

**GROUP THERAPY FOR  
ADULT INCEST OFFENDERS  
AND  
ADOLESCENT CHILD MOLESTERS**

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*Focal Group Psychotherapy*

# **Group Therapy for Adult Incest Offenders and Adolescent Child Molesters**

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## Introduction

Group psychotherapy is considered a primary form of treatment for adult incest offenders (Knopp, 1984) and adolescent child molesters (National Adolescent Perpetrator Network, 1988; p. 29). This chapter presents the principles and methods of conducting an introductory psycho-educational group for adult incest offenders and adolescent child molesters. The psycho-educational group is viewed as a means to prepare the offenders to make better use of therapy and thus increase the efficacy of the therapeutic process.

The introductory psycho-educational group was developed from my clinical work with adolescent child molesters and adult incest offenders. At the initiation of sexual offender group therapy, I found that specific forms of resistance consistently emerged which impeded the offenders' ability to adequately make use of the group therapy process. These problems included: 1) fear of the actions being taken against them by the law enforcement and judicial systems; 2) having negative preconceived ideas about the nature of psychotherapy and their role as a client; 3) tremendous defensiveness manifested in outright denial of the offending behavior, or an individual client thinking that he's the only one who has committed the type of offending behavior that led to his referral for treatment. Entering a therapeutic group can heighten the anxiety associated with these issues and can prevent the

offender from fully benefiting from or even participating in the group psychotherapy experience.

The psycho-educational group is a means to address these issues in a nonthreatening manner and thus increase the likelihood of the offender maximizing the benefits provided by group therapy. Providing structure—for example, through psycho-education—is an effective method for reducing the client's anxiety level to a more moderate level. This is conducive to the client participating in and benefiting from the group process (Shapiro, 1978).

The psycho-educational group is usually run as part of a comprehensive treatment package consisting of individual therapy, group therapies, and self-help activities. A brief chronological outline of this package follows:

Individual therapy is a necessary adjunct throughout the entire program, with couple and family therapy occurring when appropriate.

Adult offenders first participate in an orientation group with their non-offending partners and with adults molested as children. This group aims to facilitate the development of empathy and assumption of responsibility for the sexually offending behavior as prerequisites for further treatment. Adolescent offenders go straight into the psycho-educational group.

1. The psycho-educational group prepares offenders for ongoing therapy by helping them understand the impact of their

behavior; identify the thoughts, feeling, and situations that led to the offending behavior; and assume personal responsibility for their offenses.

2. The first ongoing process group continues the focus on accepting full responsibility for the abusive behavior and to fully understand the factors that led to the occurrence of the sexual abuse.
3. The second group helps offenders develop adaptive ways to handle the stresses that contribute to their offenses. This includes working through the unresolved traumas or abuses of their own childhoods.
4. Parents of offending adolescents enter separate therapy groups to help them understand their own impact as parents on their sons' behavior, and to learn more effective parenting skills.
5. Skill groups follow, focusing on assertive communication, sexuality, and (for the adult offenders) parenting.
6. Throughout the treatment process, offenders participate in various self-help activities through a program called Parents United. These activities include, among others, sponsorship (where a veteran member of the program acts as a support person for a new member), four hours per month of volunteer work, and a speakers bureau where veteran members of the program go into the community with a therapist and give talks to educate the community about child sexual abuse.



For this chapter, the psycho-educational group has been modified for presentation as a group that is independent of other resources.

## **Screening and Selection**

The screening and selection process is accomplished through a clinical interview of the offender, which usually takes 60 to 90 minutes.

Since the offender has usually been referred by the law enforcement, probation, or social services systems, it's helpful to obtain all available background information on the sexual offense, including the victim's statement of what occurred. Any additional information regarding the sexual offender's psychological and social functioning should always be requested prior to this interview.

## **Determining Appropriateness for Treatment**

You must determine whether the offender fits the clinical criteria for outpatient treatment. The primary issue is to assess if a prospective group member is at minimal risk to reoffend while in treatment, and to assess any psychological problems that may preclude treatment of the offender in an outpatient setting. Generally speaking, the incest offender (as described by Groth, 1984, and Giarretto, 1989) and adolescent sexual offenders who fit the categories of the naive experimenter or under-socialized child exploiter (as

described by O'Brien, 1985), are seen as being at minimal risk to reoffend while in outpatient treatment. Furthermore, these types of offenders typically have the psychological capacity and motivation to benefit from outpatient treatment.

In light of these issues, you will most frequently be confronted with having to differentially diagnose a fixated pedophile from an adult incest offender. Groth (1984) provides a comprehensive review of the clinical criteria and psychodynamics to assist in the differential assessment of these two types of offenders. Other types of adult sexual offenders who are inappropriate for the psycho-educational group are the rapist (Groth & Birnbaum, 1979) and the extra-familial noncontact offender, who has neither a trusting nor a parental relationship to his child victim. Such offenders engage in sexually abusive behavior in which there is no actual hands-on contact with the victim—for example, exhibitionism, voyeurism, or obscene phone calls. It's possible and appropriate to treat an adult incest offender or an adolescent sexual offender if he exhibits this type of offense pattern toward a child with whom he has a trusting relationship.

When assessing adolescent sexual offenders, you will need to screen out those offenders who are considered adolescent rapists (Groth & Birnbaum, 1979) or sexual compulsives, disturbed impulsives, and peer-group-influenced offenders as defined by O'Brien (1985).

Once you've made a determination that the adult or adolescent sexual offender falls within acceptable offender type, there are several other factors that can affect whether or not a prospective sexual offender is conditionally accepted into the group. Exclude those offenders who suffer from mental retardation or have an IQ below 75, dementia, psychotic disorders (psychoactive substance-induced, schizophrenia, and delusional disorders), or multiple personality disorder, or who are antisocial, paranoid, or schizotypal.

When the offender is totally denying the sexual offense (in other words, saying "I did not do it"), he can be conditionally accepted into the group therapy for 90 days. During this time, the group clinicians, in conjunction with the therapist providing individual psychotherapy for the offender, evaluate his progress toward assuming some responsibility for the offending behavior. If, at the end of 90 days, the offender still denies the sexually offending behavior in total, he should be dropped from the group. Managing this offender in the psycho-educational group is fully discussed later in this chapter.

- The offender with a substance abuse or dependence disorder can be conditionally accepted into treatment if one or both of the following contingencies are met:
- If needed, the offender completes detoxification or inpatient substance abuse treatment

The offender is concurrently involved in a 12-step substance abuse program as prescribed by the group therapists; and the offender provides verification of his attendance at these meetings

### **Degree of Ability To Discuss the Sexual Offense**

You need to determine the ability of the offender to discuss the sexual offense and to determine the types and the rigidity of his defenses related to exploring the offending behavior. More specifically, you're looking at content and process levels as they relate to the offender's degree of insight into the origins of the offending behavior, his levels of empathy for the victim, and his sense of responsibility for the offense.

You should assume a probing and confrontative approach in exploring these areas of inquiry while maintaining sensitivity to the effects of this type of questioning on the offender. The idea is for you to re-create in this interview a similar level of confrontation and probing that is to be found in the group. The end result is to obtain a sampling of the client's methods of dealing with this approach—not to have the offender admit fully to any aspect of the offending behavior. For example, the following is an excerpt from a screening interview:

*Therapist:* Prior to the first time the sexual abuse happened, how long before that did you have thoughts of sexual involvement with your daughter?

*Offender:* You mean did I—[pause, with irritated affect] was this premeditated? No, I didn't have any thoughts before it happened. It just happened all of a sudden.

*Therapist:* So you want me to think that you walked into your daughter's bedroom that night and out of nowhere, with no thought, you began fondling her vagina.

*Offender:* [with affect still irritated] Well, I can't really remember having any thoughts before I did that to her. You know I have a hard time remembering much about it.

*Therapist:* So what you're saying is that you could have had some thoughts before the sexual abuse started but you can't really remember at this time.

*Offender:* Yeah. I might have had some.

*Therapist:* That's something you'll need to explore more in therapy. Okay, how about... [interview moves to different subject related to the offense].

The intent of the probing and confrontation is to assess the offender's coping strategies in reaction to these methods in order to determine the type of denial system he presents. This tactic is useful in helping to determine whether the offender can handle the group process without becoming unduly defensive or severely decompensating. This method of interviewing is crucial in determining the forms of denial the offender engages in.

There are types of denial which are not appropriately handled in the psycho-educational group. In fact, group participation for some offenders can further reinforce the denial as well as cause significant disruption in the

group. The following types of denial, as defined by Salter (1988), would preclude an offender's involvement in the psycho-educational group:

1. *Admission with justification.* The offender will admit to the sexually abusive behavior but justify its occurrence. What is critical in understanding this form of denial is the characterological nature of the justification. The offender's justifications reflect his ego-syntonic beliefs that what is defined as sexually offending behavior is, in his opinion, appropriate sexual conduct. In fact, the offender does not perceive his actions as sexually abusive. Typically, this form of denial is seen in rapists and fixated pedophiles.
2. *Physical denial with or without family denial.* This is where the offender denies specific aspects of the offending behavior on a given day, time, or place. Typically, this offender will not deny the overall charges that he committed the sexual abuse but, rather, has a defense for each alleged instance of the sexual abuse. The offender presents an alibi which, in his perceptions, shows that he did not commit the offending behavior. In some cases the offender's family or friends will support his alibi and actively come to his defense.
3. *Psychological denial.* In this type of denial the offender makes an overall repudiation of the sexual abuse allegations (in other words, "I didn't do it."). The quality of his denial has an underlying theme of "I am not the sort of guy who would do something like this." This offender is not preoccupied with disputing the facts of the child's disclosure and may present vague responses to the report of sexual abuse made against

him or may have no idea why it was made. Members of the offender's family may believe that he did not commit the sexual abuse; however, the elaborate stories which are typical of the physical denial pattern are not presented by family members. When this form of denial has been ongoing for three or more months after the initial disclosure of the sexual abuse, the psycho-educational group is not an appropriate choice for an initial group placement.

When faced with one of these forms of denial, the best course of action is to remove the offender from the group. If possible, have him placed in a process group which provides the appropriate therapeutic confrontation necessary to break through these forms of denial. Once an offender admits to some aspect of the sexual abuse, he can be placed back in the psycho-educational group.

### **Providing the Ground Rules for Entering the Group**

When the offender is assessed as being appropriate for group therapy, and before entering treatment, he must read and sign an authorization regarding confidentiality. This form should emphasize that the treatment the offender will receive is being coordinated with other professionals who are supervising the offender and/or his family, such as the probation officer, social worker, or juvenile court. The authorization should also define what additional information can be released to the other professionals intervening

with the offender and his family. Treatment should not begin until this document has been signed by the offender.

Many offenders may be ambivalent about signing this form. In answering any questions the offender has regarding the disclosure and authorization for release of confidential information, you should come from the position that the only information released is what is necessary for the other professionals to make intelligent decisions regarding the management of the offender's case.

## **Time and Duration**

The psycho-educational group meets on a weekly basis for one and three-fourths hours per session. The group is seven weeks in length.

In some treatment settings, the lack of treatment personnel, or having a small and static number of offenders, may preclude having a psycho-educational group as a separate treatment entity. In these instances, you can implement selected parts of the psycho-educational group in the context of an ongoing sexual offender therapy group.

## **Structure**

The number of clients in this group can vary from a minimum of 4 to a



maximum of 30. A large number of clients can be involved in this group because there is a minimum amount of group process occurring.

The group is usually co-facilitated by a male-female team. While this is the preferred combination, other gender pairings of co-leaders can be used.

The group leaders take on the role of information providers and assist the group members in clarifying and applying concepts to their own personal situation. When group process interventions are used, they are usually brief.

In the adolescent sexual offender psycho-educational group, the parent or parents of the offender attend group meetings. The rationale of this approach is grounded in the experience that issues addressed in the group also apply to parents; clinically, the treatment program has seen better treatment outcomes for those adolescents whose parents participated in the group. As the parents come to understand the intent and methods of the treatment program, a spirit of cooperation between the treatment providers and the parents can be established. When this alliance is created, the parents can communicate to the adolescent the importance of participating and making progress in treatment. This results in a significant increase in the adolescent's and parents' motivations to complete the treatment goals of the program.

If the parents of an adolescent are not available to participate in the

psycho-educational group, this does not preclude the adolescent's participation on his own. Invariably in these cases, the parent of one of the other offenders in group will strike up a relationship with this youth and act as a surrogate parent figure. When this pairing occurs, the adolescent without a parent in group manifests higher levels of motivation to engage in and complete treatment than he would if this connection had not been established.

## Goals

The primary goals of the psycho-educational group are

1. to provide a nonthreatening environment in which to confront the common forms of denial that are associated with the offending behavior,
2. to establish a basis for developing empathy in regard to the effects of the sexual abuse on the victim,
3. to understand the factors that led to the offending behavior, and to determine how to prevent it from recurring,
4. to establish an understanding of the expectations and goals of treatment.

Other general goals include attendance at all scheduled group sessions, arriving on time, maintaining good participation in all subgroup exercises,

and completing all assigned homework.

## Ground Rules

At the conclusion of the introduction, continue by establishing the ground rules of the group.

"Based on the information we present in the group, you will be expected to discuss the material further in the large group and in subgroups, and from time to time you will be required to complete homework assignments."

Review the following ground rules:

1. "Everything that is said in this room stays in this room. There is no reason to tell anyone who is not part of this group the identity of other members or things that other members say in group.
2. "You are expected to attend all sessions and to arrive when the group is scheduled to start. If you cannot attend or come on time to the group, you are expected to call and inform one of us of this fact. Provide a phone number where you can be contacted.
3. "Please respect other members' feelings. Do not cut others off when they are speaking. If you don't agree with what someone is saying, you can let that person know, in a respectful way, that you don't agree.

