

LEAR'S
FEBRUARY
1992

INCEST

A Chilling Report

Do you want to know what incest is? What it really is? No euphemisms, evasions, excuses, or intellections? Are you sure? Then read this. Every word of it is true. The horror is unimaginable. But in the end, at least you will know.

By Heidi Vanderbilt

Drawing by
a 7-year-old
girl who
was raped
by a 15-
year-old
neighbor.



CASE STUDIES

Rikki and Nick's parents were members of a satanic cult. The children were sexually abused and tortured. When the parents left the cult, they got their children into therapy. Rikki is three. Nick is four. Both have full-blown multiple personality disorders.

Lauren was five when she told her mother that a family friend who often took care of her had "fooled" with her. Her mother was relieved when the doctors found no physical evidence of sexual abuse. She wondered if her daughter's story was true. Then Lauren told her mother that the friend had taken photos of her. The photos were found; they revealed that Lauren had been raped and sodomized over a period of more than a year.

Sharon's mother masturbated her to sleep from the time she was born. As Sharon grew older, her mother would sometimes stare at her for long periods. "I love you too much," she would repeat, over and over. Now 44, Sharon says, "I still don't know where my mother ends and I begin.

"I take responsibility for what happened," she says. "I bought into it. I know my mother shouldn't have done it, but I'm responsible, too."

"How could you be responsible for something that began when you were only a baby?" a friend asks.

"I just am," she insists.

Sharon has been in Freudian analysis for 15 years.



The Children

I am five. The July sun shines on my shoulders. I am wearing a dress I have never seen before, one I don't remember putting on. The door opens and a little girl runs to me, her face

delighted. I have never seen her before. I am completely terrified and try to hide behind my astonished and irritated mother.

"But she's your best friend!" my mother says, and tells me that I played at the girl's house just yesterday. I don't remember. When my mother tells me her name, I've never heard it before.

Other children arrive. I remember some of them, but from long ago. They're older now. They've grown. Some have lost their teeth.

I pretend that everything is all right.

At night I lie awake as I have for years, listening. I hear footsteps coming down the hall. I hold my breath. I watch the edge of the door to my bedroom. I watch for the hand that will push it open. If it is my mother's hand or my father's, I am all right. For now. If it is the hand of the woman who lives with us and sticks things into me, I move out of my body. I disappear into a painting on the wall, into my alarm clock with its rocking Gene Autry figure, into imaginary landscapes. Usually I come back when the woman leaves. But not always.

I am eight. I have spoken French from the time I was three. I attended a French kindergarten, and now the Lycée Français. I have just spent the summer in France. My French is fluent when we leave Nice. Four days later, after my return to the woman who hurts me, I can no longer understand or speak a single word of French. Sitting at my gouged wooden desk, my classmates sniggering around me, I feel terrified and ashamed, certain that whatever is wrong is my fault.

She told me she would cut out my tongue. She told me I would forget. I remember how tall she was, how she wore her hair pulled back with wisps breaking loose at the temples. I knew then that I would never forget.

I am 40. There are things I have always remembered, things I have forgotten, things that exist in shadows only, that slip away when I try to think about them. I can't

remember all that she did that sent me "away." Nor do I know what I was doing while I was "away." I only know that these episodes began with periods of abuse so frightening, painful, and humiliating that I left my body and parts of my mind.

I rarely talk about what happened to me. I have never discussed the details with my parents, my husband, or anyone else. Whenever I think of telling, she returns in my dreams.

I dream that I am a child and she chases me with a sharp knife, catches me, and gouges out my eyes. I dream that I have to protect little children at night, even though I am alone and a child myself. I tuck in the other children and get into my bed. Her arm reaches for me and pulls me down. I dream that I run for help, enter a phone booth, hear a dial tone. When I reach up I see the phone has been torn from the wall. I dream of animals skinned alive while I scream.

Sometimes when I sleep I stop breathing and can't make myself start until I wake gasping, my fingers blue.

Incest can happen to anyone: to rich and to poor; to whites, blacks, Asians, Native Americans, Jews, Christians, and Buddhists. It happens to girls and to boys, to the gifted and to the disabled. It happens to children whose parents neglect them, and those—like me—whose parents love and care for them.

What exactly is incest? The definition that I use in this article is: any sexual abuse of a child by a relative or other person in a position of trust and authority over the child. It is the violation of the child where he or she lives—literally and metaphorically. A child molested by a stranger can run home for help and comfort. A victim of incest cannot.

Versions of this definition are widely used outside the courtroom by therapists and researchers. In court, incest definitions vary from state to state. In many states, the law

requires that for incest to have taken place, vaginal penetration must be proved. So if a father rapes his child anally or orally he may be guilty of child sexual abuse but may not, legally, be guilty of incest.

I believe that if incest is to be understood and fought effectively, it is imperative that the definition commonly held among therapists and researchers—the definition I have given here—be generally accepted by the courts and public. I am not alone in this belief. As therapist E. Sue Bloom, for one, writes in *Secret Survivors: Uncovering Incest and Its Aftereffects in Women*: "If we are to understand incest, we must look not at the blood bond, but at the emotional bond between the victim and the perpetrator. . . . The important criterion is whether there is a real relationship in the experience of the child."

"The crucial psychosocial dynamic is the familial relationship between the incest participants," adds Suzanne M. Sgroi, M.D., director of the Saint Joseph College's Institute for Child Sexual Abuse Intervention in West Hartford, Connecticut, writing in the *Handbook of Clinical Intervention in Child Sexual Abuse*. "The presence or absence of a blood relationship between incest participants is of far less significance than the kinship roles they occupy."

Incest happens between father and daughter, father and son, mother and daughter, mother and son. It also happens between stepparents and stepchildren, between grandparents and grandchildren, between aunts and uncles and their nieces and nephews. It can also happen by proxy, when live-in help abuses or a parent's lover is the abuser; though there is no blood or legal relationship, the child is betrayed and violated within the context of family.

No one knows how many incest victims there are. No definitive random studies on incest involving a cross section of respondents have been undertaken. No accurate collection systems for gathering information exist. The statistics change depending on a number of variables: the population surveyed, the bias of the researcher, the sensitivity of the questions, and the definition of incest used. This is an area "where each question becomes a dispute and every answer an insult," writes Roland Summit, M.D., a professor of psychiatry at Harbor-UCLA Medical Center in Torrance, California, in his introduction to *Sexual Abuse of Young Children*. "The expert in child sexual abuse today may be an ignoramus tomorrow."

As recently as the early '70s, experts in the psychiatric community stated that there were

When Lisa was 12 her father started having intercourse with her. "I didn't like it," she says, "but he said it was right. He quoted Job."

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only 1 to 5 cases of incest per one million people. When I began work on this article, I thought that maybe one person in a hundred was an incest victim. How wrong I was. Sometimes called "rape by extortion," incest is about betrayal of trust, and it accounts for most child sexual abuse by far. To be specific: In 1977, Diana E. H. Russell, Ph.D., professor emerita at Mills College in Oakland, California, and author of *The Secret Trauma: Incest in the Lives of Girls and Women* and *Sexual Exploitation: Rape, Child Sexual Abuse and Workplace Harassment*, questioned 930 San Francisco women and found that 38 percent had been sexually abused by the time they had reached the age of 18. She further found that of those women who were victims, 89 percent were abused by relatives or family acquaintances. Using Russell's figures as my guide—they are widely cited by other authorities in the field and have been duplicated in other studies—the estimate of the incidence of incest that I came up with is one in three; which is to say that incest happens to about one person in three before the age of 18.

Incestuous acts range from voyeurism and exhibitionism to masturbation, to rape and sodomy, to bestiality, to ritualized torture in cults. Incest may or may not include penetration, may or may not be violent. It may happen only once or continue for decades. It usually exists in secret, but not always.

Kim Shaffir was four and a half years old when her divorced mother remarried. Her stepfather, John Hairsine, showed Kim pornographic photographs and read aloud to her from pornographic novels. He took Polaroids of himself and Kim's mother having sex and showed Kim the pictures. He arranged for her to watch him and her mother having intercourse; he told her when they would be doing it and left the door open. Hairsine kept Kim quiet with the threat that if she told anyone, her mother would send her away.

From exhibitionism and voyeurism, Hairsine moved on to fordling. He made Kim perform oral sex on him. Then he forced her to have anal sex. As he had photographed

himself with her mother, he now photographed himself with Kim.

When Kim was 13 her mother discovered the blurred backings of the Polaroid pictures of her husband and Kim. She broke the camera as a symbolic statement. "We're going to put it all behind us," she announced. But she was wrong.

Hairsine made peepholes throughout their Maryland house so he could spy on Kim. He drilled through the bathroom door. Kim repeatedly stuffed the hole with soap and toilet paper, which he would remove and she would replace. For three years she tried to avoid showering when her mother was out of the house.

Every morning, under the guise of waking her for school, Hairsine entered her room and masturbated in her presence. Kim, now 30 and living in Washington, D.C., says, "That's how I'd wake up, to him coming into a dish towel as he stood by my bed."

One reason for the imprecise nature of the incest statistics is that when children try to tell, they aren't believed. Another is that

Painting by a girl who has just had an abortion after being impregnated by her stepfather. The child's title for this piece is: *What I See in My Sleep*.



many victims don't recognize certain behaviors as abusive. My parents would never have let anyone abuse me—if they had known. They didn't know because I didn't know to tell them.

Small children understand very little about sex. Even kids who use "dirty" words often don't understand what those words mean. And as little as they know about normal sex, they know less about deviant sex. They simply trust that whatever happens to them at the hands of those who take care of them is supposed to happen. Children know that adults have absolute power over them, and even in the face of the most awful abuse, they will obey.

The victim who does tell is almost always asked: Why didn't you tell sooner? The answers are:

I didn't know anything was wrong.

I didn't know it was illegal.

I didn't know who to tell.

I did tell and no one believed me.

I was ashamed.

I was scared.

The abuser keeps the incest secret through threats:

If you tell, I will kill you.

If you tell, you'll be sent away.

If you tell, I'll kill your little sister.

If you tell, I'll molest your little brother.

If you tell, I'll kill your dog.

If you tell, it will kill your mother.

If you tell, no one will believe you.

If you tell, then you will go to the insane asylum.

If you tell, I'll go to jail and you'll starve.

If you tell, they'll give you to someone who will really hurt you.

If you tell, you'll go to hell.

If you tell, I won't love you anymore.

Many abusers make good on their threats, but most don't need to. "Small creatures deal with overwhelming threat by freezing, pretending to be asleep, and playing possum," says Dr. Roland Summit, the Harbor-UCLA Medical Center psychiatrist who, in a paper titled "The Child Sexual Abuse Accommodation Syndrome," sets forth a widely accepted explanation of how children behave when molested.

The classic paradigm for an incestuous union is between an older male (father or stepfather or grandfather or uncle) and a younger female. The male is pictured as seduced by a conniving and sexually precocious child who wants sex, power, and presents. Or he is seen as a snaggletoothed tree dweller with an IQ below freezing who rapes his daughter because she is female, his,

and nearer to hand than a cow. Yet Massachusetts therapist Mike Lew, author of *Victims No Longer: Men Recovering from Incest and Other Sexual Child Abuse*, told me that as many as 50 percent of victims may be boys. As therapist Karin C. Meiselman, Ph.D., writes in *Resolving the Trauma of Incest*, "The fact that many males are abused as children and adolescents is only beginning to receive adequate professional attention."

Difficult as it is for girls to talk about their abuse, it is even harder for boys. Boys are taught that they must be strong and self-reliant. For a boy to report that he was abused, he must admit weakness and victimization. If he was molested by a male, he will fear that this has made him homosexual.

Then, too, many boys simply don't know they have been abused. Deborah Tannen, Ph.D., professor of linguistics at Georgetown University and author most recently of *You Just Don't Understand: Women and Men in Conversation*, suggests that girls and boys are raised in different cultures. The world expects one set of behaviors and attitudes from girls and another, quite different set from boys.

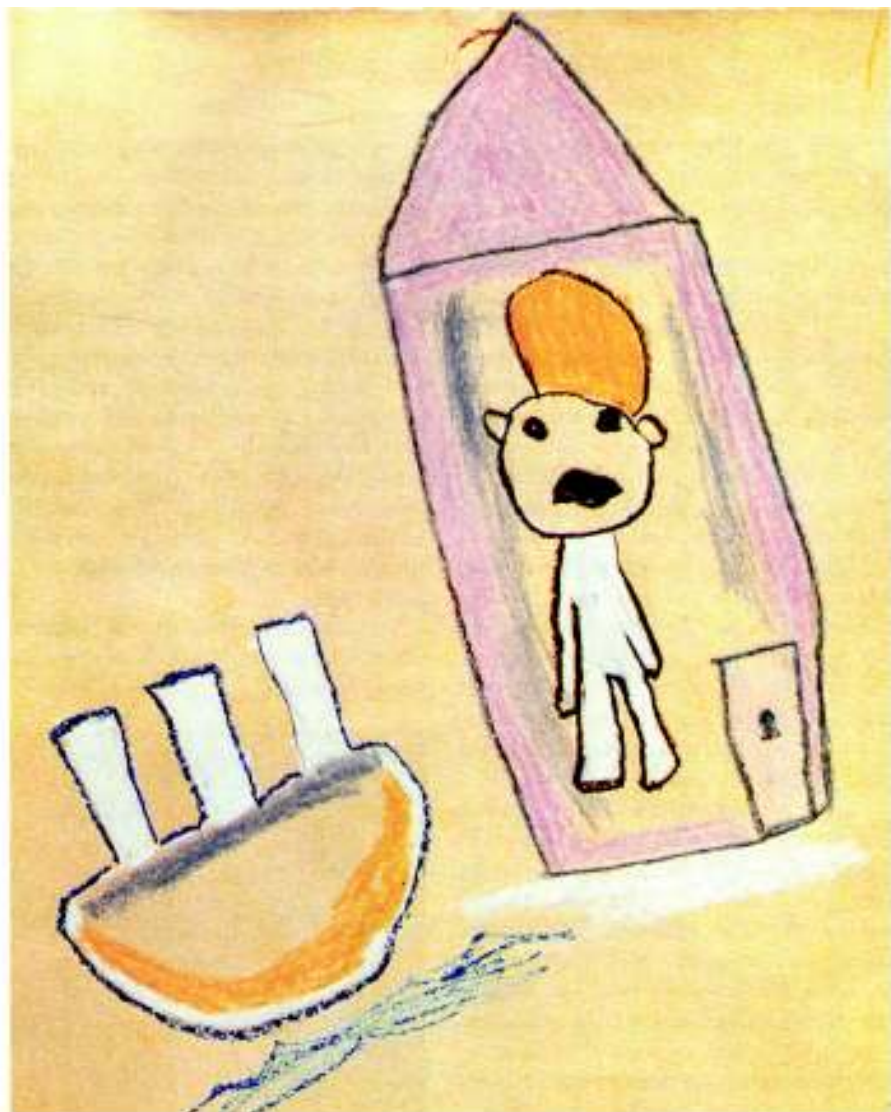
We teach girls to avoid sex, to wait, and to protect themselves. We teach them that men are not allowed to do certain things to them. But we teach boys that any sex—any heterosexual sex—is good, the earlier the better. We tell them they "scored," they "got lucky." But consider the impact when a boy "gets lucky" with his mother.

"My first really clear memory," says Michael Smith, 30, "is of my mother performing oral sex on me. I was seven. My parents would make me watch them have sex before or after my mother had oral sex with me."

Ralph Smith, the family patriarch, is now 65 years old. His wife, Betty, is 58. They are gray-haired, churchgoing, God-fearing people whose eight children range in age from 20 to 40. The Smiths say they tried to give their kids a good childhood.

"What happened to me was bad," says Michael, "but it was nothing compared to what happened to Lisa." Lisa is Michael's sister. Her earliest memory is of being five and her father fondling her and performing oral sex on her. She told her mother. "I was in the bathtub when I told her," Lisa says. "She slapped me around. She said, 'You're dirty. Don't ever say that again.'"

Lisa's parents had sex in front of her, and when she turned 12 her father had intercourse with her—a pattern he continued until she turned 23 and left home. "I didn't like it,"



she says. "But he said it was right. He said it even said in the Bible that it was okay to have sex with your children and sex with your parents. He quoted Job. I begged my mother not to leave me alone with him anymore. She said, 'I know you love him.' I asked her to help me, but she wouldn't."

Lisa's sister Michelle slept in a room next to Lisa's. She would hear her father go into Lisa's bedroom at night. "I would hear Lisa crying and screaming and telling him no," Michelle recalls.

