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Book Reviews: Technical Books Section

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EXCERPTS

Handbook of Forensic Sexology: Biomedical & Criminological Perspectives *by* James J. Krivacska and John Money, Eds, Hard Cover, Binding - cloth, 6" x 9".

Prometheus Books, 59 John Glenn Drive, Amherst, New York 14228-2197, USA. or . Publication Date: July 1994. 594 pages, index, Category: Human Sexuality, ISBN 0-87975-883-X. Price $130.00

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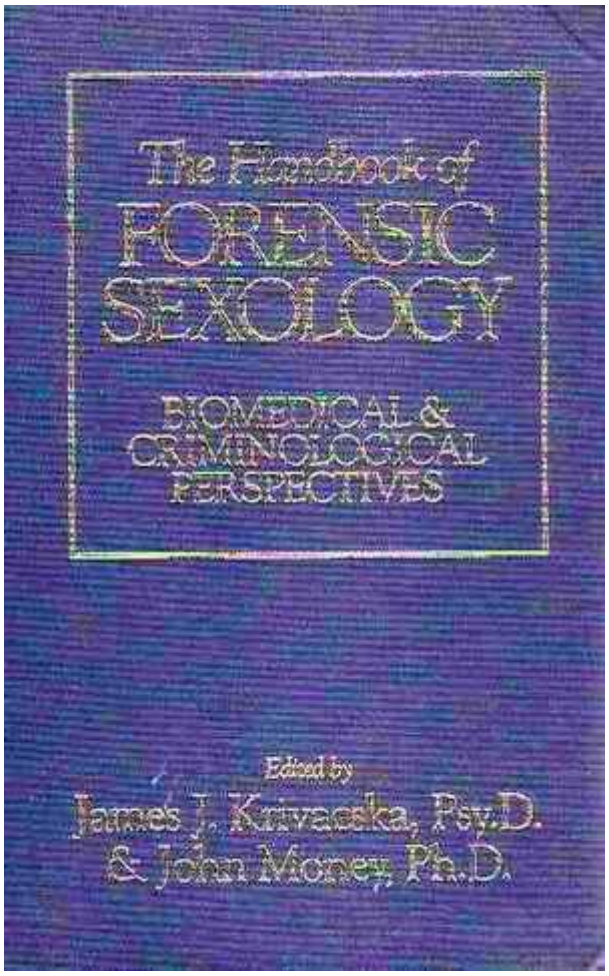

"This book is destined to become a classic", thus opines our expert reviewer about this book at the end of his review. When we received the review at the editorial office, we decided to let the readers taste some nuggets from this classic, so they know what a great beauty this book is.

A small note first. The text in all chapters in this book is interspersed with copious references in Harvard system ('name-year' approach). We decided to do away with the references mainly because it would hinder easy reading. Readers with technical bent of mind must note however that the authors have backed up almost every fact with sound references.

We decided to start with chapter 4 dealing with rape and sadomasochistic paraphilias. Written by Peter M. Sheridan, from the Clarke Institute of Psychiatry, Toronto and Steven J. Hucker of the Queen's University, Ontario, this chapter deals with several lesser known aspects of rape. Sample this piece on male rape from this chapter...

RAPE OF MALES

Pages 109-112

In the foregoing discussion of definitions and descriptions of the diverse forms rape may take, victims are assumed to be female and perpetrators male. Indeed, in some states rape is defined as a crime against women and requires forced penile-vaginal penetration. The problem of male rape has been largely ignored by researchers, or has been considered an anomaly of institutional life where the sex object of choice is unavailable . The prevalence of sexual assault of noninstitutionalized adult males has been estimated to be between 5 percent and 10 percent but

the figures do not carry statistical certainty. Little attention has been paid to males who experience sexual violence as adults in the community.