4. "We will take time to discuss topics that will apply to your case— however, this is not a time to debate or argue about the particulars of your case.
5. "Do not make fun of or put down other members or their cases for any reason at all.
6. "There is no eating, drinking, or smoking during group. Also, you are required to be sober and straight at all group sessions. If you need to use the restroom, please do so before or after the group.
7. "Pay attention during group, ask questions (especially if you do not understand something), and complete all assignments on time."

## Starting the Group

At the initiation of session one, start with the following statement:

Welcome to the offender psycho-educational group. In this group we will present and discuss different ideas regarding the sexually offending behavior that brings you here today. Before we go any further, I would like for each of you to introduce yourself. We will repeat this introduction whenever new people enter the group. In this introduction I'd like you to cover several things: first, tell us your first name; second, state briefly who you sexually abused, including that person's first name, how that person is related to you, and his or her age; and third, describe your status in the legal system and how long you've been in this group<sup>1</sup> Below are sample introductions of an adult incest offender and the parent of an adolescent sexual offender:

*Offender:* My name is George. I'm in this group because I molested my nine-year-old daughter, Marisol. My family is being supervised by Social Services and I am waiting to be arraigned by the criminal court. This is my first time in this group.

*Parent:* My name is Linda. I came to this group to support my son, Rod [points to him], who was accused of touching a neighbor boy who he was babysitting.

## Main Concepts and Skills

The main concepts of the groups for adolescent sexual offenders and adult incest offenders are similar. When specific concepts of the groups differ between the two sexual offender populations, this distinction will be explained.

### A. Concept: How the Criminal Justice System Works

"I'm sure many of you have fears about what the 'system' will do to you. Some of these fears are probably realistic; others may be unfounded. Whatever the case, we're going to begin with a description of how the criminal and social services systems operate. Hopefully, this will reduce your anxiety." The concepts discussed in this section are based on California law. This presentation may need to be adapted to reflect any differences in other jurisdictions.

*The following information regarding the criminal justice system is only*

*presented to the adolescent sexual offender group:*

"After the police investigate your case, they can do several things: a) close the case; b) give your parents a notice-to-appear citation; or c) arrest you and place you in Juvenile Hall. In the case of b) and/or c), the Juvenile Probation Department gets involved.

"When a notice-to-appear citation is given, a copy of it goes to the Probation Department. It takes about 4 to 6 weeks before the probation officer will contact your family. You and your parents will meet with the probation officer to discuss the case. At this stage the probation officer can do one of several things: a) close the case or b) place you on informal supervision, for 6 to 12 months. When on informal supervision, you are expected to follow certain rules developed by the probation officer. If you fail to follow these rules, the probation officer can take the case to court. If you satisfactorily complete informal supervision, your case is closed. The third alternative, c), is when the probation officer files a petition with Juvenile Court charging you with certain crimes. When this occurs, it can take 4 to 8 weeks before the first court date comes up. The last possibility, d), is where the probation officer arrests you, places you in Juvenile Hall, and files the petition.

"When a petition is filed in Juvenile Court, you will go through at least

two hearings. If you are in custody, three court hearings will take place.

"If you're in custody, the first court hearing is the detention hearing. This hearing should happen within 48 to 72 business hours after the arrest. In this hearing, the judge decides whether you are a danger to yourself or others insofar as you need to remain in custody.

"The second hearing is the jurisdictional hearing. In this hearing, the judge determines whether the petition is true. The judge makes a legal finding only, not a determination of guilt. Therefore, the judge only needs to be 51 percent certain that the crime happened, in order to uphold the petition. If there is a trial, it is held in front of the judge. There are no juries in Juvenile Court, and the general public is not allowed into the court room.

"The third hearing is called the disposition. At this stage the judge will decide how to handle the case. By law, the judge must provide the least restrictive alternative. This usually means that you will be given probation and court-ordered counseling. If the circumstances warrant it, you could be placed in a group home, the county ranch, or the Youth Authority, which is like a prison for adolescents.

"After you're processed in court, a new probation officer will be assigned to you. This probation officer has the job of making sure that you follow all conditions of your probation. Usually you'll have to meet with your

probation officer once a month. Adolescent sexual offenders can spend up to two years on probation, or may remain on probation until they have successfully completed the treatment program."

*Provide the following information about the criminal justice system only to adult incest offenders.*

"As the police conduct the investigation of your case, they can arrest you; however, it's more common at the conclusion of the investigation for the case to be referred to the district attorney. The district attorney then decides whether legal charges should be filed.

"When legal charges are filed, the police can arrest you or ask that you surrender yourself to authorities. Whatever action is taken, the first court hearing is the arraignment. This is where the judge formally reads the charges against you and makes a decision about bail. The judge can set bail at a certain monetary amount or release you on your own recognizance (OR). When you are released or pay your bail, you'll be assigned a pretrial release officer. This person supervises you while you go through the court process. This officer is assigned because the judge usually sets other conditions of release, such as no contact with the victim.

"Your case then goes through a series of court hearings. These include:



- *"The preliminary hearing.* This determines if there is enough evidence to try the case in Superior Court. The judge needs to be reasonably certain that the crime happened before he or she can bind the case over to Superior Court.
- *"Pre-trial conference.* These are meetings between the judge, defense attorney, and district attorney, during which they prepare to take the case to trial. Usually part of this process in an attempt to resolve the case without having to go to trial.
- *"Trial or adjudication.* A trial takes place if you plead not guilty. An adjudication occurs when you plead guilty to the charges. A trial involves a jury that hears the evidence and the testimony of witnesses presented by the district attorney and defense attorney. After all the evidence is presented, the jury deliberates to determine your guilt or innocence. If you're found innocent, you are then free to leave the court.
- *"Sentencing hearing.* After you've pleaded guilty or been found guilty the judge will set a sentencing date. Before the sentencing date, you're interviewed by a probation officer, and the judge may also order a psychological evaluation. The probation officer will make a recommendation as to the sentence you should receive. The psychologist determines if you can be safely treated in the community. Usually the district attorney and the defense attorney write letters to the judge, making their recommendations for sentencing. Sometimes the defense attorney may present witnesses on your behalf at the sentencing hearing. Once the judge has

received all the testimony and reports, he or she will pronounce your sentence.

"The types of sentences received can range from straight probation to work furlough to county jail time to state prison. Sometimes the judge may be undecided between state prison and a county jail sentence. In this case, he or she can send you to Vacaville State Prison for a 90-day evaluation to determine which sentence would be most appropriate. Most of the incest offenders who have gone through this evaluation are determined to be more appropriate for county jail or work furlough. When the case is being handled in the county, the judge usually orders counseling for the offender as well as other conditions of probation.

"When you're eventually released from prison, you will be assigned a parole officer. The length of your parole is determined by the maximum custody time you still have remaining upon your release from prison. The parole board grants you parole and usually sets specific conditions to be met while you're on parole. One of these conditions may be counseling. The parole officer's job is to ensure that you meet all the conditions of your parole."

## **B. Concept: How the Social Services System Works**

In the adolescent sexual offender group, this section of material can be skipped if no one in the group is involved with social services.

"In intra-familial sexual abuse cases, the family may be involved in both the criminal system and the social services system.

"Social services is charged with protecting the child victim. They usually become involved only in an intra-familial sexual abuse case.

"In handling a child sexual abuse case, the social worker has several options. One is to close the case. Another is to informally supervise the case. This is where you agree to follow certain rules set by the social worker for 6 to 12 months. If you satisfactorily complete this period of supervision, the case is closed. The social worker can alternatively opt for formal court supervision.

"If the case goes to court, it becomes a civil matter. This basically means that you cannot go to jail. The social worker files a petition with the court stating that the child is in need of the court's protection and supervision. If the petition is upheld, the child becomes a ward of the court. This means that your legal custody is temporarily taken away. In some cases, the child may be placed in a foster home or children's shelter. In either case, you are expected to follow a service plan that has been developed by the social worker. Every 6 months the court reviews your progress. Social services and the court can stay involved in the case until it is determined that the child is no longer in need of protection.

"If the child victim is placed outside the home, the law states that there has to be a chance for the child to be reunified with his or her family within 12 months after placement. If the court determines at the end of this time that there is little chance for the child to return home safely, the court, by law, must begin a procedure called permanency planning. This is a process in which the court decides to place the child in a long-term foster home or to terminate parental rights and place the child up for adoption.

"The family is assigned a social worker who supervises the case and makes sure that the family follows the services plan ordered by the court.

"The treatment program's primary goal is to ensure community safety. This means that we have to work with the courts, social services, and the departments of probation and parole in our efforts to meet this goal. The treatment program makes reports only to the professional who is supervising or investigating your particular sexual abuse case. These reports reflect the therapist's impressions as to the progress you're making and whether you continue to be suitable for this type of treatment program. These reports are forwarded to the court for the judge's review. Your attorney will also get a copy of these reports.

"In cases where reunification of the family is possible, the treatment staff works closely with the supervising social worker or probation officer to

decide when and how this reunification will occur."

### **C. Concept: What Makes Social Behavior Between Two People Abusive**

"Sexual activity among teenagers or adults is a normal behavior. Many times when a sexual offense occurs the offender thinks that his sexual behavior is normal; or, even if he knows it's wrong, he believes that the sexual behavior is not harmful to the victim. In some situations, the victim may not overtly resist or protest against the offender's sexual behavior, which may reinforce the offender's ideas that what he is doing is not abusive. Some relevant concepts are defined below:

*"Legal definitions.* This is defined as the penal code sections you are charged with. In treatment, the legal charges are not as important as what you were thinking or feeling about your offending behavior.

*"The age differences between yourself and the victim.* Young children tend to trust and do what older people ask of them. In fact, many children perceive an adolescent to be an adult. Adolescents and adults can use their more sophisticated intellectual abilities to bribe or entice child victims into sexual behavior.

*"The use of physical force or surprise.* This form of coercion is more easily associated with abusive sexual behavior. This is where you use actual or

threatened physical force, such as hitting, kicking, or a weapon, to coerce your victim. In some situations you may have been physically abusive toward the victim prior to the onset of the sexual abuse. Because of this, the victim submits to your sexual advances out of fear of being physically abused.

*"The use of trust in the relationship.* Most often this form of coercion is seen in incest cases involving parent-child or sibling incest. The offender manipulates the child's trust in order to bring about his or her cooperation or submission to the sexual abuse. Victims in this type of situation feel an extreme amount of guilt, as they tend to blame themselves, at least in part, for the abuse.

*"Physical or mental handicap of the victim.* This is where the victim, because of a physical or mental disability, cannot either consent to or refuse your initiation of sexual behavior."

#### **D. Concept: Common Myths About Sexually Offending Behavior**

"There are many myths about sexual abuse that serve to distort the seriousness of the offense or the offender's perception of the need for treatment.

*"Myth 1: Sexual assault is a crime caused mostly by sexual issues or problems.* This is not true. In part, sexual feelings do play a role in the

commission of a sexual offense. Sometimes the sexual offense may even reflect the offender's conflicts regarding his own sexual feelings. For the most part, however, sexual abuse occurs when other feelings, thoughts, and unresolved conflicts from childhood come together at a certain time, leading to the commission of the sexual abuse. In this way, sexual abuse can be seen as the expression of the offender maladaptively acting out conflicts and emotions that are not necessarily connected to sexual issues.

*"Myth 2: A teenager who is accused of committing a sexual assault is really only experimenting or curious. Sexual experimentation or curiosity with another adolescent is defined as mutually consenting sexual relations between peers. But even if the sexual feelings the offender acts upon during the offense may be age-appropriate, the adolescent may still do so in an abusive way. Many times the idea that an adolescent who sexually offends is really only experimenting is a way for the offender or his family to dismiss the seriousness of the offending behavior. It's easier for the adolescent and his parents to view the sexual behavior as experimentation rather than abuse. This way of thinking is called *denial*.*

"Denial is a common reaction when the sexual abuse is disclosed. The offender and his parents feel guilt, fear, and shame. Rather than face up to these feelings, it's easier to see the sexually offending behavior as normal or typical. Eventually, the offender and his parents need to see the sexual

behavior for what it really is. They need to deal with it fully in order to minimize the risk of it happening again.

*"Myth 3: Once a sexual offender is caught by the law, this is enough to stop the sexually offending behavior from happening again. How many of you knew your offending behavior was wrong or against the law when it was occurring?"* Many of the offenders will answer this question affirmatively. "Clearly, many of you knew that the sexual abuse was wrong—however, this was not enough to keep you from doing it. The sexual offender is like the recovering alcoholic, who has to constantly be aware of the urges and stresses that can set off his drinking. Similarly, as you progress in treatment, you will find that the sexual abuse occurred because of your inability to handle your feelings, stresses in your life, and other problems. The treatment will focus on helping you identify the factors that led to your offending behavior, and develop ways to deal with these factors to minimize the probability that you might be sexually abusive again.

"I'm sure that many of you have a hard time accepting this idea. It may be difficult for you to accept yourself or feel better about yourself if you believe yourself capable of committing such an act again. But if you continue to deny to yourself that you could, in the future—maybe not today or next week but in six months, a year, or five years from now—you'll be at a greater risk to reoffend, because you will not have taken the opportunity to identify,



and to learn to adaptively deal with, the factors that led to the occurrence of your offending behavior.

*"Myth 4: A person who sexually abuses someone must be 'crazy.'* For the purposes of this statement, crazy is defined as someone who is out of touch with reality. Many offenders consider this statement to be true and use this belief as either a rationalization that their behavior was not sexually abusive (for example, 'Sexual abusers are crazy, I am not crazy, therefore what I did was not sexually abusive') or, more commonly, as a self-punishing statement.

"Only a small number of offenders, maybe five to ten percent, are actually what we would call crazy. As you look around this group, you see individuals who, if seen on the street, would never be suspected of molesting a child. Sexual offenders come from all walks of life, rich and poor, and in all different colors. As we discussed in the earlier statement, sexual abuse occurs when certain factors build up over a period of time and are maladaptively acted out through the sexually offending behavior. Sexual abuse rarely occurs because of mental illness *per se*.