Ralph and Betty Smith made Michael and Lisa perform oral sex on each other while they watched and gave instructions. "They said they were teaching us about sex," Michael says. "They were teaching us how to be good mates when we grew up, how to keep a mate satisfied. I would know how to please a woman. I could stay married."

Ralph and Betty kept the children silent by beating them and threatening to kill them and their brothers and sisters. Ralph Smith regularly held a gun to Lisa's head while he had intercourse with her.

Lisa believed that she and Michael were the only ones being molested. She believed

Drawing by a seven-year-old boy who was sodomized by his father. The father has gone to jail, and the child includes a boat "so I can take my father away."

that her being abused was protecting her younger siblings. "Until Michelle came and told me she was also being molested," Lisa says, "I thought I had protected them. My whole goal was to protect them. When I found out they had all been abused..." Her voice trails off. "We were afraid of our parents and the outside world. The very few people we tried to tell didn't believe us or only believed a little, not enough to do anything."

"I even told a priest once," Michael says. "He gave me a bunch of leaflets and told me to go home and work it out with my family."

Abused children assume that they are responsible for the abuse, believing they brought it on themselves. One man said to his 13-year-old victim, "I'm sorry this had to happen to you, but you're just too beautiful." Some victims feel guilty because they accepted presents or felt pleasure. Victims who experience orgasms while being molested suffer excruciating guilt and conflict. ➤

While there have been articles by pedophiles arguing that incest is good and natural and that its prohibition violates the rights of children, psychiatrist Judith Lewis Herman, M.D., writes in her pioneering book, *Father-Daughter Incest*, that the actual sexual encounter, whether brutal or tender, painful or pleasurable, "is always, inevitably, destructive to the child." And Maryland psychotherapist Christine A. Courtois, Ph.D., author of *Healing the Incest Wound: Adult Survivors in Therapy*, is firm in her belief that incest "poses a serious mental-health risk for a substantial number of victims."

Mariann's father began taking her into his shower when she was five. He washed her and taught her to wash him. He took her into his bed for snuggling, which turned into fondling. He taught her to masturbate him and made her perform oral sex on him. When she was ten he forced her to have vaginal and anal intercourse.

Mariann's father told her he was teaching her about sex. He said he was teaching her to control her sexual feelings so she wouldn't get swept away. He told her that if she was ever with a boy and got sexually aroused, she was to come to him and he would "help" her.

When Mariann's mother caught her husband fondling their daughter, she called Mariann a whore and accused her of trying to seduce her father. Yet when Mariann's father got a job in another state that required him to move early one spring, her mother stayed behind until summer but insisted that Mariann go with him.

As Mariann grew older her father experienced periods of impotence. When he could no longer manage penetration, he masturbated between his daughter's breasts, ejaculated onto her chest, and rubbed his semen over her.

"There was no escaping it, no safety," Mariann remembers. "I started to feel crazy. I wanted to be crazy. I remember thinking, I want to take LSD and go crazy so they'll lock me up and I can stay there for the rest of my life." At 17, Mariann cut her wrists. The wounds were superficial, but she bled into her sheets all night and came down to breakfast with Band-Aids lined up along her arms. No one asked what had happened.

In spite of her objections and efforts to avoid her father, he continued to have sex with her, until he died when she was in her 20s. She has been hospitalized several times for severe depression and suicidal impulses. "I was invisible," she says. "That's all I was—a vagina. Nothing else existed."

If incest can lead to suicide, it can also lead

to homicide. Witness Tony Backeland. Tony's mother, Barbara, seduced him when he was in his early teens. She openly boasted of their affair, and Tony talked of it as well. When he became violent in his late teens and early 20s, neither of his parents got him psychiatric help. At 26, Tony stabbed his mother to death in their apartment. He was incarcerated at a facility for the criminally insane. His grandmother rallied friends and family to have him released. It took six years. Once freed, Tony stabbed his grandmother eight times at her apartment in New York. She survived. He was imprisoned on Rikers Island, where he suffocated himself with a plastic bag.

In young children who are victims of incest, the vast array of physical and psychological symptoms suffered include injuries to



the mouth, urethra, vagina, and anus; bed-wetting and soiling; fear of everyone of the perpetrator's gender; nightmares and/or sleep loss; compulsive masturbation, precocious sexual knowledge, and sexual acting out; running away, suicide attempts, and sexually transmitted diseases. Judge Jeffrey H. Gallet of the New York State Family Court, sitting in Manhattan, perhaps best known as the judge who heard the Lisa Steinberg case, told me he had once seen a baby with pelvic inflammatory disease so severe that as an adult she will never be able to conceive. And as is well known to health workers and court officials, not all AIDS babies contract the virus before they are born.

It is not at all unusual for victims to grow up with sexual problems. Some can't touch or be touched. Others become wildly promiscuous. Or act out in other sexual ways. That was the case with my friend Nina, who told me that she had been her "father's mistress."

Nina then went on to defend her father. "I hate it," she said, "when people say, 'Any man who'd do that is sick.' He wasn't sick.

Except for the incest my dad was totally reliable and helpful and loving. He was the only loving parent I had. He was my role model when I was growing up. He taught me about morals and gave me all the important lessons of my life. If I have to give up my love for my father, what will I have left? I hate what he did, but I love him."

In what she now understands was an unconscious need to reenact in adulthood her secret, duplicitous life with her father, Nina became a bigamist. She married two men, maintained two households, and simultaneously raised three children—two of them in one house and a stepchild in the other.

Some victims become prostitutes. Others believe that incest forced them into lifelong sexual behaviors that they would not have chosen for themselves, including homosexuality. Victims experience not only guilt, shame, fear, and a broad range of psychosocial disorders. They are unable to trust. They have severe problems maintaining intimate relationships, including those with their children.

Journalist Betsy Peterson, in *Dancing with Daddy: A Childhood Lost and a Life Regained*, describes how incest with her father affected her relationship with her sons. "To know how much I love them is to know what I didn't give them, what they missed and what I missed," she writes. "I use my hands to stuff the sobs back in, to eat the terrible grief . . . because I spent their childhood as I spent my own, trying to protect myself."

Michigan therapist Kathy Evert, author of the autobiographical *When You're Ready: A Woman Healing from Childhood Physical and Sexual Abuse by Her Mother*, recently completed a study of 93 women and 9 men abused by their mothers. She found that almost a fourth of the men and more than 60 percent of the women had eating disorders. "I can't tell you the number of women I've seen who weigh over five hundred pounds," Evert says. One woman told her she ate to get bigger and more powerful than her mother. Another woman in the group weighed more than 600 pounds. "Food was my weapon against her," she said of her mother.

More than 80 percent of the women and all the men in Evert's study had sexual problems as adults that they attributed to the abuse by their mothers. And almost two thirds of the women said they rarely or never went to the doctor or dentist because to be examined was too terrifying for them. Thus they are unable to avail themselves of the diagnostic benefits of modern medicine, such as pelvic exams, PAP smears, breast examinations, and mammography.

Some victims are unable to feel physical pain. Some self-mutilate—they burn or cut themselves. Mariann told me that the impulse to cut herself is almost constant and almost uncontrollable. “You get to feeling like your body is full of something rotten,” she says. “If you can make an opening, somehow the pressure will be relieved and everything will come out.”

Dr. Roland Summit says that a victim of incest “will tend to blame his or her own body for causing the abuse.” Some victims may go so far as to seek repeated cosmetic surgeries in an attempt to repair physically the damage that was done to them psychologically, according to a 1990 paper written by Elizabeth Morgan, M.D., a plastic surgeon, and Mary L. Froning, who holds a doctorate in psychology. (Dr. Morgan herself had made headlines in the late '80s, when she sent her daughter into hiding to keep her away from the father that Dr. Morgan alleged had sexually abused the child.) Perpetual plastic surgery, in fact, was to become one of the consequences of incest for Cynthia, who was raped by her father and her brother Eugene but had blocked all memory of the assaults.

Even when her brother sexually abused Cynthia's daughter Kit, Cynthia failed to recall her own assaults. Kit was three and a half when Eugene came to visit and, one afternoon, took her upstairs to the bathroom. When Cynthia discovered them, both were naked. Kit was sitting on the sink and Eugene, standing between her legs, was slowly rocking back and forth. Cynthia threw her brother out of the house. Then she said to the confused child, “This never happened. Understand? Forget it ever happened.” By the time Kit was 20, she had only vague memories of childhood trips to the doctor for pelvic examinations and ointments.

Cynthia spent years in psychoanalysis, which didn't seem to help her severe depressions—nor restore her memory of having been sexually assaulted as a child. She kept telling Kit—who didn't understand why she was being told—that incest is so rare that it almost never happens. Kit was in her 30s when she remembered that afternoon in the bathroom with her uncle, and she understood then that he had probably given her a sexually transmitted disease.

Cynthia began to have plastic surgery in her middle 40s. She approached each operation as if it were *The Solution*, and she was briefly delighted with the results. Within months of each lift, tuck, or suction, however, she began to prepare for the next one.

Cynthia didn't remember her own abuse until she was in her late 60s and a grandmother. Now in her middle 70s, she is planning on having a breast reduction as soon as she can find the right surgeon.

Also prevalent among incest victims is post-traumatic stress disorder (PTSD), which I discussed at length with Mary W. Arnsworth, Ed.D., the author of dozens of articles on incest and its aftermath, as well as a professor of educational psychology at the University of Houston who teaches one of the few courses in this country on trauma. In the early '80s, Arnsworth noticed that incest patients, who “live in a bath of anxiety,” had the same PTSD symptoms demonstrated by some Vietnam War veterans and most victims of torture. These symptoms include but are not limited to amnesia, nightmares, and flashbacks. People who have PTSD may “leave their bodies” during the abuse, and they may continue to dissociate for decades after the abuse ends.

(In 1990, *The New York Times* reported that Dennis Charney, M.D., a Yale psychiatrist and director of clinical neuroscience at the National Center for Post-Traumatic Stress Disorder, had found that even one experience of overwhelming terror permanently alters the chemistry of the brain. The longer the duration and the more severe the trauma, the more likely it is that a victim will develop PTSD.)

Most of the dreams told to me by victims of incest involve being chased and stabbed, suffocated, made immobile and voiceless. I myself have a recurring dream of a man who gouges out my eyes and of a woman who rips out my tongue. One woman who has been in long-term therapy owing to years of abuse by her aunt, uncle, and mother told me she dreamed she was at a beautiful, crowded picnic in the woods when she vomited feces. The dream so revolted and shamed her that she had never before told it to anyone, not even her therapist.

Children forced to perform fellatio may grow up to be adults with flashbacks trig-

gered by the smell of Clorox, the feel of melted butter, the sight of toothpaste in their mouth. It is difficult for people who don't have flashbacks to know what one is like. Flashbacks are not memories—memories have distance, are muted and selective. A flashback is a memory without distance. It can bring all the terror of an original event, triggered by something utterly innocuous.

A few months ago I was daydreaming in a friend's kitchen. Her husband, on his way to get the mail, came up quietly behind me, speaking softly to himself. The sensation of being approached (sneaked up on) from the rear by a much larger person who was muttering triggered a flashback—terror so acute that I had to get him away from me with the same urgency I would feel if my shirt were on fire.

Flashbacks can be almost continuous and overwhelming. People who experience them without knowing what causes them can feel crazy. An incest survivor's friend, seeing her run to hide for no apparent reason, might agree that she is. When flashbacks come less frequently, they can be handled almost as fast as they happen. The man who accidentally terrified me never knew it, and I was able to check back in with where I really was and what had really happened almost as quickly as I had checked out.

At the extreme edge of post-traumatic stress disorder lies multiple personality disorder (MPD). It was once thought to be rare and is still disbelieved entirely by some (one of the more noted skeptics is Paul McHugh, M.D., head of psychiatry at Johns Hopkins in Baltimore). But while MPD has been called the UFO of psychiatric disorders, a growing number of cases are being treated.

Researchers believe that children develop multiple personalities as a way of coping with abuse so violent and sadistic that the mind fractures. Each assault is then handled by one or more personalities—“selves,” or “alters.” Some personalities hold pain, others grief, others rage. Even happiness may be segregated into a discrete “self.” The personalities often have no knowledge of one another, so a

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Sylvia says. “My dad's a pedophile.
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was seven. My mom's a sociopath.”

person with MPD "loses time" when one personality gives way to another, and can "come to" hours or years later without any way of knowing what had happened in the interim.

Brad, a victim of incest who suffers MPD, has learned to recognize a particular feeling that warns him he is about to switch into one of his alters. It happens under stress, he says. "My eyes all of a sudden blur and everything goes to gauze."

I met another sufferer of multiple personalities—a young woman—the day after she fled a cult. My husband and I were guests of the people she ran to, and I sat up with her until early morning because she was afraid to be alone. She had been sexually tortured by her father, brothers, and other cult members for all of her 28 years. As we talked, she switched personalities.

One of her alters was suicidal. Another wanted to call her family and tell them where she was. One was very young, five or six. One knew the dates of satanic holidays and the rituals she had performed on them. At one point during the night she closed her eyes, then opened them again and looked at me with such an evil stare that the hair on my neck stood up. Later, she asked me to put my arms around her and hold her, and I did.

"I was my mother's gift to my father," says Sylvia, yet another woman who suffers multiple personalities. "My dad's a pedophile. He had sex with me until I was seven. My mom's a sociopath. She tried to suffocate me many, many times. She slept with my brother until he was fourteen. She made him her husband, even though my father lived with us. The last time I saw her was twenty years ago. I came by the house where she was living with my brother. He opened the door with a gun in his hand. She had told him to shoot me."

Sylvia and her family lived in a cult that practiced blood sacrifices. When she was three, she was ritualistically raped and sodomized by the cult leaders. Her life was so torturous that she split into alternate selves who carried on when she couldn't.

"The one thing a child learns from sexual abuse," Dr. Summit told me, "is how to be abused." Sexually abused children teach themselves to endure assault. Instead of learning to protect themselves, they learn that they *can't* protect themselves. As adults they can be blind to dangers others would find obvious. They may freeze or go limp when threatened. Someone who has never been abused can say no, can walk or run away, can scream and fight. The incest victim often doesn't



The girl who scribbled this said the red eye was her. "And that's Jack's thing," she said, indicating the form descending from above. Jack was her mother's lover.

know what to do except to wait for the danger to be over.

Child incest victims often become adult rape victims. Almost one quarter of the incest victims Mary W. Arnsworth studied went on to be sexually abused by their therapists. Many incest victims as adults choose abusive partners.

Judy, who was abused from infancy by her grandmother, grew up with what she describes as free-floating feelings of shame. "I always felt there was something wrong about me," she says, "something loathsome."

She married a violent man. She believed that when he beat her it was her fault and what she deserved. She believed the beatings were a sign of his love. She stayed with him for more than a decade, leaving him only when she became afraid that her suicidal feelings would overwhelm her and that she would die, leaving her child alone and in danger from his father.

Only later did Judy remember the abuse at the hands of her grandmother. "Every night, I lay awake listening for the sound of her feet on the hall carpet," she now recalls. "I taught myself to leave my body when she came into

the room, and to forget. I forgot so well that whole years vanished from my life."

When victims do finally remember their abuse, they are often hushed by friends and told to "put it in the past," to "forgive and forget." But that is precisely what they unwittingly had done so very long ago. In *Incest and Sexuality: A Guide to Understanding and Healing*, psychotherapists Wendy Maltz and Beverly Holman point out that "many women (estimates run as high as 50 percent) do not remember their incestuous experiences until something triggers the memory in adulthood."

"Sometimes my body remembered," says therapist Roz Dutton of Philadelphia, "and sometimes my mind remembered." Roz was an infant when her father began coming into her room at night. He placed one hand on her back and inserted a finger in her anus. He continued doing this until she was two and her baby sister was born. As a teenager and young woman Roz had no conscious memory of these events, though her life had been punctuated with "nudging feelings and disturbing thoughts."

Roz became a therapist with a thriving practice. In working with her clients, she noticed that she had "triggers"—things she heard or saw that sent her into a dissociative state. These things tended to have to do with certain settings but included once the unexpected sight at a professional meeting of a man's hairy hands. Though she questioned herself for years in therapy and in clinical supervision, it wasn't until she was in her early 40s that a chance remark to a colleague about brainwashing—and the colleague's reply that maybe Roz was afraid of brainwashing herself—evoked memories of her father.

