

Dr. Benzion Sorotzkin, Psy.D.  
Clinical Psychologist  
Brooklyn, NY  
www.DrSorotzkin.com  
bensort@aol.com

## **THE DENIAL OF CHILD ABUSE** (The Rind, et al. Controversy)\*

In a recent issue of *The Journal of Psychohistory* (Sorotzkin, 2002) I discussed the tendency of most societies to deny that many of their children are abused (emotionally, physically, or sexually) by their parents or other adults. One example cited, is the recent scandal involving the Catholic Church. At first, the church hierarchy simply denied that any sexual abuse took place, in spite of the convincing evidence to the contrary. When the evidence became too overwhelming to deny they then claimed that while perhaps abuse did take place, it did little damage and shouldn't obscure the good work the abusing priests did!! And besides, the whole scandal is simply a plot by the media to discredit the church.

In spite of my awareness of these historical trends, I still found it surprising that a reputable psychological journal would publish an article that questions the scientific basis for prohibiting adults from engaging in sexual activity with children.

### **Rind et al: Sex with Children isn't Harmful to their Health!**

In 1998 Rind, Tromovitch, and Bauserman published an article (Rind et al., 1998) in *Psychological Bulletin*, a prestigious review journal of the American Psychological Association, which set off a firestorm of controversy. Their article reported the results of a meta-analysis of studies relating to the long-term impact of sexual abuse on children. (A meta-analysis is where information from many studies that address a similar issue is combined in order to achieve a more accurate estimate of the effects being measured). The main finding reported by Rind et al., is that most youngsters who have had sexual relations with adults (they object to the term "child sex abuse" as being unscientific - they prefer "adult-child sex," a "value-neutral term") do not suffer long-term negative consequences. This is especially true, according to Rind et al., of boys who were "willing" participants in sexual activity with older males.

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## The Firestorm

Initially, the study didn't attract much attention. However, after pro-pedophilia websites began to cite this study as scientific evidence to support their views, a popular radio talk show host brought it to the attention of the wider public and a public furor ensued. In fact, it resulted in the first ever United States Congress resolution condemning a paper published in a scientific journal.

In 2001 *Psychological Bulletin* published two articles that critiqued Rind et al.'s results. The authors of both articles emphasize that it has long been recognized that not all victims of sexual abuse suffer pervasive and intense harm. In fact, many researchers have been interested in studying the resiliency of those victims of sexual abuse (and of other forms of abuse) who remain asymptomatic. Yet both articles are sharply critical of Rind et al.'s findings.

### Dallam et al. – Methodological Shortcomings

Dallam and her associates (Dallam et al., 2001) retrieved and examined the 59 studies analyzed by Rind et al. and their article focused mainly on the methodological shortcomings in Rind et al.'s study. For example, Rind et al. (1998) only included studies of college students, a young, well-functioning portion of the population, and hardly representative of the general population. Children who are negatively impacted by a history of child sex abuse (CSA) are less likely to end up in college. Likewise, most of the college studies focus on the impact of CSA on internalizing behaviors such as depression, anxiety, and eating disorders. Yet studies of high school students who reported a history of CSA found that the males were more likely to experience a negative impact on externalizing behaviors such as poor school performance, delinquent activities, and sexual risk taking.

Dallam et al. also point out that there was a lack of standardization of definitions (e.g., of CSA, of upper age limit of 'child' etc.) across the studies included in Rind et al. (some studies included sexual experiences that occurred after age 17). This makes it questionable if the results of the various studies could be lumped together. Dallam et al. also find it baffling that Rind et al. excluded from their analysis two articles that they themselves said 'may capture more accurately the essence of abuse in a scientific sense' while including other less relevant studies. Likewise, Rind et al. failed to report certain negative outcomes associated to a history of CSA (e.g., illegal drug use) found in a number of studies.

Dallam et al. also cite studies that show that abused men tend to present themselves as doing much better than objective criteria indicates. Therefore, they conclude that:

A more correct statement of Rind et al. findings is that men often claimed to be unaffected by CSA but simultaneously demonstrated negative effects similar to those displayed by their female counterparts.