*"Myth 5: Most victims of sexual abuse do not know the offender who commits the abuse.* Most of the offenders in this group are related by blood to the victim or have a trusting relationship with the victim. This myth leads to another form of denial about the sexually offending behavior: it can lead the

offender to feel as if he is the only person who ever sexually abused someone close to him. This can lead the offender to feel extremely guilty about his abusive behavior and thus increase his resistance to dealing with the problem.

"We know that approximately one out of three females and one out of every five males report having been sexually abused before their eighteenth birthday. Among those who are sexually abused, approximately 70 to 80 percent state they know the person who sexually abused them. As you can see, it's much more common for victims to be sexually abused by someone they know as opposed to a stranger. What we know from the offenders we work with here is that the offenders tend to use the victim's trust as a way of getting him or her to cooperate with the sexual advances."

#### **E. Concept: Offense Patterns—How Are My Offense and My Family's Dynamics the Same as Those of Other Offenders?**

"The legal system has a way of defining what is sexual abuse and what is not. I am sure that many of you felt shocked or disgusted when you read the legal charges the district attorney filed against you. I know that some of you would like to fight the charges just based on the way in which they're worded. As we discussed earlier, there are many factors other than sexual feelings which can lead one to commit sexually offending behavior. In treatment we look at your offenses differently than the legal system does. I'm going to

explain to you some of the common traits of three types of sexual offenders. I want to stress that these descriptions are based on common patterns we see occurring many times, and that there are offense patterns other than the ones I'll talk about today.

*"The child molester.* This is the offender who chooses a young child as a victim. That child can be a family member—a brother, sister, daughter, niece, nephew, or cousin—or another child with whom the offender has a close or trusting relationship. Under these circumstances, the offender may only have to instruct the child about what to do, and the child will go along. In other instances, the offender may bribe, entice, or threaten the victim in some way to get his or her cooperation. Rarely do we ever see the child molester physically forcing or abusing the child in order to commit the offense."

Present the following material to the adult incest offender group.

"In the family in which incest occurs, we see some common patterns. Often the husband does not feel that he is getting his emotional needs met in his relationship with his wife. Mother and daughter may not be very close. The child and father may turn toward one another for support and affection. At this stage, no sexual abuse is occurring. As time goes on, the father begins seeing his child as another adult, and begins to express his closeness and affection in sexual ways. It is as if he relates to his daughter as an adult. This

misperception is another form of denial on the part of the offender."

Present the following material to the adolescent sexual offenders.

"With the adolescent child molester, only about one out of five will molest a child who is a stranger. Usually this offender has some authority over the child as well as the child's trust.

"In many cases, the adolescent sexual offender has never been in trouble with the law, and his parents do not have major problems with him at home. A fair number of adolescents have major behavior problems at home and school. In most cases, the adolescent feels a lack of emotional closeness to his father. This may be due to his father being gone from the house, or his father may be uninvolved with the adolescent when at home. This breakdown in the father-son relationship is a major factor contributing to the adolescent's poor self-esteem. Sometimes the mother sees this problem, or she may be having problems in the marriage which result in her developing an overprotective attitude toward her son. The adolescent usually resents this overprotectiveness, but does not attempt to change it for fear of hurting his mother, or for fear that his mother may reject him. This can lead the adolescent to have hurt and angry feelings that he does not directly express to anyone.

"Many of these problems occur because one or both parents came from

dysfunctional families. We see many parents who were sexually or physically abused or who feel emotionally abandoned by a parent or parents. Many times the parents model their parenting on their own parents' behavior. This happens frequently in our society.

"It's important to understand that these problems alone do not cause the adolescent to sexually offend. Again, it takes many factors for sexual abuse to occur.

*"The rapist.* The rapist is an offender who sexually abuses someone who is near his own age or older. Most often the victim is a stranger to the offender. This offender uses a lot of physical force, violence, or a weapon to coerce his victim. Because such people are at high risk to continue to act out in a sexually assaultive way even while in this type of treatment program, we do not accept them for treatment."

When conducting the adult incest offender group, add the following statement: "This type of offender illustrates an example of the difference between the legal system and treatment definitions of offenders. It's not uncommon for a stepfather who has intercourse with his stepdaughter to be legally charged with rape. From the treatment provider's point of view, this offender does not fit the psychological definition of a rapist that we discussed earlier. Instead, we would view this stepfather as an incest offender.

*"The noncontact offender.* The noncontact offender is an adult or adolescent who commits sexually offending behavior in which there is no hands-on contact with the victim. These types of offenses include peeping, exposing one's genitals to others, and making obscene phone calls. It's not uncommon for the noncontact offender to progress to hands-on contact with a victim. For instance, an offender may begin by peeping at a child when that child is bathing. As the offender engages in this behavior, he is thinking about engaging in sexual behavior with the child. After doing this for some time, the offender may act out what he is thinking. The family dynamics we discussed in regard to the child molester apply to this type of offender in our treatment program."

#### **F. Concept: The Chain of Events Model**

"The chain of event model is a way for you to understand the different thoughts, feelings, stresses, and unresolved childhood problems that came together and led to the commission of your offending behavior. As we go through this model, you may find that you will not be able to apply each aspect of it to your own situation. At this point, that's okay. We don't expect you to be able to fully apply this to your offense situation. What we do expect is that you understand what each part of the model means. As you progress in the treatment process, you'll have the opportunity to discuss this model further. Based on what you find out about the chain of events leading up to

your offense, treatment will focus on ways to help you minimize the chances of committing another offense.

"The first link in the chain of events has to do with past hurts or abuses. These are some of the things that happened in your childhood which were upsetting to you and which you have not really talked about or which may still bother you to this day. Past hurts or abuses can include sexual or physical abuse as a child; witnessing physical violence in the family; having an alcoholic or drug-using parent; or having a parent or parents who used critical or demeaning language on a regular basis toward you. You may find yourself feeling troubled to this day when thinking about these event.

"The second link pertains to how these past hurts affected your thoughts and feelings about yourself and others. These are the negative feelings and thoughts you have about yourself and some of the fears or concerns which led you to have problems in relationships with others. What is important in understanding this concept is that these past hurts or abuses are events which led you to feel and think badly about yourself and other people. When you remember these events now, you have those bad feelings about yourself. For example, you may feel guilt, hurt, shame, embarrassment, or rejection. In addition, you may be aware that these past hurts also affect the way in which you get along with other people. You may have a hard time trusting others; you may feel that you are not able to make friends with your

peers, so you avoid contact with them; or when you do have relationships with peers, either male or female, the relationship does not last long or is fraught with problems. You may tell yourself that you're worthless or unlovable, or that other people are cruel and untrustworthy. These and other similar negative thoughts maintain the bad feelings.

"The third link pertains to the high-risk situations that led to the sexual offenses. These are the times when you were feeling those bad feelings associated with past hurts or abuses, or thinking negative thoughts about yourself or others. These thoughts and feelings occurred each time you committed your sexual offense.

"You may have a hard time identifying those feelings in the present. Sometimes offenders experience them as tension, stress, or anxiety. Usually certain problems occur that set off the troubling feelings. These problems are usually with another person, such as your wife, parents, or a peer. In others cases, your feelings may be set off by a big stress in your life, such as a death, divorce, or being fired from a job. You begin to tell yourself once again that you're worthless or unlovable and begin to feel this same painful feelings.

"The fourth link pertains to the strategies used to cope with the negative thoughts and bad feelings which ultimately facilitated the sexual abuse. This link is difficult for offenders to understand, as they think it means that they



planned out the sexual abuse. Usually this is not the case. What we find is that the offender handles the troubling thoughts and feelings in the high-risk situation in several different ways, which help lead toward the sexual abuse. For instance, a father may turn toward his daughter to get the love and acceptance he thinks he cannot get from his wife. An adolescent may associate with younger children because he thinks they accept him for who he is. Other offenders may also turn to drinking alcohol or using drugs as a way to cope with the high-risk situation. It's important to realize that the offender does not intend to commit a sexual offense when this process is happening, but that the combination of this and the false or distorted ways of thinking about the child, or the sexual thoughts that come up regarding the child, lead to the sexual offense being committed.

"The fifth link involves false or distorted ways of seeing or thinking about your offending behavior. These are the thoughts you had before, during, and after your sexually offending behavior which made your offense seem okay to you or did not make you feel so bad about it. This can include ideas such as: a) 'Since my victim didn't resist, he must have agreed to what we did.' b) 'I will only do this one time just to see what it's like.' c) 'I will never let this happen again.' d) 'This is a way to show love toward my daughter.' As you can see, these types of thoughts make the offender believe that what he is doing is not harmful or hurtful to the child. When the offender thinks this way, it makes it easier to act upon the sexual thoughts or ideas that he has

toward the child."

### **Concept: Relapse Prevention**

"Most of you probably think that you would never commit a sexual offense again. If you continue to think this way, then you probably will reoffend at a later time. As you find out more about your chain of events, you'll learn that the thoughts and feelings which contributed to your offending behavior are common. Under the right circumstances, these feelings and thoughts could recur. It may be years before this happens, or it may happen next week. The idea of relapse prevention is to help you develop healthy ways to cope with your chain of events, should you see all or part of it emerging later in your life."

### **Concept: Myths About the Victim**

The following are common myths that offenders believe regarding how the victim is affected by the sexual abuse or how the victim perceives what occurs. These distorted ideas prevent the offender from genuinely understanding the effects of the sexually abusive behavior on the victim.

*"Myth 1: When a person does nothing to resist, like scream or fight back, it means that he or she does not really feel sexually abused. This statement is false. Many victims of sexual abuse do not fight back. This may be due to*

many factors, such as fear of getting in trouble or making your parent angry, trusting that the offender will not hurt you, being threatened with physical force or some other negative consequence, or the offender using bribery.

*"Myth 2: Many victims invite abuse because of the way they act.* No matter how a person acts, there is no justification for forcing sexual behavior onto him or her. Sometimes children may act in a seductive manner which could be related to a phase in their development or might be a result of earlier sexual abuse. In this situation, it's your responsibility to take action by informing the child's parent, or if an adult incest offender, to discuss this issue with your wife, in order to deal with the situation adaptively. This misperception of blame is a way for the offender to rationalize his actions so that he does not have to feel so badly about himself for what he did.

*"Myth 3: When a child under the age of three is a victim of sexual abuse, he or she is too young to know what happened or to feel traumatized by it.* While a child under the age of three is not able to understand what sexual behavior is or means, that child does get the message that what's happening is a bad thing. The child then begins to think that 'this thing that makes me feel bad must have happened because I am a bad person.' This is the way a child's mind works. This can result in the child developing poor self-esteem, which can lead to significant emotional and behavioral problems for that child in the future.

*"Myth 4: Children make up stories or just lie about sexual abuse in order to get attention or get back at someone.* Young children do not have the sexual knowledge or the intelligence to make up such a story, let alone decide to get back at someone by fabricating such allegations. A child who consistently tells about sexual behavior in childlike words can be considered to be a reliable reporter of what happened.

"Because children have difficulty with remembering specific dates and times, it's normal to have reports that may incorrectly state the date or time of the offense. Also, because victims try to forget what happened to them, the story may not be that clear. A child may telescope several events into one event, too.

"Finally, in family-related cases, a child may report the abuse and later say that it didn't happen. Usually in these situations the victim is upset over the problems that have occurred in the family because of the disclosure—for example, no one in the family believes her, the offender is arrested, or the victim is removed from her family by the police. Under these circumstances, the victim retracts the statement alleging sexual abuse as a means of undoing the problems associated with the disclosure she made.

*"Myth 5: If a person felt sexually abused, she would surely report it right away.* The way in which the offender coerces the victim may prevent the child

from reporting the sexual abuse. For instance, the offender could threaten the child with violence or getting in trouble. The child may feel to blame for the sexual abuse occurring, because the offender used bribery or enticement; it takes some time before the victim realizes that it was not his or her fault. In fact, if the sexual abuse occurred on several occasions or over a period of years, it's more common for the child to make a disclosure only after the abuse has stopped.

*"Myth 6: Victims always hate the person who sexually abuses them.* In the types of sexual abuse cases we deal with here, most of the offenders have a trusting relationship with their victim. In this situation, the victim has a lot of positive feelings for the offender. In fact, this adds to the trauma, because the victim is confused as to why someone who is so nice does something that is hurtful. The child victim may continue to want to have a relationship with the offender because of the positive aspects of their relationship. The offender may only see this side of the victim's feelings and may misperceive that the victim was not affected by the sexual abuse."

### **I. Concept: How Is My Victim (or Victims) Like Those of Other Offenders? [presented only in adolescent offender group]**

"There are many characteristics common to the victims of adolescent sexual offenders. Here are some that occur most frequently.<sup>2</sup>

- "Three out of ten victims are male, seven out of ten are female.
- "Almost four out of ten victims are members of the offender's family, usually a sibling or cousin.
- "About five out of ten victims have some type of trusting relationship with the offender.
- "One out of ten victims is a stranger to the offender.
- "When the offender commits the sexual offense, he is more likely to talk the victim into it or use his authority over the victim to commit the offense rather than using violence.
- "Usually the offense goes on for two to six months and can happen anywhere from two to fifteen times.
- "The offender usually engages in such sexual behavior as touching the victim on the genitals, pretending to have sexual intercourse with the victim, or making the victim suck the offender's penis."