Says Roz: "As I talked about myself and my symptoms—eating disorders, depression, inability to protect myself from emotional danger, dissociating emotionally—I began to make clear connections between myself and other abuse victims." Roz's memories were of early infancy. She remembered feelings of dread and terror associated with her father coming into her room. Images came to her of his hands reaching over the slats of her crib, and she experienced body memories from infancy of being held facedown and penetrated.

Just how reliable are memories? Can they be manufactured? How reliable, especially, is the memory of a child? Do leading questions by parents, therapists, or investigators—or the use of anatomically detailed dolls in the questioning of children who may have been abused—create false accusations that lead to

false convictions? These were the sort of questions addressed by Gail S. Goodman, a psychologist at the State University of New York, Buffalo, and her colleagues in studies designed to test not only the accuracy of children's recall under stress and over time but also how children respond to leading or strongly suggestive questions devised to bring about false accusations. "If children are indeed as suggestible as some have claimed, then we should be able in our studies to create false reports of abuse," Goodman writes in the chronicle of her studies, published in 1990. Child-abuse charges, after all, have often been dismissed by judges on this ground.

The scenes acted out in one of Goodman's studies were based on actual child-abuse cases. Pairs of four- and seven-year-olds were taken into a dilapidated trailer where they encountered a man who talked to them while using hand puppets. Then he put on a mask. While one of the children observed, he played a game of Simon Says with the other child, during which he and the child touched knees. He photographed the children and played a game where one child tickled him while the other child watched. All of this was videotaped through a one-way mirror so that researchers could have a precise record.

Ten to 12 days later the children were asked the kinds of questions that might lead to a charge of sexual abuse: "He took your clothes off, right?" The seven-year-olds remembered more than the four-year-olds, but whatever both groups remembered they remembered accurately and could not be led into sexualized answers. They became embarrassed by the leading questions, looked sur-

prised, covered their eyes, or—according to Goodman—"asked in disbelief if we would repeat the question."

Goodman and her colleagues used anatomically detailed dolls when questioning the children to see if the dolls would encourage false reports. The study's conclusion on this point: "Whether or not the children were interviewed with anatomically detailed dolls, regular dolls, dolls in view, or no dolls did not influence their responses to the specific or misleading abuse questions."

Because some people believe that a child under stress can't remember accurately and may escalate what really happened in order to match the stress felt, Goodman also studied children who had to go for shots at a medical clinic. "We know of no other scientific studies in which the stress levels were as high as they were for our most stressed children," she writes. The children had to sit in the clinic waiting room and listen to other children scream as they got a needle, knowing they would get one, too.

"These children's reports were completely accurate," Goodman writes. "Not a single error in free recall was made." The most stressed children remembered best and in the greatest detail. One year later Goodman and her colleagues reinterviewed as many participants as they could find. Even after the children had listened repeatedly to leading questions, most persisted in reporting the incident exactly as it had taken place. "Child abuse involves actions directed against a child's body," Goodman writes. "The violation of trivial expectations would probably not be very memorable. The violation of one's body is."

The Offenders

Jerry "Bingo" Stevens was born in 1910 in New Orleans. He was the third of five children and the first and only boy, hence his nickname. Bingo's father, Joe, was tall, handsome, redheaded, and

smart. A supremely successful real estate developer, Joe believed that men should be strong and that women should smell good, keep the house clean, and serve dinner on time. He smoked a cigar and drank quietly

and steadily from the moment he came home from the office until he went to bed.

Bingo's mother, Trudy, sometimes took the boy to bed with her to relieve her loneliness. She snuggled him in the dark,

trying to block the sounds Joe made on his way into the girls' rooms, and any sounds that came later.

Joe died of cirrhosis of the liver when Bingo was 13. "You're the man of the house now," his mother told him.

By the time Bingo was 30, he had molested not only his sisters but most of their children. Trained from infancy to keep sexual abuse a secret, they never talked about it, even among themselves.

Bingo fell in love and married. The marriage was, apparently, a happy one. He had three daughters of his own, a son, and, eventually, an infant granddaughter. When his wife died he mourned. Then, after an interval, he married again and had a happy second marriage. He owned and operated a successful real estate business. In addition, he was a champion polo player and a member of the Explorers Club.

Bingo died of a heart attack in 1988 while sailing on Lake Pontchartrain with the nine-year-old daughter of his best friend.

He was, as anyone who knew Bingo was quick to say, brilliant, funny, charming, gifted, and successful with women. There was nothing about him that would have identified him as an incestuous father, brother, uncle, cousin, and grandfather. I am one of the children he abused.

After Bingo's death I visited his psychiatrist. "Bingo was one of my favorite patients ever," he told me.

"He molested me," I said.

"He molested everyone," his psychiatrist said. "Why not you?"

Everyone reading this article probably knows—whether aware of it or not—more than one incestuous man or woman. "Offenders don't have horns and a tail," says incest survivor Kim Shaffir. "They look like nice guys. They are not strangers. Everyone tells you to say no to strangers. No one tells you to say no to your family."

In *Broken Boys, Mending Men: Recovery from Childhood Sexual Abuse*, incest survivor Stephen D. Grubman-Black points out that "perpetrators who commit sex crimes are rarely the wild-eyed deviants who stalk little boys. They are as familiar and close by as the same room in your home, or next door, or at a family gathering."

Offenders come from the ranks of doctors, construction workers, hairdressers, building contractors, teachers, landscapers, philosophers, nuclear physicists, and women and men in the armed forces. David Finkelhor, Ph.D., director of the Family Research Laboratory at the University of New Hampshire,

and his associate, Linda Meyer Williams, Ph.D., had just concluded *Characteristics of Incest Offenders*, their landmark study of incestuous fathers, when they saw nearly half of their subjects sail off to the Persian Gulf to serve their country.

Some offenders prefer girls, others boys. Some abuse both. Some are interested only in adolescents, or preteens, or toddlers, or newborns. Some, though not most, molest only when they are drinking or depressed or sexually deprived. Some don't abuse until they are adults, but more than half start during their teens.

Like Bingo, some victims go on to become abusers. Seventy percent of the incestuous fathers in the Finkelhor study admitted that they were abused during their own childhood. Judith V. Becker, Ph.D., a professor of psychiatry and psychology at the University of Arizona College of Medicine who has supervised or been involved in the assessment and/or treatment of more than 1,000 abusers, reports that some 40 percent said they had been sexually abused as children. Ruth Mathews, a psychologist who practices with Midway Family Services—a branch of Family Services of Greater St. Paul—has seen a similar number of adolescent offenders, male and female, and has arrived at a similar conclusion.

Mathews went on to tell me about a girl whose father abused her with vibrators after her mother's death. He also brought in other men to abuse her and, with his new wife, had sex in front of her. When she was 12, a city agency, acting on a neighbor's complaint, removed her from her father's house and placed her in a foster home. There she inserted knitting needles into her foster sister's vagina. Asked why, she replied, "For fun." In therapy, asked to draw a picture of herself, she chose a black magic marker and wrote, over and over again, the words *hate*, *disgust*, and *hell*.

In another instance of children acting out their own abuse on other children (animals are also frequent targets), one little boy was referred for therapy because he tried to

mount most of the children in his kindergarten. His parents told the therapist that they made him ride on his father's back while they had intercourse. They said that this excited them.

Although we want to believe that we can spot evil when we confront it, the truth is that nothing about a perpetrator would alert us. Offenders are good at hiding what they do. They are master manipulators, accomplished liars. Those few who aren't get caught; the others molest dozens or even hundreds of children over many decades.

On January 15, 1991, 67-year-old Raymond Lewis, Jr., a retired aerospace designer, son of the founder of the Lewis Pharmacies in Los Angeles, wrote to his middle-aged daughter Donna that he "was the father who begat you; the knight on a white horse who protected you. The guy who had no lover other than your mom till well past his teens. A no smoking, no drinking, no drugs man of restraint."

This man of restraint had raped his five daughters (Donna's first memory of abuse is of her father molesting her while he was taking her to her first day of school in the first grade) and each of the female granddaughters he had access to—five out of seven. In the letter, Lewis wrote: "What is going on in Marlon's twisted mind when he tells of me, deathly ill and post-operative from my prostatectomy, licking Nicole's vagina making slurping noises? . . . Why would I lick a female? Wrong modus operandi. Wrong age. And a relative! A grandchild! Totally insane! Granddaughters have fathers and no father would permit such a thing to happen. Nor would any mother. Had it happened, hell would have been raised."

But for more than 40 years, hell had not been raised. When Lewis's daughters tried to avoid him, when they cried and told him it hurt, when they threatened to tell on him, he showed them photographs of decapitated murder victims. They endured his rapes in silence, convinced from earliest childhood that they were protecting one another and themselves.

Says DeeDee, now 38: "My father said, 'People who betray their father are like people who betray their country. They should be executed.' He carried a gun in his car, in some black socks. He also kept a gun between the mattress and box spring.

"At first he'd molest me in the bathtub. He'd say, 'I'm the baby. Clean me up. Here's the soap.' Every time before he molested me and my sisters, he'd put his foot on the bed and beat on his chest like King Kong. He penetrated me when I was eight. When I was thirteen he bought me a ring. He told me we could cross out of California and get married, because I was illegitimate. He said exactly the same thing to my daughter when *she* was thirteen. I fooled around with the first boy I could. I got pregnant. I thought, Thank goodness, Dad won't touch me now. For a while, he didn't.

"When my little sister was fifteen she was living alone with Dad. I waited one day until he'd gone out, and went in the house. I found her in a corner, naked, crying. She said, 'I'll be okay. Don't tell. Don't tell.' I thought that if I told, Dad would find out and kill me."

One daughter broke away from Lewis when she was in her 30s and went into therapy. Then, recognizing signs of sexual abuse in her five-year-old niece, Nicole, DeeDee's youngest child, she reported her father to the authorities. In his letter to Donna, Lewis wrote about Nicole: "I fooled with the petite perjurer's pudendum! She said it! Crazy story! Totally insane!" He denied that he had done anything. At first his other daughters defended him. Then they began to talk—16 relatives, including his daughters, told the same story.

Most of his crimes were wiped out by the statute of limitations. He was charged with only four counts of child sexual abuse against his five-year-old granddaughter, and one count of incest—a lesser charge in California, as in most states—against her mother, DeeDee, whom he had coerced into sex when she was a grown woman by promising to leave her daughter alone.

During the trial Lewis's daughters—all professional women, one a college professor—were unable to meet his gaze in the courtroom. It fell to his five-year-old granddaughter to face him. Although Lewis had threatened that he would kill her if she ever talked about what he had done, the judge ordered her to tell the truth. Seated on the witness stand, shaking and crying, she testified for two days. Lewis denied everything.

Three times the judge asked him if there wasn't anything he was sorry for. "How

"My father offered me a hundred thousand dollars to have a child with him," DeeDee says. "He said it would be a genius."

could they say such terrible things about me?" Lewis asked by way of an answer. "I drove a rusted wreck of a car so that I could give them good cars."

"Isn't there something you think you did to make your family say these things about you?" the judge asked.

"Well, maybe," Lewis replied. "A long time ago."

The five-year-old handed the judge a note she had written. "My granddaddy is a bad man," it read. "I want him to go to jail for two hundred years."

Lewis was convicted of one count of incest against his daughter and three counts of lewd acts, including oral copulation, involving his granddaughter. Expressing the opinion that Raymond Lewis, Jr., represented a threat to all females and that the only place where he would have no access to them was in prison, Superior Court Judge Leslie W. Light sentenced him to the maximum: 12 years and 8 months. But with time off for good behavior, he will probably serve only half his sentence, which means that he will be released from Mule Creek Prison in 6 years.

Says DeeDee: "Until I was twenty-three, I thought I was retarded. He told me I was brain damaged. He told me I was neurotic, manic-depressive, a damaged genius. He thought he was a genius. He said we could have a child together and it would be a genius. Six months before going to jail, he offered me one hundred thousand dollars to bear his child.

"I always hoped he would love me. I just wanted to be his daughter. But now I have my own home, my own checking account. I give sit-down dinners. I feel special. I have knowledge. I am a great mom and I'll be a great grandmom. I love myself, finally. And now I can die without that secret."

Lewis never said he was sorry. In the letter to Donna—one of a stream that he continues to send to his daughters—he wrote: "Loneliness was the reason that I had enslaved myself in my youth to raise kids, and now in the illnesses of old age 14 of my loved ones had abruptly dumped me! Licked! How bizarre! A puzzle."

Lack of empathy for the victim is typical of offenders. Every therapist I spoke to commented on this characteristic. All said that for offenders to be rehabilitated they must take responsibility for what they did and develop empathy for their victims. With one possible exception, not one of the offenders I interviewed had done this.

I am talking to Joe. His daughter accused



him of sexually abusing her. He pleaded nolo contendere. "But I didn't do it," he says. His sentence: four years probation, with therapy. He has been in treatment for two years. "When I first came to therapy," he says, "I had an attitude that I was being punished for what I didn't do. I had no rights, when you got right into it."

I ask how he feels about the therapy he is required to undergo now. "It's a little inconvenient," he says, "but it helps me in dealing with other people to understand them. I think it would be helpful if a lot of people could go through a program to give them understanding and another outlook, instead of being negative or feeling put down."

I ask him again about his daughter. "I never touched her," he says.

Later I talk with Joe's therapist. "Is he in denial?" I ask.

"Denial," the therapist replies, "is when someone says 'She asked for it' or 'She didn't say no.' Joe's not in denial. He's lying."

I am talking to Chris. His sentence: 8 to 23 months in jail plus 5 years probation, with therapy. He has served 8 months and has been in therapy for 2 years.

"My stepdaughter and I had an affair when she was thirteen," he says. "It lasted a year. I got sick and had to go on dialysis. My wife was working. My stepdaughter was taking care of me. She was like the wife. She never refused me or anything. I really believe

Drawing by a nine-year-old boy who has just been placed in a foster home after having been sexually molested by his mother.

she fell in love with me. More than like a father. She met a boy and fell in love. He was into selling cocaine. I didn't want him in the house. I slapped her. She ran to her grandmother and told. She didn't want to take it to court, didn't want me to go to jail. But her grandmother and Women Against Rape stepped in. The grandmother never did like me anyway. They blew it out of proportion and it got all stinky. I did what I could to keep it out of the paper. I could have beat it. I have to come here [to therapy] or I'd have to serve all my time. But if I didn't have to come, I wouldn't."

"Is there a message you would like me to pass on to the people who read this?" I ask him. "Can you tell me something that would help them?"

"Yes!" he replies. "I want you to tell them that if their child gets a boyfriend, don't stand in the way. Don't say no. If I hadn't said no to her, this would never have happened."

I am talking to Bob. He, too, is in court-ordered therapy. Two and a half years ago he was convicted of indecent assault on his girlfriend's 15-year-old daughter. "She was curious about drinking," he says. "Her mother and I decided we would all get together

and drink. Better at home, you know?"

The first time, all three drank together. But later the drinking took place when Bob's girlfriend was away. "The first time it went okay," he says. "Then two weeks later, we did it again. I talked her into giving me a back rub. Then I gave her one. I felt her breasts. She didn't say no. I was very attracted. She got up and went upstairs. She got on the phone, but she didn't say 'Stop.' Then she pretended to fall asleep facedown. I fondled her buttocks, pulled her pants down, felt her vagina.

"She was crying. I started to get scared. For myself. I really got scared. I'm trying to figure out how to react. I ask her, 'You want me to leave?' She says to me, 'No. Mom loves you.' She went outside and didn't come back. She called her girlfriend whose mom works at the courthouse. The cops showed up. I was thinking, Oh shit, this is real."

Bob was given a two-year probation, with therapy. (The sentence was light because this was his first offense and the molestation hadn't progressed beyond fondling.) "She would have dropped it," Bob says, "but the courts already had it."

I ask Bob about his therapy. "I have a lot more knowledge now than I had," he replies—"about how many lives I can screw up. Every time she goes through something in the future I'm going to have to ask myself, 'Was I responsible for that?'"

Males who molest children have traditionally been lumped into two broad categories, violent and nonviolent. Included in the latter are offenders who are fixated and regressed. Psychologist A. Nicholas Groth, Ph.D., founder of the Sex Offender Program at the Connecticut Correctional Institution at Somers, describes fixated offenders as adult men who "continue to have an exclusive or nearly exclusive sexual attraction toward children." Regressed offenders are attracted to their peers, but under stress—illness, loss of job or spouse—turn to children as substitutes.