Dallam et al. cite a prominent epidemiologist, who suggested that the worst abuse of meta-analysis stems from the temptation to produce a single estimate of effect from disparate study

results and then treat this estimate as a definitive literature synthesis.ö They conclude that while they agree that CSA does not inevitably lead to intense and pervasive harm to all individuals, their reading of the same data indicates a significant association between reported CSA and öa wide range of mental health and social problems in adult life.ö

### **Ondersma et al.**

Ondersma et al. (2001) was the second critique of Rind et al. (1998) published by *Psychological Bulletin*. These authors cite other reviews of Rind et al.ø methodological shortcomings. One reviewer, for example, pointed out that most victims of CSA öshow only a subset of all possible symptoms; thus, any one symptom may not be significantly elevated in the CSA population as a whole, even though the majority of individuals demonstrate some symptoms.ö Ondersma et al. also note that many of the studies reviewed by Rind et al. include in the definition of CSA both contact and non-contact sex. In one of the studies fully 83% of malesøöCSAö experiences involved being propositioned by an adult, without any actual contact! Is it any wonder that Rind et al. found a smaller degree of profound and persistent long-term harm among the victims of CSA (so broadly defined) than what would have been predicted by other researchers?

### **Presentational and Interpretive Shortcomings**

Ondersma et al. emphasize that:

[O]ur concerns regarding Rind et al. are not predicatedí on their methodology and findings, which should be accorded the same blend of trust and skepticism as any other studyí . [T]he primary flawí is not the science that is used but its use of scienceí . to inappropriately imply that key moral assumptions about CSA should be reconsidered. We take issue with the basis as well as with the logic of these implications.

Ondersma et al. begin by objecting to limiting the definition of *harm* to the existence of negative effects lasting to young adulthood. According to that criterion,

other clearly negative childhood experiences - for example, being beaten by an adult or having leukemia ó might not qualify as harmful either. Moreover, harm does not require that the victim perceive that experience negativelyí the possibility that a child might learn from an abuser that such experiences are normal and positive is one of the most concerning possible outcomes of CSA.

As I emphasized in my *Journal of Psychohistory* article (Sorotzkin, 2002), This last point is especially important since research has shown that when children normalize, or even excuse, the abuse they experienced they are more likely to become abusers themselves. Those victims who realized that they were terribly wronged were less likely to become abusers (Briggs & Hawkins, 1996). It may in fact be that those victims of CSA that Rind et al.ø study found to

have escaped psychological harm in young adulthood, were the ones who were helped to realize (perhaps in therapy) what a terrible injustice was done to them. As far as I could tell, these studies did not explore if there was a correlation between having been in therapy and being asymptomatic.

Ondersma et al. also challenge Rind et al.'s implication that the small effect sizes they found regarding the impact of CSA on mental health means that CSA shouldn't be an area of major societal concern. They contend that "small effect sizes can reflect very important effects for many people and impact large numbers of people if a phenomenon is relative common, as CSA appears to be." Dallam et al. also make the point that the effect size Rind et al. reported are only slightly smaller than the effect of smoking on lung cancer, yet no one claims that smoking shouldn't be a public health concern.

### Advocacy Science

Ondersma et al. criticize Rind et al.'s advocacy science, where all interpretation of data is geared toward relaxing moral standards, by ignoring or downplaying alternative interpretations. For example, they fail to cite the well-documented short-term harm following CSA that appears to be equivalent for boys and girls. They ignore alternative explanations for why college males may paint their childhood sexual experiences in positive terms (e.g., unwillingness by males to admit being victimized, successful indoctrination by the abuser etc.). They are careful to emphasize the aspects of their data that suggests that CSA is not harmful, and imply that it can be morally benign. This certainly appears to be an attempt to erode current societal views regarding CSA (e.g., that children can't make informed decisions about having sex with an adult).

