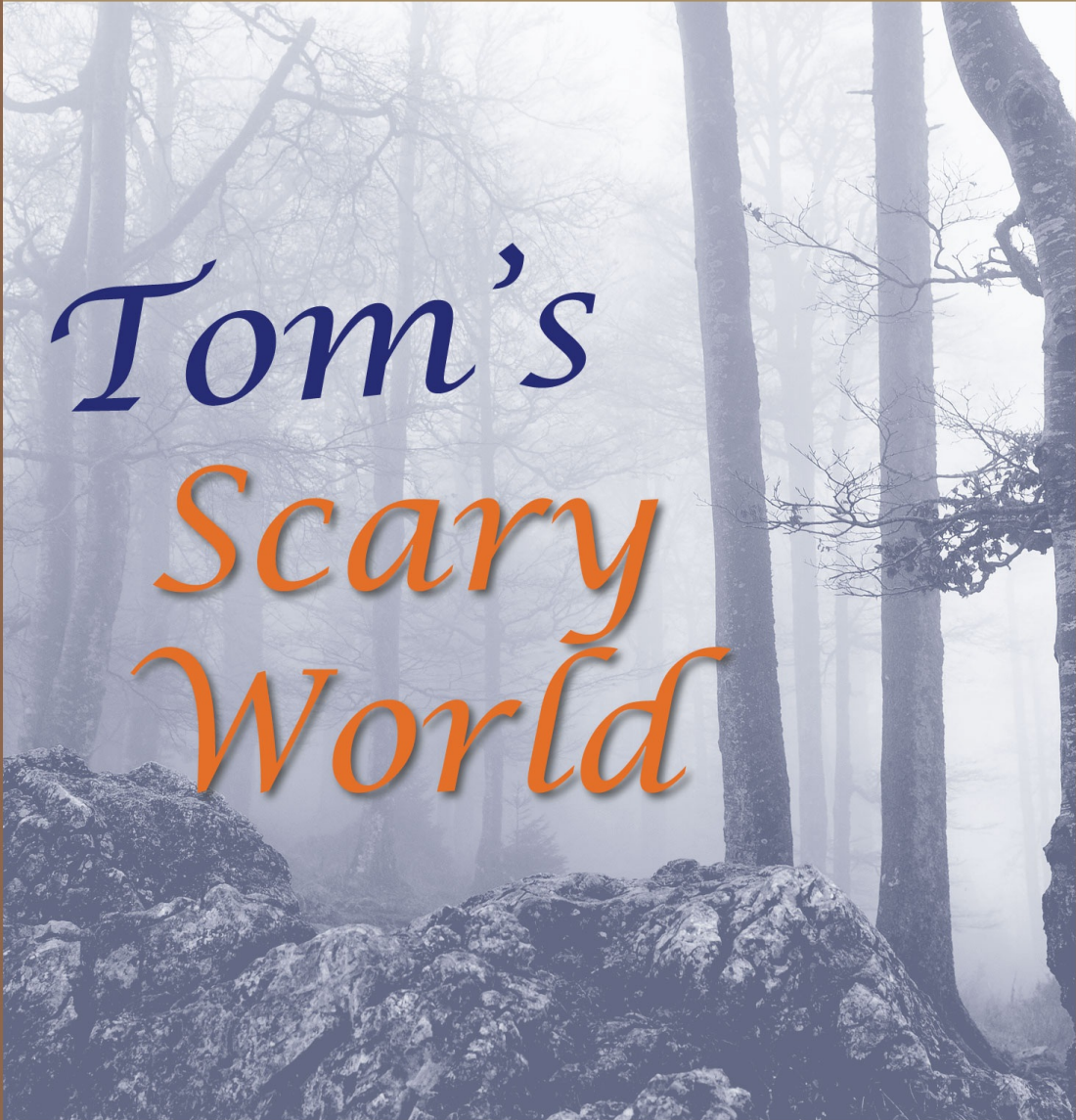


Playing for Their Lives



*Tom's
Scary
World*

Dorothy Singer

TOM'S SCARY WORLD

Dorothy G. Singer

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TOM'S SCARY WORLD

A Case of Sexual Abuse

Introduction

There are times when it is difficult for me to separate my role as therapist from that of a parent. Working with Tom, a five-year-old boy, created that conflict in me. I can describe my immediate reaction only as outrage when I heard about what had happened to him. Hearing his mother, Ellen Kaye, tell me over the telephone that Tom had been sexually molested by her cousin Eddie made my stomach knot in pain. Outwardly, I remained as calm as I could and tried to reassure her that I would work with Tom in play therapy.

Here, once again in my practice, an innocent child had been the victim of an adult's perversion. And once again, I needed to control my anger and disgust, that someone had continued to violate a youngster over a year's time and no one had suspected it. And yet, once again, I also tried to understand, as a psychologist, the aberration of a person like Eddie. What had driven him to invade the lives of Tom and his parents with such a foul act?

I remember, too, feeling the urge to say to Ellen Kaye, "Where were you? Didn't you know? Didn't you even suspect? How could you let this happen?" And then, the more rational, controlled me, the therapist, responded appropriately, as I had on many similar occasions over the years, and as I undoubtedly will again when the next sexual abuse case is referred to me.