To refine these categories, Robert A. Nass, Ph.D., a Pennsylvania therapist who treats sex offenders, suggests a third group: quasi-adult sex offenders—men who yearn for a loving relationship with another adult but, because of their own immaturity, are unable to have one and turn to children instead.

In researching *Characteristics of Incest Offenders*, the most detailed study of male perpetrators to date, David Finkelhor and Linda Meyer Williams of the University of New Hampshire questioned 118 incestuous

A PIONEERING NEW

David Finkelhor, Ph.D., and Linda Meyer Williams, Ph.D., who are sociologists at the Family Research Laboratory of the University of New Hampshire, have recently completed the most thorough study to date of men who have sexually abused their daughters. The sample consisted of 118 incestuous fathers—55 men in the U.S. Navy and 63 civilians from treatment centers around the country—and a carefully matched control group of nonincestuous fathers.

In this landmark study on the characteristics of incest offenders, Finkelhor and Williams set out to determine whether men are socialized to see all intimacy and dominance as sexual, whether fathers separated from their daughter for long periods soon after birth are more likely to molest her than fathers who have not been absent, and whether incestuous men had themselves been abused as children more than had nonoffenders. The researchers also sought to learn each man's feelings about his daughter, his outlook on sex, and his attitudes toward incest.

Many theories have been posited about why fathers molest their daughters. Everything from alcoholism to a frigid wife has been blamed. With this study, Finkelhor and Williams have shed new light on the subject and produced much new insight. They have established, for example, that there are distinct differences in the onset of abuse: Daughters ranged in age from 4 weeks to 15 years old when the incest began. "Fathers were more likely to start abuse when their daughter was four to six years old or ten to twelve years old," the study reveals, "than to initiate abuse when she was seven, eight, or nine years old." Men reported various behaviors leading up to the abuse. Some of the fathers said they had masturbated while thinking of their daughter, had exposed themselves to her, or had made her touch their genitals before they began touching hers. A substantial percentage of the men—63 percent—had been sexually attracted to their daughter for a period of years before the abuse began. Most significantly, the findings reveal that there are many paths to incestuous behavior and that there is not just one type of man who commits such abuse.

Each man was interviewed for at least six hours and was asked hundreds of questions. The results—many presented here for the first time—dispel some common myths and prompt the following typology.

Type 1.

SEXUALLY PREOCCUPIED

Twenty-six percent of the fathers studied fell into this category. These men had "a clear and conscious (often obsessive) sexual interest in their daughters." When they told what attracted them to their daughter, they talked in detail about her physical qualities—the feel of her skin, for example, or the smell of her body.

Type 1 subcategory: *Early sexualizers*

Among the sexually preoccupied fathers, many regarded their daughter as a sex object almost from birth. "One father reported that he had been stimulated by the sight of his daughter nursing and that he could never remember a time when he did not have sexual feelings for her. . . . He began sexually abusing her when she was four weeks old."

Many of the offenders were themselves sexually abused as children.

STUDY OF INCESTUOUS FATHERS

"These men are so sexualized that they may simply project their sexual needs onto everybody and everything. . . . The children may be those who are most easily manipulated to satisfy the preoccupations."

Type 2.

ADOLESCENT REGRESSIVES

About a third of the fathers—33 percent—became sexually interested in their daughter when she entered puberty. They said they were "transfixed" by her body's changes.

For some the attraction began when the daughter started to act more grown up, before her body changed. Some of the fathers in this group became aroused by a daughter after having been away from her for a long time. Her new maturity and developing body caught them by surprise. Sometimes the fathers let the attraction build for years, masturbating to fantasies of the daughter, before they acted.

These men acted and sounded like young adolescents themselves when they talked about their daughter. One said, "I started to wonder what it would be like to touch her breasts and touch between her legs and wondered how she would react if I did."

"The father-adult in me shut down," said another offender, "and I was like a kid again."

Type 3.

INSTRUMENTAL SELF-GRATIFIERS

These fathers accounted for 20 percent of the sample. They described their daughter in terms that were nonerotic. When they abused her, they thought about someone else—their wife, even their daughter as an adult.

In contrast to the sexually preoccupied and adolescent-regressive fathers who focused on their daughter, the instrumental self-gratifiers blocked what they were doing from their mind: "They used their daughter's body as a receptacle." The fact that they were abusing a daughter or that a daughter was so young was actually "a distracting element" that these fathers had to work to ignore. While one man was giving his seven-year-old a bath, she rubbed against his penis. "I realized that I could take advantage of the situation," he said. "She wasn't a person to me." Another man said, "I abused her from behind so I wouldn't see her face."

Instrumental self-gratifiers abused sporadically, worried about the harm they were causing, and felt great guilt. To alleviate the guilt, some convinced themselves that their daughter was aroused.

Type 4.

EMOTIONALLY DEPENDENT

Just over 10 percent of the sample fit this category. These fathers were emotionally needy, lonely, depressed. They thought of themselves as failures and looked to their daughter for

"close, exclusive, emotionally dependent relationships," including sexual gratification, which they linked to intimacy and not to their daughter's real or imagined sexual qualities.

One man, separated from his wife, saw his five-year-old daughter only on weekends. "It was companionship," he said. "I had been alone for six months. We slept together and would fondle each

other. The closeness was very good and loving. Then oral sex began."

The average age of the daughter when the incest began was six to seven years. But it happened with older daughters as well. The fathers of older daughters described the girls as their "best friends," and the relationships had a more romantic quality: The men described their daughter as they might have described an adult lover.

Type 5.

ANGRY RETALIATORS

About 10 percent of the men were in this category. These fathers were the most likely to have criminal histories of assault and rape. They abused a daughter out of anger at her or, more often, at her mother for neglecting or deserting them. Some denied any sexual feelings for the daughter. One father of a three-year-old said, "My daughter has no sex appeal for me at all. What I did was just an opportunity to get back at my daughter for being the center of my wife's life. There was no room for me."

Sometimes the daughter was abused because she resembled her mother, sometimes because of the father's desire to desecrate her or to possess her out of an angry sense of entitlement. Some angry retaliators tied up, gagged, beat, and raped their daughter and were aroused by the violence.

OTHER FINDINGS Alcohol and drugs: While 33 percent of the men reported being under the influence of alcohol when the abuse occurred, and 10 percent reported that they were using drugs, only 9 percent held alcohol or drugs responsible. "Preliminary analysis indicates that the incestuous fathers are not more likely than the comparison fathers to have drug or alcohol abuse problems, although they may use alcohol or drugs to lower their inhibitions to abuse."

Marital discord: Forty-three percent of the men felt that their relationship with their wife was part of the reason for the incest. "However, the wife was rarely the only factor mentioned. . . . Different men probably come to incestuous acts as a result of different needs, motives, and impairments."

Sexual abuse of the offender as a child: Significantly, 70 percent of the men said they themselves had been sexually abused in childhood. Half were physically abused by their father and almost half—44 percent—had been physically abused by their mother. "Although not all who are abused go on to become perpetrators, it is critical that we learn more about how child sexual victimization affects male sexual development and male sexual socialization."

RECOMMENDATIONS Finkelhor and Williams suggest, considering the "intergenerational transmission of sexual abuse," men be given improved opportunities for positive fathering—including paternity leave and more liberal visitations in cases of divorce or separation. Also that they be encouraged to be intimate in nonsexual ways, beginning in boyhood. The study argues that, based on the evidence, it's very likely that people can become more aware of the precursory signs of incest. "It is conceivable," Finkelhor and Williams conclude, "that the sequence of events that leads to abuse can be interrupted."

fathers in exacting detail. Based on the men's explanations about why and how the incest started and how the men felt about what they had done, the researchers identified five distinct types of incestuous father: the sexually preoccupied—men who are obsessed about sex and tend to sexualize almost every relationship; adolescent regressives—men who have adolescentlike yearnings for young girls generally and direct them toward their daughter; instrumental self-gratifiers—men who molest their daughter while fantasizing about someone else; the emotionally dependent—men who turn to their daughter for emotional support they feel deprived of from others; and angry retaliators—men who assault their daughter out of rage at her or someone else.

And what of the women who sexually abuse children in their care? What patterns, if any, are they cut from? Psychologist Ruth Mathews of St. Paul, in a study of more than 100 female sex offenders—65 adult women and 40 adolescent girls—found that they fall into four major categories.

The first is teacher-lover—usually made up of older women who have sex with a young adolescent. This category often goes unnoticed by society as well as by the offender because the behavior is socially sanctioned. For confirmation, one has only to look to films such as *The Last Picture Show*, *Summer of '42*, and *Le Souffle au Coeur*.

The second category is experimenter-exploiter, which encompasses girls from rigid families where sex education is proscribed. They take baby-sitting as an opportunity to explore small children. Many of these girls don't even know what they are doing, have never heard of or experienced masturbation, and are terrified of sex. One girl who had seen a movie with an orgasm scene said, "I wondered if I could get that 'ah' feeling. I was waiting for the 'ah' to happen, then I got into all this trouble."

The third category is the predisposed, meaning women who are predisposed to offend by their own history of severe physical and/or sexual abuse. The victims are often their own children or siblings. As one woman in this category said, "I was always treated as an animal when I was growing up. I didn't realize my kids were human beings."

Mathews's final category is male-coerced women—women who abuse children because men force them to. These women were themselves abused as children, though less severely than the predisposed. As teens they were isolated loners but anxious to belong. Many are married to sex offenders who may

CASE STUDIES

When Anne-Marie's 17-year-old daughter, Maureen, left home, she told an aunt that her father had molested her and her brothers and sisters. While the case was being investigated, Maureen's father killed her mother. Out on bail pending trial, he moved back in with his younger children. When a child-welfare worker came to question him, he said, "Get out of my face or I'll do to you what I did to my wife."

Jenny, who had been sexually abused as a child, refused to believe it when a neighbor filed a complaint charging that her ten-year-old had been molested by Jenny's husband, Norman. Then her own child, five-year-old Emma, told Jenny that her father had abused her and her baby brothers while Jenny was at work. Norman went to prison.

Jenny poured gasoline over herself and her children and struck a match. The mother and both sons were enveloped in flames, but Emma was able to escape. Jenny, two-year-old Adam, and three-year-old Gerry burned to death.

Alison was eight when she was raped by her stepfather, Buddy, a drug user. HIV positive, Buddy had infected his wife, who later gave birth to an HIV-positive son and, the following year, a second daughter, who is HIV negative. In 1987, Alison's mother, who was carrying twins at the time, died of AIDS in her seventh month of pregnancy. Convicted of Alison's rape, Buddy is currently serving time. From prison he is seeking visitation rights to his son and daughter, who are now in foster care.

abuse the kids for a long time without the wife's knowledge. Ultimately, she is brought into it. Witness a typical scenario.

He: "Let's play a game with the kids."

She (*surprised and delighted*): "Great!"

He: "Let's play spin the bottle."

She: "No!"

(*He slaps her face, then beats her head on the floor. The child tries to stop him.*)

Kid (*yelling*): "Mom, do it. He's been doing it for years."

Deeply dependent and vulnerable to threats, these women are easily manipulated. As one of them said, "If he would leave me, I would be a nobody." Once such a woman molests a child, however, she may go on to offend on her own. As the mother of a five-year-old put it, "Having sex with my son was more enjoyable than with my husband."

While more than a third of the survivors I interviewed told me that they had been molested by women, true female pedophiles, Mathews says, are relatively rare—about 5 percent of her sample. Those she interviewed had themselves been abused from approximately the age of two onward by many family members. They received virtually no other nurturing—most of the nurturing they received was from the offender—and came to link abuse with caring.

Like male offenders, some females molest many, many children, their own and those in their care. But Mathews feels that women may take more responsibility for their acts than men do. Only one girl she worked with blamed her victim. Seventy percent of the females took all the blame if they acted alone. One half took 100 percent of the responsibility if they molested with a man. Where the men minimized what had happened—"We were only horsing around"—the women were "stuck in shame."

In Atlanta at a poetry reading, the woman sitting next to me asks what I write about. When I tell her, she leans close. "I molested my son," she whispers. I ask if she wants to talk about it. "No," she says. "But I will say that it will take me the rest of my life to even begin to deal with it."

Therapist Kathy Evert of Michigan, extrapolating from her 450-question survey of 93 women and 9 men who were abused by their mothers, sees a more general problem. "I believe that no one, including me," she says, "knows the extent of sexual abuse by females, especially mothers. About eighty percent of the women and men reported that the abuse by their mothers was the most hidden aspect of their lives. Only three percent of the women and none of the men told

anyone about the abuse during their childhood." Instead they endured their own suicidal and homicidal feelings.

A. Nicholas Groth, the Connecticut psychologist, suggests "the incidence of sexual offenses against children perpetrated by adult women is much greater than would be suspected from the rare instances reported in crime statistics." He further suggests that women offenders may not be recognized as such because it is relatively easy to get away with abusive behavior under the guise of child care.

Female offenders wash, fondle, lick, and kiss the child's breasts and genitals, penetrate vagina and anus with tongue, fingers, and other objects: dildos, buttonhooks, screwdrivers—one even forced goldfish into her daughter. As one survivor told me, "My mom would play with my breasts and my nipples and insert things into my vagina to see if I was normal. 'I'm your mother,' she'd say. 'I need to know you're growing properly.' She'd give me enemas and make me dance for her naked. It lasted until I was twenty. I know it's hard to believe, but it's true. I was petrified of her. Absolutely."

It has long been believed that any woman who sexually abuses a child is insane and sexually frustrated but that her abuse is less violent than a man's. None of this is true. Only a third of the women and men in Kathy Evert's study, for example, said they thought that their mother was mentally ill. (According to Ruth Mathews, a tiny percentage of abusing mothers are severely psychotic.) Not only were most of the mothers in the study sane, but almost all had an adult sexual partner living with them. Furthermore, the mothers in Evert's study abused their daughters violently, beat and terrorized them, and raped them with objects. But they treated their sons like substitute lovers. Evert postulates that the abusing mothers projected self-hate from their own history of sexual abuse onto their daughters. "This causes rage and anger that don't go away," she says.

Not all incest is intergenerational, committed by adult against child. "There is more sibling incest than parent-child," David Finkelhor told me. And in *Sibling Abuse: Hidden Physical, Emotional, and Sexual Trauma*, Vernon R. Wiehe, Ph.D., professor of social work at the University of Kentucky, writes: "There is evidence . . . that brother-sister sexual relationships may be five times as common as father-daughter incest."

There are problems with numbers and definitions in this area, as in others. How, for example, does one define consensual versus

forced sexual contact between siblings? Finkelhor says that an age gap of five years implies coercion. Others feel that a five-year gap is too wide. What about children who are close in age but different in size? What about children who have much more or much less power in the family? What about children who are more gifted or less gifted physically or intellectually?

Coercion aside, "sibling abuse has been ignored in part," writes Vernon Wiehe, "because the abusive behavior of one sibling toward another is often excused as normal behavior. Sibling rivalry must be distinguished from sibling abuse."

Certainly, sibling sexual abuse is no different from other sexual abuse in that it is self-perpetuating. According to the Finkelhor study: "The role of physical and emotional abuse in childhood should not be overlooked. . . . Arousal to very young children may be the result of early sexual victimization."

The Finkelhor study has profound implications for the possible prevention of father-daughter incest. Over 50 percent of the men in the study reported that their sexual interest in the daughter developed slowly. Is it possible that prevention programs could have helped them clarify and deal with their feelings about her before sexual contact occurred? According to the researchers, "It is conceivable that men can interrupt the sequence of events which led to the abuse."

Currently, the statistics on recidivism are predictably dismal. The rehabilitation of offenders has always been approached as a matter of jail, probation, or court-ordered therapy. Only some few medical institutions in the country—notable among them, Baltimore's Johns Hopkins—offer impressive inpatient treatment involving drugs and therapy, but treatment is expensive, and not all medical-insurance plans will cover it.

While some nonmedical rehab programs claim up to a 95 percent "cure" rate, they are misleading in their optimism. Jim Breiling of

the National Institutes of Mental Health says that the results of many studies are suspect owing to the unreliability of statements by offenders, many of whom lie. According to one study, a 38 percent dropout of participants can be anticipated in any program. Of those who receive the full course of treatment, 13 percent reoffend during the first year. After that, who knows?

The rare offender who voluntarily seeks help can get trapped in a bind. Therapists are legally required to inform the local police if they hear about a specific child-abuse crime. Massachusetts therapist Mike Lew cautions his clients at the outset that if they tell him they have offended, he must report them. Even so, the authorities tend to look more favorably on those who turn themselves in than on those who get caught or accused.

