

# THE STYLE FACTORY

INSIDE INDUSTRIA SUPERSTUDIO

BY MICHAEL GROSS





# Close Encounters

**L**AST YEAR, UPPER WEST SIDERS WERE horrified when an 11-year-old boy on his way to school was kidnapped and sodomized. The child's ordeal was compounded by the fact that the man who attacked him had AIDS.

"But in *my* neighborhood! I mean, it's . . ."

"Terrible!" Another mother finishes the sentence on a recent segment of the CBS News show *Street Stories*.

The crime was, indeed, terrible . . . unspeakable . . . a mother or father's worst nightmare. But little do most parents realize that the sexual bogeyman that they *should* fear is almost never the disheveled stranger who lurks in the shadows.

□ After her first week at a reputable pri-

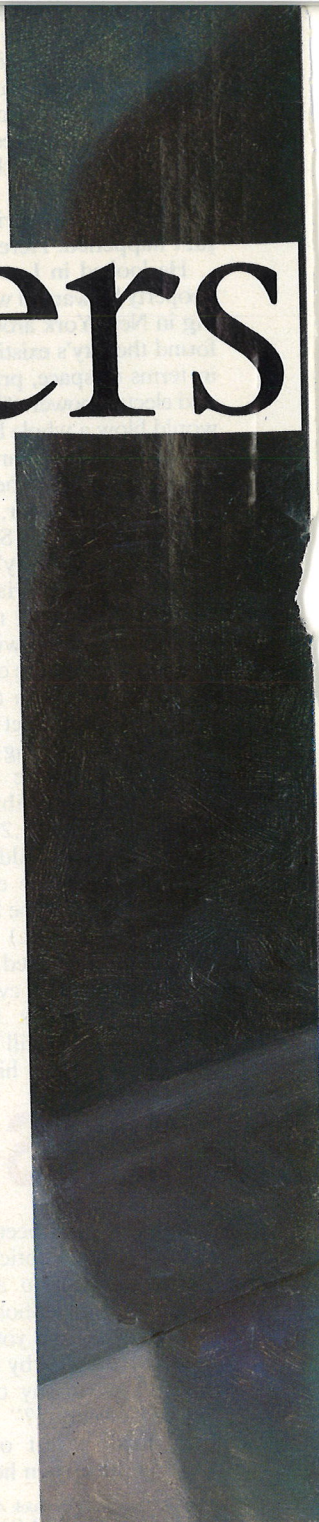
ate school in Manhattan, 8-year-old Alexandra\* didn't want to go back. A 9-year-old had been harassing her: "He said he wanted to hump me." She wasn't sure what "hump" meant, but she was ashamed at being singled out.

□ Seven-year-old Tommy complained that his baby-sitter "always plays with my penis when she gives me a bath." His mother responded, "Oh, no—she's just trying to clean you." Tommy kept protesting, "That's *not* what she's doing." Mom finally got suspicious when her son said, "But she's not even using soap."

□ Twelve-year-old Ben felt "special" when his junior-high-school coach invited him to his house to see football films.

\*All names of children, parents, and offenders—as well as some identifying details—have been changed.

**HOW TO PROTECT YOUR CHILD FROM SEXUAL ABUSE • BY MELINDA BLAU**





day, traveling around the world. He had money to burn. It was a far cry from shooting agitprop for the Communists. "Politics weren't a priority anymore, but my role as a citizen was," Ferri says. "You try to build something without exploiting other people. That's always been a priority."

The recession sparked Industria's expansion to America in 1989. "In Italy, we were in the middle of a crisis, not facing the problem, still living on the fake feedback of the easy eighties," Ferri says. He saw that the economic malaise would cause magazines and newspapers to watch their photography budgets. New York's Superstudio would provide an alternative to expensive location shoots.

"America was looking ahead," he says. "The only way to come out of a recession is with guts, investment, and creative ideas. There's no other way out. I'd made so many mistakes. I said, 'I'll make another studio and do it right.' The first time, it just happened. Here, I thought about it."

He looked in Los Angeles first, but the property he wanted wasn't available. Working in New York around the same time, he found the city's existing studios inadequate in terms of space, privacy, level of service, and electric power. "The lights I usually use would blow a whole building out," he says. "A star ends up in an elevator with people they don't want to be with."

Ferri and a realtor, Karen Hoke, walked uptown from Wall Street along the West Side, where the city's light lasts longest. Hoke, now Industria's special-events director, saw the FOR LEASE sign on an old garage. She, along with Frances Grill and Grill's son, Joey, the owners of Click Models, soon signed on as a minority shareholder, and architect Deborah Berke and Ferri started looking beyond the oil and grime. Walls were blasted out. Bathrooms, indestructible concrete floors, heating, and new 1,200-amp three-phase power lines were added. Each studio got double doors, wide enough for a car to drive through. (Anne Klein has even trundled in an elephant.)

The studio opened in February 1991. With Hoke running events, studio manager Carla Popenfus booking photographers, and Joey Grill watching the business, Ferri turned his attention to the



Model Patricia Velasquez in Ferri's forthcoming book, *Acqua*.

make sample sweaters like the ones models wore, borrowed from their boyfriends, a coat like one his grandfather once had, and jackets like those worn by Sardinian bandits.

Just as Ferri stripped his models of clothing to find their essential personality, he made clothes that enhanced individuality instead of overwhelming it—a sort of couture version of the Gap. The line was

the wrong collection. It's the *attitude*." Or rather, its absence.