To date there are few clinical and research papers that deal with male rape . The popular conception of male rape is that of homosexual rapists overpowering heterosexual men and boys. This notion is not only false but may even represent an inversion of reality. The majority of assailants in some reports of male rape are perceived to be heterosexual, while victims usually consider themselves to be homosexual or bisexual. Groth found that assailants in cases of male rape were more likely to be strangers to the victim than in cases of female sexual assault. Groth (1979) belongs to the school of thought that considers such rapists to be similar to rapists of women; their rapes, he believes, are the sexual expression of aggression and hostility. As such, sexual gratification is of secondary, or nonexistent, importance. Groth understands male rape to serve a variety of motives, including the expression of mastery and control through conquest; the desire for revenge and retaliation, provoked by anger toward the victim; the erotic gratification of sadism and degradation of the victim; the punishment of another as a means of warding off anxiety resulting from unresolved conflict over one's sexual orientation; or the need for status and affiliation, as in gang rape. A number of these motives are clearly operative in antigay violence, or "gay bashing"; as many as 10 percent of men who are victims of antigay violence report experiencing sexual assault by heterosexual male perpetrators .

Recent investigations of sexual assault of adult males , including our own , and studies of sexual coercion in the relationships of adult males , have challenged this model of the heterosexual male perpetrator and homosexual victim of stranger rape. Such research suggests that the majority of sexual assaults occur within the context of homosexual relationships, in a manner analogous to heterosexual date rape. Few cases of male rape conform to the stereotype of blitz rape described above; most assaults occur in the victim's or perpetrator's home, involve use of alcohol or drugs by both parties, and tend to involve verbal coercion, intimidation, threats, and restraint more often than physical violence. Few victims are attacked by complete strangers; often the assailant is the victim's partner or former partner, an acquaintance, or someone the victim met in a gay bar or known gay cruising area, such as a public park. The assault behaviors reported by victims consist primarily of receptive oral and anal intercourse or attempted intercourse . Of particular note in one study is that over a third (35 percent) of victims were physically or cognitively disabled, and 21 percent indicated that they were assaulted when unconscious (intoxicated, drugged or sleeping).

It may be that these patterns of male rape represent two distinct groups of perpetrators: heterosexual males who rape other males as a means of punishing and degrading them, possibly an extension of other forms of violence targeted specifically toward subordinate males (e.g., in prison); and gay or bisexual males who coerce partners or acquaintances into sexual activity by use of threats or intimidation, as in date rape. In the opinion of the authors, the former pattern does occur, but is more rare than the latter. The emergence in the research literature of the date rape pattern may reflect the growing awareness of clinicians and researchers to this form of sexual violence as well as the willingness of victims to acknowledge their sexual orientation. Furthermore, research with offenders, as opposed to victims, would appear to be particularly biased in terms of reporting of sexual orientation; sex offenders are known to deny their sexual preferences, and those who assault males may be loath to admit that they are homosexual or bisexual .

Sexual assault of adult males by females

Sexual assault of adult males by females is not unknown, although true sexual aggression, characterized by physical restraint and fear for safety, is rare . It appears that men are also subjected to sexually exploitative pressure, most often psychological, such as not wanting to appear homosexual, unmasculine, inexperienced, or shy . Where female perpetrators have been identified, however, it is most often in the context of a sexual assault involving another male . For example, victims have reported that they were engaged in consenting activity with a male partner, who was then joined by a female against the victim's wishes and forced sexual activity ensued .

Effects of sexual assaults on men appear similar to those of women , although special needs populations have been identified. The heterosexual victim of male assault may have fun¬damental beliefs about his sexuality and masculinity challenged. Dysfunction in affectional and sexual relationships following assault by male or female assailants is not uncommon . The gay male victim of acquaintance sexual assault may experience fearful or aversive feelings associated with normal sexual behavior and may blame himself - as female victims of date rape do¬ - for not resisting vehemently enough, or being somehow complicitous in the rape . Victims of antigay violence in which sexual assault is a part have special treatment needs which must be addressed, including internalized homophobia, stigmatization and marginalization.

RAPE AS A PARAPHILIA

A problematic area for mental health professionals of all disciplines is whether rape constitutes a true paraphilia. The concern raised by the discussion of this issue appears to arise out of the fear that the extensive work done by women's groups to raise public consciousness regarding the severe impact sexual assault has on victims will be reversed. The popular perception is that individuals may escape punishment for their actions by using the psychiatric diagnosis of paraphilic rape (paraphilic coercive disorder). Abel and Rouleau (1990) point out that as the ability of the victim to resist sexual assault decreases (such as in pedophilia) or the degree of force used in the perpetration of the crime increases (as in rape), society is less accepting of a psychiatric justification for such crimes and is more in favor of punishment through the criminal justice system. In practice, however, psychiatric treatment in response to a paraphilic diagnosis does not preclude incarceration for the illegal act. Indeed, court mandated psychiatric or psychological treatment may well prolong, rather than reduce, time served.