Ruth Mathews believes that women may be easier to rehabilitate than men because, as noted, they may feel more empathy for their victims than male offenders do. But she points out that her opinion is based on the women she sees, who have come voluntarily for treatment. A sample of women in prison for sex crimes would probably yield very different results. Child offenders who receive treatment, on the other hand, do much better than adults. They need less long-term help and are less likely to reoffend.

Mental-health providers are key to spotting and treating offenders and their victims. But, says psychologist Mary W. Armsworth, the Houston trauma specialist, "we don't train mental-health providers properly." Incest victims who need psychiatric care are often misdiagnosed. Victims of child sexual abuse who suffer symptoms of post-traumatic stress disorder have been hospitalized for everything from manic depression to schizophrenia and have been subjected to shock treatments, insulin shock, and other inappropriate therapies.

Misdiagnosis occurs because the therapist, psychiatrist, or doctor doesn't know what to look for, doesn't consider childhood sexual abuse a possibility, or doesn't believe the patient's account of what has occurred. For

"Until I was twenty," says one survivor, "my mom would play with my nipples and insert things into my vagina to see if I was normal."

Our doctors, analysts, and judges have been taught to mistake victim for offender. They leave offenders free to infect the next generation.

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almost a century, Freud and his followers have led us astray.

Vienna, Austria, April 21, 1896. Sigmund Freud stands before his colleagues at the Society for Psychiatry and Neurology, reading his paper "The Aetiology of Hysteria." He informs his listeners that mental illness is the result of childhood sexual abuse. The words he uses to describe the abuse are *rape, assault, trauma, attack*.

He has based his findings—which he has used to formulate what he terms the seduction theory—on the testimony of his patients. These are both women and men who have told him of their childhood abuse, often by their fathers. He has listened to them, understood them, and believed them. He has reason to. As he has written to his friend and colleague Wilhelm Fliess, "My own father was one of these perverts and is responsible for the hysteria of my brother . . . and those of several younger sisters."

But Freud is soon under attack by his colleagues, many of whom denounce his argument. He retracts the seduction theory. The accounts of incest, he now says, were fabricated by hysterical women who were not assaulted. Like Oedipus, he says, they yearned for intercourse with one parent and wanted to murder the other, and these yearnings produced such a profundity of guilt and conflict that they caused a lifetime of mental illness.

Unlike the seduction theory, for which Freud was ostracized, the Oedipal theory finds favor with the great majority of his colleagues. It becomes the cornerstone, the bible, of all psychoanalysis to come.

Jeffrey Moussaieff Masson, Ph.D., former project director of the Sigmund Freud Archives in Washington, D.C., and a self-described "former psychoanalyst," has written three books detailing first his affection for, then his disaffection from, Freud and his teachings. According to Masson, Freud's reversal of his position represented a monumental loss of moral courage that served to save his professional skin to the detriment of his patients.

In *Banished Knowledge: Facing Childhood Injuries*, Alice Miller, Ph.D., like Masson a former Freudian psychoanalyst, argues that Freud suppressed the truth to spare himself and his friends the personal consequences of self-examination. "Freud has firmly locked the doors to our awareness of child abuse and has hidden the keys so carefully that ensuing generations have been unable to find them."

Miller goes on to make a startling revelation about Freud's great friend Wilhelm Fliess. She writes that many decades after Freud suppressed his data, Wilhelm's son Robert found out that "at the age of two, [Robert] had been sexually abused by his father and that this incident coincided with Freud's renunciation of the truth."

Some scholars have expressed the wish that the seduction theory and the Oedipal theory could work together. But they can't. The seduction theory states that child sexual abuse is the cause of most—or even all—mental illness. The Oedipal theory, on the other hand, states that child sexual abuse almost never happens, that a person's memories are false, and that mental illness and neuroses come from a child's conflicted desires for sex and murder.

Ever since Freud, the Oedipal theory has been used to refute claims of child sexual abuse. In *Healing the Incest Wound*, Dr. Christine Courtois, the Maryland psychotherapist, writes that "many survivors report that they were medically examined and treated for their various symptoms, but for the most part the symptoms were never attributed to abuse even when the evidence was obvious. Instead, symptoms were most frequently described as psychosomatic or without basis or another diagnosis was given." Some therapists still tell their patients that their memories—no matter how degrading, detailed, or sadistic—are really their wishes. Freud placed the responsibility for the deed and the memory not with the offending adult but with the child victim—and his adherents continue the sham. As Alice Miller writes: "I often hear it said that we owe the discovery of child abuse

to psychoanalysis. . . . In fact it is precisely psychoanalysis that has held back and continues to hold back knowledge of child abuse. . . . Given our present knowledge of child abuse, the Freudian theories have become untenable."

But most people don't know this. To accept that Freud lied means that nearly a century of child rearing, analytic training, law enforcement, and judicial and medical attitudes must be reconsidered. As the matter rests now, the men and women who should be able to identify abuse and help prevent and punish it have never even learned the basics. Our doctors, analysts, and judges have been taught to mistake victim for offender. They allow offenders to remain untreated, free to infect the next generation.

Alice Miller writes that Freud "wrote volume after volume whose style was universally admired and whose contents led humanity into utter confusion." His legacy has been in part to blind us to the prevalence of incest, to make the offenders in our midst invisible.

At the Sexual Abuse Center of the Family Support Line in Delaware County, Pennsylvania, therapists who work with perpetrators and survivors showed me paintings done by children aged 7 to 12 who had participated in an incest survivors' support group.

Monica, 10, had drawn the outline of an adult, six feet tall, on butcher paper. With the help of her therapist she titled it *Diagram of a Perpetrator*. She drew in hair, a brain, eyes, ears, nose, mouth, shoulders, big hands, a heart, and a penis. Next to each feature, down each finger, and around the penis, she wrote the things her father had said to her:

TRUST ME.
I'LL PROTECT YOU.
I'M NOT GOING TO HURT YOU.
IT'LL FEEL GOOD.
DON'T FIGHT ME.
DON'T MOVE.
THEY'RE SOFT.
I THINK WITH MY PENS.
I DON'T CARE WHAT YOU SAY.
I NEED SOME.
BETTER ME THAN SOMEONE ELSE.
IT'LL MAKE YOU A WOMAN.
I'M BIG.

The Courts

The family court building at 60 Lafayette Street in lower Manhattan looks like a Darth Vader prison—big, black, square, and ugly. Once inside, you

have to wait in a line of irritated people to be searched for weapons by armed guards.

The interior is depressing, monotonous, and confusing. In the six days I spent there, I never could figure out which floor I was supposed to go to or whether I was already there. All the corridors look the same: flesh-colored walls, orange and blue seats made of molded plastic and bolted to one another and to the floor. Drug addicts slump. Babies scream. Once in a while a fight breaks out. All too often I saw small children with bored, baffled, or frightened faces.

Manhattan family court is blessed with social workers who care passionately about their work and the children, with bright and dedicated Legal Aid Society lawyers for those who need them, and with good judges. Each judge hears thousands of cases every year, more than half of which have to do with child abuse—including child sexual abuse, including incest. But even given the high numbers, fewer than 10 percent of the incest cases ever get to court. One reason is the traumatic nature of the process, which can involve weeks of agonizing testimony.

Everyone from the victim to the judge wants to avoid a trial if at all possible. To many critics, it seems that the system is designed to protect the accused, not the accuser. And this becomes unreasonable, even abusive, when the accuser is a child who must participate and withstand cross-examination as if an adult. New York Family Court Judge Jeffrey H. Gallet, for one, does all he can to keep children from having to testify. In his courtroom—or part, as it's known—the child is almost invariably the last witness scheduled in the hope that the case will have resolved itself before that point.

The agencies that intervene to stop the abuse frequently, if unintentionally, maintain it instead. And it is the child victims, those most in need of care and consideration, who receive the worst treatment. A child may be questioned 20 different times by as many different people in perhaps as many different

places—hospital emergency rooms, attorneys' offices, police stations, courthouses. The children are exposed to drunks, criminals, and their own parents in handcuffs. I knew one terrified little boy who had to wait for hours on a bench in the courthouse hallway, across from his abuser. This happened to him six times over a period of years.

From the child's perspective the process is

Drawing by a child who had been sexually assaulted by her stepfather. She drew the picture to depict the turmoil at home after her family became aware of the incest.



a nightmare, and it is almost as arduous for the child's family. Mothers who report that their children have been incestuously abused are often regarded as unreliable or vindictive, particularly if the accusation comes during a custody dispute.

Oliver's parents were divorced when he was just one year old. He lived with his mother in the country and visited his father in the city for holidays. As he grew older it became evident that Oliver didn't like to visit his father. His mother thought it must be normal separation anxiety. When he was five, Oliver told her his "butt hurt." Then he described to her how his father had anal intercourse with him, shared him with friends, and put him in pornographic movies. Oliver's mother reported all this to the county mental-health clinic and a social worker was assigned to the case. "I don't know about her," the social worker told me later. "She just seems so . . . hysterical."

Eight years ago child-sexual-abuse cases rarely got to court. Today courts across the country brim over with them. In *Vulnerable Populations: Evaluation and Treatment of Sexually Abused Children and Adult Survivors*, Detective Richard L. Cage of the Child

Abuse Sexual Offense Unit of the Montgomery County, Maryland, police department, writes: "Many police and social service personnel are finding themselves bombarded with these cases. Yet there are not enough qualified personnel to investigate cases adequately and deal sensitively with the families and particularly the children who are in a crisis."

In all 50 states, incest, whether specifically called so by statute or covered under other child-sexual-abuse laws, is a felony offense. But its definition varies from state to state, and so does the punishment. What is consistent is that incest per se is harder to prove. It also carries fewer and lighter penalties than any other form of sexual abuse, due largely to the fact that in many states incest laws were conceived not to protect children but rather to prevent closely related adults from marrying and procreating. In any event, most incest cases, even in states where an incest statute exists, are tried as child sexual abuse or rape, charges that are often easier to prove. Assuming these cases get tried at all.

There are problems from the outset. Many cases never progress beyond the initial complaint, if they even reach that stage. Children refuse to tell, typically out of loyalty to their abuser; they remain silent out of love and fear. Those who do tell usually retract. So do their families. "You find families hiding the abuse, families accepting it, families passing it on," says Philip Caroom, an official in the Maryland judiciary whose docket includes child-sex-abuse cases.

Sandra Butler Smith, a municipal court judge in San Joaquin County, California, and author of *Children's Story: Sexually Molested Children in Criminal Court*, says that "adults faced with the disclosure of sexual molestation often find reasons for denying belief, but more often, even if the child is believed, have difficulty in perceiving of such a case as a fit subject for a criminal proceeding."

Police investigators and social workers not only must deal with the victim's unwillingness to talk about what happened but with their own beliefs. "Unfortunately, extremely competent investigators find allegations of child sexual abuse very difficult to deal with on a personal level," writes Cage. Just because someone is a cop or a social worker doesn't automatically mean that he or she is a sensitive questioner, able to earn and keep the trust of a frightened and abused child or a distraught parent. Nor do these investigators necessarily know what information is needed, how to get it, or how to organize it into a cohesive case.

In Manhattan each of the ten family court judges starts the year with 500 to 600 unresolved cases of every kind that are held over from the previous year. About 3,500 new cases then come in. Generally, more than half of these involve physical or sexual child abuse. "The implications of these figures are profound," Judge Gallet says. "Nobody can look for quality of disposition, only quantity of caseload." Judges are worried, even scared. Their decisions, based only on the testimony and evidence brought before the bench during the presentation of each case, can wrongly convict someone or can free an offender to abuse again.

I asked Judge Gallet about false allegations of sexual abuse. He said that while he sees some cases where the charges are trumped up, "a horrifyingly large majority are not." This opinion is echoed by Cynthia Ferris of the state's attorney's office in Anne Arundel County, Maryland. "There are very few false claims made," she says, "and those are usually weeded out at the precinct level. By the time they get to us, most of them are true."

While in Manhattan's family court building, I attended a lecture on "The Child Sexual Abuse Backlash," delivered by Howard A. Davidson, director of the American Bar Association Center on Children and the Law. Regarding the truth of children's reports, he said, "Generally, what the child says happened is the best indication of what did happen. If the child spontaneously tells a trusted adult, then gives details, you can be almost certain" that the child is speaking the truth.

But he pointed out to his audience of judges and defense and prosecution attorneys that although the system is "flooded with reports" of child sexual abuse, its primary preoccupation is with investigation, not with providing services and treatment for the child and the family. Referring to a report from the U.S. Advisory Board on Child Abuse and Neglect, Davidson said: "Just because a kid reports abuse . . . and the offender is brought to court and it is proven that the kid is at risk, there is no guarantee the kid and family will get any services. Most get no treatment at all."

This situation has led to complaints from family-rights activists on the political right and left that child-protection services are essentially antifamily. And these complaints, in turn, have fueled the backlash that is responsible for the formation of certain reactionary groups.

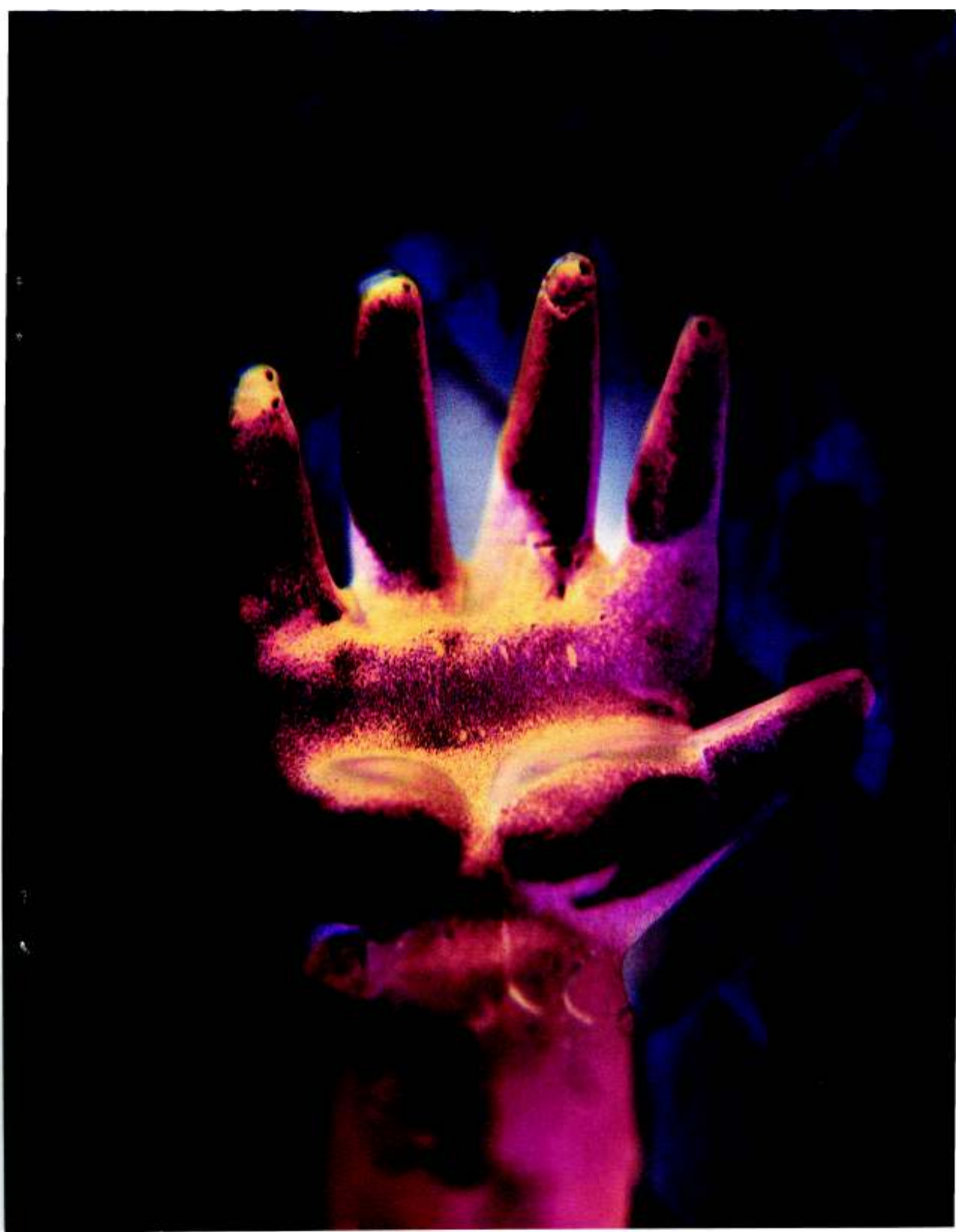
Take VOCAL (Victims of Child Abuse Laws), a national organization dedicated to making it more difficult to prove or even to lodge child-abuse charges. VOCAL's executive director, Graham Jeambey, Ph.D., maintains that only between 1 and 2 percent of child-sexual-abuse allegations are true. The remainder, he told me, are largely the result of claims made by child-protection workers in an effort to get large sums of money—\$40,000 per family, he said—from the federal government. Child-welfare agencies work on a quota system, he said by way of elaboration, and must bring in a certain number of child-abuse cases annually or lose federal funding. (I phoned child-welfare agencies in Massachusetts, where I live, and in Colorado, where Jeambey lives, and asked if this were true. I was met with laughter. As one official put it, "Don't I wish!")