Our interview is ending. A car is waiting to take Ferri to the airport to catch a flight to Denver for an *Acqua* AIDS fund-raiser. Then he's off to Big Bear, California, for a shoot. I ask Ferri, who is separated from his wife of ten years and sees his 8-year-old daughter only when he's in Italy, if he has time for

## MODELS WHO CAME TO HIS STUDIO—IN THE NUDE.

clothing line he'd been toying with since 1989. "You start noticing how girls dress when they come to a shoot," he says. "The clothes you photograph, they wear only onstage. Then you look at yourself. You're surrounded by men's fashion, but you don't wear any of it. How come? What am I wearing?"

Ferri made a list of chic basics and stopped at 300. Then he hired someone to

launched with a fashion show at Industria in February. In the photos on the tags that come with the clothes, the female model is nude.

This is fashion without façades. "These clothes have to be as functional as cameras and lights," says Ferri. "That's why we show them here, in a brick room. If we needed a better showroom to sell this collection, it would be

a private life. In reply, he talks about his business. "There's no separation, no dichotomy," he says. "I live to build a harmony between myself and what I do." How does he relax? "Work. Shooting pictures. I know how to do that. I enjoy it. Yes, I stop. But I never stop thinking. Would you tell a beaver not to go from one dam to another? That's my life. You don't have a choice. You do what you believe in." ■

Photographs: top, from the book *Acqua*, by Fabrizio Ferri; opposite page: top center, Ted Hardin; bottom, James McGoon; all others; Bruno Rinaldi.





PAINTING BY MAX GINSBURG



# close encounters

Over the next several months, under the guise of teaching Ben about sex, the coach slowly progressed from explanations about masturbation to mutual masturbation and, finally, to oral sex.

□ Nine-year-old Mary's father bought her sheer teddies and asked her to "model" for him. He also rented porno tapes, suggested that they watch them together, and started to fondle his daughter. He told her not to tell. "Mom wouldn't believe you anyway."

The sexual abuse of children is a major public-health crisis—more pervasive than AIDS. In New York City alone, more than 3,300 allegations of sex abuse were reported last year to the New York State Central Register for Child Abuse and Maltreatment (SCR)—"the hot line"—but that is only a fraction of the actual cases. Most children never tell. According to the estimates of most researchers and child-welfare groups, fewer than one in four incidents is reported; families who have the resources to stay out of "the system" are the least likely to report.

A more accurate indication of the problem comes from retrospective studies of adults in the general population who are asked to recall incidents of sexual abuse in their childhood. Researchers analyzing these studies estimate that as many as one in four women (half of all handicapped women) and one in seven men have been abused by the age of 18. Some believe the ratios should be even closer—that boys, taught to "act like men," are more likely to tough it out than to tell.

"I simply choose not to believe sexual abuse can be that common," declares one mother. Many parents find sexual crimes against children too depraved to contemplate. Unable to accept the reality, they do little to educate themselves and less to protect their children. Unwittingly, they are perpetuating the problem.

## How Does It Happen?

**S**EXUAL ABUSE OF CHILDREN includes noncontact abuse like harassment, exhibitionism, and voyeurism. Fondling, oral sex, penetration by objects, intercourse, and sodomy are considered contact offenses. Sometimes force is involved, but more often children are tricked, bribed, and coaxed into these acts over a period of months, even years.

Why is it so hard to believe a grown man who claims that when he was 9, the scoutmaster he had trusted taught him how to perform fellatio; or a woman who says her older brother forced her to have intercourse with him? Because most people are uneasy dealing with sex, and, just as important, recognizing this problem

makes the presence of pain and perversion in the world—and in our

own families—too overwhelming to bear.

It's infinitely more palatable to think that childhood sex abuse is perpetrated only by sicko strangers, but evidence to the contrary is staggering: By most experts' accounts, between 85 percent and 95 percent of all sexual crimes against children under 18 are committed by someone the child knows. And 80 percent to 90 percent are "intrafamilial": The perpetrator is a parent, sibling, grandparent, aunt, uncle, or cousin, or is someone close to the child, like a stepparent. Perhaps even more shocking, as many as one third to one half of these abusers are under 18 when they commit their first crimes. And some offenders are women.

Childhood sexual abuse has been widespread across cultures and throughout history. In 1896, Freud cited "premature sexual experiences" as a major cause of "hysteria." But within a year—because of his colleagues' skepticism and censure, as well as his own dread of the social implications—the father of psychology recanted, claiming that incest occurred merely in patients' minds.

Only in the early seventies, when adult female rape victims started to talk about their childhoods, did incest begin to invade public consciousness. Psychologist Walter Bera, a marriage and family therapist who researches sexual abuse, points out that in the past few years, new areas of awareness have emerged: child and teenage perpetrators; female offenders; male victims; and the prevalence of cluster abuse. Bera notes that Ben's experience with his coach, who violated an estimated two dozen boys over the course of his prurient "career," is typical of cluster abuse.

Offenders often prey on boys like Ben, who was hungry for adult attention because his own father was somewhat distant and preoccupied. "Typically, the offender makes the boy feel special," Bera says. "By the time he sexualizes this surrogate-father relationship, the boy is so invested in the relationship that he can keep it a secret out of loyalty, confusion, or fear of being, or becoming, a homosexual."

Bera stresses that these offenders are rarely homosexual; often they are married men with children of their own. (Also, there is no evidence that this kind of abuse causes homosexuality.)

**O**NE REASON SO MANY SEXUAL abusers of children can continue the abuse without detection is this step-by-step grooming process, a pattern in most protracted cases, including incest. Some pedophiles prefer preadolescent boys, but for many, the victim's age and gender are unimportant. The abuse often spans several years, escalating over time and as the child develops. Mary's father, for example, began to abuse her when she was 7, years before he fondled her.

