Adolescence

Opportunity vs. Risk
1. Nuanced meaning vs. misunderstanding
2. Protective strength vs. isolation or violence
3. Love vs. sexual isolation or abuse

Adolescent Tasks
1. Integrate attachment & sexuality;
2. Construct hierarchical meta-models of multiple relationships;
3. Select and practice relationships.
4. Discriminate other people's strategies:
   a. Appearance vs. reality;
   b. Personal fit.

Parallel Arousal Systems

Arousal
- Pain
- Fear
- Anger
- Desire for comfort
- Comfort
- Bored
- Tired
- Sleep
- Depression

Sexual Arousal
- Sexual pain
- Sexualized terror
- Sexual aggression/submission
- Romanticism
- Affection
- Satisfaction
- Afterglow
- Sleep
- Numbness
New Patterns

1. Compulsive Self-reliance
   a. Social
   b. Isolated
2. Compulsive Promiscuity
   a. Social
   b. Sexual

Deception

1. Lie
2. Self-deception
3. Intentional deception
4. Involving & reciprocal deception

Mate Selection & Attachment

1. Integrate mate selection & attachment strategies
2. Patterning:
   a. Likes attract
   b. Opposites attract

Mate Selection Strategies

1. MALE: healthy, young, nurturant;
2. FEMALE: high status, rich, faithful.

Central Challenges

1. Integration of aspects of self into a coherent personality;
2. Integration of self into a network of relationships that vary in intimacy;
3. The outcomes are:
   a. Personal integrity,
   b. Interpersonal intimacy,
   c. Social reciprocity;

4. The risk is fragmentation and isolation.

**New Competencies**

1. Intellectual: Abstract reasoning

2. Physical:
   a. Sexual maturity
   b. Basic self-care

3. Emotional: Sexual desire

**Mental Change**

1. Abstract reasoning

2. Complexity
   a. Multiple causation
   b. Reciprocal effects
   c. Causation vs. responsibility

3. Self-reflection
   a. Stability of self across people and context
   b. Strategic variation in presentation of traits

**Sex and Non-verbal Communication**

1. Signals drawn from other behavioral systems
   a. Attachment
   b. Defense: aggression and submission
   c. Economy of evolution
   d. Over-determined essential functions

2. Gender strategies
   a. Male dazzles – as widely as possible
   b. Female chooses – as precisely as possible
**Failure to Master & Integrate Self-Protective Strategies**

1. Block out/distort needed information;
2. Reduce range of expression of personality;
3. Put control of outcomes in others’ hands;
4. Restrict range of adaptability.

**Perspectives**

1. Short-term adaptation
2. Long-term adaptation
3. Mental health
4. Ethics – prohibit probable behavior

**Sexual Abuse & Violence**

**Treatment Outcomes**

- Common understanding
  - Pedophilia is incurable
  - CBT reduces recidivism
- Empirical findings (Crighton & Towl, 2007)
  - Poor evidence base (2039 studies, only 66 were methodologically adequate)
  - 0-4% effect, chemical castration
  - Volunteers & inpatients worse
  - Homogeneous treatment for heterogeneous men

**Possible Negative Effects**

- Not assessed or reported!
- Compulsive compliance in institutional settings
- Confusion of self and other (A8)
- Less clarity of self than prior to treatment
- Augmentation of distortion

**Arousal Disorders**

- Comfort disorders
  - Confusion of comfort with sexual satisfaction
  - Confusion of comfort/sexual desire with anger or others’ fear
- Arousal reduction
- Arousal increase (depression reduction)
  - Confusion of anger & fear with well-being
  - Confusion of pain with excitement/pleasure
Sexual Disorders

- Precocious sexuality
- Promiscuous sexuality
- Inhibition of sexuality
- Sexuality with children
- Violent sexuality

Who are the sexual abusers?

Childhood:
- Battered mother/violent father
- Mocked by father for fear & caring for mother
- Non-protective mother
- Physical abuse by father (& mother)
- *Single parent home or loss of parent
- *Abandonment by father & mother
- Unsupervised, comfortless time out of home
- Victim of bullying
- *Sexual abuse (out of home)
  *Associated with more severe offending (i.e., children, strangers, with violence)

Who are the sexual abusers?

Adolescence:
- Sexual desire permitted in males
- Precocious peer sexual activity
- Equally vulnerable partner
- Rejection by appropriate sexual partners
- *Isolation and/or promiscuity
- Premature home leaving/adulthood
  *Associated with more severe offending (i.e., children, strangers, with violence)

Adult Functioning

- Distorted self-protective strategy
- Incest: Delusional idealization of mother, hate for father
- Caregiver abuse: Obsession with revenge
- Stranger abuse/violence: Intense shame & longing
- Confusion of sexual arousal with other aroused states
- Misinterpretation of children's signals (coy/flirting, sad/longing)
- Use of sexual function to:
  - Clarify arousal state
  - Achieve comfort (lowered arousal)
- Reversal parenting strategy
- Trauma intrusions when aroused

Strategies

- Utr(ds) A4,7
- Dp Utr(ds, dx) A4,7 [ina]
- Utr(p&ds) C5-6+ ??

Developmental Pathways

- Early development influences, but does not determine later development (not a trajectory)
- Serious disorder requires stage-salient series of dangers
- Pathways are explicable, not predictable
- Families are involved in developing disorder at all stages
- Sexual behavior is complex and can serve both sexual and attachment functions
- Change of attachment figures → risk, moves increases the psychological risk
- Chemical addiction disrupts learning & changes the brain
- Cortical integration creates the possibility of change - for self and future children
Treatment that fails

- Semantic treatment
- Manualized treatment (not individualized)
- Treatment in obligatory settings
- Focus on self-responsibility (shame)
- Focus on others’ feelings (denial of own feelings)
- Stopping the fantasies
- Authority-based treatment
- Shunning and marking

New Directions

- Prevention with young boys

- Offender treatment focusing on:
  - Experiencing an empathic relationship
  - The man’s feelings
  - The man’s self-protective strategy
  - The man’s information processing

New Directions, con’t

- Offender treatment focusing on:
  - Empathy for the boy he was
  - Resolution of past traumas
  - Recognizing coy & sad/lonely signals as triggers
  - Procedures for social/sexual satisfaction

The complexity of being a ‘victim’

- Not a random event
- Vulnerable children attract vulnerable men
- CSA is not entirely negative
- Not entirely positive either

Treatment Strategies

1. Opposite strategies …
2. Being explicit & integrating information regarding the self in relationships is crucial.
3. Implicit functioning requires treatment that illuminates behavior.
4. If one doesn’t know what they do or why, observation of oneself becomes crucial.
5. Generalizations cannot be used effectively until after observational data are available (to the self!)
Treatment Strategies, con't

6. Exploring the self in relationships requires (1) a relationship and (2) safety.

7. People who manage relationships poorly need fewer therapeutic relationships.

8. Counter-intuitive idea: The more problems a person/family have, the fewer professionals should be directly involved.

9. Abstract, verbal therapies are for those who can already integrate.