## **Sexual Abuse**

"Common emotional reactions of victims include:

- Shame
- Guilt

- Embarrassment
- Fear
- Confusion
- Helplessness
- Anxiety
- Sadness
- Anger

"Common behavioral reactions include:

- Difficulty sleeping
- Running away
- Poor school performance
- Bed wetting
- Thoughts of suicide or attempted or actual suicide
- Acting out aggressively
- Sexually abusing someone else
- Getting into trouble with the law

- Temper tantrums
- Withdrawal or isolation from others
- Drug or alcohol abuse
- Eating disorder, for example, refusing to eat, bingeing and purging
- Self-mutilation

"Common psychological reactions include:

- Impaired feelings of self-worth
- Confusion regarding sexuality
- Depression
- Fears about having a normal sexual life, of getting too emotionally close to others, or leaving the 'safety' of the home.
- Flashback memories of the sexual abuse
- Getting into other abusive relationships
- Getting into a relationship in which the partner sexually abuses their child
- Problems expressing feelings



- A need to control others
- Inappropriate adult behavior (on the part of a child)

"Common physical signs which are a direct result of sexual abuse include:

- Bleeding from the rectum or vagina
- Vaginal infections
- Poor personal hygiene
- Bruises and cuts"

"All victims do not experience every reaction listed above. There are other factors related to the offense which contribute to the types of reactions victims have. These factors include: the length of time over which the sexual abuse occurred, the type of sexual behaviors committed, and whether the offender used physical force in the offense. Even when the offender does not use physical force, or sexually abuses the victim for a short time, it doesn't mean that the victim will suffer less. Victims tend to react more negatively to the abuse when one or more of the following occur: a) when the abuse lasts more than one year, b) when the victim is sexually abused by a parent, c) when family members do not believe that the victim was sexually abused, and d) when the victim has to be placed outside of the home."

## **K. Concept: What Is Normal Sexual Behavior?**

"It's common for offenders and their families to incorrectly define abusive behavior as typical or normal. This is most frequently seen with adolescent sexual offenders where the abuse is labeled as 'normal adolescent experimentation.' In other cases, offenders and parents may misinterpret attention-seeking behavior on the part of a child as sexual seductiveness.

"At about the age of three to five, children begin to notice that the opposite sex has different body parts. For instance, a male child sees that a female does not have a penis. When seeing a female, the child is curious, as is normal at this stage, and he wants to know what it feels like not to have a penis or maybe try to find if it is hidden someplace. During this stage the child's behavior is not sexual in nature but rather is a function of the child's natural curiosity. What happens is that many times adults misperceive such behavior as sexual. Similarly, it's common for children to touch their genitals because it feels good—not because the child is being sexual in adult terms or fantasizing about sex.

"It's common for a preteen or young teenage female to act in a seductive, flirty manner toward her father. The child is not attempting to be sexual with the father, but rather is looking for recognition that she is a developing young woman and is testing limits as to acceptable behavior with males.

"In sexual offense situations, we find that the offender misinterprets these normal forms of child development as the child wanting to engage in, or enticing the offender into, sexual acts. This type of thinking on the offender's part is a way for the offender to justify acting upon his own sexual urges toward the child.

"Children are not physically, intellectually, or emotionally prepared to engage in a sexual relationship with a parent or someone who is older than themselves. Furthermore, children do not have the knowledge or experience, unless they have been sexually abused, to make up stories that involve sexual behavior, such as describing an erect penis or what semen looks like.

"Healthy male adolescent sexual behavior can be defined as mutually consensual sexual behavior between two peers. Other definitions follow:

- "For younger adolescents (age twelve to fourteen), it's most common to see such behavior as kissing, touching of genitals or female's breasts, or 'dry humping.' The older the teenager becomes, the greater the likelihood for sexual intercourse. It's rare for an adolescent to engage in anal intercourse.
- "The adolescent has sexual fantasies regarding peer-age or older partners. It's common for adolescents to masturbate during these sexual fantasies. It's also common for adolescents to deny that they masturbate when they really do. This denial of masturbation occurs, in part, due to the

idea that masturbation is wrong; or from false ideas that only boys who are homosexual or cannot "get a girl" are the ones who masturbate.

- "Adolescents usually learn about sex from classes in school, discussion among peers, and from watching television and non-X-rated movies. It's common for adolescents to have viewed some type of soft pornographic material such as *Playboy* or *Penthouse* magazines."

Only give the following information about adult male sexual development when conducting the adult incest offender group.

- "The adult goes through the same type of sexual experiences as described for the adolescent.
- "The adult more frequently engages in sexual intercourse than the adolescent.
- "It's normal for the adult male to have his highest level of sexual desire during his late teens and early twenties; whereas females experience their strongest levels of sexual desire in their early to mid-thirties."

### *The Role of Fantasy*

"A sexual fantasy is a thought, no matter how short, about sexual involvement or activity. A sexual fantasy can occur with or without masturbation.

"An appropriate sexual fantasy involves a mutually consenting sexual relationship. It's not uncommon to have fantasies involving sexual partners that the person sees as being unattainable, such as a movie star; but even these fantasies involve mutually consenting sexual behavior. It's unhealthy to have a sexual fantasy involving sexual behavior being forced upon another person.

"It's unhealthy for adults or adolescents to have sexual fantasies involving young children. In fact, such fantasies or thoughts are one of the major factors that contribute to the occurrence of the sexually offending behavior. In the thoughts that lead up to the sexual abuse, the offender usually imagines that the victim is cooperating with the sexual behavior and is not being harmed by it. In a sense, the offender tricks himself into justifying the sexual behavior as appropriate."

*There are major differences between consent and coercion.*

"Consent usually involves the following elements:

- "One person does not have unequal power over the other. Power does not only apply to the physical size or strength of a person, but also to such factors as trust, intelligence, and authority.
- "Both people who are sexually involved like each other, and the sexual relationship is a means of expressing affection.

- "Privacy is honored between the two sexual partners. One person does not go around and brag about the sexual relationship or use it to shock or excite others. (This element of consent is not always honored in otherwise 'normal' relationships, such as when teenage boys may brag about sexual conquests among themselves, or when girls discuss their romantic exploits or sexual behavior.)
- "Both people who are sexually involved agree to have a sexual relationship. The consent must be clear and not based on what one person assumes the other to be thinking; nor does it rely exclusively on nonverbal communication such as body language.

"Coercion is defined as using some form of power over another person in order to have him or her submit to sexual behavior that the offender wants to engage in. The power takes away the ability of the victim to consent. Coercion can involve actual physical aggression as well as bribery, enticement, deception, or misuse of one's trust or authority in a relationship."

#### **L. Skill: Discussing the Abuse in the Family**

"When discussing the sexual abuse in intra-familial cases, the primary concern should be how the victim will be affected by any discussion. It's important that any discussion of the sexual abuse does not further traumatize the victim.

"The non-offending parent in the adult incest offender case and the parents of the adolescent sexual offender have the right to have their questions answered about the sexual abuse. These parties should show some sensitivity to the feelings of the offender, but should not allow the offender to avoid talking about the abuse. It's helpful to acknowledge to the offender his difficulty in talking about it, and to let him know that you need to discuss it with him. Talking about the abuse can help relieve the burden, for family members as well as the offender, of keeping the secret.

"In some situations, the details of the offending behavior may be important. The offender should understand that his partner or parents may feel a good deal of guilt over not realizing that the sexual abuse was occurring. Their need to discuss the sexual abuse, in many cases, is an attempt to determine whether they should feel guilty for not having recognized that the abuse was occurring.

"As part of the treatment process, the offender will be required to inform his spouse or parents of the factors that led to the occurrence of the offending behavior. This step helps improve the level of trust within the family and allows the partner or parents a means to monitor the offender to ensure that he is not slipping back into old patterns that could lead to a re-offense.

"Various feelings and fears prevent the discussion of sexual abuse within the family. Some of these include:

- "Fear on the part of the victim, the offender, or other family members of being rejected or abandoned
- "Embarrassment, shame, or guilt
- "Not wanting to pressure the offender more
- "Feeling sorry for the offender
- "Fear of punishments or verbal abuse inflicted by the parents"

Close with the following: "As you can see, there are some compelling reasons not to discuss the sexual abuse within the family. The question is, are these feelings or fears valid, or are they an attempt to avoid dealing directly with the sexual abuse? The only way to find this out is to talk about your feelings and concerns. In other words, you have to check them out. You have to tell your spouse or parents of your concern for feelings, and check to see whether your perceptions or fears are accurate."

#### **M. Concept: Who Else Should Be Told?**

"As a rule of thumb, the child molester should not be placed in a situation where he will be left unsupervised with children. Even when he can



be supervised around children, the parents of the children should be informed of the offender's offense. This is necessary, as the parents of the children should have the right to decide if their children should be in such a situation. If you do not tell them and they find out another way, the parents may be quite upset and angry that you placed their child in a risky situation.

"Immediate family members should be told of the sexual abuse committed by the offender. It's a form of avoidance to think that the other children in the family do not know what occurred. Although the children may not know the exact details of what happened, they do sense that something is wrong. If they're not told of the problems in the family, the other children are left to imagine what these problems are. This can result in a child feeling highly anxious or thinking that he or she caused the problems that are being experienced by the family. It's important to tell the children in a way that is appropriate to their age and level of understanding. It's not necessary to go into great detail. For example, you might tell a six-year-old: 'Your brother was touched in bad ways by Uncle Hank, ways that made him feel sad and confused. He's going to a doctor now who will help him feel better; and we're looking out to make sure that Uncle Hank doesn't bother him again.'

"You might say to a twelve-year-old: 'Daddy did sexual things with your sister that he shouldn't have done. This is a very serious and painful situation for your sister, and for our whole family. Daddy is getting help to make sure

that he never does anything like this again. But if he can't learn to change, we'll live apart from Daddy—because I have to protect you and your sister from being hurt by him in ways he might not be able to control. Your sister is getting all the help that money can buy to help her get over her pain. She'll need a lot of understanding and love from all of us from now on—and this may mean that you'll need some extra love and understanding, too. Don't talk to Sally unless she wants to talk about what happened—but I'm available for you whenever you need to talk. And if you'd like to talk to someone besides me, that can be arranged, too.'

"In the adult incest offender cases, the non-abused siblings may come to feel mad at the victim for causing the turmoil in the family. If this occurs, it may be necessary for the offender to sit down with the non-abused children to tell them what occurred and to remove the blame from the victim by assuming sole responsibility for the offending behavior.

"In adolescent offender cases, a parent may need to discuss the sexual abuse with a trusted friend in order to manage the stress associated with it. This is okay, even though the offender may not like it. It's important for parents to trust their own judgment and to realize that such support may be crucial to weathering this crisis.

"It should be left up to the parents to decide who is told about the sexual

abuse in the extended family or outside of the family. In intra-familial cases, the attitude of the victims toward discussing or not discussing the sexual abuse with others should be of primary consideration. For instance, the victim should not be put in the position of having to make up a story accounting for the hard times that others see the family going through. This only reinforces the sense of secrecy and badness that the victim is trying to work through in treatment."

## **Main Interventions**

### *Week 1*

#### **Introduction**

See Starting the Group.

#### **A. Concept: How the Criminal Justice System Works**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 2: Soliciting Information From Individuals*

Call on participants to share their experiences going through particular parts of the criminal justice system.

## **B. Concept: How the Social Services System Works**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 2: Soliciting Information From Individuals*

Call on participants once again to share their experiences going through particular parts of the social services system.

### **Homework**

Do this every day throughout the duration of the group.

"Once or several times a day you are to write down the details of any thoughts or fantasies that are related to your offenses. These thoughts or fantasies may be sexual, but may also include other feeling states—for example, anger, depression, pain. The details of the thoughts or fantasies should include what is happening, who is in the fantasy, what the thoughts and feelings are, and any other information you think is important. Include whether you masturbated or not. Also, you should record your feelings, thoughts, and what was happening around you before the start of the offense thoughts or fantasies. Finally, write down the time and day the thoughts or fantasies occurred. Here is an example.

Sunday about 1 p.m. I was sitting in the living room feeling kind of bored. I had gotten into an argument earlier with my wife. I was thinking how

unfair she was and how she is always on my case. I was feeling angry. Later I began having thoughts of my daughter. I thought about how nice it is to talk with her and how good it feels to play with her breasts and vagina. As I thought of this I began to beat off and I came. When I finished I felt better inside but also guilty for thinking about molesting her.

## **Week 2**

### **Review of Homework**

#### **C. Concept: What Makes Sexual Behavior Between Two People Abusive**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 2: Soliciting Information From Individuals*

Write the concept at the top of a blackboard or flip chart. Ask the group to begin to define those things that they think make sexual behavior abusive. As group members respond, clarify answers that are unclear and write the main point of their responses on the board. If members fail to provide all the main ideas, continue to the next intervention.

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

#### **D. Concept: Common Myths About Sexually Offending Behavior**

*Intervention 3: Group Discussion*

Read each of the myths aloud (see Concepts and Skills section) and invite participants' reactions to each statement. Write down the comments that accurately reflect the reality. If the major issues aren't all raised, continue to the next.

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

**E. Concept: Offense Patterns—How Are My Offense and My Family's Dynamics the Same as Those of Other Offenders?**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

**Homework (for adult offenders)**

"Read the article called *A Personal Account of a Father* (see Handout 1). After reading it, complete the questions at the end and we'll discuss them next week." Give each member a copy of the article and questions. Take a firm stand that homework is essential and must be completed.

***Week 3***

**Review of Homework**

Use the discussion of the homework to lead into the presentation of the next concept.

## **F. Concept: The Chain of Events Model**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 4: Exercise—Chain of Events*

The method in conducting this exercise varies between the two offender groups. The instructions for both are as follows.

Give each person a copy of the Chain of Events questions (Handout 2), and say: "Now that we have reviewed the chain of events model, we'd like you to apply it to your offense situation.

"There are questions about each link in the chain that you need to answer. These questions include:

1. "What are some of the past hurts or abuses that happened to you in your childhood that were upsetting, that you've not really talked about, or that still bother you?"
2. "How have these past hurts or abuses affected your thoughts or feelings about yourself and others? What are the fears or concerns which lead you to have problems in relationships with others?"
3. "What were the thoughts and feelings that were bothering you around the time, or just before, you committed each sexual offense."

4. "What were the coping strategies—behaviors, feelings, and thoughts—that helped you deal with the high-risk situations? How did these coping strategies lead you to act in sexually abusive ways?"
5. "What were the false or distorted ways of seeing or thinking about your sexually offending behavior that made the offense seem okay to you or seem less bad?"