In families where there's incest, there is often no respect for privacy and poor boundaries between the generations. Parents usually begin the invasion by watching the child in the bathroom or as she undresses—or leave their doors open, exposing the child to adult sexuality at an early age.

Sexual abuse breeds in families for a number of reasons. There is a high correlation between sexual violation and substance abuse. Children also may be at risk in staunchly religious or rigid, authoritarian families, or where there is a lack of respect for their needs, or when parents are survivors of abuse themselves but haven't dealt with their own pain.

There is a strong cultural bias against seeing women, especially mothers, as sexual abusers. Most literature has focused on male offenders. Harvard psychiatrist Judith Herman, author of *Trauma and Recovery*, believes that "female perpetrators are still



**Many parents find sexual crimes against children simply too depraved to contemplate. Unable to accept the reality, they do little to protect their children.**

relatively unusual."

Walter Bera's studies show that "about a quarter to a third of male victims report female offenders. Teenage girls and women have ready access to children, and some of them do abuse." Bera suspects that as more men "break through their socialization" and come forward about their abuse, we will learn more about female perpetrators as well.

Why do abusers abuse? One obvious but repugnant answer is that they enjoy it, see children as objects, and love the sense of power and control. But researchers rec-



they were sexually abused as children. And some young victims become aggressive, "abuse reactive" children who imitate the perpetrators of their abuse. But, Herman asserts, "the idea that somehow all abusers were abused themselves is an explanation that separates us from them."

One element all sex offenders share, however, is the culture in which they learn to abuse. "Parents socialize their children differently," says James Maddock, associate professor of family social science at the University of Minnesota. "We give men power and women the burden of control, and that socializes kids into a rape culture. Girls are taught that they have to take responsibility. But boys are taught that their sexuality is out of control—it's in their genes."

The cultural factor helps explain why there are more male offenders and why abused men are more likely to identify with the power position and become offenders themselves, while women, who feel less powerful anyway, are more likely to suffer repeated victimization. Maddock says it also explains why sex abuse in general is so rampant.

### Who Will Teach The Children?

**W**HILE PARENTS CAN'T make children immune to sexual harassment or sexual abuse, they can improve their chances by teaching their children about sex. Clinical psychologist Philip Morse, who works with victims and perpetrators, recalls one family in which a 12-year-old girl and her 8-year-old sister had been sexually molested for five years by a cousin four years older. "It took something dramatic to get the parents to notice. The girl, a good student, was failing in school. The sexual abuse was then validated by a pediatrician, who identified vaginal as well as anal contact."

Morse explains that this was, by all outside indicators, a "good" family, but the parents had spent no time talking to the

children. The children went to Catholic school, so they had no discussions about sex at school or at home.

Many parents would rather let "experts" tell their children about sexual abuse—and, therefore, about sex. In 1986, the New York City Board of Education mandated a sex-abuse-prevention program beginning in kindergarten. But teachers are often no more comfortable talking about sex than are parents.

Finkelhor, who is conducting a study to find out whether these programs actually prevent abuse, says that "sex-education programs encourage kids to tell after the fact, and they sensitize them." Thus, school programs may be a good springboard to let parents open up discussions, but the information still needs to be reinforced over the years. Clearly, the best

prevention begins at home.

"Be an 'askable' parent, so your children will talk to you," urges sex educator Sol Gordon. "If you convey the message that a knowledge of sex is harmful, your children won't come to you when they have questions or fears."

### What to Say

**E**VEN THOUGH PARENTS DON'T hesitate to warn children about being kidnapped by strangers, many worry that cautioning them about sex abuse will frighten them. But studies show that the majority of children do not show signs of anxiety. Flora Colao, who directs the Greenwich House Children's Safety Project in Manhattan, adds, "Infor-



Collage photographed by Paul Manangan



# Where to Turn for Help

## Advice and Referral

**To report suspected sexual abuse:** NEW YORK STATE CENTRAL REGISTER for Child Abuse and Maltreatment (the New York State hot line), (800) 342-3720.

**For preventive information and to find out about available resources and services:** New York State Department of Social Services, (800) 345-KIDS.

**For information, advice, and referrals to doctors or counselors:**

The Prevention Information Resource Center (800-342-PIRC) of the New York Federation on Child Abuse & Neglect, a chapter of the private, nonprofit National Committee for the Prevention of Child Abuse, which also has an information hot line, (800) 422-4453.

Victim Services Agency (577-7777), which has offices in every borough and a 24-hour hot line; operators can also explain the varied kinds of help Victim Services provides, such as victim counseling and court escorts.

The district attorney's offices in each borough will give information to parents or to abused children, including whether or not to press charges; some also have counselors on staff. *In Manhattan:* Sex Crimes Prosecution Unit, 1 Hogan Place, 335-9373; *in Brooklyn,* Crime Victims Counseling Unit, Supreme Court Building, 360 Adams Street, Room 773, (718) 802-2712; *in Queens,* Special Victims Bureau, 80-02 Kew Gardens Road, (718) 286-6505; *in the Bronx,* Sex Crimes Bureau, 215 East 161st Street, (212) 590-2323; *in Staten Island,* SAAF Unit, 36 Richmond Terrace, (718) 390-2682.

The Safer Society Program, R.R.1, Box 24-B, Orwell, Vermont 05760, will provide information to anyone looking for victim or offender treatment resources nationwide. Call (802) 897-7541 Monday through Friday, 9 A.M. to 5 P.M.

The Children's Rights Council (formerly the National Council for Children's Rights), 220 "I" Street, N.E., Suite 230, Washington, D.C. 20002, (202) 547-6227, an advocacy group for children, offers resources and referrals to psychotherapists and lawyers who can help parents distinguish between real and false allegations of child sexual abuse in custody battles or after divorce.