Additional controversy over this issue tends to be generated by some contemporary feminist scholars and some social science researchers who argue that rape is primarily a crime of power and aggression, and represents only one dramatic instance of patriarchal society's general hostility toward women . Such theorists tend, as a whole, to dismiss any arguments about the sexual nature of rape. Careful review of the relevant literature, however, reveals that sexual and aggressive impulses are fused in sexual assault and neither variable alone can account for all aspects of the phenomenon. Recent developments in the taxonomy of sexual offenders, including rapists, recognize the diverse routes which end in sexual assault . Furthermore, these two perspectives on motivation in rape are not incompatible; elucidation of the mechanisms whereby power and aggression become eroticized is critical in understanding the etiology of sexual violence.

Support for the classification of rape among the other paraphilias comes from a number of sources. Clinical interviews with rapists reveal that in many cases recurrent, repetitive, compulsive urges or fantasies to commit rape are present. These tend to have a cyclical nature: the individual experiences urges of increasing intensity which he attempts to control, the urges become too strong, control breaks down, the urges are acted upon, and a temporary reduction of urges follows. This cyclical pattern is similar to the clinical picture present in traditionally recognized paraphilias .

Additional support for the conception of rape as a paraphilia comes from the developmental history of the disorder and its association with other common paraphilias. Similar to the early onset of deviant arousal in other paraphiliaa, 50 percent of individuals who rape experience the onset of this type of arousal by the age of twenty-one . In one study, rapists had a high likelihood of past or present history of other paraphilia in addition to rape, most commonly nonincestuous (44 percent) and incestuous (24 percent) female pedophilia, exhibitionism (28 percent), voyeurism (18 percent), frotteurism (11 percent) and sadism (10 percent).

The editors/authors give us rare and exclusive information throughout the book. Chapter 5 entitled "Genital exhibitionism and voyeurism: Theories and treatment" written by Ron Langevin, associate professor of psychiatry at the Clarke Institute of Psychiatry, Canada gives us good information. For instance he tells us that exhibitionists may be suffering from castration anxiety, and they may be reassuring themselves that they do have their male organ intact by showing it to females. Their horror reaction perhaps serves to convince them that they do have their genitals intact! There is also some evidence indicating exhibitionists have some feelings of inferiority about their bodies too.

Click here to read review of *Forensic Sexology*

Similarly voyeurism can also be explained by psychoanalytic theories. Voyeurs may be sadistic people, their intention being to injure or humiliate the victim. One may believe that voyeurs would be more interested in strip shows than the rest of the population. This is not true. Indeed they are not interested in strip shows, because to them voyeurism is sexually gratifying only because it is undetected and forbidden! Anything which is open and commonplace like strip shows does not interest voyeurs. Here is what Dr. Langevin has to tell us in his chapter...

EXHIBITIONISTIC BEHAVIORS

Pages 128-133

The chronology of the development of exhibitionistic behaviors and more aggressive sexual offenses may be difficult to discern. Fehrenbach et al. (1986) noted that the criminal history of sex offenders can begin early. Characteris¬tically, adolescence is a time for the emergence of anomalous sexual behavior, however, juveniles frequently escape court proceedings. In their sample, 11 percent of the 305 adolescent sex offenders, whose average age was 14.8 years, had engaged in indecent exposure, with victims equally divided between child peers and adults. Particularly noteworthy was that 64.7 percent of those adoles¬cents currently being assessed for indecent exposure had committed a previous sexual offense. These results indicate that

exhibitionists may be a greater concern than historically has been the case. The results also suggest that there may be distinct aggressive and nonaggressive subtypes of exhibitionists.