In the adult offenders' group, provide the following instructions:

"I want you to spend about ten minutes filling in, to the best of your knowledge, those parts of the chain of events that apply specifically to your offense. You have a sense of how this model applies based on the homework you completed. Don't be concerned whether your answers are correct. We'll discuss your answers in a few minutes. The idea of this exercise is to understand how the model is applied in order to help you use it in future therapy sessions. Okay, go ahead and start and I'll tell you when time is up."

For the adolescent group, provide a variation of the above directions as follows:

"We're going to break up into small groups, mixing parents and adolescents together. I'm going to count off around the group." Count one, two, three while pointing to each member of the group in turn.<sup>3</sup> Okay, now I want all number ones over here, the number twos over there, and the number



threes here." Gesture to different parts of the room.

After the subgroups are formed, continue with the following directions: "You will have about 20 to 25 minutes to discuss how the chain of events model applies to your particular offense situation. I want each group to quickly choose one person to read aloud the different questions for the chain of events model. Go through them one at a time. Each person should give an example of that part of the chain of events that applies to his offense. For those parents in the groups, I would like you to give an example for each factor as you see it applying to your son. When we're done, we'll come back together as a large group and discuss what this experience was like. Okay, let's start. If you have any questions, raise your hand and one of us will come to your small group to answer it."

For both the adolescent and adult offender groups give the following instructions to conclude the exercise:

"All right, time is up. Let's get together as a large group again." Pause while the group gets back together. "What I would like to do is to have several of you share what was difficult about completing the exercise, and for some of you to share what you learned about your chain of events."

Help the members share their experiences related to the above two areas. Provide information to assist them in better understanding how to

apply the chain of events to their offense situation.

## **G. Concept: Relapse Prevention**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 4: Exercise—Relapse Prevention*

Usually a group member will question the validity of this concept. It's important to interpret the offender's resistance to accepting this concept as a manifestation of the guilt he already feels about having committed the offense. Acknowledge that he could potentially do this again and it would only serve to intensify his guilt. After dispensing with this issue, continue by giving each member a copy of the Relapse Prevention Worksheet (Handout 3).

"Please look at the Relapse Prevention Worksheet. There are six questions which will help you develop a specific plan of action. This plan will help you develop ways to cope with the thoughts and feelings that could lead to a repetition of your offense. The questions are as follows: (Describe what you would do in order *not* to continue thinking of, or actually following through with, another sexual offense.)

1. "What could I immediately do to deal with the ways of acting, the feelings, or the thoughts which could lead me to commit another sexual assault?"

2. "Whom could I call or talk with to tell about my urges, feelings, or ways of acting?"
3. "What do I want the person listed above to do?"
4. "What can I do to stay away from opportunities that give me access to potential victims?"
5. "What are some of the things I could do or say to handle the high-risk situations, feelings, and ways of acting that contributed to my offense?"
6. "What are some true or realistic statements I need to make to myself to correct the distorted thinking which might lead to my committing another sexual offense?"

"I would like you to jot down your responses to these questions.<sup>4</sup> We will give you about 25 minutes to do this. When you have completed this, we will discuss the exercise in the group."

Announce when time is up. Ask the group: "What are some of the responses that people came up with? Johnny, why don't you start."

Reinforce responses which show that the offender is seriously applying this concept to his current life circumstances. Help offenders think of more concrete steps to take in order to avoid a re-offense. At this stage, the offenders should be developing strategies for avoiding situations in which

there is a potential for a re-offense to occur. They should also learn, when troubled by thoughts or feelings of a re-offense, to identify people with whom they can talk about their incendiary thoughts or feelings. For those offenders who cannot do, or who refuse to complete, this exercise, the leaders should express their concern over the offender's ability to control himself. It's also helpful to interpret out loud his inability to examine this issue as a way of setting the stage to reoffend; and to verbalize potential consequences of another offense.

## **Homework**

"Describe in detail the things in your childhood which may have contributed to your offending behavior. You are to describe the incidents in detail, your feelings then and now, and how you see those events affecting your offending behavior."

## *Week 4*

## **Review of Homework**

### **H. Concept: Myths About the Victim**

#### *Intervention 3: Exercise—Group Discussion*

Read each statement aloud (see Concepts and Skills section) and invite participants' responses. Most of the main points that debunk each myth will probably be raised in the discussion. If not, continue with the next intervention.

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

**I. Concept: How Is My Victim (or Victims) Like Those of Other Offenders? [presented only in adolescent offender group]**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 4: Exercise—Understanding the Victim>*

This is a small group exercise. The large group is divided into small groups according to the instructions given for the chain of events small group exercise. After clients assemble in the small groups, give each person a copy of the Readings From Victims of Sexual Abuse and questions (Handout 4).

Then state: "For the first passage, I would like one person to read the material that the victim wrote at one age. Then another person will read the material for the next age. Continue rotating the reading until this entire passage is complete.<sup>5</sup> Once you've complete the readings, answer the accompanying questions.

"There are 5 questions as follows:

1. "What are some of the short-term effects of sexual abuse on victims?"
2. "What are some of the feelings the victims have regarding the sexual abuse committed against them? Also discuss your reaction to the victims' feelings."
3. "At whom are the victims' feelings directed?"
4. "What do you think are the steps the victims need to take in order to get over their reactions to being sexually abused?"
5. "If you were a victim of sexual abuse, you would feel, think, and react to being sexually abused in the following ways... (please write your answer in the first person—that is, 'I feel....' 'I think....')"

"In answering these questions, I want a member in the small group to read the question and then for the group to discuss it. Spend no more than five minutes on the question and then move on to the next one. As you discuss the questions, make sure that each of you writes down the answers you give in the small group. Continue doing this until you've answered and discussed all five questions. When you're done, we'll come back together as a large group to discuss the exercise. Okay, go ahead and start."

At the conclusion of the exercise, instruct group members to come back

together in the large group. Facilitate a discussion of the questions, emphasizing how victims react to the sexual abuse in many different ways, both in the short and long term. In addition, elicit discussion regarding the members' reactions to doing this exercise. Usually offenders verbalize their difficulty in doing this exercise. Reframe this difficulty as avoidance of facing the profound negative impact of the offending behavior on the victim.

## **Homework**

"Write a detailed account of your offense. Use the following factors to organize your account.

- "How my offenses began and progressed until the time I was caught.
- "My fantasies and state of mind prior to, during, and after each sexual abuse incident.
- "How I was able to gain access to and coerce the victim to go along with the sexual behaviors I engaged in.
- "How I kept my sexually abusive behavior a secret and avoided being caught."

## *Week 5*

## **Review of Homework**

## **J. Concept: Common Reactions of Victims to Sexual Abuse**

### *Intervention 2: Soliciting Information From Individuals*

"Victims of sexual abuse are affected in different ways—on emotional, behavioral, psychological, and physical levels. The sexual abuse can have different short- and long-term effects on each of these levels. What are some of the emotional reactions that victims experience as a result of the sexual abuse?"

Write participants' responses on a blackboard or flip chart categories. Differentiate between short- and long-term effects (and those which are both).

### *Intervention 1: Didactic Presentation (See Concepts and Skills section)*

Cover any reactions not listed by participants, and make concluding statements.

### *Intervention 3: Group Discussion*

Write the following two questions on a blackboard or flip chart:

1. What are some of the negative behaviors, troubling feelings, and physical signs which my victim or victims may experience both in the short and long term?



2. What could it take and how could I (and we, if the parents are involved) help the victim or victims in overcoming the effects of being sexually abused?

Direct the group to break down into subgroups according to the instruction used during the chain of events transformational exercise. Once the members are in subgroups, instruct them as follows:

"Someone in the small group should read each question aloud. After the question is read, discuss your responses to it. When you've completed this exercise, we'll come together and discuss it further. Okay, go ahead and get started."

When the groups have completed the assignment or the time is up, ask the members to reconvene as a large group. Have them share their reactions to completing the exercise, as well as the content of their responses to the questions. In facilitating this discussion, follow these guidelines:

Acknowledge those responses that reflect the offender's difficulty in understanding how the victim was affected by the abuse. Many offenders will say they have no idea how their victims feel about the sexual abuse because they have no contact with them. Even when asked to imagine how the victim might feel, the offender may still state that he cannot imagine this. When you get this type of response, you can respond in either of two ways: 1) Point out

that this inability may reflect the offender's guilt over the sexual abuse. To admit how his victim might be reacting to it would only make him feel worse.

2) This inability to understand how the victim feels is a major contributor to the offending behavior, as the offender might not have committed the offense in the first place if he realized the negative impact of his behavior. (This is an example of a false or dangerous way of thinking.)

Acknowledge the responses of group members that share sensitivity to the victim's reactions to the sexual abuse, or show that the offender is willing to appropriately assist the victim in the healing process. Emphasize that the healing process for the victim can be greatly facilitated by: the offender assuming personal responsibility for the offending behavior; the non-offending parent(s) verbalizing their belief that the child was sexually abused; and, when indicated, the offender apologizing to the victim within the context of therapy sessions.

## *Week 6*

### **K. Concept: What Is Normal Sexual Behavior?**

#### *Intervention 4: Exercise—Normal Sexual Behavior*

Direct the group to break into subgroups per the instructions used in the chain of events small group exercise. Give each person a copy of the What

Is Normal Sexual Behavior questions (Handout 5). Instruct: "Choose a person who will read the first three questions aloud in the group. These questions are as follows:

1. "What is considered normal sexual behavior on the part of an adolescent, adult, and a child?"
2. "What is a sexual fantasy? What is an appropriate sexual fantasy as compared to one that is not normal?"
3. "Explain the differences between consent and coercion."

Go through one question at a time. After the designated person reads the question, each member should share his reaction to it. "As you go along, write down your responses in the space provided on the worksheet. When I call time, we'll get back together as a group. You can start now."

After 20 minutes, call time. Instruct the small groups to stay together (there is one more exercise to complete in the small group) and to turn their chairs toward the front of the room. Elicit from the members their reactions to answering the questions as well as the specific content of their answers. Fill in any information that is not provided, using the following interventions.

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

*Intervention 4: Exercise—Coercion and Abuse*

Direct members to reconvene in their small groups to discuss the next three questions as follows:

1. What are the things that occurred in my offenses which involved coercion?
2. What are the things that occurred in my offenses which make the sexual behavior abusive?
3. What are some of the new ideas I've learned about coercion and abusive behavior in my sexual offense?

Instruct them to discuss the questions as per the previous exercise. Upon conclusion of, the time limit, have the groups come together as a whole to discuss the exercise.

During the group discussion, there are most often two divergent responses. It's helpful to respond to these using the following guidelines:

1. Some offenders will be able to label the abusive or coercive aspects of the offending behavior. In these cases, acknowledge and praise the offenders who are able to report on the coercive or abusive aspects of their behavior. It's important to acknowledge how difficult it is for the offender to verbalize this, and that such recognition is a big step toward recovering from the sexually offending behavior.
2. Other offenders will continue to deny any coercive or abusive

aspects of their behavior. Rather than being confrontative, interpret the offender's denial. Such an interpretation should come from a supportive frame of reference. Point out to the offender that his denial protects him from having to experience the painful feelings that would emerge if he were to acknowledge the abusive or coercive aspects of his offending behavior.

*Offender:* I guess I always thought what I did with Timmy was okay, because—you know—he always liked me so much. And he never yelled or anything; he never even told me to stop. But maybe he was afraid that his mother would send me away if she found out what was going on—I guess she would've. Or maybe he was afraid that he'd never get to ride the horses again, since I was his teacher and all. I never thought about that at the time.

*Therapist:* Your comments show the beginnings of empathy, Mike. This marks an important step in your recovery—and in making sure that you never commit a sex offense again.

*Offender:* Donna is sixteen going on forty. You'd have to see her before you could really understand. No red-blooded man could resist that kid—especially if she came on to him like she came on to me.

*Therapist:* Paul, I'd like the group to examine what you're saying and the words you're using. You say that your stepdaughter is sixteen going on forty. The reality is that she's sixteen. Try to think back to when you were sixteen, Paul, and what that felt like. And think about your relationship to your own stepfather. Were you intimidated by him at all? Were you scared of him? Did you look up to him? If he had asked you to do something you really didn't think was right, how likely would you be to go along with him anyway? You say that "No red-blooded man could resist that kid"—but the fact is that she *is* a kid, Paul. Maybe thinking about Donna as an adult makes it seem less horrible that you had sexual intercourse with her. Would anyone in the group like to comment?

## Homework

"Write a detailed description of your sexual development. Write about

- The various ways in which you learned about sex
- The age at which you began having sexual feelings and thoughts, began masturbating, and had your first sexual experience
- Any negative sexual experiences
- Your general feelings and attitudes regarding sex"

## *Week 7*

### Review of Homework

#### **L. Skill: Discussing the Abuse in the Family**

##### *Intervention 4: Exercise—Discussing the Abuse*

Give each person a copy of the Discussing the Abuse in the Family outline consisting of the following three questions (Handout 6):

1. How often should the sexual abuse be discussed in the family, and how many of the details should be included?
2. What are some of the feelings or concerns which may stop me (or

us) from discussing the sexual abuse in the family?

3. What are some of the limits that should be set on such things as being around situations or people where another offense could happen; and who should be told about what happened?

Then continue:

"Talking about the sexual abuse within the family is a difficult issue. Due to the shame and embarrassment associated with the abuse, most families would like to pretend that it doesn't exist. Some think that it's just more traumatizing to discuss the sexual abuse."

For the adult incest offender group, instruct the group to break down into subgroups according to the directions used in the chain of events small group exercise. The method of dividing the adolescents and parents into subgroups is the same as that for the adults, except that the subgroups will not mix parents and adolescents together. Instead, each subgroup should be comprised of adults or adolescents and contain no more than four members. This type of division provides an interesting array of responses to the questions. The differences in responses will emerge when the large group processes the exercise.

