

Child Pornography and Extrafamilial Child Sex Abuse

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CHILD PORNOGRAPHY AND EXTRAFAMILIAL CHILD SEX ABUSE

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Although extrafamilial sexual abuse of children is widely recognized as a major problem there is a paucity of mental health literature in this area. This symposium will provide a review of the existing literature on child pornography and extrafamilial sex abuse with a specific focus on clinical treatment of child victims and their parents as well as legal aspects relevant to child victim and their parents. The presenters have collaborated in the individual and group treatment of victims of one of the largest child pornography and sex abuse cases in the United States. This case which has been recently successfully prosecuted involved hundreds of children in an upper socioeconomic suburban area. The presentations will address the individual treatment of these children, group therapy of the children and their parents and use of hypnosis in the treatment of dissociation in victim. Relevant legal issues including reliability of children as witnesses and the role of clinicians in preparing children for testimony will also be presented. All presentations will address both general clinical and research issues regarding child pronography [sic] and extrafamilial sex abuse using specific illustrations from the case described above.

The presentations of this symposium will include: Overview of Child Pornography and Child Sexual Abuse; Group Therapy for Victims of Child Pornography and Extrafamilial Sexual Abuse; Group Treatment of Parents of Child Pornography and Extrafamilial Sexual Abuse Victims; Dissociation and Sexual Abuse in Children and Adolescents; Legal Proceedings of Child Pornography and Extrafamilial Child Sexual Abuse.

**OVERVIEW OF CHILD PORNOGRAPHY AND CHILD SEXUAL ABUSE
PRESENTATION I
SANDRA KAPLAN, M.D.**

Although extrafamilial sexual abuse of children is widely recognized as a major problem there is a paucity of mental health literature in this area. This symposium will provide a review of the existing literature on child pornography and extrafamilial sex abuse with a specific focus on clinical treatment of child victims and their parents as well as legal aspects relevant to child psychiatrists. The presenters have collaborated in the individual [sic] and group treatment of victims of one of the largest child pornography and sex abuse cases in the United States. This case which has been recently successfully prosecuted involved hundreds of children in an upper socioeconomic suburban area. The presentations will address the individual treatment of these children, group therapy of the children and their parents and use of hypnosis in the treatment of dissociation in victims. Relevant legal issues including reliability of children as witnesses and the role of psychiatrists in preparing children for testimony will also be presented. All presentations will address both general clinical and research issues regarding child pornography and extrafamilial sex abuse using specific illustrations from the case described above.

Child pornography is a multi-faceted, international, multimillion dollar business. More than 260 different varieties of pornographic publications have been produced. (Pierce, 1984). It is estimated that between 300,000 to 600,000 children below the age of sixteen are involved nationwide in child pornography activities, (Pierce, 1984). Depiction of sexual activity between adults and children is thought to account for approximately 7% of the total pornographic industry in the United States (House of Representative Hearing, 1977, cited in Pierce).

The United States is the world's leading consumer of child pornography materials. Customs officials have evidence that approximately 20,000 known Americans (97% of whom are male) are buying child pornography material, either from domestic or foreign (Netherlands, Sweden, Denmark) distributors (Thorton, Washington Post, 1986). Domestic materials are typically produced by amateurs, foreign production is commercially produced in a more sophisticated way. (American Medical Association, 1987).

The typology of child pornography [sic] will be presented and the mental health literature will be reviewed. The psychological consequences have been reported by Burgess (1984) in her study of sixty-two children involved in sex rings, that those involved in child pornography as part of the abuse had more negative symptoms than those who were abused but not subject to child pornography.

CHILD PORNOGRAPHY AND EXTRAFAMILIAL SEX ABUSE
Group Therapy and Hypnosis for Victim of Child Pornography
and Extrafamilial Sexual Abuse
PRESENTATION II
David Pelcovitz, Ph.D.

