it shows up. It is based on the idea that fetishism is the result of conditioning or imprinting. The therapy is not able to change the patient's sexual preference itself but can only suppress the resulting unwanted behaviour.
- Psychoanalysis tries to spot the traumatic unconscious experience that caused the voyeuristic behaviour in first instance. Bringing this unconscious knowledge to conscience and thus enabling the patient to work up his trauma rationally and emotionally shall relieve him from his problems.

Medication treatment involves various forms of drugs that inhibit the production of sex steroids, above all male testosterone and female estrogens. By cutting the level of sex steroids, sexual desire is diminished.