After breaking into small groups, say:

"Someone in the small group should read each question aloud. After the question is read, each person should state his response to it. As you answer, write down your responses in the space provided. When the small groups have completed this exercise, we'll come together and discuss it further. Okay, go ahead and get started."

When the groups have completed the assignment or when the time is up, ask the members to reconvene as a large group. Ask them to share the content of their responses to the questions. Attempt to elicit from group members the major points which you're presenting through this exercise. Expand upon the responses given by group members when necessary, using the following intervention and closing statements:

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

With the adolescent sexual offender group, you can facilitate the following intervention:

*Intervention 4: Exercise—Reality Testing*

"Let's try this out in the group. How many of you parents would yell at your child or reject him if he talked to you about the sexual abuse? How many of you teens wouldn't be able to handle a discussion of the sexual abuse with your parents?"



Let the parents and adolescents respond to these questions. Usually the responses received are contrary to what the group members presented in the subgroup discussion. In this case, underscore the importance of false ideas leading one to make poor choices, and how it's important to check out what you are thinking about another person in order to determine whether your perception is accurate.

In some instances, an adolescent or parent will confirm the fear of a negative outcome in discussing the sexual abuse. In this situation, explore the reasons for this with the member who expresses it. Usually such statements are made out of anger or are an attempt to avoid dealing with the sexual abuse in a direct manner. You can respond to these statements by highlighting the underlying motive in making such a statement.

### **M. Concept: Who Else Should Be Told?**

*Intervention 1: Didactic Presentation (See Concepts and Skills section)*

### **Review of Treatment Goals**

When this group is run as part of a comprehensive treatment package, it is extended one week. Week 8 is then used to carefully review with participants the treatment process presented in the Introduction. During this session, a treatment agreement for the rest of the package is discussed and

signed by each participant.

## Criteria for Measuring Change

As stated earlier in this chapter, the psycho-educational group is intended to provide a preparatory group experience that introduces the sexual offender and the parents of the adolescent sexual offender to the methods of treatment that the offender will go through. The group is not structured to bring about significant behavior change (however, there have been experiences where the process of psycho-education has helped in working through the denial of the sexual abuse that some offenders present during the early stages of treatment). Instead, the group is designed to plant seeds, in a nonthreatening manner, that will grow later in the treatment process.

The leaders determine whether a group member has adequately learned the material presented through the level of participation of the offender in the group. It's assumed that the offender who fully completes the assignments, attends the group regularly, takes notes on the material presented, and participates in the large and small group exercises is understanding the concepts that need to be learned in order to maximize the benefits of treatment. In some instance where the offender has made poor progress, he will be expected to complete the psycho-educational group over

again.

## **Problems Specific to the Group**

In conducting the psycho-educational group, there are several types of problem members who consistently emerge. There are those offenders who deny that the material is relevant to them, those who are withdrawn or uncooperative, and those who are disruptive or argumentative.

### **The Group Member in Denial ("I don't belong in this group")**

These types of offenders or parents of adolescent sexual offenders may seem to be cooperative when judged by their participation in the group process. However, this person's responses to the issues discussed in the group consistently reflect the theme, "This does not apply to me." Psychologically, these individuals are avoiding and denying their painful feelings—shame, guilt, anger, embarrassment—associated with the sexually offending behavior. The issues discussed in the group begin to activate these feelings, and the individual goes on the defensive to suppress them.

In managing this form of resistance, it's most effective for the therapist to take a supportive role. The group leaders should respond by acknowledging the group member's feelings and thoughts. Then one of the leaders should interpret the underlying motive for the denial presented by

the member. For example: "I'm hearing that you think the sexual abuse did not affect your victim. It seems to me that it would be too painful for you to admit the harm you caused your victim."

After making several of these types of supportive confrontations, and through the material presented in the group, this type of offender or parent of an adolescent sexual offender usually shows a positive change in the pattern of avoidance and denial.

### **The Argumentative Group Member**

The argumentative member wants to contest the material presented by the group leaders. This person becomes problematic when this is the person's consistent style in group. He wants to argue about specific details with which he disagrees; the only basis for his arguments is his idiosyncratic way of thinking about and perceiving his environment and interpersonal relationships. In extreme cases, this type of consistent response pattern may be symptomatic of an underlying narcissistic or antisocial personality disorder. In other cases, the argumentative style of a member may reflect that person's primary way of avoiding the painful feelings that are activated by the group discussion (a neurotic defense pattern). The underlying dynamic for the member's argumentative behavior will determine the type of intervention that is made by the group leaders.

The member whose argumentativeness is a characterological trait requires firm limits and confrontation for his inappropriate behavior. The group leaders have to quickly intervene and let this member know that his argumentativeness is not appropriate in the discussion. For example:

Joe, I find that you're splitting hairs over this subject and it's causing us to get off track. I want to stop the digression at this point and move on.

In some cases, confrontation and limit setting are futile, as the group member cannot modify his behavior to conform to the norms of the group. The group member may have to be prematurely discharged, in such circumstances, from the psycho-educational group. When this occurs, it may be appropriate to send the offender or the parents of the adolescent offender into an ongoing therapy group. A therapeutic group usually has better resources for managing this type of personality.

The group member who shows the neurotic form of argumentativeness is best handled by using the supportive approach described in the previous section. The group leader should interpret for the entire group the underlying dynamic that is contributing to the individual's argumentative response.

### **The Withdrawn Group Member**

The withdrawn group member presents himself as being a

nonparticipating member. This individual remains aloof from all or part of the group process. Several patterns of nonparticipation are seen:

- The member who remains completely aloof from any participation in group
- The person who remains quiet in the large group but is active in subgroup exercises
- The member who will not participate unless called upon
- The individual who does not complete homework assignments

The type of withdrawal can indicate what is motivating the person's nonparticipation.

A general consideration in addressing the four types of withdrawal is to determine if the member has some type of cognitive limitation or severe depressive disorder which precludes his ability to participate actively in the group. In the latter instance, the member will need to be precluded from the group until his mental status improves to the extent that he can participate in the group. When an offender has a cognitive limitation that affects his participation, it may be helpful to assign him a "buddy" in the group to help him complete the homework and discuss the material covered outside of the context of the group.

The initial intervention with the withdrawn member is for the group leader to specifically identify the type of withdrawal and to verbalize that problem behavior to the member. This is done in a supportive manner that places responsibility on the member to change this problem behavior. For example:

Bill, I've noticed that you've really kept to yourself in the group and haven't said much during any of our discussions or exercises. I'm concerned that you're not getting much out of the group and I'm wondering what you have to do in order to begin participating more actively.

Through this process, the leader and member can establish some form of agreement regarding the person's more active participation. In other cases, it may come to light that the offender's lack of participation may reflect his anxiety about being in a group and/or be symptomatic of his poor self-esteem.

Shyness and low self-esteem are probably the most common reasons for nonparticipation in the group. It's helpful in this situation for the group leader to call upon such members directly to elicit a response. When the group member responds, he should be given verbal or nonverbal recognition for his contribution. Such positive reinforcement of the member's answers will increase the likelihood of his future participation.

The withdrawn member's lack of participation may reflect a passive-

aggressive way of dealing with authority figures. The most effective way to deal with this member is to encourage his participation but not become involved in a power struggle. After encouraging him a few times, the leader then responds in a manner such as this:

I can tell, John, that you don't want to participate in this group and I know I can't force you to. I do want to let you know that if you decide to continue not participating, I may have to terminate you from the group or have you repeat it. The choice is up to you.

It's crucial to enforce the consequence if this member decides to continue with his non-participatory behavior.

## Relapse

Due to the preparatory nature of this group, relapse prevention is not an applicable concept. Relapse prevention as it relates to the sexually offending behavior is a standard and important aspect in treating the sexual offender. In the context of the psycho-educational group, however, relapse prevention is a concept that is introduced to the offender and more fully worked on later in sex offender therapy groups.

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## Notes

1 When conducting the adolescent offender psychoeducational group, instruct parents to state their first names, indicate which offender they are affiliated with, and give a brief statement of why they're attending the group.

2 The information presented here can be adapted to more accurately reflect the victim characteristics that may be present in other treatment settings.

- 3 The small groups should have no more than four persons. The size of the overall group will determine the range of numbers you will use to assign numbers to group members.
- 4 The parents of the adolescent offenders are asked to imagine what actions their sons could take in order to prevent a reoffense from occurring.
- 5 Usually the long passage plus one or two of the shorter passages can be completed in the time allowed. When reading the shorter passages, instruct one group member to read the entire excerpt to the small group.

## Handout 1

### *A Personal Account of a Father*

From: Giarretto, Hank. *Integrated Treatment of Child Sexual Abuse*. Palo Alto, California: Science and Behavior Books, 1982. (reprinted with permission of the author)

In the children's home where I grew up, I learned to hate: social workers, school, almost everything and everyone. Next I learned to destroy what I hated. I played some very sad and heavy games. It became easier to hate than to love. I stuffed inside myself any feelings of being hurt and didn't let myself hurt. I never let a tear come out of either eye, because guys I lived with at the home wouldn't have tolerated that. I learned not to discuss or share any emotion about being physically hurt or sad.

I didn't ever think I had a meaning or purpose or sense of flow about my life. I just pointed myself in a certain direction and tried to conquer and destroy. I had no sense of belonging to a family or to society. Once a priest came to the home and cornered me to get inside my thoughts. I wasn't a Catholic and didn't want him to know my thoughts. My faulty reasoning was that it would keep him from coming back. I was seventeen years old then but operating with a ten-year-old's reasoning. I wasn't close to males at any time in my life on any kind of feeling level. I didn't know how to deal with the fact

that the males I know kept all their feelings repressed and pushed down. They couldn't do anything for me that I needed, so I just let them do their own thing.

I was ready to give but not receive, even when I was very young. I could give and give and give...but I didn't know how to let anyone else give. As a result, lots of people rejected me because I didn't accept anything from them. They needed to give, too, but I didn't let them. I learned not to attach myself to anything or anyone.

I liked being rejected because then I knew how to react. I knew my ground and what to do next each time that happened. I thought I knew what other people thought and that I could guess when they didn't want me around anymore. Then I'd say, "Okay, I don't have to be around anymore." And I'd hurry and detach myself, even if it was someone I really was drawn to. I learned that very young and kept that pattern as an adult. I learned to fantasize about relationships, about being close to people. Of course, it was always on my terms. At night lying down, I'd fantasize in a dream state about having relationships where people accepted me. The only place I could have relationships was in my dreams—not in real life.

As an adolescent, I had several girlfriends. I'd make each one reject me and make them go on to someone else. I kept repeating that pattern. I kept all

of them from being able to harm me or get into my "garbage can." By garbage can I mean all my repressed or angry feelings that I kept stuffing inside myself and keeping a lid on.

What I learned in the children's home about stuffing feelings inside myself and denying them followed me into adulthood. I was very, very negative about everyone and everything. I was angry most of the time. That really affected my outlook on life. I didn't share my feelings with anyone. I didn't want to be touched or to be close to anyone, because they could reject me by surprise. I pushed people to reject me so that I could maintain control of any rejecting that resulted. I was used to being in a rejected state. Any other state was unfamiliar and left me feeling I didn't know what ground I was on. Being rejected was ground I knew, so I could handle that.

I kept my thoughts to myself in that garbage can I started filling as a boy. That can was never empty, because I kept filling it every day. I also held on to everything that I had ever put in there, so it got more and more full every day. I had a very low opinion of myself. I wasn't accomplishing much success or adding much to the world. I never tried suicide, but I often thought that if I snuffed out the light on my life that it would be better for the people around me.

I had very little self-control and let myself be very violent. I got

frustrated a lot; and when I did, I wanted to throw or bang or destroy something. One time I got a bolt started right but couldn't make it fit back in my car. I threw my wrench neatly through the windshield and blew the glass apart. That just caused me more problems and more frustration. Another time, when I was in business for myself, I designed and drafted some drawings, which was \$140 worth of work several years ago; I ruined it with one sweep of my knife. I did it because it didn't fit precisely the way I wanted. I did that even though it looked acceptable enough and the people I did it for had approved and accepted it. It wasn't what I wanted, so I destroyed it. And when I had to do it over, I got angry with the people and blamed them instead of myself. When I finished, I destroyed the plates because I didn't want any reminders around of that experience.

I was destructive to others and to myself. I didn't eat much or eat right. I'm six feet tall and was three hundred pounds and looked like a bloated hunk. Even if I got hungry at work, I wouldn't eat. I'd get the shakes and be nervous from hunger, but I'd use will power to deny that it was happening and try not to let it bother me.

I was a real loner. I thought I liked being alone. I wallowed in my garbage of thoughts by myself. I tried to keep thoughts straightened out in my head enough to satisfy myself. I didn't try to straighten out matters with anyone else. I avoided any place where there were crowds, like parks. I didn't

want people staring at me, so I stared at them instead. I liked being the silent observer, so I'd sit in a corner and watch people. I'd try to figure out what was going on with them and try not to let them see what was going on with me. I watched football on TV and tried to be knowledgeable about it, because the guys at work related to that. I wanted to sound knowledgeable.

I deceived others about how much I drank. I thought it was manly to sit down and drink a case of beer. Sometimes, I'd follow the beer up with a quart or a couple of six-packs. I won approval from my fellow employees and other acquaintances by doing that. Right before I came to Parents United, I drank a fifth each day and drank all day long.

I convinced myself that drinking helped me cope with my wife's health problems. In reality, all it did was help me repress those problems. I kidded myself that if I lived alone, I could lick my drinking problem easily. When I drank, I could talk more easily, hold a conversation better (I thought), be a different person that I couldn't be when sober. When I was drunk, I related to other people's stories better and forgot some of my "garbage." Drinking helped me get into a comfortable "gray field." It made me feel more successful and stronger than I felt at any other time. In recent years, when I couldn't reach that level and just got sick, I felt helpless that booze couldn't do for me what it had done for me earlier in my life.