## Treatment Centers

### Specialized Hospital Units

THE FOLLOWING HAVE TEAMS OF MEDICAL AND PSYCHOLOGICAL SPECIALISTS who work together to evaluate and treat sexually abused children, their families, and, in some cases, offenders. Parents can call for information or physician referrals or to set up an appointment.

Columbia Presbyterian Medical Center, Child Support Clinic, Vanderbilt Clinic, fourth floor, 622 West 168th Street. Information: 305-2393.

Bellevue Hospital, Child Protection Team, Pediatrics, 1 South Nine, 462 First Avenue, at 27th Street. Call the Child Protection Coordinator, Fran Levitt, 561-3151.

Montefiore Medical Center, Child Protection Center, 111 East 210th Street, the Bronx. Call Leah Harrison, M.S.N., C.P.N.P., 920-5833.

New York Hospital-Cornell Medical Center, Child Protection Team, Pediatrics, 525 East 68th Street, Room 53, 746-3305.

North Shore University Hospital, Family Crisis Program, Department of Psychiatry, 300 Community Drive, Manhasset, (516) 562-3005.

The Long Island College Hospital Rape Crisis Intervention Program, sixth floor, 340 Henry Street, Brooklyn. Staffers see adolescents who have been sexually abused. Call (718) 780-1459.

### Other Treatment Facilities

THE ACKERMAN INSTITUTE FOR FAMILY THERAPY, 149 EAST 78TH STREET, accepts families for treatment in its Incest Project; call Harriet Sheer, intake staffer, for a phone consultation, 879-4900.

Greenwich House Children's Safety Project, 27 Barrow Street, offers personal-safety classes for children, counseling support groups, and in-school presentations; call director Flora Colao, 924-1091 or 242-4140.

CAP (Child Abuse Prevention) Behavior Associates, Inc. (779-3126), a private psychotherapy practice specializing in adult and child victims and offenders, was founded by Ken Cullen, CSW, who coordinates the sex-offender-treatment program at Bronx-Lebanon Hospital and directs the child-abuse-prevention in-patient program at Gracie Square Hospital.

Child Sexual Assault Counseling and Prevention Program, Kingsbridge Heights Community Center, 3101 Kingsbridge Terrace, (718) 884-0700. Available to Bronx residents only, but Lisa Lubell, phone counselor, will give parents in other boroughs information or make referrals.

Child Sexual Abuse Treatment Center, Westchester Jewish Community Services, 141 North Central Avenue, Hartsdale, (914) 949-6761, treats intrafamilial-abuse victims and offenders; call director Patricia Lemp.

## Sex-Abuse Education And Prevention

PARENTS AND PARENT GROUPS SHOULD ENCOURAGE SCHOOLS TO stress sex-abuse prevention and to institute programs to help raise children's consciousness.

The National Committee for the Prevention of Child Abuse and Neglect, 332 Michigan Avenue, Suite 1600, Chicago, Illinois 60604, (312) 663-3520, publishes a variety of educational materials on child-abuse prevention; free catalogue available (1-800-835-2671).

People Against Sexual Abuse, Inc. (PASA), 26 Court Street, Suite 1209, Brooklyn, New York 11242, (718) 834-9467, offers a personal-safety course for kids 7 to 10 and parent workshops as well; contact Kathy Dee Zasloff.

The Child Abuse Prevention Program, Inc., 2 Metro Tech Center, Suite 5700, Brooklyn, New York 11201, is a not-for-profit agency that uses life-size The Kids on the Block puppets as part of its abuse-prevention presentation. Parents can obtain information, but booking must be done by a school; free to schools in Manhattan, Brooklyn, Staten Island, and the Bronx. Call Marion White, (718) 834-6655; or get in touch with The Kids on the Block directly, Kate Ferrall or Maggie Mullikin, (800) 368-KIDS.

## Helpful Books

### For Children:

*A Better Safe Than Sorry Book*, SOL AND JUDITH GORDON (PROMETHEUS Books, 1992).

*I Told My Secret*, Eliana Gil (Launch Press, P.O. Box 5629, Rockville, Maryland 20855; 800 321-9167. This publisher also has other books for survivors).

*No More Secrets for Me*, Oralee Wachter (Little, Brown & Co., 1984).

### For Parents:

*Raising a Child Conservatively in a Sexually Permissive World*, SOL and Judith Gordon (Fireside, 1989).

*Your Children Should Know: Teach Your Children the Strategies That Will Keep Them Safe From Assault & Crime*, Flora Colao and Tamar Hosansky, available in libraries or from the Greenwich House Children's Safety Project (see above).

*When the Bough Breaks: A Helping Guide for Parents of Sexually Abused Children*, Aphrodite Matsakis (New Harbinger Publications, 1991).

*When Your Child Has Been Molested: A Parents' Guide to Healing & Recovery*, Kathryn B. Hagans and Joyce Case (Lexington Books, 1990).



that her father's behavior was inappropriate when a friend told her about sex with her 17-year-old boyfriend. "That's nothing," the girl replied. "I go to bed with a 34-year-old."

Leah Harrison, a pediatric nurse-practitioner who is the assistant director of the Child Protection Center at Montefiore Medical Center, says that when parents encourage kids to use "secret words" for their genitals, "that sets up a system where the kids learn that those are really dirty words, and they shouldn't say them." Instead, when children are young, parents should help them develop a basic vocabulary to discuss sex: vagina, vulva, testes, penis, buttocks, anus, breasts. Good books offer helpful guidelines (box, page 58).

Start early. In a study conducted by Finkelhor in 1984, parents guessed that the optimal age to have these talks was when the child was 9. But by then, according to most studies, more than a third of the victims have already been abused.