Group treatment for victims of sex abuse is widely thought to be the treatment of choice for this population. Forseth and Brown (1981) report that in their survey of 36 incest-treatment programs, group therapy was most often cited as the preferred treatment modality. The advantages of group treatment include a lessening of the feeling of stigmatization and difference which is one of the most damaging sequelae [sic] of sexual abuse, a decrease in feelings of social isolation which is also reported by many victim and the beneficial effects of learning that their experiences were no so "horrible" that they

permanently have to be kept secret. In light of the above, it is surprising that the literature on group treatment of victims of sex abuse there is no reference to the unique treatment needs of boys abused by perpetrators outside of their family.

In light of the paucity of data on group therapy for this population, we attempted to empirically measure the effectiveness of groups we offered to these victims.

Fifteen victim of a child pornography and sex abuse ring which victimized children attending an after-school program were seen in once weekly focused group therapy sessions for six months. The victimization of the children included repeated sodomy, oral sex and numerous sexual games. The abuse was recorded by the perpetrators on videotape, and numerous photographs. All members of the group were administered the Child Behavior Checklist, Youth Self-Report, Area of Change Questionnaire, and a structured interview designed by Pynoos and Eth to assess changes in children's behavior as a result of the trauma. The results of these questionnaires pre and post group interviews are not yet analyzed but will be reported at the time of the symposium.

Short-term focused group therapy sessions were offered on a once a week basis for ten sessions. The focus of the sessions was similar to what is described in the group therapy literature on incest victims but a number of themes emerged which were unique to this type of abuse. Themes consistent with what is reported in the group treatment of incest included:

(1) Stigmatization: The children reported feeling permanently damaged and different from their peers as a result of the abuse. Some of the children reported being teased and called "gay" by peers who discovered they were abused. A number of the children expressed a hope that their future wives and children never find out about their victimization;

(2) Guilt: A number of the children were embarrassed [sic] to discuss their feelings about being abused because of fear that the abuse would be viewed as their fault. In spite of repeated assurance by family members and therapists that they were not to blame, these feelings persisted. A major source of guilt was not having told their parents about the abuse because of their believing the perpetrators' threats.

(3) Trust: Many of the children expressed continuing difficulty trusting adults outside of their family--particularly teachers. Unlike children in incest families, there was no evidence that this lack of trust was also directed towards parents. However, several children expressed concern regarding their parents [sic] failure to protect them from the abuse;

(4) Anger: As is the case with groups of incest victim, perhaps the most frequently expressed feeling in our groups was that of anger at the perpetrator. On the evening following the conviction of the man they felt was the most sadistic perpetrator of abuse, the boys had a party to celebrate the event. Vivid fantasies of torturing the perpetrators were often expressed.

(5) Powerlessness: This theme emerged repeatedly particularly in the dreams reported by these youngsters: One child reported dreaming repeatedly of being trapped and unable to get help, "I tried to scream for help but nothing came out";

(6) Sexuality: The children had considerable difficulty discussing the effects the abuse had on their sexual functioning. The consensus of most of the children was that since the abuse was done by men and not women, it was not really sex, and they were, therefore, still virgins. A group which discussed the children's knowledge of sexual matters, revealed

many misconceptions about sex, as well as a high level of anxiety about discussing the impact which their abuse might have on future sexual functioning.

Several issues which emerged in the group were unique to this type of victimization. **Pornography:** The children almost universally denied being upset by the idea that pictures of their victimization are being circulated. An interesting adaptation to the permanent record of their abuse was a belief that since several years have elapsed since the photographs and videotapes were made, they now look so different that they have a new appearance and identity from that seen on the pornographic material.

Dissociation: Of the 15 children seen in the two groups, six children had no memories of being victimized even though members witnessed their abuse. A technique that was useful in helping these children remembering was having all group members draw pictures of the room where they were victimized and speak about their memories of the classes using the pictures as visual aid. With the help of this technique, two group members who had amnesia for the abuse, remembered most of the detail of their victimization. Two of the remaining four have had vague but not detailed memories and the remaining two continue to not remember their abuse. The group was also helpful in that those children who remembered, who initially had dissociated, were able to reassure those with amnesia that the process of remembering would not be painful (the children had been told by detectives who questioned them that when they remembered it would be traumatic).