I became a Boy Scout leader. I learned about boys' problems and about counseling them. I didn't drink when I was with those boys, which was one weekend a month. I had to give up being a scout leader after I molested my stepdaughter. I couldn't risk that they'd find out about me. I still regret that so much and it still hurts. I can't take the chance, though, that someone would call them to say they had a child molester as a leader. I contribute to them now in a more direct way. Scouting seemed to me the one place where I really started to get in touch with myself. That happened on campouts when I had time to myself late in the evenings and would do some sober thinking.

I had met my first wife while I was still in the Marines. We lived together before marriage, then just took off one night and got married. We had two children. At first the marriage was very secure and we shared a lot of thoughts and feelings. I felt enlightened and enthused about the marriage. Then my drinking interfered. I became depressed and began visualizing us separated and divorced. That fantasy became a reality. I let both of my children go completely. That was very frightening then and still is today.

After my first wife and I became alienated from each other, I became aware of a warm feeling inside myself that I'll call love. I thought maybe I could be capable of love, but I didn't deal with it beyond being aware of it. Then I jumped out of my first marriage into my second one. I was single for only thirty days when I married my second wife. Our communication level

was great before marriage but slipped right after we married. My drinking interfered, and she chose not to talk about some things anymore. I let my wife pay all the bills and take care of all the household needs, because I had no interest in the house or in my family. I was interested in one thing: drinking! I had a cocky, arrogant attitude at home. Everything had to be my way or no way at all. If I didn't like what my wife cooked for dinner, I didn't go to the table to eat. I didn't always win with my family; but at least when I lost, I knew where I stood. I knew the actions I would take about losing, because I was used to losing.

I didn't understand by wife. I was confused and I didn't know the reasons why I had married a woman with many physical illnesses. I resented her being sick because I hadn't asked to have those problems, and they were very hard to cope with. I was angry with my wife all of the time. Mostly because she was physically sick a lot of the time. One of the times was from a hysterectomy that caused her trouble afterwards. Our physical action certainly wasn't great. In sex, she made me feel like her partner didn't count. She seemed just to want to get herself taken care of. It took me longer to climax because of my heavy drinking, I think. My mind wanted to perform, but my body wouldn't. She didn't know how much I was drinking because I always denied it. It was at this point in my life that I began to get so close to my stepdaughter.

I never felt I was a natural, functioning part of my family. I was the strong arm, the heavy, in the relationship with my wife. I was the disciplinarian. My kids were used to my wife saying "Wait 'til your dad gets home." Sometimes I'd come unglued when I punished the kids: I'd lose control and I didn't know when to quit punishing. I wouldn't let things drop even after I had punished them. Whatever they had done wrong, I might bring it up over and over again for three weeks. I was mentally abusive about the way I did it, too, because I'd ride the hell out of one of my stepsons.

I acted differently to my stepdaughter. I let her get away with a lot of shit. The interaction between us was very different. She know how to twist me around to get what she needed, and I let her do that. I started to get close to my stepdaughter when I started helping her with her homework, and that's when I started molesting her. She started touching me first, and I really liked that. I started touching her back. It happened over a period of most of a year. I drove her to school and back every day, and that brought us even closer together. I was the one who took her clothes shopping for her gym clothes and uniforms that she needed for the private school she attended. My wife decided that it was more practical for me to be the one to shop with her since it was on my way home from work and since I was the one who picked her up from school.

I had set up in my own mind a plan, a fantasy, of making my wife reject

and divorce me. That is what I wanted. I envisioned living alone in a trailer safe and sound, surrounded by my possessions and being only with myself. Then all of a sudden there was this young person loving me without question (my stepdaughter). She'd put her arms around me and depend on me to do things, which my wife did not do. She'd stand beside me while I watched football games just to be near me. She's pressured me in a nice way to do things I couldn't do on my own—like put on a swimsuit, which I was very self-conscious about. She'd make me feel it was okay to do. She had a special way of bringing me out of myself and she did it in a way no one else could. She got me to take her and other kids places—like a fair or somewhere—where there were those crowds I hated. She'd hold my hand and help me through those situations. I was still uncomfortable but at least I could bear it with her at my side.

We became very close. Then the touching became closer. One evening I was showing her how to operate a calculator, and she stated to rub my neck and shoulders. I returned her touches. This touching was the wrong message for me to give her.

The sexual abuse got progressively worse from that evening. I never had conscious intentions of having intercourse with her. I just wanted some self-gratification, I think. I don't really know. The amount I was drinking made me unable to get an erection or ejaculate, anyway. I had desire, but my body

wouldn't respond physically. Because of that, I don't see how I could have done some of the things I was accused of doing. I remember touching her back and buttocks frequently and probably her private parts. (I say "probably" because my drinking made my memory hazy. I've accepted the responsibility of it, though. If it happened, then it did. All I can do about it is never do it again.)

My stepdaughter told my wife I was patting her on the butt. Moments before she told her mother, I was patting her on the butt and rubbing her back with her in my lap. She told her mother afterwards she didn't like that and didn't want that much closeness. At the time, I thought her idea of closeness and mine were the same because she'd often start rubbing my neck or back before I touched her.

I denied it and refused to admit I had been drinking. Immediately afterwards, I had a six-day drinking binge. During that time, I had a motorcycle accident but didn't get hurt badly. My wife has since told me that during those six days, I was extremely violent and ran all of my family out of our house. My wife told our relatives that I had molested my stepdaughter. Soon there were several people coming down on me for what I had done. I knew how to have enemies one at a time; but I couldn't handle this whole group.

My family left me. Then my wife called to tell me a police sergeant wanted to talk to me in a few days. I kept drinking until I got sicker and sicker and wasn't even high. On the third day, I contacted AA (Alcoholics Anonymous). I had listened to an employee of mine talk about it. My police interview was to be in two days, and I knew I needed help pulling myself together for it. AA sent a member over to my house. He didn't try to stop me from drinking. He said, "You said you wanted to kill yourself drinking. While you're doing that, I'd like to sit here and tell you a part of my life." I could really relate to him. Pretty soon he was making coffee with honey and orange juice with honey, and I was drinking it.

Guilt feelings started to surface. I confided to him that, in a rage, I had run off my family: I didn't tell him I had molested my stepdaughter, because I didn't think he or anyone else in AA would understand that. The AA people stayed with me for the next two days until my appointment with the sergeant. My wife and daughter had already seen the sergeant by that time. The sergeant cut some tapes about my case and had written a report. What he wrote was not the truth. He later admitted that the facts were a combination of my case and someone else's case.

I spent seven days in jail. I began feeling that I didn't want my family to reject me and that I wanted us all to be back together. I didn't know it at the time, but my wish would never come true. Two guys who were in jail with me

for the same charge told me about all the frightening possibilities I was facing. I tried to deal with all the different people involved by myself: the public defender, the OR (own recognizance) program people, etc. A lady from the OR program was the one who told me about Parents United and its list of attorneys that I should consult. Since the public defender wanted me to plead guilty and told me to expect five to fifty years, I decided to try a private attorney.

At that point I had been sober several days. I thought I should be able to go on and live my own life and have this problem dealt with and over with. But I had no goals and no place to go. I didn't know whether I would work or go on welfare. I was very confused, and I'd started crying inwardly over little things. I didn't want to be in jail, yet I wanted to be away from people. I was caught up in feeling guilty.

I contacted an attorney through Parents United, and a beautiful relationship developed with him. When he talked to me, I still had the shakes from days before and felt very uncertain of myself. I was going to be released on OR, but first I had to be arraigned. My attorney advised me to plead guilty, which switched my case from municipal to superior court. I was allowed to live in a Halfway House for alcoholics when I had been sober for nine days.

I went to several AA meetings that week. And I met Hank Giarretto and

Ellie Breslin, who was to be my individual counselor at Parents United.

I did not know what to expect from the court system, and I was afraid. I had a woman judge in superior court, a woman counselor in Parents United, and a woman group leader. Women seemed to be in charge of my life at that point, and that was frightening. I also felt terror about not knowing what tomorrow would bring. The lawyer I had found through Parents United prepared me for what might happen in superior court. He spent time with me and put me at ease. Almost everything he prepared me for did happen. Now Parents United has a chart to offer members telling them about the court system and the possible sequence of events and explaining legal terminology like "arraignment" to those who have never been through the system. I'm one of the sources of that paper.

My case was postponed many times and dragged out for nine and one-half months. My attorney assured me that meant that the people in the court system were taking a thorough look at my case. The court system was not very humane. I felt I was locked up like an insane person. I do not think I should have been slapped into a brown uniform and forbidden to communicate with other prisoners. The system really did stink.

I was forced to have a Mentally Disordered Sex Offender Hearing, which scared the hell out of me. Someone else was going to make a value judgment



about me, and they might see nothing else about me except that I was an alcoholic and child molester. The first doctor gave me a clean report. The other doctor decided I needed to see my mother. They gave me a clean report and stated that I was not mentally disordered. It was a frightening experience.

My sentencing was postponed four times, and each time was very frightening because it left me hanging, not knowing what was going to happen. Some Parents United members were in court with me. My shaking nerves may not have shown outside, but inside I was torn up. I didn't even hear my sentence when I finally got it; I just heard the woman judge say, "I am now sentencing Jim to five years." She paused before she said, "...probation," so I missed that word. I thought I was going to jail. I was also sentenced to do 500 hours of community service. The probation department allowed me to give all my community service time to Parents United work. That was really nice. Even as simple a thing as setting up chairs for the weekly meeting was a reward for me and let me contribute to the group and feel I belonged to that group.

I don't think being in jail would have helped me to grow at all. It would have made me clam up and not learn anything about myself or my problem. It probably would have taught me more about being a criminal. The adult probation department put my sentence up for modification now.

The week I came to Parents United and met Hank and Ellie (my individual counselor), emotions were cropping up from everywhere and driving me crazy. [When I met Dorothy Ross at CSATP, I resented her because she was an authority figure and I was the slave.] I felt I no longer had control over my body or mind, that these people could decree what I had to do.

I began individual counseling with Ellie, disliking her at first because she was trying to pry information out of me and get into my head and into my garbage can of stuffed feelings, I thought. I didn't think she could get in, though, because my garbage can was the long-lasting chrome kind, not just the galvanized kind that's easier to break through. She was making me deal with what I didn't want to deal with. By looking at the situation, though, I did start to deal with it. My wife and I went to the Parents United group session the second week I was out of jail. For a month I didn't say anything in those sessions in the orientation group. I didn't know what I was supposed to say. I didn't understand what purpose it served for all of these members to stir up the thoughts that made them feel bad. So my concept was that people in this group make everyone feel bad.

After finishing orientation, we went through the Couple's Communication Group. Two fantastic people led that group and let me be silent for a couple of weeks. Then they made me interact by throwing questions and statements to me. I was scared and told them so. One of them

asked me if I could tell why I was so scared. I said, "Because no one else has ever felt the pain and guilt I'm feeling, and no one else could share it with me." I discovered that the other guys in the group felt exactly as I did. I talked to those guys and worked with them in the sessions. Things started opening up. Then my wife and I started to communicate. She told me she had filed for divorce. I didn't want to lose her and tried to hang on to her. I was afraid of being alone. Ellie recommended a book on loneliness. I was more aware of my loneliness than I had ever been in my life.

I underwent a big change after being a member for a while. For the first time, I wanted to take care of myself physically. I watched what I ate and drank. I took vitamins. I got enough sleep, brushed my teeth, kept my hair combed. I thought, "Hey, I ain't such a bad guy, but I'm going to be in a real bad place if I don't take care of myself." After taking care of what was physically wrong, I could deal with my emotional problems better. Ellie showed me a couple of meditation exercises in our counseling sessions that really put me in touch with my life. I'd sit quietly and count breaths. It taught me to let problems and feelings be there. It made me alert to the fact that I was hurting and crying.

After being in Parents United two months, I cried for the first time. I sat under a tree one day, and my whole life fell in on me. I felt very sad about who I was and what I had done. I still drive by that tree sometimes and remind

myself that is where my life turned around. I felt relieved after crying and after talking to Hank and Ellie about my stepdaughter. I told them I couldn't remember doing all the things she said I had done, but I knew she had no reason to lie.

After that, I grew very rapidly in the program and kept seeing Ellie every week for counseling. I participated more in the groups and learned a lot about myself: What makes me tick, what I like and don't like, how I feel, whether I'm afraid. I got in contact with all the feelings I had suppressed for years. I learned that I could feel good if I wanted to feel good. I learned even from the things that went wrong. After I had been in Parents United for six months, I set goals for myself, and I have met all of them. My newest goal is to co-lead an Alcoholic Group for Parents United.

I have gotten more support from Parents United than from any other people in my life. I remember once one of the women members sat on one side of me and held my hand while my wife held my other hand. It helped me realize the kinds of love that aren't sexual at all but are just a way of caring about one another. But before that when any of the women members put their arms around me to give me a friendly hug, I would stiffen and pull away from them. What they did scared me and I'd think, "What do they want of me?" I hadn't realized yet that they just wanted to be my friend.

I learned to realize something else, too. Through Parents United, I learned to talk about incest outside of PU—like through the Speakers Bureau when I went on speaking engagements. I was surprised to realize that there were people out in the community who would relate to me personally and didn't think I was the most disgusting person in the world. I learned that they could talk about the problem. So all of a sudden I had a new worth I hadn't known I had.

I kept educating myself in many ways. Every time Ellie said a word I didn't understand, I looked it up in the dictionary. I read books that covered the topics she talked about. Now I have three shelves of paperbacks about self-esteem, humanistic psychology, etc. Being in Parents United made me look at myself, see how I had put it together, see how much garbage I was carrying. It's sad that I had to fall so near the bottom before I could get turned around, but now I'm on an uphill climb. I sometimes slip downhill, of course, but my worst day now doesn't compare with how bad my past days were.