When I asked Jeambey how many members VOCAL has nationwide, he told me that the size of the membership was "a closely guarded secret." When I asked why, he said, "To protect members from harassment. We are one of two groups you absolutely must not belong to." I asked what the other was. He said it was the John Birch Society.

"We're more American than they are," he said, referring to social services. He read to me from what he claimed was an "FBI law-enforcement paper" that warned against "voyeuristic investigators" in the child-abuse field.

VOCAL maintains that children are routinely coached to make false allegations, that they are sent to clinics ("the handmaidens of the system," in Jeambey's words) and brainwashed. Jeambey told me that he has a videotape—"I can't tell you where I got it or who gave it to me, but it was a senator," he said—of a child being badgered for more than three hours by an "inquisitor" into accusing his father of molesting him. "They always coach the kids," Jeambey told me, "before they make the final tape" that gets used as evidence. Describing the tape to me, he played the part of the child, whining and pleading.

Jeambey acted out several other roles as we talked, including that of a German woman who, he said, had called him with the news that "Hitler broke up family ties, put girls in breeding camps and boys into youth camps. The same thing is happening in the United States under the guise of child-abuse protection." Jeambey also spoke of a hysterical female investigator "on a rampage, a wild woman." He blames females for most false claims: "Females are down on males," he



lamented. "We have a female judge here and thank goodness she's retiring, and a female prosecuting attorney, and female caseworkers." He said that children are taught in school that "if your parents do anything you don't like, we can get them for you" on child-abuse charges.

Jeambey then brought up the McMartin Preschool sex-abuse case in Manhattan Beach, California, as an instance of children lying about abuse. The case first came to light in 1983 with charges of child molestation against Virginia McMartin, her daughter Peggy McMartin Buckey, Buckey's son Raymond and daughter Peggy Ann, and three school employees. In 1986, charges were abruptly dropped against all but Peggy McMartin Buckey and Raymond Buckey. Eventually the case involved abuse allegations by more than 300 children who had attended the school from the ages of three to five. After the longest trial in the history of U.S. jurisprudence, Peggy Buckey was acquitted in 1990 and a mistrial was declared in the case of her son Raymond. Tried again the same year on eight counts of child molestation, Raymond was released in August 1990 (after five years in jail with no conviction), when the jury announced it was hopelessly deadlocked. Overall cost to the taxpayers for two prosecutions and Raymond Buckey's incarceration: about \$15 million.

After the second trial more than half of the panelists on the hung jury said they believed some of the children had been abused, but they'd been unable to determine from the evidence who had done it. The evidence of physical and sexual abuse introduced during both proceedings included vaginal and anal tears, bleeding, infections, and enlargements.

The children claimed they were taken through underground tunnels that ran beneath the school building. One tunnel, they contended, led to a chamber where they were molested by people in robes and videotaped; the other went to the front yard of the building next door, which was obscured from street view by a three-car garage. From the yard, children said, they were transported

to other locations where they were also abused. They claimed, too, to have been forced to watch the slaughter of animals.

Early in the case, investigations by the district attorney's office failed to locate these tunnels. Seven years later—a month before the preschool building was to be torn down by its new owners and while the first trial was still under way—some McMartin parents asked former FBI agent Ted Gunderson to coordinate a professional dig. On the recommendation of the chairman of the archaeology department at UCLA, Gunderson hired Gary Stickel, Ph.D., an internationally known archaeologist.

Stickel says he began the dig skeptical of the charges against the Buckeys. But three days before the building was demolished, he and his crew found the tunnels and the chamber exactly where the children had said they were. The spaces had been filled in with dirt. Objects found inside included a plate from a child's tea set, inscribed and painted with three pentagrams arranged in a pattern known as the witch's foot—a cult symbol—and four large containers, including a breakable ceramic crock and a large iron cauldron. The diggers also found a plastic Walt Disney bag with a copyright date of 1982, which indicates that the tunnels had not been filled in by then. Significantly, that was the year before the first charges were lodged.

In my conversation with Stickel, he expressed regret and frustration that even though the trial was still going on when his dig was completed, the district attorney refused to enter into testimony evidence about the tunnels' existence.

Jeambey dismissed the published details of the McMartin case and insisted that the whole thing had been masterminded by a madwoman for reasons he didn't venture to explain. Then he changed the subject: "You know where Jim Jones got those children he killed in Jamestown, don't you? From social services. He killed over two hundred of his foster children from social services to satisfy his sadistic and satanic practices."

VOCAL seeks to narrow the definition of

child abuse ("There are states where you can't even spank 'em," says Jeambey), to eliminate mandatory reporting except when the person making the report actually saw the abuse occur, and to eliminate immunity for those who report suspected cases of abuse. "Children do lie," Jeambey told me.

The most difficult cases for judges to verify are those involving extremely young children. There are usually no witnesses to incest except the adult and the child.

Most abusers don't leave physical marks. And most toddlers can't explain what happened in language that an adult can accept as reliable enough for a conviction.

I am talking to a Manhattan family court judge of whom it has been said that "she runs her courtroom as if her car were double-parked outside." If she didn't, she'd never get through her caseload. In moments grabbed between sessions, she talks to me about what every judge I met talked about: the problem with expert witnesses, or "validators."

"We have no fixed criteria for proving allegations of child sexual abuse," she says, "especially of a very young child. If a three-year-old is the victim, how do we get evidence?"

"Gonorrhea?" I offer. "Syphilis? Vaginal and rectal tearing? Fractured pelvis?"

"Sometimes," she says. "But take a sexually transmitted disease like chlamydia. Five years ago I had chlamydia cases every day. Children were taken away from their parents if they tested positive. But I haven't had a good chlamydia expert in over a year, and I almost never see any chlamydia cases now. The test used five, six years ago gave false positives. What do you do about a child who was removed in 1985 when you find out in 1991 that the test was flawed? Say sorry?"

Validators testify to whether a child's physical and behavioral systems are consistent with a finding of sexual abuse. Opinions vary. There are no guarantees. In fact few doctors, it turns out, know how—or are willing—to perform the necessary examinations to determine whether a child has sustained physical injury from sexual abuse. It sounds simple enough—just look and swab. But even highly trained doctors can miss the tiny tears and scars on a child's genitals. And even gross sexual abuse may leave no physical marks. Just one of many horror stories I heard was of a four-year-old girl who was subjected to yet a third pelvic exam because the first two hadn't found anything.

Validators may or may not be competent. Some are improperly trained—or even untrained. Others may operate from a highly

Cases involving very young children are tough for judges. Usually the only witnesses are the child and an adult. And few abusers leave marks.

INCEST LAWS

personal agenda—or misuse the authority invested in them. All are paid to testify. One validator offered testimony that a little girl had not been molested, but on cross-examination he proved ignorant of the symptoms of child sexual abuse. Another—serving in this instance not as paid validator but party to a custody case—manufactured incest evidence against her husband in an attempt to gain sole custody of their child.

In Manhattan, judges' salaries have remained the same for four and a half years. Caseloads have more than doubled since 1982 and would be even heavier now if additional judges had not been appointed. Judges complain that they don't get feedback on their decisions, that there are no follow-up studies of their cases to let them know the long-range effects of their rulings. "I'm not getting good data," says Judge Gallet. "If I place x number of kids in foster care, I want to know if y number did badly. In New York City we are spending more than one billion dollars on foster care. No one's auditing to see what works best. In New York City the state comptroller can't audit case files. Confidentiality has become a shield for incompetence." Meanwhile the child suffers.

In Santa Monica, California, I saw a better way of doing things. I saw Stuart House.

Seven years ago, when the McMartin Preschool case was constantly in the news, a movie called *Something About Amelia*—about a teenage girl molested by her clean-cut father (played by Ted Danson of *Cheers*)—aired on TV, resulting in a flood of reports of incest. The number of children referred to Santa Monica Hospital's Rape Treatment Center by law-enforcement officials increased enormously. Gail Abarbanel, director of the center, became deeply concerned for the mushrooming population of children being caught up in the process. "There are three agencies involved with each case," she says. "Police, child welfare, and the district attorney's office. And often they don't talk to one another. In each agency there are two or three workers handling each case. So you can't find out and they can't find out who's responsible for what, or who knows what."

Abarbanel decided to look at the system through a child's eyes and to create a new vision from that point of view. "We needed to focus on making a structure where the defendant has rights but where adjustments are made for the developmental, language, and cognitive levels of kids," she says. "There is a difference between a five-year-old and a ten-year-old. We needed to enhance the skills of interviewers and to maximize the ability

CRIMINAL PROSECUTION

The narrow legal definitions of incest, together with the stringent requirements for proof, the meager punishments generally handed down, and the trauma for victims who must testify, tend to make the criminal prosecution of incest a doubtful and sometimes impossible enterprise.

In most cases criminal prosecution for incest can be undertaken only if the victim is a minor at the time the abuse is discovered. To complicate the issue, however, most incest does not come to light until the victim reaches adulthood and begins to remember what happened. By then, the statute of limitations on criminal offenses has usually long since expired.

Incest statutes: The states of Connecticut, Maine, Michigan, New Jersey, Ohio, Rhode Island, Vermont, and Virginia have no incest statutes. Incest cases in these states are prosecuted under other sexual-abuse statutes, which often carry a higher penalty.

Blood-relatedness: In California, the District of Columbia, Florida, Hawaii, Indiana, Kansas, Louisiana, Maryland, Minnesota, Nevada, New Mexico, New York, and North Dakota, blood relationship is a requisite to prosecute for incest. In all other states it is not.

Vaginal penetration: The states that deem vaginal penetration necessary in order for incest to have occurred are: Alabama, Alaska, Arizona, Arkansas, California, Delaware, the District of Columbia, Florida, Georgia, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, New Hampshire, Nevada, New Mexico, North Carolina, Oklahoma, Utah, and West Virginia.

Independent corroboration: The corroboration of an independent party is required only in Alabama, Arkansas (if the victim consented and is at least 16), California (if the victim consented and is of legal age), and Illinois (if the testimony is not clear and convincing).

PENALTIES FOR INCEST

The penalties for the crime of incest vary from state to state.

- Indiana—imprisonment of up to 18 months, plus additional time for aggravating circumstances, or minus time for mitigating circumstances; a fine of less than \$1,000.
- Delaware—imprisonment of up to 2 years; a fine of not more than \$1,000.
- Kansas—imprisonment of 2 to 10 years.
- Illinois—imprisonment of 4 to 15 years.
- Alaska, Arizona, California, Florida, Hawaii, Iowa, Louisiana (if uncle-niece or aunt-nephew incest), Missouri, New Mexico, New York, North Dakota, Oregon, South Dakota, Utah, Wyoming—imprisonment of up to 5 years.
- Alabama, Arkansas, Colorado, the District of Columbia, Georgia, Idaho, Kentucky, Louisiana (if other than uncle-niece or aunt-nephew incest), Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Hampshire, North Carolina, Oklahoma, Pennsylvania, Tennessee, Texas, Washington, West Virginia, Wisconsin—imprisonment of 5 years and up.
- South Carolina—imprisonment of 10 years and up.

CIVIL REMEDIES

Many victims don't want to put their abuser in jail. Some want financial restitution for their therapy and for other consequences of the abuse. Others just want a written apology or a court order compelling the abuser to get therapy.

Enter civil remedies. Civil remedies give victims a chance to tell their story in court and to be awarded punitive damages for the pain and injury suffered. For many victims, just lodging the complaint gives them a sense of empowerment that helps them heal.

Statutes of limitations generally are reckoned from the date of injury and run for a fixed period, often three years. But in child-sexual-abuse cases, the statute of limitations is often more flexible. Thanks to the dedicated work of lawyers such as Shari Karney and Mary Williams of California, these statutes in some states begin when the victim remembers the abuse. The phenomenon is called delayed discovery and is based on the fact that someone who has no memory of an act cannot complain about it.

Reform legislation is imperative if we are to protect children against incest and sexual abuse. We urge our readers to send this letter, or some version of it, to their political representatives at the state level, including governors and legislators.

Dear _____:

The children of our state need your help. According to the most reliable studies of the incidence of incest and child sexual abuse in the United States, at least one out of three girls and one out of five boys will be sexually abused before the age of 18. Research has shown that 89 percent of these assaults are committed by someone the child knows, trusts, or loves. In spite of the crippling damage done to victims, incest often carries lighter penalties than other child sex-abuse crimes. I urge that all the laws in our state pertaining to incest and to any and all sexual assaults against children be reviewed and strengthened, and ask you to take the following steps as soon as possible.

1. Expand the definition of incest in our state in order to broaden the application of criminal statutes. Most states require vaginal penetration and a close blood relationship to establish incest in a criminal prosecution. The definition should be expanded to include any other acts of sexual assault by a parent or family member and any and all sexual assaults by any care giver—including stepparent, adoptive parent, and guardian of either sex—or any other person in a position of authority.

2. Increase criminal penalties for incest and child sexual abuse. Incest and sexual-abuse victims suffer long-lasting psychological and physical trauma. Penalties should be at least equal to those for capital crimes, and minimum sentences for perpetrators should be set by law. Persons convicted of incest and child sexual abuse should be denied custody and/or visitation privileges.

3. Abolish or extend statutes of limitations for civil and criminal cases pertaining to incest and child sexual abuse. Some states have recently extended their statute of limitations for civil cases (see the California Code of Civil Procedure, Section 340.1). At least seven states have no statute of limitations in criminal cases, and legislation to abolish such statutes is pending in ten others. Because the victims are children and because they may be terrorized into silence and/or may repress memories of sexual assaults for many years (studies have shown the average age of discovery to be between 29 and 49), statutes of limitations should be based on the special circumstances of the crime or case.

I ask you to reform our laws and give our state prosecutors and child victims a real chance for justice.

Sincerely,

of the children to tell and participate."

Abarbanel went to hospital administrators and to top officials of the city and county and told them she wanted something entirely new for the children—a building to house everything and everyone needed to investigate and prosecute a child-sex-abuse case. She wanted full-time social workers, prosecutors, and detectives on site. She wanted sensitive doctors skilled in performing the exams necessary to gather physical evidence without further traumatizing the child. She got it all.

Santa Monica Hospital donated the site. Private foundations, including the Stuart Foundation—established by the founding family of the Carnation Company to support programs for children—underwrote the building costs. Lorimar Telepictures paid for the medical clinic and examining room. The Rape Treatment Center contributed experienced therapists for the children and their families. County and city agencies provided specially trained law-enforcement officials, child-protection workers, and district attorneys. The rest was paid for by private contributions. "We made a dream come true," says Abarbanel.

Stuart House opened in 1988. Personnel from the Rape Treatment Center, the district attorney's office, the Department of Children's Services, the Los Angeles Police Department, and the Los Angeles County Sheriff's Department are permanently housed there. They are needed constantly. Though Stuart House serves only West Los Angeles, which includes Santa Monica and the western region of L.A. County, it sees hundreds of child-sexual-abuse cases a year, the majority of them incest cases.

From the outside, Stuart House looks like any private residence—nothing intimidating or formal or hospitallike about it. Inside, everything is slightly scaled down. The arched doorways are smaller than usual, the receptionist's counter is low so that a child can easily see over it. The stairs have short risers. The sectional seats in the waiting room are child-size. Children can climb up into a multilevel play area where dozens of stuffed animals await them. Light filters softly through windows and a skylight, and the carefully chosen colors—deep blues, pinks, purples, and grays—soothe. Adults enter Stuart House and their mood lifts. The children seem composed.

The interview rooms are furnished with small tables, toys, a one-way mirror, and an intercom telephone. A child is interviewed only once, at a meeting carefully



coordinated so that everyone who needs to attend is either present in the room or listening and watching through the mirror.