Family Issues: Many of the victims harbored anger at their parents for urging them to continue attending classes. Although it was apparent that most parents encouraged their children to discuss the abuse, almost all of the group members reported that they were only comfortable discussing their topic in the safety of the group and not with their parents.

In summary, group treatment for male victims of child pornography and extrafamilial sex abuse appears to be very helpful in providing a forum for discussion of memories and feelings related to the victimization, lessening feelings of stigmatization [sic] and damage,, and lessening feelings of isolation and powerlessness. The group also proved to be a helpful modality for helping those children who repressed their memories of the abuse to remember what had happenend [sic] to them.

A number of workers in recent years have pointed to a link between physical and sexual abuse in early life and the subsequent development of dissociative disorders, particularly multiple personality disorder (Putnam, 1985; Braum & Sachs, 1985). Most of the existing studies on this issue have been based on retrospective studies of adult patients with multiple personality disorder, although the findings of a correlation have been quite consistent and etiologically suggestive. A critical review of this literature will evaluate the empirical evidence and theoretical formulations for the emergence of dissociation as a psychopathologically overdetermined response to physical and sexual abuse during childhood and adolescence.

Supportive evidence for the above includes a recent study by Finer (Ph.D. dissertation), which compared the dissociative propensity of abused children with that of a control group. Finer found higher dissociation scores in the abused group on two independent measures, one of which was a standard measure of hypnotizability. The findings and implications of this study will be discussed.

Finally, treatment implications of the above findings will be addressed. **This will include a review of the literature on the use of hypnosis with physically and sexually abused children as well as those with dissociative disorders.** Our own clinical experience in this area will be reviewed, together with suggested guidelines for further study.

**CHILD PORNOGRAPHY AND EXTRAFAMILIAL SEX ABUSE
(Group treatment of parents of child pornography and of
extrafamilial sexual abuse victims.)**

PRESENTATION III

Carol Samit, C.S.W.

The majority of the literature on the treatment of child sexual abuse focuses on the treatment of incest. Few articles describe the group treatment of extrafamilial sexual abuse and those are limited to the treatment of child victim. Reference has been made to the need to help parents cope with extrafamilial molestation, but there is nothing written about group treatment for parents whose children are these victims.

In a clinical presentation, we will describe the process and the themes in the group treatment of parents whose latency age children were molested while attending an after-school program.

Like their children, these parents feel victimized, stigmatized and betrayed. The symptomatology of the parents often paralleled their children. Among their symptoms were feelings of sadness, feelings of failure (as a parent), fear that something bad will happen to them in the future and general feelings of depression and anxiety. In addition, feelings of self-blame and guilt and a wish for retribution and need to be validated were expressed. Individual and couple issues emerged as therapy progressed. The boys' own ongoing group process as well as for group sessions, were strongly influenced by community response to the sexual abuse, media coverage and the impacting legal systems.

Countertransference issues of working with a non-pathological parent group, therapists living in the same community, sharing a similar SES background and common value base will be discussed. The stages of group process will be examined as they apply to other groups of this type.

**LEGAL PROCEEDINGS OF CHILD PORNOGRAPHY AND
EXTRAFAMILIAL CHILD SEXUAL ABUSE**

PRESENTATION IV

**Detective Sergeant Frances M. Galasso,
Nassau County, New York Police Department**

Federal and State laws regarding child pornography and extrafamilial child sexual abuse and investigation and prosecution procedures will be presented. Legal obligations of child and adolescent psychiatrists will be discussed.

Court proceedings and child victims as witnesses will also be reviewed. The law enforcement and judicial proceedings of the case involving all of the presenters will be utilized to illustrate this presentation. Child and adolescent psychiatric collaboration with law enforcement in these cases will be emphasized.