Ondersma et al. cite another glaring example of this advocacy for relaxed moral standards, where Rind et al.

draw parallels between society's current attitudes toward CSA (including use of the term *abuse*) and 19<sup>th</sup> century attitudes toward masturbation [and] that adult-adolescent sex "has been commonplace cross-culturally" and may fall in the "normal" range of human sexual behaviors. It is difficult to avoid interpreting this as meaning that first masturbation and soon CSA may be revealed as simply another "sexual behavior" that must shake itself free of outdated moral baggage. Making such comparisons without highlighting the extreme and obvious differences between masturbation and CSA is troublesome.

Ondersma et al. also challenge Rind et al.'s appeal for the value-free term *adult-child sex* rather than *abuse*. They point out that

Scientists studying a range of social behaviors ó from rape to robbery to gangs ó have not previously found a need to alter these value-laden terms. A stranger who provides a willing child with heroin may not cause short- or even long-term harm; further, that child could report the experience as positive and might grow to

see heroin use as a normal and natural part of life. [Should we therefore give it the value-free label of] *adult-child drug sharing*?

### **Science and Morality**

Ondersma et al. explain the crux of the matter where Rind et al. went astray, as follows:

Science cannot provide answers to moral and legal questions. Scientific research can inform moral issues (e.g., that parents should place infants in car seats) but can never be the sole arbiter of them. Society's moral stance on CSA, as with e.g., child labor is appropriately based only in part on the potential for harm. The negative response to Rind et al. is thus something very different from an attempt to censor unpopular data. It is instead a rejection of the way those data are used to make implications in a sphere in which they have no authority.

### **Rind et al.'s Rebuttal**

Following the two critiques, the *Psychological Bulletin* published a rebuttal from Rind et al. (Rind et al., 2001). Much of the rebuttal consists of a very technical discussion regarding the research methodology they used in their meta-analysis. I do not feel sufficiently proficient in that area to comment much on the merits of those arguments. I would however, like to discuss some of the other issues discussed in the rebuttal.

Rind et al. paint their critics as representing the "victimological viewpoint." They not only question these dreaded "victimologists'" scientific credentials, they also insinuate that their motivations are less than pure:

Sexual victimology is a blend of social science, criminology, and victimization-based feminism that advocates social and legal reform. [S]exual victimology holds as a basic tenet that victimization, which is defined in increasingly broad terms, typically produces lasting psychological damage; this view invited the medicalization of victimization, which promoted expansion of therapeutic services that embraced victimological assumptions as a basis of treatment.

Rind et al. characterizes people who try to help victims of abuse in quite ominous terms indeed. They insinuate that their critics are motivated by career or monetary gain or by social conservative bias (they credit NARTH as being the first to criticize their study) rather than by genuine concern for the victims of abuse. This is reminiscent of the Catholic Church's claim that their current crisis is the doing of an anti-Catholic media! (Incidentally, the connection between those trying to help the victims of abuse of male and female and feminism, is not clear to me).

It is ironic that some of the arguments that Rind et al. marshal for their rebuttal are actually unintended indictments of the liberal agenda. For example, in acknowledging that both

men and women with a history of CSA are "slightly" less well adjusted than controls (this much they are willing to concede), Rind et al. point out in their defense that minors in general who have precocious sex are also less well adjusted. This is an argument in defense of their position that sex with children is not necessarily so harmful!!

Likewise, in defense of the idea that children can give informed consent, they cite an American Psychological Association (APA) statement to the U.S. Supreme Court. The APA, in support of their position that adolescents be permitted to consent to an abortion, declared:

By age 14 most adolescents have developed adult-like intellectual and social capacities. [to give] legally competent consent. [additionally] there are some 11- to 13-year olds who possess adult-like capabilities in these areas.

This is certainly a sterling example of advocacy science calling on advocacy science to defend advocacy science!

### **Liberals Deny their Advocacy**

Rind et al. (2001) insist that they are dispassionate scientists with no agenda. It is only their "victimological" critics who invoke "extrascientific" moral standards. It seems to me that social conservatives are more likely to be honest and open regarding their social agenda. Ondersma et al. (2001), for example, clearly stated:

[U]ltimately, CSA may best be determined sociologically through the consensus of a given society. CSA is not primarily a scientific construct. It is a moral and legal term.