The child is shown how the mirror works and knows who is behind it. He or she is allowed to play with the intercom and understands that the people behind the mirror might use the phone to call the adults in the room and have them ask questions. The purpose of the mirror and phone are to allow everyone to hear the story without overwhelming the child. It's easier to talk to one or two people than to six or seven, just as it's easier to tell a harrowing story only once than to tell it 20 times.

Children who need medical exams are seen in the Lorimar Clinic, housed down the block in Santa Monica Hospital. For each child the process of examination is slow and careful and adapted to the child's individual needs.

The children's examining room has kites stenciled along the top of the wall. A koala bear sits atop a cabinet, wearing a stethoscope. The office is equipped with a colposcope, which is a microscope that allows for magnified examination of the child's genitals and anus and makes a photographic record of the findings. A fantasy town painted on a folding screen hides the examining table. It's a tiny table—much, much smaller than those in a gynecologist's office. It has a pillow at one end and metal stirrups at the other. I found the sight of it agonizing. I couldn't look at it without getting a vivid image of a four-year-old in position for a pelvic exam. But the children who come to Stuart House aren't traumatized by the exam. To the contrary, many are reassured.

Five-year-old Matti was sitting in the bathtub, strangely silent. Her mother, Mary Lou, asked her what was wrong. "If I tell you," Matti said, "you'll punish me. He said so." Mary Lou promised she wouldn't punish Matti. Then Matti told. Her mother's friend, a man who took care of Matti, who took her on outings and to his house, had made her undress and go into the bathtub with him. He licked her. He made her play with him. "White stuff would come out," Matti said.

Mary Lou called her pediatrician. He sent her to the local emergency room. There, Matti was examined by a male doctor. Mary Lou, in the next room, heard Matti scream, "Don't do that! Don't do that to me!"

The next day, Mary Lou took Matti to Stuart House. Eventually Matti told her therapist there that she had been photographed. She remembered what the photo album

looked like and exactly where her abuser kept it. Immediately, the police got a search warrant and found it. Although Matti had no physical signs of abuse, the photos showed that she had been raped and sodomized for months.

Incredibly, several months later, Matti asked for another pelvic exam, to be done at Stuart House. She said she wanted to know for sure that her body was all right. A female doctor, one of the experts in child sexual abuse who staff Stuart House, examined her on the little table. This time her mother was at her side.

Stuart House uses vertical case management: The same social worker, prosecutor, and police officer stay with a case all the way from intake to resolution. Children and family nonoffenders get free long-term indi-



vidual and family therapy. They see the investigators and social workers regularly.

Kathy Giugliano, Stuart House's child advocate, telephones families often to keep them up-to-date on what is happening with their case. There are no long out-of-touch periods of confusion. Cases—and children—don't get lost in the system. New cases often take only one day to go from the initial complaint of abuse to the interviews with child and family, the gathering of medical information, the interview with the suspect, the issuing of a warrant, and the filing of charges. In other places this process might take weeks, months, even years.

Once the filing takes place, the case is in the hands of the courts and the same delays occur as elsewhere. Meanwhile, therapy at Stuart House, for victims and family nonoffenders, continues as needed for as long as needed. Free of charge.

In California, as in most states, the child victim who complains of abuse must take the witness stand in criminal proceedings. Someone at Stuart House asked me to imagine

what it's like: You are five years old. You have been told by your father that he will kill you and your mother and your baby sister if you ever tell the truth about what he did. Your mother isn't allowed in the courtroom with you. You had to leave her crying outside in the hall. You sit in the witness chair. Your father sits in front of you. The judge asks if you know who God is. He orders you to tell the truth. Your father, whom you love, glares at you with his don't-you-dare expression. A strange, scary crowd of adults also stares at you. You can't speak. The judge tells you to speak up. You start to cry. On cross-examination, your father's lawyers ridicule you, trick you, and call you a liar.

Stuart House children who must testify are shown the courtroom ahead of time. They are allowed to sit on the witness stand, talk into the microphone, and meet the bailiff and the judge. At trial, someone the children know and trust from Stuart House goes into the courtroom with them for support. (A parent who is not a witness can also accompany the child, but parents are often called to testify, and witnesses are allowed into the courtroom only to give their own testimony.)

When her abuser came to trial, Matti had to testify. She had to look at every picture he had taken of her and tell the judge what was happening in each one. Her mother, who has never seen the photographs—"I don't want to," she says—stood in the back of the courtroom and listened. Matti's abuser, who, it had been revealed by investigators at Stuart House, had also molested his stepdaughter, was sentenced to 34 years in prison. The counselors explained to Matti how old she will be when he is released.

For more than a year, Matti continued to go to Stuart House for therapy. Her mother attended the weekly moms' group. "Before that," she told me, "I couldn't open up. It helped me so much to be with other mothers and to really talk."

The support Stuart House gives to its clients is unequalled anywhere in the country or the world; delegates from as far away as Fiji, Japan, Australia, and England have come to study what goes on there. "We could reorganize the whole system," Abarbanel says, "if there were Stuart Houses everywhere. Then the professionals could do what they're supposed to do: provide services. It takes leadership more than money. A community could convert a room or a floor in an existing building—establish a place for the agencies to operate in one place and make a commitment to work as a team. There could be children's courts, with rooms scaled down

and designed for kids, where the environment isn't scary. In the long run it saves money. Cases are well put together and end in more guilty pleas. That saves hundreds of thousands of taxpayer dollars per case."

"It's getting better," says Los Angeles District Attorney Bill Penzin. "Partly because of Stuart House, we're getting better statutes and having better outcomes." Also partly responsible for the improvement is a recent change in California law extending the statute of limitations in civil cases pertaining to sexual abuse and incest.

Across the country as well, more and more survivors are successfully taking their abusers to court. In Texas, Shelley Sessions, who has coauthored *Dark Obsession*, a book about her ordeal with incest, won a \$10 million judgment against her father, a Corsicana rancher and contractor, for years of having suffered his sexual and psychological abuse.

In Maryland, Kim Shaffir's stepfather was forced to pay for Kim's therapy and was sentenced to six months for spying on her and for masturbating in her presence as she awoke in the morning. "He got off easy," Kim says. "But I stood up to him, I identified him, and I spoke out. At least he was convicted. At least he got punished for some of what he did."

Also in Maryland, in March 1990, Ralph

and Betty Smith were convicted of five counts of incest, child abuse, and unnatural and perverted acts. They were sentenced to 15 years and are currently serving time. "At first we were so shocked that people cared," Lisa told me. "All our lives our parents said to us, 'If you tell, I'll kill you. If you tell, no one will believe you.' I felt guilty that I'd told." But, she went on, "I found I had brothers and sisters who cared. Going through the system, I found that the prosecutor cared."

At the end of the case, the Smith children gave plaques to prosecutors Cynthia M. Ferris and Maureen Gillmer of the state's attorney's office.

SMITH FAMILY AWARD

PRESENTED
WITH APPRECIATION AND AFFECTION
FOR LISTENING AND CARING
WHEN NO ONE ELSE WOULD
FOR YOUR COMPASSION AND DILIGENCE
WE HONOR YOU
NEVER FORGET
LISA, MICHAEL, MICHELLE, RALPH AND JOE
WONDERFUL THINGS DO HAPPEN
APRIL 1990

"It isn't over for us," Michael says. "We'll be dealing with this the rest of our lives."

"It feels so good now not to be ashamed to talk about it," Lisa says. "If someone asks about my parents, I tell them they're in jail."

Recovery

I drive north through fog along the California coast. To my left, fields, cliffs, and ocean—spectacular views, if only I could see them. I focus

on the dim, looming headlights of approaching cars and trucks, stay as far to the right as I can, and worry about being late.

I am on my way, reluctantly, to interview Helen, a photographer, for this article. I knew her more than 20 years ago. She had waist-length hair then, gorgeous cheekbones, and slanted green eyes. She would have been beautiful if she hadn't been so somber and so weird. She was beyond skinny; her bones stuck out everywhere. She never washed her hair. She picked at herself constantly, dug at her cuticles and fingernails until they bled, scratched her arms until they were raw, and pulled out her eyelashes. She obsessed about

her health, starved herself, gorged, vomited, then starved again. I used to see her in the college cafeteria, muttering to herself and weeping. I couldn't stand her.

I finally cross the river into Mendocino. The fog lifts and I find my way through town to Helen's gingerbread house, overlooking the headlands. She meets me at the door. Her eyes and cheekbones are as I remembered them. Otherwise everything about her has changed. For one thing, she smiles.

Helen tells me that she and her older brother, Paul, were abused from infancy by their divorced mother, Diane. Until they left home—Helen at 16, Paul at 19—Diane

CASE STUDIES

From the age of five, Becky was ritually abused by her mother and others in a cult. At the age of eight, Becky was designated to drug other children in the cult; she was to give them a soft drink laced with sedatives. When she refused she was made to sit naked on a hill of fire ants. The only comfort she knew in her life was when her mother applied lotion to her bites.

Becky developed multiple personalities. She became a nanny and went on to abuse a succession of children in her care who were all too young to report what had happened.

Eventually she went to a psychiatrist and got treatment.

Viola, 27, was raped by her father when she was 4. Her father was caught in the act and fled the country. Viola can't remember the assault. She believes that she must remember it in order to heal. She is bulimic and suicidal.

Sandy insisted that Laura, her daughter, move her bowels every day after dinner. She forbade her to flush. If Sandy wasn't satisfied with what she saw—she almost never was—she bent Laura over the toilet and inserted her finger into the child's rectum.

"She'd move it around, in and out," Laura says, 23 years later. "I know now that she was finger-fucking me, but it wasn't until I was in therapy for eating disorders that I realized what it meant."

Laura is 5 feet 5 inches tall. Her weight swings between 90 and 170 pounds.

exposed herself to them, masturbated in front of them, and gave them enemas. Their father fondled both of them whenever he came to visit and routinely made comments about Paul's penis. They were also physically and sexually abused for years by other relatives and care givers, including a violent live-in baby-sitter.

Paul became a heroin addict before his 15th birthday. He was suicidal at 18 and hospitalized twice. It was Helen who had to arrange those hospitalizations, because the parents refused to help or even to acknowledge that anything was wrong. At 19, Paul married a 30-year-old woman. In his new home he covered the bedroom walls with photographs of his mother. He lived in a miasma of depression and impotence—and anger aimed at his wife.

Helen first had intercourse at 15 with a drunken, 35-year-old friend of her father's. From then on she slept with any man who asked her. She was raped twice, and at 20, the year after I met her in college, she married a sadistic man (I remember him well; he was straight out of *The Shining*). She was anorexic and bulimic, and not only picked at herself mercilessly but deliberately cut herself on the arms. An emergency-room doctor who once treated her told her he doubted she'd live to grow up. She hoped he was right.

Helen tells me that Paul and his wife have spent years in couples counseling, and that Paul still goes to one-on-one therapy. He has been drug free since his early 20s. He runs his own business, restoring antique cars. He and his wife have three sons, ages 7 to 17.

Paul has stayed in touch with their mother but sees her less and less often. Her behavior has become increasingly bizarre. Even her grandsons are wary of her. Helen laughs. "You know what Paul did on his tenth anniversary?" she asks. "He took down the photographs of Mom from the bedroom walls. That's when I knew he was making real progress."

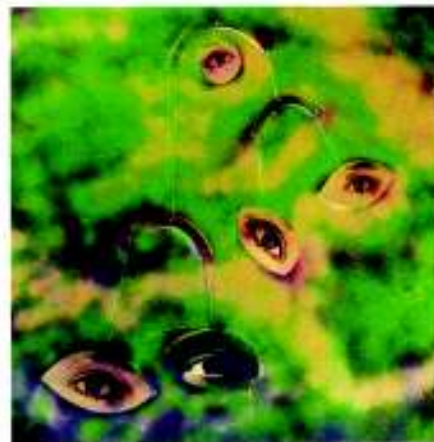
Helen says that when she divorced her first husband and moved to Mendocino with their daughter, Christine, she finally went into therapy. "I found a wonderful therapist," she says. "He was smart, kind, and helpful. Even though sexual abuse wasn't his specialty, he believed me, and he was able to listen to what I told him. We developed a partnership that gave me a lot of power."

A year after starting therapy, Helen severed ties with her family, except for Paul. "I had to decide what was going to keep me sane and let me grow," she says. "I could have spent years working on how to deal

with Mom and Dad, but I decided that I wanted to get on with me, with my life. Not just in a selfish way. I wanted to make a life for myself and Christine. I wanted the past to be the past. Some relationships are worth working to preserve. Some aren't."

After two years with her therapist, Helen joined an incest survivors' group and attended its meetings regularly for more than two years. "Every now and then," she tells me, "I still go back either to group or to my old therapist for tune-ups."

"Six years ago I met a nice man, John, and pretty soon we talked about getting married. I went back to therapy then—it was the second time I'd gone back—because I wanted to be clear about what I was doing, and why. I wanted to tell John what had happened to me, and I wanted help doing it."



There are no photographs of Helen's parents to be seen in her house. "I have them in scrapbooks," she tells me, "for Christine. I don't know if I'd keep them for myself."

Instead, I see Helen's photographs of Christine and some of her second husband, John—"I got it right this time," she tells me, "I married someone wonderful"—and of her friends. On the wall outside her office I see a photograph of Helen winning an award for her pictures, and another of her taken on a mountain-climbing expedition. Her head is thrown back and she is laughing.

"I have my life now," Helen tells me. "My child is a wonderful, healthy, sunny young woman. I have a truly happy marriage. I have my work. I still have issues—who doesn't? I don't know what I would have been like without the incest, but now I'm pleased with myself and my life. I consider myself a survivor. I consider that I have recovered."

Can anyone really recover from incest? This question is asked at workshops, in therapy, by victims and offenders. This is a question I asked myself. Can I heal?

The answer is yes. With a lot of work and a lot of help. Most victims who don't get help find themselves afloat, aimless and desperate, tethered only to the secrets, the shame, and the self-hatred of the past. I have seen them lined up on Manhattan streets after midnight, 12 years old, naked from the waist down, selling themselves to carloads of men. They are our child whores. They are the fodder of organized prostitution and pornography. They account for a huge percentage of the runaway, the vagrant, the criminal, and the despairing who live on our streets and clutter our subways and bus terminals when they are not filling our mental hospitals.

"Ten years ago I longed for a suspected brain tumor or cancer to relieve me of the burden of life," writes T. Thomas pseudonymously in *Men Surviving Incest: A Male Survivor Shares on the Process of Recovery*. "Today I long to live."

"Every survivor deserves to heal," says Laura Davis, coauthor of *The Courage to Heal* and author of *Allies in Healing*. From the time she was 3 until she was 10, Davis was molested by her grandfather. He began by fondling her, then progressed to rape. She learned to leave her body by concentrating on the ceiling light. It seemed clean and pure to her. She split off from herself. She forgot what her grandfather did to her. All she knew was that he loved her. When he died 12 years ago, she wrote a eulogy. Several years after he was buried, she remembered.

"I read everything I could find on the subject of incest," she says. "Seven years ago I found a grand total of three books. Those books helped me to know that I wasn't alone, but the message I got from them was that my life was ruined. I was now a grim statistic of child sexual abuse. No one was talking about healing yet. I wanted to find out if I could heal and how to go about it. Then I decided to write a book about it."

As recently as a decade ago, healing from incest was problematic at best. The psychiatric community, still in thrall to the teachings of Freud, either disbelieved that incest occurred or minimized its importance. Therapists often tried to convince patients that their abuse was a fantasy. If there was an irrefutable history of incest, many refused to accept the patient.

Over the last ten years, however, therapists who were influenced by the feminist movement began to listen to their clients, believed them, and pioneered new and effective treatments. Other therapists followed. Now survivors can use talk therapy, group therapy, art

therapy, and body and movement therapy—the last two of which help release memories locked in the body. (Last summer I hurt my back. The instant the physical therapist touched my ribs I had vivid flashbacks to a specific beating that I had long forgotten. This was not like feeling an old bruise. This was having the entire event recur.)

Now there are dozens of books on incest and its consequences, self-help workshops, and 12-step programs to use in conjunction with other therapies. There are even wilderness trips to help survivors experience their bodies as strong and trustworthy and to reprogram reactions to fear. There are also role models to look to: survivors who have transcended their victimization, traversed their rage, and emerged into the complex happiness of health.

