

Five Years Later:

Wishing I Knew Then What I Know Now

By Jennifer Morant, M.S.W.

The learning curve involved in doing juvenile Sex Offender Treatment is unlike any other. Having been a social worker since 1980 and a psychotherapist since 1985, one would have thought that working with adjudicated sex offenders would be a 'walk in the park' *with* good supervision. After struggling with "over normalizing" these young men, followed shortly thereafter by "over pathologizing" them, the deeper work of exploring their fantasies and offenses brought new meaning to both counter-transference and "taking care of oneself as a therapist".

What Working Alliance? The fine line to walk here is the ability to move from being groomed to having a genuine working alliance with these young men. Consistency, admitting one's own mistakes and confronting without judgment are crucial. I have learned to combine empathy with confrontation, which can be quite difficult with a young man who is very narcissistic and angry at the world. This technique works best when I use a soft tone of voice that implies curiosity and investigation. I have also been led to inserting structure to sessions, using exercises in building tolerance for exploring ugly issues.

As a clinician I had confidence in my capacity to sit together with clients, tolerating feelings that emerge. I quickly found that sitting in silence had new meanings when working with JSO's. Some guys would begin to self-induce dissociative states, while others would indulge in self-talk and fantasies, in the midst of appearing to be sitting in silence with feelings. I learned to address this as resistance, replacing my silence with encouragement and assurance that they would not die from facing their feelings. Although the kids often found this humorous, it hit home. The process came to involve restructuring their psychological and thinking patterns together, so that we could evolve to tolerating sitting in silence with feelings. I was often amazed at their ability to "catch up" on developing ego strength.

I've learned that daily disclosure journals enabled and forced (I'll admit to this) boys to look at and build tolerance for feelings about their offenses. Reviewing their entries from a mutual, investigation point of view empowered them, and made us a team, while breaking down abandonment issues. Of utmost importance, is my ability to have and convey my genuine appreciation for full disclosure.

My greatest weakness, doing this deeper work, remains wanting to push clients too fast and too far, particularly in the middle phase of treatment. The "over ventilating" that these guys can do is obviously not going to lead to a "flight into health". Instead, I lose

the trust and working alliance that I worked so hard to develop. That's when I find myself sincerely apologizing to the client for any trauma experiences that I have re-created as we process the relationship. A couple of guys have told me that I am, in fact, the first adult that has taken responsibly for harming them.

Speaking of Adults: I thought the kids were the experts on denial! Parents, who are using denial to cope, can make or break a young man's treatment program. Assessment of parental personality disorders and ego strengths guides my family therapy. The success cases are obviously those where the family and the young man grow together. The more difficult cases are the ones where the young man becomes healthier than his parents. Then too I have also learned that although reunification and relationship building tend to be the major goals of family therapy, separation and individuation is paramount to the kid; finding an identity other than sex offender in this convoluted family.

There are a few techniques that have worked for me; the list of what doesn't work is far too long. I try to balance my own and the kid's wishes and fear, with reality, when the task is finding missing parents or motivating resistant parents to come for sessions. I have been fairly successful getting some family involvement in most cases, if even only via telephone, relying on creativity, optimism and my professionally perfected intervention of guilt induction. Probation Officers, who are a crucial part of the treatment team, can be tenacious agents in tracking down and bringing in some of the parents for the kids.

Once the parents are involved, I find that by requiring the young men to read their disclosure journals in session, helps to break down parental denial. It is best to parallel the family sessions with the young man's JSO work, following the sequence of where he is in his JSO workbook and individual and group therapies. I also try empowering the young man by having him write out agendas for family sessions, while encouraging the parents to do so, as well. Sessions can be mini versions of "the good, the bad and the ugly", with processing, of course. The "good" generally is the result of SO workbook assignments and other progress. The "bad and the ugly" relate to addressing surface behaviors and underlying issues, as well as, where the client is in relation to his sexual deviance. If feasible, we obtain updates on the victims, which I try to confirm by checking with the victim's therapist. If a visit is to follow after the session, then I like to end the family session with the young men reviewing red flags and goals.

As family treatment progresses, I have more opportunities to sit back and happily watch the client educating his parents, while the parents are confronting and supporting their son; a process that has been modeled in family sessions repeatedly. Homework assignments for mom and/or dad that parallel the young man's program can be helpful. Timelines, autobiographies, anger cycle charts, journals and supported relationship rebuilding in family sessions have helped bring self-discovery about. Lastly, if a parent has him or her self been victimized, and is coping well, I will organize a conference with that parent and the kid's victim prior to beginning the victim work with the youthful offender.

I am also mindful to praise changes and growth in both the client and parents. I will also periodically have each family member rate how they feel family therapy is going and what else is needed.

Deviant Sexual Fantasies and Masturbation Patterns right after breakfast? I used to believe that a discussion, about these issues at 8:30 am, was way too early. I have since learned it is never too early, and that this work has to begin immediately and be covered consistently. As my comfort level has increased, so has the depth of disclosures the boys would make. I learned to ask detailed questions and approach the fantasies with a “scientific” investigation approach. By conceptualizing my role as “scientist”, I was better able to process personal levels of shock, disgust and rage. Shifting to pure curiosity allowed the boys to feel safe and made them more willing to take risks.

Psycho-education about fantasies and arousal with emphasis on the benefits of finding patterns, learning about the role of other paraphilias and helping the young man “fill that toolbox”, helps him progress from external to internal motivators. Depending on the young man’s issues, I address the deviant sexual self, while encouraging a healthy sexual self, using his future as a motivator.

With regards to masturbation patterns, I have found that unmotivated youth that compulsively masturbate are the most difficult group with which to work. With several boys, after approximately ten “urge” control sessions, fifteen covert sensitization exercises, and three masturbation contracts later, the compulsion persists. One young man masturbated to the point of developing a hernia.

It is important to align with my clients’ personal struggles. One of the best motivators is planning for their future and setting long terms goals together as part of the ongoing discharge planning process. In the beginning phases of treatment it takes some convincing that these fantasies are much more fun to have.

Counter-transference versus Reality: The reality is that when most people ask me what I do for a living at a social event, many politely excuse themselves after I answer. With family, friends and co-workers political discussions usually take over, from which I also politely excuse myself, or try to anyway. Doing this work requires that I take care of myself. A few of the helps in my self-repair tool kit include growing Coleuses, doing research (when I feel lost or stuck with a kid) and Walt Disney movies with happy endings, accompanied by Hawaiian popcorn. I have also been able to identify my major counter-transference issues, while at the same time permitting myself to simply have anger, rage, sadness, disappointment and feelings of total incompetence that are human reactions to working with abused children.

I have never been bored in a session and know now that I will never “have heard it all”.

[AT the time she wrote this Jennifer was an MSW had been a facility social worker at Martins’ Achievement Place for 5 years. She was promoted to Clinical Director shortly after the article appeared in the April 2002 issue of “Perspectives.”]