The liberal approach, in contrast, is to deny the existence of their advocacy. For example, the APA's organizational journal published a special issue (2002) on the Rind et al. controversy. Most of the writers rushed to defend "academic freedom." They implied that Rind et al. were simply reporting scientific data that some reactionaries find uncomfortable. They simply ignored the blatant evidence that Rind et al. were pushing a social agenda!

### **The Historical Parallels to the Normalization of Homosexuality**

The APA continued the debate over Rind et al. on a special website ([journals.apa.org/comments](http://journals.apa.org/comments)). The following is an excerpt of my contribution to that debate (retrieved 7/31/02):

Many of the writers in the special issue regarded with a tone of derision those who worried that the Rind et al. study was the opening gambit in a deliberate attempt to decriminalize pedophilia. This in spite of the fact that one of the Rind et al. authors had published an earlier article in a pro-pedophilia Dutch journal and a pro-pedophilia

advocacy group did indeed use this study as scientific evidence for its agenda to legitimize pedophilia.

Has everyone forgotten how homosexuality became accepted as a normal form of sexuality? Does anyone seriously deny that the 1973 decision to remove homosexuality from the DSM was the result of political pressure rather than from dispassionate scientific inquiry? Have the gay rights advocates not conceded that their original plea for civil rights and tolerance was a part of a long-term plan to win first acceptance and then approval of homosexuality as "equal" to heterosexuality? More recently, it has even reached the point of attempting to **outlaw** helping those who wish to change their orientation to heterosexuality (Yarhouse & Throckmorton, 2002). All this began with just the plea not to oppress those with, what was then considered, a sexual deviancy. Have we all forgotten that at that time also, anyone suggesting that this was the first step in a slippery slope toward acceptance of homosexuality was accused of paranoia and "homophobia"?

Regardless of one's position on homosexuality, the fact that the scientific community was pressured and manipulated by proponents of sexual liberation is an undisputed fact. So the concern that apologists for "intergenerational sex" [or "adult-child sex" in Rind et al.'s preferred euphemism] may be trying to accomplish the same feat for pedophilia is not far-fetched and is not merely motivated by fund-raising needs (as implied by many of the special issue authors).

Many of the apologists for Rind et al. have pointed to the one sentence disclaimer in the article that even if pedophilia is usually not harmful to children, that does not necessarily mean that it should be legalized. I wonder if they protested the article by Dr. Mirkin in the *Journal of Homosexuality* (as reported in the New York Times, [Wilgoren, 2002]) where he clearly and unambiguously defended "consensual intergenerational sex." Dr. Mirkin, the chairman of the political science department at the University of Missouri (Kansas City), "[likened] the 'moral panic' surrounding pedophilia to the outrage of previous generations over feminism and homosexuality." In 1900, everybody assumed that masturbation had grave physical consequences.

What was the reaction of the academic community? The chancellor of the university, the faculty senate, the president of the university system and the American Association of University Professors, all strongly supported his "right to hold unpopular views," and he "is being celebrated as a hero for academic freedom." In their eyes the value of academic freedom supersedes the value of protecting children. The justifications used to defend Rind et al. do not apply here. This wasn't just reporting the results of a scientific study. This was taking a pro-pedophilia stance. The comparison of pedophilia to feminism, masturbation and homosexuality is exactly the slippery slope that the critics of Rind et al. have warned about. Where is the outrage? The silence of the academic community is deafening. Perhaps it's not paranoia or fund-raising after all!

## **The Liberal Discomfort with Morality**

I would like to conclude with Engelhardt's observation (as cited in Yarhouse & Throckmorton, 2002):

[S]ome have the strong moral conviction that strong moral convictions should not be had. Belief, commitment, and firm moral convictions are regarded as divisive at best and evocative of violence at worst. The world, they firmly believe, would be better off if there was less belief and moral conviction. Such individuals tend to be intolerant of those who would merely tolerate instead of accepting the diversity of moral convictions. Ironically, such partisans of the value of moral diversity can be as intolerant as many of the religious communities they will not tolerate because of their strong moral convictions. [p. 69]

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