

REDIRECTION SELF HELP PROGRAM - Finland

Target population

Online offenders and potential online offenders

Delivery organisation

Protect Children (Suojellaan Lapsia ry.)

The ReDirection Self-Help Program is hosted on Mielenterveystalo – Finland – (The Mental Health House).

The ReDirection Self-Help Program is also available to access anonymously on the dark web through the Tor browser.

Mode and context of delivery

The ReDirection Self-Help Program has been developed by Protect Children senior specialist psychologists and psychotherapists and is based on cognitive behavioral theory. The program incorporates the results of the anonymous Help us to help you survey on the users of CSAM. We have gathered data from over 7,200 respondents to learn about the thoughts, emotions and behaviors of individuals who search for and use CSAM. Significantly, we found that around 50% of respondents said that they had at some point tried to stop their use of CSAM but had been unable to do so. This program has been created to provide guidance to those who have the motivation to change but need help in making sustainable long-lasting behavioral change.

Level/Nature of staff expertise required

None, online delivery

Intensity/extent of engagement with target group(s)

Three sections including sixteen tasks plus ongoing reflection

Description of intervention

The ReDirection Self-Help Program is an anonymous online rehabilitative program which aims to help the participant to adopt a lifestyle without child sexual abuse material (CSAM). The program teaches how to take control of emotions, thoughts and behaviour in order to 'Redirect' away from using CSAM. Throughout this program the participant will learn about what leads to using CSAM, why they should stop using CSAM, and ultimately how they can go about changing behavior to stop using CSAM in the long term. A total of 14 tasks will help to reflect on individual process and put new skills into practice.

The ReDirection Program consists of three sections, each with several tasks to learn and apply new skills on how to stop use of CSAM.

Section 1: My use of CSAM and what do I think of it?

Section 1 looks at your use of CSAM and your views and concerns about your behavior. You will be asked to reflect on your concerns about using CSAM, your life at the moment, and your core values. You will also be asked to consider some different perspectives on the use of CSAM, including society's perspective and the victim's perspective. The aim of this section is to explore your own motives for seeking rehabilitation, and to set meaningful goals for your future. This section contains four tasks for you to complete at your own pace.

Section 2: Underlying factors and the pathway to CSAM-use

Section 2 examines why people use CSAM and how different internal and external factors can lead you to use CSAM. These factors make up a path that leads you to use CSAM. The aim of this section is for you to understand the factors, motivations, reasons, situations, and triggers that lead you to use CSAM. By understanding why you use CSAM, you can take control of your own actions and make long-term changes to stop using CSAM. This section contains five tasks for you to complete at your own pace.

Section 3: A ReDirection of my life: How can I stop using CSAM?

Section 3 helps you to set goals and concrete steps for your rehabilitative journey away from using CSAM. This section will help you make concrete changes to your behavior and ensure that these changes are long-lasting and sustainable. You will learn more about relapse and how to overcome it, as well as other means to support your wellbeing, such as therapy, psychotherapy, medication, and other support. Finally, there is a checklist for you to use to uphold your change. This section contains seven tasks to guide you through the rehabilitative process.

Evaluation

The program incorporates the results of the anonymous Help us to help you survey on the users of CSAM. We have gathered data from over 7,200 respondents to learn about the thoughts, emotions and behaviors of individuals who search for and use CSAM. Significantly, we found that around 50% of respondents said that they had at some point tried to stop their use of CSAM but had been unable to do so.

Feedback is gathered from the users of the program.

References

<https://www.mielenterveystalo.fi/>

Contact details

<https://protectchildren.fi/>

RATING: Pioneering

Information correct at February 2022