Do not say, "Never let anyone touch your buttocks, your anus, or your vagina/penis." That makes it the child's responsibility to stop an offender. Instead, say, "No one is allowed to touch you." Philip Morse warns, "You should be careful not to inhibit masturbation or prevent children from exploring their own sexuality, so remember to add, 'It's okay for you to touch yourself there.'"

Children should know that it's not just a matter of "stranger danger"; someone they know and love might try to touch their bodies in ways that feel "wrong." Jeffrey Fishman, a family therapist in Amherst, Massachusetts, who specializes in male

en them permission to act on their instincts. In *Your Children Should Know*, Flora Colao and her co-author, Tamar Hosansky, point out that children need to know that it's okay to run, bite, hit, kick, or make a scene to avoid danger.

"Some parents are uneasy and confused about that, because it changes the adult-child power relationship," observes Kathy Dee Zasloff, executive director of People Against Sexual Abuse, Inc. "But offenders are clever. You need to put kids in charge of the decisions that affect their own lives."

**O**PPORTUNITIES FOR EDUCATING children crop up every day, says Mary Jo Barrett, director of Midwest Family Resource. "My 8-year-old son was rolling around on the floor with my 10-month-old daughter, and she started to sound uncomfortable. I called out to him, 'You need

## close encounters

"When I was younger, Grandpa touched my body in ways that made me feel uncomfortable. That was wrong. I don't know if he would do that to you, but if he does, tell him no and leave. Then tell me, and I will take care of it."

Or if your 6-year-old says he doesn't like "the games" Cousin Billy plays, check randomly on the children whenever they're out of sight. Nothing discourages an offender, especially a young offender, as much as the threat of detection. Parents can also choose not to go to a family gathering, or decide never to leave their child alone with a particular relative.

It's also good to remind children of their limits, as do Sol and Judith Gordon in their *A Better Safe Than Sorry Book*: "The really bad thing is that sometimes even when you

say, 'No!' a grown person might force you to do things you don't want to do." Flora Colao adds, "It is important to admit to ourselves and to our children that the world is not always a fair place. Explain that sometimes bad things happen to good people," Colao says, noting that many children think they are "bad" for letting themselves be coaxed into abusive situations, "and that sometimes good people do bad things."

The most important message is that children will never get into trouble for telling. It is always the fault of the adult, the older child, or the person with more power. Between opposite-sex peers, that's usually the boy.

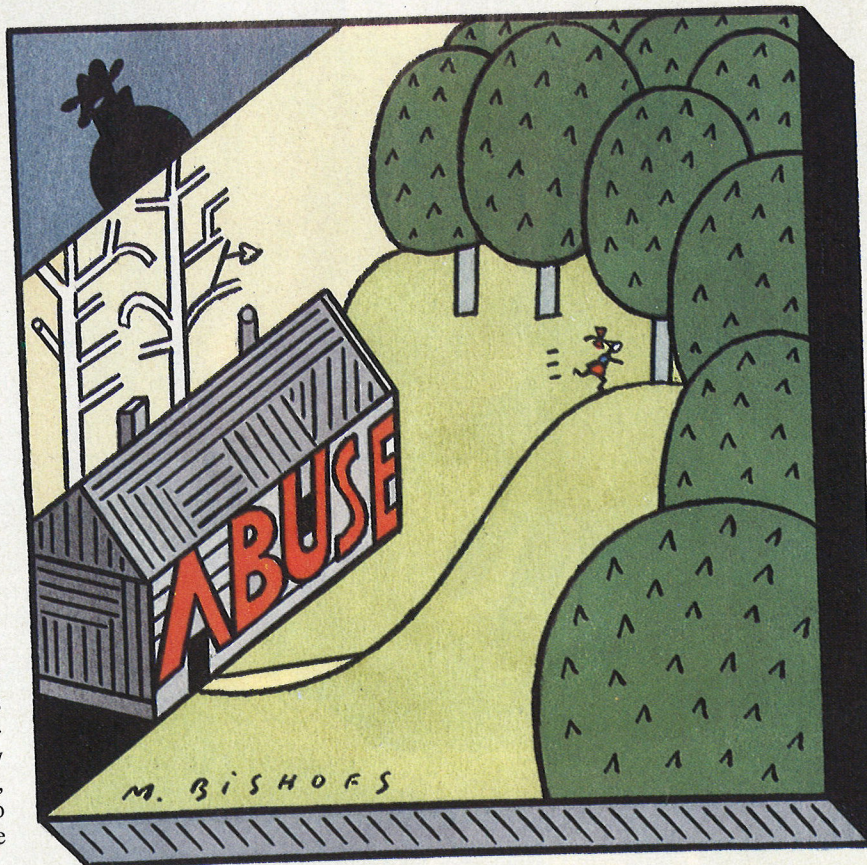


ILLUSTRATION BY MARIS BISHOFS



But most children *don't* tell. Leah Harrison ticks off the most common reasons: "Kids don't realize they're being abused; they're afraid; they fear punishment; they're physically and/or psychologically dependent on the abuser; they have been bribed to keep the secret; they feel ashamed; they fear they won't be believed; they fear the offender will hurt them or someone close to them; they feel guilty; they love the abuser or fear it will destroy the family; they don't have the words to tell; or they block the whole memory well into adulthood."

Harrison insists, "Children tell in bits and pieces, and then they listen and watch for a parent's reaction. Many kids say to me, 'I told my mommy and she said that couldn't be,' so they stopped telling."

In contrast, Alexandra's parents viewed her offhand question "Would you be upset if I didn't tell you something?" as a red flag. When her mother asked, "Is it something that upset you?" Alexandra began to cry.