Exhibitionism remains predominantly a male act, although a number of authors have questioned its existence in women. A few female case studies have been presented but financial gain (e.g., nude display for pornographic magazines) and mental illness remain paramount motives in female genital exhibitionism, although some cases may reflect true genital exhibitionism . However, the case presentations are usually atypical. Some authors have raised the issue that exhibitionism may be legal for females (e.g., the stripper), and illegal for males, which may account for the low incidents of female exhibitionists who face criminal charges . In the past decade, more male strippers have appeared in clubs, so the logic of this claim may no longer be valid.

The current psychological literature continues to document poorly the nature of genital exhibitionism. In particular, the victim's age and sex are rarely mentioned, although characteristically the victims are female. One is unsure whether there is a concurrent pedophilic interest, or whether some other sexual anomaly is more prominent. Rarely are other sexual response anomalies (i.e., voyeurism, rape, transvestitism, etc.) mentioned. A complete sex history is almost never reported, so our understanding of genital exhibitionism has not advanced much in the decade since the literature was reviewed by the present author . Moreover, a number of confounding factors may have played a significant role in the behavior of genital exhibitionists as well as other sexually anomalous men but these are rarely noted. Substance abuse, for example, while a most prominent factor, is almost never discussed.

Langevin and Lang (1990) examined a group of 461 male sex offenders. Over half of them scored in the alcoholic range on the Michigan Alcoholic Screening Test (MAST) and although the group of exhibitionists was small (N = 16), it did not differ remarkably from other sex offenders on the abuse of both alcohol and street drugs, with approximately half of them being alcoholics. Myers and Berah (1983) found that 25 percent of the forty-five exhibitionists in their study were consumers of alcohol but only 4 percent were intoxicated at the time of their offense, in contrast to 49 percent of the sixty-five pedophiles examined. Other important factors that play a role in unusual sexual behavior also have not been documented (e.g., mental illness, poor socialization, history of violence, neuropsychological impairment, or endocrine factors). Findings in the last decade suggest that the etiology of exhibitionism, as well as other sexual anomalies, is more complex than it was considered to be twenty years ago. Voyeurism remains more of an enigma than exhibitionism, even though the two behaviors are often associated . The literature on voyeurism is scant and professionals have remained, for the most part, silent about the etiology and treatment of voyeurism. The literature on voyeurism was reviewed by Langevin (1983, 1985), Smith (1976), and Yalom (1960): as the reviewers noted, empirical studies of voyeurism are rare. In part, this may be so because peeping is difficult to detect and may readily be labeled as another crime (e.g., "causing a disturbance", "trespassing" or "mischief), and may not come to the attention of clinicians and researchers. However, even when voyeurism is noted in clinical samples, it is difficult to isolate. Langevin et al. (1985), for example, did not find one exclusive voyeur in a sample of 422 sexually anomalous men tested in a forensic clinic over a six-year period. Moreover, based on sexual behavior alone, a criterion of ten instances of "peeping" was required to distinguish the "voyeurs" from healthy community controls, although only one instance of orgasmic peeping was needed to discriminate between the groups. Freund and Watson's (1990)

results were similar. Of 1,572 heterosexual paraphilic men studied, only 125 peeped (8 percent) and of these, 10.1 percent were exclusive voyeurs-0.8 percent of the total sample. It seems that, using DSM-III-R criteria to search for recurring intense desires to peep, one rarely encounters pure voyeurism. Like exhibitionism, voyeurism is multifaceted and, even more than exhibitionism, may be a common behavior that is part of other sexual anomalies or a pre¬cursor of them.

Many of the questions raised about exhibitionism can be repeated here: does the voyeur go on to commit more violent and dangerous sexual offenses? Who are the victims of voyeurism? Are there subtypes of voyeurs? It is also possible that voyeurism is such a broad clinical concept that it is useless diagnostically .

The incidence of voyeurism in the community at large is difficult to ascertain. Unlike what happens in exhibitionism, the victims of voyeurism are often unaware of what has transpired because the offender does not want to be seen or to have any physical contact with them.

Voyeurism has been linked to violence by Yalom (1960), who suggests it is associated with murder, arson, and burglary. He described voyeurism as "sadistic" since the intention of the voyeur is to injure or humiliate the victim. However, Yalom presented no systematic empirical data to support his thesis.