The earlier a survivor goes for help, the better the prognosis. Victims of incest who receive appropriate treatment make spectacular recoveries. But effective treatment is often long-term, and many survivors lead lives too chaotic to accommodate it. Long-term therapy can also be expensive—so much so that only the solvent and/or insured can afford it, and many survivors don't have health insurance because they are unemployed and indigent. Free clinics, which may be able to offer only short-term treatment, have waiting lists that are months long. Most areas don't even have a clinic to wait for.

In *The Obsidian Mirror: An Adult Healing from Incest*, Louise M. Wischuld writes: "As a child, I learned that strength was the denial of feeling. Now I see that feeling is the key to self-honesty. Within feeling is found the passion for change."

Recovery—which for many may include gaining that ability to feel—requires an almost heartbreaking commitment to truths nobody wants to hear, to things nobody wants to say, to memories nobody wants to have. Victims of incest have lost their innocence, their memories, their parents, their families, their trust, the opportunity to grow up and develop in the ways and in the time allowed to children who were not abused. They are consumed with self-hate and doubt: "Why did it happen to me? What's wrong with me? What's wrong with my family? What's wrong with God? Why didn't I stop it? Why didn't God stop it? What kind of life can I have now? Am I doomed? Am I crazy? Delusional? Vindictive? Psychotic? Evil?"

The initial results of an ongoing study being conducted by Cheryl Lanktree, Ph.D., a psychologist with Stuart House, to evaluate

how children respond to long-term treatment reveal that after three months, anxiety and depression ease, and that after six months, the symptoms of post-traumatic stress decrease—the children are no longer phobic in situations or places and are free of nightmares and flashbacks. However, says Lanktree, it takes much longer for the children's concerns and preoccupation with sex, and sexual acting out, to diminish. How long depends on the child, the abuse, the therapy. Under stress, child and adult victims may reexperience trauma symptoms and may need to go back to therapy for additional help.

Recovery for adults may take longer and be more complex than for children, but it, too, has predictable stages. Confronted by memories and their implications, the victim can swing wildly between denial that the abuse ever happened and acceptance of the fact that it did. With acceptance comes grief. Then rage. And, finally, self-forgiveness followed by resolution.

The hazard is that one can get mired in rage—rage at society, rage at the family structure that has institutionalized the victimization of children, rage at reruns of *The Adventures of Ozzie and Harriet* and *Father Knows Best*, at family members (who are in turn enraged at the survivor for talking). There may be rage about the fact that laws seem to support the offender over the victim, that the statute of limitations may have run out, that the person who did it can't be tried or can be tried only in civil court. There may be rage when an offender is either acquitted or given a frivolous sentence. And there may be self-rage for having been a victim. For having lived such a problematic life. For having felt pleasure. For not having told. For not having told in such a way as to be believed. For having told at all.

Anger feels so good, so powerful, that it can be mistaken for health. Victims, who have often long denied their feelings, need to have their anger and to move through it into healing. From anger springs the energy that propels survivors out of their victimization and into life. But the anger needs to be focused on the offender in an appropriate way. Fury at everyone who is of the offender's age, gender, or profession is too amorphous to be helpful. It is all-consuming, all-encompassing. You can drown in it. Anger isn't the last stop, it isn't the goal.

To recover from incest, victims must place responsibility for the act where it belongs—100 percent on the offender. If they fail to lay the blame there, they will remain forever in emotional paralysis, wracked by guilt and

pain and unable to grow. Each victim must develop a renewed perception of self as someone who has the right to not be mistreated. Victims need to feel safe. And to start to seek contact with others. "Victims of incest feel that they don't deserve to participate in normal activities," says Eliana Gil, Ph.D., a psychotherapist in Maryland who has had 20 years of experience treating incest victims and offenders—male and female, adult and child.

Mike Lew, the Massachusetts therapist who works with male incest survivors, defines recovery as "the freedom to make choices that are not based on the abuse."

There may be some few people who can heal on their own, without help. For some few, a friend may be able to give enough aid and support. For most of us, though, a therapist—the right therapist—makes all the difference. "‘Uh-huh therapy’ won't work," says psychotherapist Arlene Drake of Encino, California, who specializes in treating incest and child-sexual-abuse survivors both in private and group therapy. "Survivors need therapists who are active, interactive, and risk-taking themselves."

The therapist must be open, must be able to hear what the survivor needs to say and able to believe it. As Eliana Gil says, "Therapy must be where the victim can speak the unspoken. Therapy is two-way: The victim volunteers information and the therapist indicates willingness to talk about it."

Not all therapists can do that. Some find sex and violence extremely difficult to talk about. Some are overly invested in what they learned in graduate school and are unwilling to chance that what they were taught isn't all they need to know. Some, for reasons ranging from silly ("It can't be true, those things just don't happen") to legitimate (concern for the credibility of certain studies, for impartiality of certain researchers, for their own colleagues' conclusions), are not able to be fully present for their clients on this issue. It usually falls to the client to decide whether a particular therapist can handle the material.

Eliana Gil points out that some therapists turn a deaf ear when they hear about incest. "A certain percentage of them believe that this is total exaggeration or that the impact is exaggerated," she says. One general-practice therapist I spoke to expressed just such reservations. "Incest is in vogue now," she said. "And while of course I believe my clients, how can they be sure of things that happened decades ago? Suddenly my clients are coming in claiming incest, post-traumatic stress, and multiple personalities. Please!"

There are also therapists who sexually

exploit incest survivors. Mary W. Armsworth, the trauma specialist at the University of Houston, found that at least 23 percent of all female survivors have been sexually abused by their therapist. Other estimates, she says, run as high as 30 percent.

Anyone who encounters skepticism in a therapist, or adherence to what was taught and believed 20 or 30 or 50 years ago, or flirtatious behavior (even if the client flirted first) should look for a different therapist. Anyone who is in classical, "blank-mirror" analysis with a therapist who listens but doesn't speak (or who makes or takes phone calls during sessions or who falls asleep) should also look for another therapist.

Mike Lew pointed out to me that incest survivors have lived lives governed by secrecy and the lies they've been told by their abuser. They are told that what happened didn't happen. They are told that terrible things were good things. They are told that they are to blame for their abuse. In therapy they need to be able to reality-check. They need human contact, warmth, and engaged conversation.

Eliana Gil adds that survivors need help dealing with memories: "You can't say goodbye to a memory until you've said hello."

Most therapists insist that therapeutic abreaction—reexperiencing a trauma with the help of the therapist so that the feelings can be reprocessed in a less frightening way—is necessary to recovery. As Alice Miller says: "As long as feelings can be talked about, they cannot really be felt. And as long as feelings are not felt, the self-damaging blockages remain." Therapist Karin C. Meiselman, however, disagrees. "Therapists' insistence on abreaction scares some people into staying away from therapy," she says. "In my experience, it is sometimes possible to retrieve and work with memories without abreaction."

When memories return as uncontrollable flashbacks, says Philadelphia therapist and incest survivor Roz Dutton, a client has to

Drawing by a sexually abused teenage girl. She said she saw in it "a fire-breathing snake about to hit someone." She also saw an eye and said it was herself, watching.



learn to "bracket" them—to separate the self from the memory. In order to heal, she says, "survivors must reexperience the memory with feeling and in a safe environment and then eventually let it go."

Neither the number nor the detail of abuse memories, however, makes the difference in healing. Nor does forgiveness of the abuser. Therapists who specialize in incest and child sexual abuse—and a growing number of clergy and pastoral counselors, as well—realize that forgiving the abuser is not only irrelevant to healing but often impossible. More to the point, survivors need to forgive themselves. They must not hold themselves responsible for what happened.

Mike Lew keeps a photograph in his office of a group of little boys lined up to cross a street. "I have it here," he says, "so people can look at it and see what a child that age looks like. We forget how small we were."

Janice went into therapy because she wanted to kill herself over the breakup of an affair. When her therapist asked about her past, Janice said, "I don't remember a lot about my childhood. For example, I know my parents and I lived together in the same house, but I have no memories of my father until after I left home." She reported that both her parents were alcoholics. Her mother would become so depressed that she'd lock herself in her room for weeks on end. Janice had to cook for herself, her father, and her mother.

Janice told her therapist about the affair that had just ended. It had lasted only three months. The man had abused her verbally but not physically. Most of Janice's previous lovers—eight in the past two years—had abused her physically.

Janice acknowledged that she drank too much and smoked dope. The therapist suggested that she join Alcoholics Anonymous, but Janice said she could quit by herself. For several weeks she abstained from alcohol and drugs. Without the numbing effect of drinks and dope, Janice began to have troubling memories. She remembered slats of light from the venetian blinds in her bedroom falling on her pillow. She remembered her father's hand—was it her father's?—lowering the blinds. She remembered pretending to be asleep. She remembered fear.

Janice complained to her therapist that she was in pain all the time now, sick to her stomach, dizzy, headachy. She had bizarre pains in her rectum and vagina, and she felt like gagging. The therapist suggested that Janice join an incest survivors' group. She agreed that she would but insisted that she didn't really belong there. ➤

In the group Janice met eight women who had been sexually abused. Two of them had only vague memories, like hers. One had knowledge of the abuse in the form of physical scars, but no memories. Three women were in the process of regaining their memories and suffered flashbacks. One was preparing to sue her parents in civil court, and another had already taken her abuser to court and won a judgment for damages.

"I watched people who felt angry and showed it," Janice says now. "I was still too scared to feel anger. But I learned from them. I saw, too, that there were things, like confronting our abusers or going to court, that we—that I—could do. When I told my mother about the abuse and she screamed at me and asked why I had allowed it to happen, I went to the group for support. Most of them had had the same experience. But some had been able to work through it with their moms and now they have good relationships. I modeled myself on them."

Because so much of what survivors have experienced is negative and painful, good feelings can feel like abuse. People who are recovering have to learn to tolerate positive feelings about themselves and others. As author and incest survivor Laura Davis says: "I thought healing was just another punishment. I thought it was the endless processing of pain. I thought I was sentenced to healing for the rest of my life."

Eventually, for most, there is resolution. It comes at different times to different people—for some it takes a year or so, for others it takes decades. The talk therapy, group therapy, self-help groups, art therapy, the body therapy—in time they work. The past recedes until it is in the past. Memories are more often memories than flashbacks. Anger is appropriately directed at the abuser. Sex and intimacy are possible.

Survivors find they have choices, that their actions are not the inevitable result of their abuse. They can talk about other things. As Alice Miller writes: "The goal of therapy is to allow the once silenced child in us to

speak and feel. Gradually the banishment of our knowledge is revoked... we discover our history, ourself, and our buried capacity for love."

"Incest" does not tell the awful things you did to me," writes incest survivor Louise M. Wischild in *The Obsidian Mirror*. "But I will name them our loud, in public."

"Use my name," pleads a woman talking to me on the phone. "All my life I've been thought of as crazy. I want even one person to know what happened and that I am not crazy." I had offered anonymity to every survivor I interviewed. I was astonished that so few wanted it. "Use my name," they said. "Use my name."

Ten years ago my therapist advised me not to tell. "There is a real danger that you will be irrevocably labeled a victim," he said. He was right. For then. But now survivors are breaking the silence. For some that means telling their therapist and their survivors' group. For others it means whispering it to the bubbles in the bathtub. I have written the truth in my journals late at night, then torn it up. Some mail a letter to the abuser or to their family. Laura Davis, who eulogized her grandfather at his death and then remembered his abuse of her, rewrote the eulogy. "There are a few things I forgot to say," she began. Then she wrote them down.

Brad, whose days as a victim led to multiple personality disorder, returned home during the holidays last year and confronted his family. Louise Wischild invited her stepfather to a meeting and told him how he'd hurt her. Kim Shaffir took her stepfather to court. She confronted him, publicly exposed him, and was believed.

When Michael and Lisa Smith took their parents to court, they withheld their names from the media. But at the end of the trial they felt that they had no reason to hide and that by hiding they were perpetuating the aura of secrecy that surrounded their abuse. They gave permission to the newspapers to publish their names, and they appeared on TV to talk about incest and what had happened to them.

"We have to wake up and smarten up," says therapist Arlene Drake. "If the family as we've idealized it were really so wonderful, this wouldn't have happened. We've already gone overboard on the wrong side, protecting aggressors and blaming victims. Let's really be kinder and gentler. Let's err on the side of caution and the children. Let's give child sexual abuse time and attention. Let's 'listen to the whispers so we don't have to hear the screams.'"

Once I broke a bone in my foot. It healed, but sometimes it aches. When I broke that bone, I thought about it all the time. Now I almost never do. Only if I go back to the place where I got hurt. Or if I put a certain kind of stress on the bone. Or, sometimes, on gray days. There were times when I thought about my abuse every day, all day. And dreamed about it at night. But I rarely think about it anymore. For the purposes of this article I'll speak about it for a while. Then I'll go on to something else.

Healing from incest is possible: Victims become survivors. Those of us who were kidnapped in our childhood and carried into darkness have the opportunity to transcend and transform that experience, to know love in its most sinister forms as well as in its finest, and to have the power of that knowledge. But while it is possible to survive and even to triumph over incest, it is a destructive and infectious crime for which we all pay emotionally, financially, and spiritually. It affects more of us than cancer, more of us than heart disease, more of us than AIDS.

We must look at incest for what it really is, not what we fear it might be or wish it were. Incest is a crime committed by adults against children, by the strong against the weak. Incest is not a crime determined by gender. To really understand incest and to help end it, we must allow ourselves to see that women as well as men abuse. That women probably abuse as often as men and for the same reasons—because as children they were sexually abused themselves. We must acknowledge women as the sexual equals of men—down to the darkest impulse and act. Men must learn to recognize their own victimization—equal, in this instance, to women's. We must learn that the consequences of child sexual abuse damage everyone, male and female, adult and child.

We need to do more than survive incest. We need to stop it. ☉

Heidi Vanderbilt is an award-winning writer who lives in New England.

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CHECKLIST

- If a child tells you that he or she has been abused, believe it.
- If a child tells you the abuse occurred a long time ago, don't assume that it isn't still going on.
- If a child says something vague, such as "My bottom hurts," or is strangely silent or aggressive, ask questions. Don't get hysterical in front of the child. Just ask and listen. Ask *why* and *how* and *where* and *what do you mean* and *show me*. Remember that a child's vocabulary is limited.
- Don't try to gloss over the subject. Don't say "It's no big deal." Get help for the child.
- Do not wash the child.
- Save the child's clothes so that they can be examined for physical evidence.
- Take the child to a hospital emergency room.
- Call the local police and the local child-welfare department. If you live in an area so remote that you have no local agencies, call the National Child Abuse Hot Line at 800-422-4453.
- If you remember being abused yourself as a child, or think you might have been, call your local rape-treatment center or mental-health clinic.
- Take whatever time you need to find the right therapist. Therapy is often included under health plans.

SOME SELF-HELP RESOURCES

- Self-Help Clearinghouse
St. Clare's-Riverside Medical Center, Denville, NJ 07834 (201-625-9565)
Publishes The Self-Help Directory, a guide to mutual-aid self-help groups and how to form them.
- Incest Survivors Anonymous
P.O. Box 5613, Long Beach, CA 90805-0613 (213-428-5599)
Assists in forming 12-step groups.
- SARA (Sexual Assault Recovery Anonymous) Society
P.O. Box 16, Surrey, British Columbia V3T 4W4 Canada (604-584-2626)
Provides self-help information for adults and teens who were sexually abused as children.
- National Council on Child Abuse and Family Violence
1155 Connecticut Avenue NW, Suite 400, Washington, DC 20036 (202-429-6695)
Provides counseling referrals.
- Believe The Children
P.O. Box 1358, Hermosa Beach, CA 90254 (213-379-3514)
Counsels parents of children who have been victimized outside the family.
- Incest Resources Inc.
46 Pleasant Street, Cambridge, MA 02139 Requests no phone calls.
Provides educational materials for incest survivors.
- National Clearinghouse on Child Abuse and Neglect
P.O. Box 1182, Washington, DC 20013 (703-385-7565)
Provides referrals, information, and publications on all aspects of child abuse and neglect.
- National Committee for Prevention of Child Abuse
332 South Michigan Avenue, Suite 1600, Chicago, IL 60604-4357 (312-663-3520)
Holds conferences and training programs on child abuse and neglect.

The celebrity tell-all about incest has made this the right moment for LEAR'S to release a body of work on the subject begun ten years ago, assembled and beautifully written by Heidi Vanderbilt.

In 1981, Susan Brownmiller wrote *Against Our Will: Men, Women, & Rape*, a book that changed the laws on rape and the fate of rape victims. We believe that this substantive report will have a similar impact, bringing legal recourse to incest victims and profoundly contributing to the well-being of incest survivors.