Often, children's attempts to tell parents that they have been abused come out in the form of questions like Alexandra's or cryptic remarks, like 'I get scared when Uncle Hank tickles me.' Pediatrician Philip W. Hyden, the director of New York Hospital's

Child Protection Team, maintains, "If parents let comments like that go by, children think that either the parent doesn't want to hear any more, or they're saying something that upsets the parent." Hyden suggests asking specific, open-ended questions: "Tell me why Uncle Hank scares you. Can you show me where he tickles you?"

Children tell in nonverbal ways, too, so when they balk at going to a particular house or throw a tantrum when they hear that someone is coming to visit or baby-sit, parents shouldn't automatically assume that the problem is separation anxiety. They should ask what happens when they're not around, including, "Has So-and-So ever done anything that you don't like?"

Despite the impression given by the headlines, day-care abuse represents only one percent of all child-abuse reports. Perhaps media attention has blown the minority of day-care cases out of proportion, or perhaps children under 5 lack the language to reveal their terror. Since that may be so, parents should drop in—unannounced—and closely observe their children's behavior. Child psychiatrist Lenore Terr, author of *Too Scared to Cry*, points out that sometimes traumatized children make drawings or re-enact the abuse in a kind of obsessive,

ritualized play that repeats—and therefore reveals—part of the trauma. One 5-year-old consistently drew anatomically detailed pictures of naked adults. The parents thought nothing of it until the police, investigating the day-care center where the child and her two older brothers had been enrolled three years before, showed them photos of their 16-month-old child, naked and being poked on the abdomen by an erect adult penis.

The 5-year-old told Terr, "Someone scared me once—with a finger part." Seeing the picture, Terr put the pieces together: "She fears 'finger parts,' her 15- to 18-month-old word for penises."

Long before Terr saw her, however, the little girl and her older brothers (who, it turned out, had also been abused) were trying to "tell." The boys repeatedly complained about the food at the center, and all three "seemed to cry on weekday mornings." Several years later, the youngest one was still telling—in her drawings.

When children continually draw naked adults, role-play that their dolls are engaged in sexual acts, speak or act seductively, or are sexually aggressive, it usually indicates knowledge or experience beyond their years. "There's no harm in asking a kid, 'Where did you learn that?' But don't get





you hear him saying, 'Suck my penis,' I'd wonder about it."

On the other hand, parents should be cautious. Psychiatrist Sandra Kaplan, director of the Family Crisis Program at North Shore University Hospital, warns that seeing "highly sexualized" behavior is "rare" and that other behavioral signs, such as nightmares, bed-wetting, regressive behavior, lack

of appetite, depression, sudden fears, psychosomatic illnesses, or difficulties in school are "nonspecific symptoms," common to a variety of stressful situations. Moreover, physical signs—itching, swelling, or redness in the genital/anal area or the mouth, unusual or offensive odors, bruises, bleeding, discharge, difficulty walking—are present in only 30 to 40 percent of all cases (fondling, having the child masturbate the adult, and many other acts don't leave physical traces). And sometimes these symptoms are not signs of abuse.

**O**BVIOUSLY, MANY PARENTS will not be able to put the various clues together until it's too late. But all parents must believe their children when they do tell. The professionals agree: *Children rarely lie about sexual abuse.* The one exception may be an allegation that involves custody, in which case the child could have been coaxed or coerced into fabricating an allegation against a parent. But even in divorce wars, New York Family Court Judge Jeffrey H. Gallet is quoted as saying, "a horrifyingly large majority are not [false]."

Sadly, many parents repeatedly refuse to acknowledge information about their children that is too painful to accept. Flora Colao cites several stages of denial: *denial of the facts* ("I live in a good neighborhood, so this couldn't happen to my child"); *denial of awareness*—not computing what you already know about a potential offender ("He'd never do it again") or refusing to believe or investigate your child's claims; *denial of responsibility*—continually put-

**the family doctor.  
Note, however,  
that only 30 to 40  
percent of all child  
victims show  
physical signs of  
abuse.**

effects ("His aggressiveness has nothing to do with the abuse").

On the other hand, Colao says, parents can also go to the opposite extreme. "One mother was beside herself when her child said she had 'a secret.' It turned out the kids were smoking!" And parents who were themselves abused as children may become overly concerned when

a child reaches the age at which they were abused. "I have seen children brought in for multiple pelvic examinations, crying, insisting that nothing happened."

In varying degrees, all children who are sexually abused feel shamed, humiliated, and betrayed; they are angry and confused. They invariably think that they are responsible. What they need most at the moment of disclosure is the support of an adult who doesn't doubt them. "Take the child in your arms, give her a big hug, and say, 'I'm glad you're telling me,'" says Sol Gordon. "Then talk about it quietly."

"Don't underestimate the complexity of feelings a child may have toward her abuser—affection as well as rage. It's impor-

tant to let her know that it's okay for her to express a wide range of feelings."

points out Marcia Sheinberg, director of the Incest Project at the Ackerman Institute for Family Therapy.

"Parents have to prepare themselves for an overwhelmingly powerful reaction," warns Jane Gilgun, who adds that, contrary to popular opinion, many mothers really *don't* know what's going on. "Some go into shock at first and distance themselves. Others are immediately vengeful and angry. All feelings are normal, but make room for the child's feelings first." Among the worst things hysterical or disbelieving parents say are "Are you sure?" "Why didn't you tell me before?" "Why did you let this happen?" "He/she would never do something like that," or "Oh, my God! What's going to happen to you now?"

the child's statement; leave that to the professionals. "The best way for parents to document abuse is to later write down exactly what the child says, and the date. Make note of anything about the child's behavior that would confirm it," suggests Lenore Terr. Quote the child verbatim. If she says, "Daddy tried to park his car in my garage," don't correct her ("This is not the time to teach a child the right word," says Hyden). A parent who translates, "Susie said her father had intercourse with her," could later be accused of coaching.