This program saved my life. When I was first released from jail and lived in the Halfway House, I thought, "Why don't they just castrate me? They should just throw me in a box, close the lid, and throw dirt on it." They didn't. And what I learned is that human beings don't always destroy other human beings. That was really a revelation. That let me start thinking, "Maybe there is something worthwhile in me." I found the worthwhile parts, and now I can

love life, and through that I can love other people.

I can't relive the past, but now that I know I have choices, I can choose not to live the same way I did. Now that I'm more aware of how and why I let my daughter twist me around to get what she wanted, I probably would never let myself slide into that situation again with anyone—the situation of letting someone control my behavior because they have some kind of hold on me. It's great to know I can be responsible for not getting back into the space where I would molest my stepdaughter.

I haven't lived in my make-believe world for a long time. Now I want to remember about the molestation. I want to find out where things went wrong. That knowledge may push me back down and make me take several steps backward in progress. Eventually, I'll look at more of what actually happened. When I do take that look, I'll have the wisdom that Alcoholics Anonymous taught me with its slogan: I know what I can change and what I can't. And I can accept things that I can't change.

Now I know how to let people into my life. I still have difficulty having a concept of God. But some higher power within me allows me to watch myself develop now and to watch what I do turn into accomplishments. Until after I molested my daughter, the only feelings I dealt with were anger and superiority over others.

My biggest concern now is love—whether I have enough of it and whether I'm giving enough of it. My main goal is to love everyone even if I can't like them. In my opinion, love means you keep trying to understand the other person and really listen to their words. I'm entering a new relationship with a woman, and I'm scared about it. I've never felt a natural or functional part of any family. I want to be able to do that now. I'm looking forward to marrying the beautiful woman so that we can share our lives. I want her to walk beside me—not under me. I do not want us to clip each other's wings. I want her to look ahead, behind, and to the side of me. She and I can enjoy the journey together.

## Homework Assignment Questions for

### *A Personal Account by a Father*

1. What were some of the offender's negative feelings and thoughts toward himself and others, based on his childhood upbringing?
2. How did his unresolved feelings and problems lead to him having difficulty in his relationship with women?
3. What are some of the behaviors, thoughts, and feelings he experienced that contributed to his sexually abusive behavior?

4. In what manner or ways did the offender see and feel about the victim that allowed him to act upon his impulse or urge to be sexual with her?
5. What are some of the ways in which the sexual abuse by the offender affected himself or his family?
6. What are some of the ways in which the offender takes responsibility for his sexually offending behavior?
7. In what ways did the offender's participation in all aspects of the treatment program help him?



## Handout 2

### *Chain of Events Model*

The chain of events model is a way for me to understand the different thoughts and feelings that made the sexual offense happen. Once I understand, I can learn other ways of handling my chain of events so that I can minimize the risk of acting in a similarly abusive way.

A. *Link 1:* What are some of the hurts and abuses that happened to you in your childhood that were upsetting, that you've not really talked about, or that still bother you?

B. *Link 2:* How have these past hurts and abuses affected your thoughts or feelings about yourself and others? What are the fears or concerns which led you to have problems in relationships with others?

C. *Link 3:* High-risk situations that led to the sexual abuse. What were the thoughts and feelings that were bothering you around the time of or just before you committed each sexual offense?

D. *Link 4:* What were the coping strategies—behaviors, feelings, and thoughts—that helped you deal with the high-risk situations? How did these coping strategies lead you to act in sexually abusive way?

E. *Link 5*: What were the false or distorted ways of seeing or thinking about your sexually offending behavior that made the offense seem okay or you seem less bad?

## Handout 3

### *Relapse Prevention Worksheet*

*Purpose:* At this time you are probably thinking that you have your sexually abusive behavior under control. "It will never happen again" or words like that are being said by you or your parents. While you really may not want the sexual abuse to happen again, you must take more active steps to prevent a re-offense.

Based on the discussion of the chain of events, this assignment helps you to develop a plan of action to deal adaptively and non-abusively with these situations, feelings, and thoughts.

Describe what you would do in order not to continue with thinking of, or actually following through on, another sexual offense.

1. What could I immediately do to deal with the ways of acting, the feelings, or the thoughts which could lead me to commit another sexual assault?
2. Whom could I call (list name and phone number) or talk with (give person's name) to tell about my urges, feelings, or way of acting?
3. What do I want the person listed above to do?

4. What can I do to stay away from opportunities which give me access to potential victims?
  
5. What are some of the things I could do or say to handle the high-risk situations, feelings, and ways of acting which contributed to my offense occurring?
  
6. What are some true or realistic statements I need to make to myself in order to correct the distorted ones which might lead to me committing another sexual offense?

## Handout 4

### *Readings From Victims of Sexual Abuse*

#### Letters to Myself

Dear Chris,

*I'm only three.* I was so scared and afraid when I was three. Daddy hurt me. I crawled into a corner in my room. It was so big. I cried and didn't know where Mommy was. Mommy, I need you. I need you to hold me. Mommy don't make me come out of the corner. I'm scared. Mommy you didn't help me. You just made me come out of the corner. I'm scared. Mommy don't leave me. Help me Mommy! I don't understand.

Dear Chris,

*I'm five now.* I liked rubbing myself down there. It felt good. Mommy sees me. Mommy why are you hitting me? Mommy stop hitting me. I won't do it again. Don't hurt me anymore. Please stop! Mommy stops. I'm scared of Mommy now too.

I'm so scared Mommy. I wet my bed. Grandma gives me a dolly. I stop wetting. I love my dolly. I feel safe with her. My dolly doesn't like my Mommy and Daddy. Sometimes I still wet. Mommy you take my dolly away. I get so

scared because I'm alone. I don't have my dolly to take care of me. Mommy I was so afraid. It was dark. I didn't want to go down the stairs to the bathroom. Daddy might get me. Mommy, why can't you see how scared I am?

Daddy you hurt me. Why do you keep hurting me? I don't understand. I love you but you keep hurting me. Daddy it hurts. I don't like it. What have I done for you to hate me so? Stop hurting me, Daddy. I hate you Daddy!

I love my sister. She takes up for me sometimes. Mommy and Daddy take her away from me. I'm in this room. There are all of these children. I'm scared. Sister where are you? I do not talk. I am alone. Why did they take sister away? I must be bad.

Dear Chris,

*I'm seven now.* Mommy I hate you. You didn't believe me. Mommy, Daddy is hurting me down there. Mommy, help me. I'm mad at you Mommy.

I'm mad at my dolly. She doesn't take care of me anymore. I kill my dolly. I love you dolly. Why did I kill you? I'm all alone now.

Dear Chris,

*I'm eight now.* Hi, Grandma. I like you. I like it at your house. I love you, Grandma. Grandma, uncle hurt me down there. Grandma, yes he did. Please

believe me. Grandma do not say that. There is no place that is safe now. I hate you Grandma. I'm not bad. I try to be a good girl. I must be bad...I hate myself.

Dear Chris,

*I'm eleven now.* I can't handle what's going on anymore. I just want to die. Dad you're still hurting me. I want to kill you. Dad I'm going to tell someone. You tell me don't you dare. I say I am. You put your hands around my throat. I wake up. I wanted to be dead? Why didn't I just die?

Dear Chris,

*I'm thirteen now.* I tell this man down the street what Daddy is doing to me. He is going to talk to my Daddy. Someone believes me! He talks to my Dad. Thursday night Daddy and that man both rape me. I tell Mom. She does nothing! Daddy and that man get me an abortion. Two years of Thursday nights go by. Now there is my Daddy and two men. They get me another abortion. I tell my Mom again. Nothing!

I am nothing. I hate everyone. I hate me. We move. No more Thursday nights.

Dear Chris,

*I'm fifteen now.* I have a friend. It feels good to have a friend. My first

one. I love and trust her Mom. I tell her Mom what my Dad's doing to me. She says nothing. Help me I say!! She drives me home. I hate my friend. I hate myself. I never tell again.

Dear Chris,

*I'm sixteen now.* I have my first real boyfriend. I'm not scared of him. He is nice to me. He rapes me. I'm scared. A baby grows within me. I tell my Dad. I tell him I tell him I don't want to kill the baby. He makes that decision for me. My baby is dead. My father comes to rape me again. I say no more. He says if not, I'll tell everyone you killed your baby. It was I, or was it? I give up. I forget the rapes.

Dear Chris,

*I'm nineteen now.* I go out with this guy. I remember he is the guy who raped me when I was sixteen. I get scared! He rapes me again. I find a knife. I stab him. There is blood everywhere. I run. I'm home now. I'm going to forget all of these things. I love my Mommy and Daddy. I have had a really normal childhood. I do not feel. I do not remember.

Dear Chris,

*I am now 34 years old.* I have lived with the fantasy of having a really



normal childhood for sixteen years. With the help of many adult women who were molested as children and a loving and caring woman, Leona, I am alive. I feel for all these years there has been this big black cloud that I needed to surround me. Bit by bit I've broken through that big black cloud. At first I only saw a bit of sunlight. Now the sunlight encircles me. I feel so warm. I do exist. I feel. I love myself.

I share "me" in hopes that this may help someone. I can think of no better way to turn what happened to me into a more positive thing than if by sharing "me" I help someone else.

--Chris Shultz<sup>10</sup> ©1982

Over the past six years, I have been molested by my brother and it messed me up pretty bad. I am writing this letter to tell everyone...especially my brother...how I feel.

I feel that I have been used, abused, and hurt a lot. I feel that because I have been molested by my brother I have bi-sexual feelings. I am just starting to accept the fact that I am bi-sexual...for a long time I was very ashamed about it.

I feel sorry for my brother because he had a rough life, too, and he has been abused himself. I hope that he starts working on getting his own life

together. I hope that my brother can admit what he has done, so that he can get his problem out in the open and deal with it. I love my brother and don't want him to have this on his shoulders all his life.

Love,

David<sup>11</sup>

\* \* \*

## **Molest Is**

Molest is when a man touches a boy or girl

In the wrong place

It is the same like a woman touching a boy and a girl

In the wrong place

It is hardly any different

but a girl has more things to touch than boys.

Molest feels like all sorts of things.

It hurts

It tickles

and sometimes it can make you bleed.

Deena2

### **Mother and Son Secret**

I am a man in my late 40s who was molested by my mother. The molest took many forms and occurred many times during my childhood and youth, culminating in an episode of intercourse which has seemed to me like a nightmare. She continued to invade my privacy as a young adult.

You may be wondering how this has affected me. It put me in a "double bind" and has caused me frequent periods of depression due to the conflict of anger, rage, hate, and compassion for both my parents. I was hooked into every secrecy and was made to feel responsible for "rescuing" my mother. She would tell me all her problems with my dad, not enough love or warmth. She ran him down and told me how loving and warm I was, all the things he wasn't. She manipulated and controlled the communication in the family. She had the power to have me beaten by my father and then to take care of my welts. She turned me against my father and I hate her for that. I hated being in

this family triangle and having to be responsible for her happiness. There was tension all the time and I took every opportunity to get away from it—school, farm work, etc.

There were a few times as a child that I was horrified by my intense feelings of hostility and rage. I acted this out against my brother, putting him in the hospital once and another time almost killing him. Most of the time I stuffed down these feelings and pretended that I was a nice, sweet boy without a mean bone in my body, and eventually I convinced myself that I had no anger, either.

My mother says I am being "tacky" when I confront her with the incest and she refuses to talk about it. I am not going to tell my father because he is now 80 years old.

The damage for me has been distortion of reality, lies, deceit, dishonesty, hate, rage, destructiveness, guilt, shame, failure, self-rejection, and depression. The only way out for me is to accept that it happened and stop denying and pretending that it was just a nightmare. Parents United and Adults Molested as Children United has helped me to get in touch with my feelings that I have repressed for so long—and to finally accept the fact that I was a victim. I *am* a survivor.

—A Male AMAC

1. *Becoming Whole, Adults Molested as Children United*

2. *From DSU, We Love You*

Both publications are available from Giarretto Institute, 232 East Gish Road, San Jose, CA 95112.

### **Questions**

*Instructions:* Based on the passages that you have read, please answer each of the five questions:

1. What are some of the short-term effects of sexual abuse on victims?
2. What are some of the feelings the victims have regarding the sexual abuse committed against them? Also discuss your reaction to victims' feelings.
3. Who are the victims' feelings directed at?
4. What do you think are the steps the victims need to take in order to get over their reactions to being sexually abused?
5. If you were a victim of sexual abuse you would feel, think, and react to being sexually abused in the following ways: (Please write your answer in the first person—for example, “I feel...,” “I think...”)

## Notes

[10](#) Becoming Whole, Adults Molested as Children United

[11](#) (David, Deena,& A Male AMAC) From DSU, We Love You

## Handout 5

### *What Is Normal Sexual Behavior?*

In small groups you are to discuss and take notes on the following questions:

1. What is considered normal sexual behavior on the part of an adolescent, adult, and child?
2. What is a sexual fantasy? What is an appropriate sexual fantasy as compared with one which is not normal?
3. Explain the differences between consent (which means to agree, to give someone permission) and coercion (which means to make someone do something by force; force can be physical or verbal).

Based on what you have learned about consent versus coercion and the difference between sexual abuse and typical adolescent sexual behavior, please write down your answers to the following questions:

1. What are the things that occurred in my offenses which involved coercion?
2. What are the things that occurred in my offenses which make the sexual behavior abusive?
3. What are some of the new ideas I've learned about coercion and

abusive behavior in my sexual offense? (If parents are answering the questionnaire: What are some of the new ideas we've learned about coercion and abusive behavior in our child's sexual offense?)



## Handout 6

### *Discussing the Abuse in the Family*

1. How often should the sexual abuse be discussed in the family and how many of the details should be included?
2. What are some of the feelings or concerns which may stop me (or us) from discussing the sexual abuse in the family?
3. What are some of the limits that should be set on such things as being around situations or people where another offense could happen; and who should be told about what happened?