Many of the criticisms of the literature on exhibitionism apply to voyeurism as well, only empirical studies of the latter are much rarer. In the following sections, theories of genital exhibitionism and voyeurism will be outlined with supporting data, followed by a review of current treatment studies.

THE THEORIES

A number of theories have attempted to explain genital exhibitionism and voyeurism. It should be kept in mind that when empirical evidence is presented for these theories, it is frequently based on inaccurate assessments (e.g., exhibitionism and pedophilia are mixed; exhibitionism may or may not occur with voyeurism; and it may even be labeled as sadistic or even homosexual, although females are usually the primary victims of indecent exposure). Both exhibitionism and voyeurism may be common pathways for the expression of a variety of sexually anomalous preferences. Therefore, conclusions must be considered with caution until more systematic research is available.

Psychoanalytic Theory

Exhibitionism and voyeurism, like many sexual anomalies, are explained by psychoanalytic theory in terms of castration anxiety, unconscious homosex¬uality, and feelings of inferiority. Scoptophilia was a term used by Freud to explain the common association of voyeurism and exhibitionism. The primary satisfaction for these two behaviors comes through the act of looking rather than through tactile behavior. Other psychoanalytic hypotheses have been reviewed and will not be repeated because no additional systematic empirical evidence has been accumulated in the past decade to test the hypotheses. In general, psychoanalytic theory is short on empirical data, so validation of theoretical claims is often quite poor compared to other theories. One of the difficulties with the analytical literature is that the concept of scoptophilia, which includes exhibitionism and voyeurism, often transcends the sexual realm. Therefore, the intense desire to look or derive satisfaction from looking may be labeled exhibitionism or voyeurism, when, in fact,

the individuals described are not evidently deriving erotic gratification in the usual sense of the term .

Only a few case studies have been reported in the past decade which support the psychoanalytic theory that (1) the exhibitionist is protecting himself against castration anxiety by having a woman watch him expose; (2) the fear of the female assures him that he has a penis; and (3) it is a triumphant act in which the exhibitionist says, "I will show you what I hope you could show me." Buzov (1988) examined cases of genital exhibitionism through their manifest dream content and found support for the theory. In a more detailed case presentation, Fuerstein (1984) also found support for the theory. It is noteworthy that Stoller (1975) has defined perversion as "an erotic form of hatred" which has found acceptability in some psychoanalytic circles.

In reviewing the literature in 1983, the present author found that the available evidence indicating exhibitionists have some feelings of inferiority about their bodies or are overly concerned about castration had only equivocal support. When asked twenty-four questions about their bodies, exhibitionists, in comparison with other individuals with heterosexual anomalies and non¬patient controls, differed only on six items. Exhibitionists, more than controls, wished that they were more athletic and had a more athletic build, had a larger penis, and were better looking. They more often felt that there was something wrong with their penis and that their fathers were concerned that they take care of it and keep it clean. However, the exhibitionists did not differ from other sexually anomalous men, only from the controls. In general, the concerns about body image and cleanliness were not specific to exhibitionists.

Similarly, psychoanalytic claims that exhibitionists differ from controls in their relationships with their mothers, were not supported by empirical data. In fact, the exhibitionists did not differ from controls in any remarkable ways in terms of their mother relationships, although they did see their fathers as stricter than did controls. The contention that exhibitionism is a form of latent homosexuality has not been supported by sexual behavior or phallometric studies. Characteristically, exhibitionists have a heterosexual history and react most to adult females in phallometric testing .

Voyeurism has been described as sadistic by Yalom (1960), who maintains the voyeur wants to injure and humiliate his victim. Both Yalom (1960) and Karpman (1957) stressed that voyeurism is sexually gratifying because it is undetected and forbidden. Consequently, voyeurs are not interested in strip shows. Karpman also hypothesized that voyeurs have an unusual lack of curiosity. Langevin, Paitich and Russon (1985) in two empirical studies of forty-five and thirty-one voyeurs did not find support for either hypothesis. To this writer's knowledge, there have been no other empirical studies of voyeurism conducted in the past decade.

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