The city has only a few specialized child-abuse centers (see box) where children can be given medical and psychological evaluations, but according to Margaret McHugh, the outspoken pediatrician who directs the Child Protection Team at Bellevue, "the majority of cases shouldn't be seen here, anyway." An emergency room, most agree, is probably the worst place to take a child, both because of the atmosphere and the risk of being seen by inexperienced personnel.

Instead, see a family doctor who is trained in this area. Done correctly, the exam should be neither painful nor upsetting to a child—unless he or she is in pain or extremely distressed to begin with. But McHugh is adamant about the need to prepare the child. This is not a run-of-the-mill doctor's visit, since the doctor spends

## close encounters

a great deal of time looking at the child's genital and anal areas and asks very direct questions about the reported abuse.

Parents might consider inquiring about their own doctor's experience with these kinds of examinations before a crisis occurs. "It's an injustice to have a child examined two or three times because someone doesn't know what they're looking for," says Leah Harrison. "One study indicates that 55 percent of all doctors cannot accurately label what a hymen is." Some doctors may not know what to look for; they may miss something; they may know that something is wrong but not why; or they may write an inaccurate or incomplete report.

Although doctors are mandated by law



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to report even suspected cases of child abuse, not all private practitioners do. Nicholas Cunningham, director of the pediatric outpatient unit at Babies Hospital, Columbia Presbyterian Medical Center, says, "The risk in the middle class is that they underrespond because of their relationship to the family."

## Working With the Authorities

**G**OING TO A DOCTOR IS THE best first step, but parents can also call the New York State hot line (see box). Nationally, about 15 percent of all hot-line calls are for sexual abuse. A hot-line operator will screen the call to determine if there are sufficient grounds to begin an investigation—"reasonable cause to suspect." If there are, the information will be faxed to the Child Welfare Administration (CWA) office responsible for that locale, and someone will be sent to investigate the charges within 48 hours. Louise Cohen, supervising assistant district attorney in the Brooklyn D.A.'s office, adds, "When calls are verified, CWA is supposed to send us criminal cases—which includes any type of child sexual abuse."

If the perpetrator is a parent, custodian, guardian, or any other person "continually or at regular intervals found in the same household as the child," the case fits into the category of "intrafamilial abuse" and therefore falls under the jurisdiction of CWA and Family Court. But if the offender is an uncle, a neighbor, a teacher—in other words, someone not "legally responsible for the child"—it is strictly a matter for Criminal Court and will be referred only to the D.A.'s office. Some cases can be tried in both domains—in Family Court, which protects the child against further abuse, and in Criminal Court, which punishes the offender.

Although CWA has a "joint response" protocol to cut down on the number of interviews, once a case gets into the system a child typically retells his story to an endless parade of detectives, doctors, social workers, and lawyers. "Eight or nine people, on the average," notes Flora Colao. Even those within the system agree: Many of these people are specially trained and dedicated professionals, sensitive to the complexities of child abuse; others are just doing a job. What you get is the luck of the draw. Besides, child sex abuse is hard to prove.

Consider the ordeal of Mary, the 9-year-old incest victim, whose abuse came to light when she told a girlfriend that what she was doing with her father "felt wrong." Detective Raymond Layne of the Brooklyn Special Victims Squad, who in-

vestigated Mary's case, explains why the father was acquitted: "Other than the little girl's testimony, there was only circumstantial evidence—the teddies and the receipts from the video store. I don't think juries want to believe that this is going on." And what was worse for Mary is that her own mother didn't believe her story, either.

Even when parents are supportive of their children, sexual abuse presents a myriad of tough practical and ethical decisions that don't lend themselves to pat solutions. For instance, what if the abuser is the 16-year-old daughter of old friends? Do you call the cops, talk to her or her parents first, or just stop using her as a baby-sitter? Or what if the offender is your brother's son, as was the case with Philip Morse's clients? That family is now in shambles. Sister is pitted against brother. The father of the accused teenager prefers to think of his son's offenses as "normal childhood sex play." And the little girl misses her favorite uncle, so she wants to "take the whole thing back"—a common outcome once a child sees the effects of her disclosure.

Worst of all, what if the accused perpetrator is the child's father, stepfather, or a live-in lover paying the bills? Certainly, the very real prospect of financial devastation constrains many mothers from believing children, much less taking steps that might put the breadwinner in jail.

Clearly, a parent's first obligation is to protect the child from further harm. But to really prevent sexual abuse, we also have to stop the abusers. "What about the other kids?" asks Philip Hyden. "How are you going to sleep at night? You may be ethically responsible for allowing that baby-sitter to abuse other children."

If the offender is a family member, it's unrealistic to hope that the abuse will never happen again. In fact, reporting the problem may also be the only way to protect other children in the family. "There are pros and cons about pressing charges," concedes Lenore Terr, acknowledging that the system is often overloaded and difficult to deal with, and that children are not always treated well. Sol Gordon, for one, says, "I'm not big on telling the authorities right away. In too many cases, social agencies

handle these things inappropriately."

Other experts think reporting abuse may be empowering for the child. Sandra Kaplan says, "It's very therapeutic for victims to get involved." Of the many children she has seen who are victims of sex abuse outside of the family, "those who worked with the police did the best to overcome the effects."

Ken Cullen, C.S.W., director of the child-abuse-prevention inpatient program at Gracie Square Hospital and coordinator of the sex-offender treatment program at Bronx-Lebanon Hospital, makes a powerful argument for calling in the authorities. He notes that when a child has been abused by a parent or a good friend of the family, he is "revictimized" by self-loathing. "Parents have to say to their child, 'We support you in getting well.' Part of that process is recognizing that this is a criminal act."

## Healing

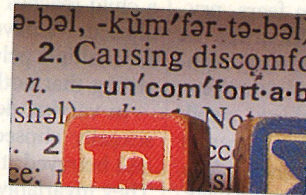
**S**EXUAL ABUSE REVERBERATES throughout the family, and everyone has to get involved in the treatment. The nonoffending parent (the mother, say) feels guilty that it happened in the first place and that

she didn't see it coming or do more to protect the child. She wonders how damaging the abuse will be and what will become of the family. As for brothers and sisters, whether or not they're victims, if they sensed what was going on, they may feel somewhat complicitous because they never told anyone, or they may resent disclosure.

Sandra Kaplan reassures family members, "Sex abuse is a trauma that can be dealt with." She points out, "The closer the kinship, the more devastating the effects, but when you have a supportive parent, the psychological effects can be buffered, and treatment needs are not as long." If the abuser is not a family member or someone extremely

close to the child, Kaplan estimates that the child will need a year of treatment with follow-up, particularly when the child reaches adolescence, gets married, and has a child of her own.

"Incest victims require longer-term treatment because not only were they sexually abused, but a family trust was violated," Kaplan says. Naturally, some cases



**Dealing with sexual abuse requires a myriad of tough decisions. What if the offender is your baby-sitter, or your brother's son? Do you call the cops?**





will require longer treatment than others: The trauma depends on the age and resiliency of a particular child and the duration and severity of the abuse. It also helps if the offender confesses, willingly enters treatment, and promises to make some kind of restitution to the child.

Ongoing therapy for the whole family can be expensive, though many professionals who specialize in the treatment of sexual abuse work on a sliding scale. Health insurance may foot some of the bill. In any case, the psychological cost of not getting the proper treatment is very high.

We know from adult survivors that when parents deny or cut short children's treatment—as many unfortunately do—the consequences can be catastrophic. Without help, child sex-abuse victims may be unable to develop healthy relationships; many are prone to further victimization; they may turn to drugs and alcohol to numb themselves; some will suffer lifelong depression, develop multiple personalities, or attempt suicide.

High-school counselors are already seeing the fallout. Last summer, when a teacher at the prestigious Phillips Exeter Academy in New Hampshire was arrested on charges of possession of child pornography, the news jolted the school. Candace Wheeler, M.S.W., head of the school's counseling department, has had a number of calls from alumni struggling with "memories" of their own sexual abuse. Students in school frequently seek her help as well. One boy was worried because he so strongly identified with the symptoms of depression presented in freshman health class. Several years before, he had been molested, but no one had encouraged him to see a therapist.

Ken Cullen is not surprised. "Girls get more treatment than boys. We continue to

fall victim to our own stereotypes. As long as a boy can continue to go out and play ball, he's okay."

Disclosure is just the beginning of the healing process. The second phase involves the child's expressing feelings—shame, sadness, outrage, loss. Being in a survivors' support group is often recommended, so that the young victim realizes that this happens to other kids too.

Jane Gilgun observes, "In many situations, children need an opportunity to tell the perpetrator what the experience meant to them. And it's important for the child to hear, 'I'm sorry. I tricked you; it's not your fault.' When treatment programs build that in, children heal better."

Always let your child's needs guide the extent of your involvement in the healing process, remarks Ellen Bass. "'Being there' for a child may mean backing off. This can be really excruciating for a parent." Which is why parents need to develop their own support system as well—a therapist and good friends.

Spreading the message is also helpful. The more that children talk openly about harassment and abuse, the more other children will be encouraged to come forward. Alexandra's disclosure opened a floodgate of complaints by other girls who had been harassed by the same boy.

Likewise, parents of victims feel less impotent about their own problems when they join forces with other parents, persuade school boards to institute better sex-education programs, or urge lawmakers to make this grave problem a top priority. Bass admits, "Dealing with abuse is going to be a nightmare for a while. Still, with a good therapist, a support group, and people in addition to the counselor and the parent to help the child, healing is possible."

Though about 40 percent of all adult

survivors of sexual abuse suffer serious aftereffects that require therapy, Leslie L. Feinauer, professor of family therapy at Brigham Young University, points out that millions also lead successful lives. The importance of a supportive parent was underscored in a 1992 study by Feinauer that examined why some adult survivors became healthy and productive and were able to put sexual abuse in perspective. "If children have at least one parent or some other supportive adult who can help them deal with the abuse," says Feinauer, "they'll be more likely to develop skills that help them survive."

Leah Harrison has seen children heal and parents learn to deal with their anguish. Eight years ago, she confirmed that a 4-year-old had been "digitally manipulated" in a day-care setting. The child was referred to a therapist, and the mother, who was "unbelievably hostile" toward Harrison, was sent to a parents' group.

"Today that beautiful, bright 12-year-old still sends me Christmas cards," Harrison says. "And the mother and I can laugh about that first meeting. Even through the mom's anger, they were able, together as a family, to put the situation in perspective and get through the trauma successfully. Children can recover."

Children can be protected, too. A few weeks after the incident at school, hearing Anita Hill's testimony over the radio, Alexandra exclaimed, "That's what happened to me! He didn't touch me, but his words upset me!" Alexandra's first lesson in sexual harassment may not be her last, but, thanks to her parents, who listened to her, believed her, and supported her, she'll at least be better prepared to deal with sexual abuse than the women and the men of Anita Hill's generation.