The parents were Eddie's victims, too. I listened to Ellen with sympathy and concern, and with the knowledge that often, the parents are trusting, especially when a family member is the abuser, and that, as a result, the abuse continues. Tom may have believed that what was happening to him was normal, perhaps even a sign of Eddie's love. After all, no one was concerned about it or stopped it. In Tom's mind, his parents' silence must have meant that they condoned Eddie's actions. But after a year, as Tom grew older, and as the incidents became more frequent and were accompanied by pain and threats, Tom had

broken the silence himself and told his parents about his disturbing experiences with his cousin.

Tom's Story

It was evening bathtime in the Kaye household. Tom's two-year-old sister, Maureen, had just come out of the tub. She was dressed in her pajamas, and Ellen was reading her a story. Jim, the children's father, was washing Tom's hair while Tom squirmed, wiggled, and protested about the soap getting into his eyes. Then Tom said, "Soap comes out of pee-pees." At first, Jim thought that Tom meant the shampoo that now made bubbles and floated in the tub. Tom persisted. "Eddie pee-pees in my face, and my eyes get stuck together." Jim quickly pulled Tom out of the tub, dried him, and carried him into his room. He shouted for Ellen to join him. Together, they tried to remain calm questioning Tom further.

- Tell me, just tell me what you mean about "pee-pee" in your face.
- After you and Mommy go out, Eddie comes into my room and lays down on my bed, right next to me. He jumps up and down on my heinie. He pulls my pants down. Eddie's pee-pee is hard. He puts soap on my eyes with his pee-pee.

Jim and Ellen listened to this, tried not to panic, and continued to probe. Tom told his parents that this happened whenever Eddie came to baby-sit. Eddie, Ellen's cousin, had been looking after the children for about a year and a half, since he had turned sixteen and was able to drive to the Kayes'. He had lived with Ellen's parents from the time he was an eleven-year-old, when his own parents were killed in an automobile accident. Ellen's mother and father had legally adopted him about a year after the tragedy. The Kayes described Eddie as a loner and a poor student, but a "good kid" who seemed to love their children. He was saving up for his own car and needed the baby-sitting money. Jim had felt that Eddie was somewhat "strange," but Ellen felt comfortable with him as a sitter and trusted him completely.

As the Kayes questioned Tom further, he described in greater detail what Eddie had done, including rubbing Tom's penis, "smelling" his "heinie," and "biting" his penis. Evidently, when Tom resisted, Eddie pulled Tom's hair, "squeezed" his face, and "punched" him. Once, he had "kicked" Tom when Tom resisted him and had also threatened to hurt him. These threats had become more frequent, and so Tom had decided to tell his parents. Just the weekend before, Eddie had "twisted my nose and

twisted my pee-pee. He held his hand over my mouth so that I wouldn't holler, and he squished my face."

Ellen and Jim put Tom to bed, reassuring him that he was a good boy, and that Eddie was "bad" and would be "punished." They promised not to hit Eddie or Tom. Both parents left the room and collapsed into each other's arms, crying, heartbroken, and bewildered. Ellen then remembered that six months before, Tom had kept talking about a "hard pee-pee" and she had assumed that he was referring to his awareness of his own erections. She also recalled that just three weeks before, he had mentioned a "soapy pee-pee." Again, she thought, as Jim had, that Tom was referring to the soapy bath bubbles and made no connection between his two attempts to reveal what had been happening to him. As Ellen put it, "Such things as Eddie did to Tom never occurred to me."

The Kayes were in a state of shock. Their world seemed to be crumbling around them. Jim's next reaction was fury, and Ellen had to restrain him from going out to find Eddie. "I'll kill the bastard," he shouted over and over. When he finally calmed down, they called their pediatrician, who advised them about the procedure to follow.

The following morning, the Kayes reported the incident to the Connecticut Department of Children and Youth Services, as their pediatrician had advised. A social worker visited the Kayes and questioned Tom, who repeated the story just as he had told it his parents. The Kayes did not want to involve the police until they had spoken to Eddie and to Ellen's parents, the Kellers, but they took Tom to the pediatrician for an examination. The social worker had given them a referral to the child abuse unit at the local hospital for an evaluation, but the Kayes preferred that Tom go to a private therapist. Their pediatrician referred them to me.

The Kayes also took Maureen to the pediatrician for an examination. They had asked Tom if Eddie had ever "touched" Maureen, but Tom hadn't seemed to know. Doubt was raised, however, and now Ellen and Jim were afraid that their daughter might also have been victimized by Eddie and was too young to tell them.

The pediatrician's examination of both children showed no evidence of abrasions or infection, and he was able to ascertain that there had been no penetration of Maureen's vagina or of Tom's anus, ruling out coitus and sodomy. Eddie's acts seemed to have involved mostly touching or stroking Tom's body, and

perhaps masturbating by rubbing against Tom. Fellatio may also have been part of the abuse.

Eddie agreed to begin therapy with a psychiatrist (“only because I’m unhappy”) but kept denying the Kayes’ accusation. In a dramatic scene, Ellen’s mother implored the Kayes not to press criminal charges, saying that the “whole family would be disgraced.” She promised that Eddie would continue in treatment, and she hoped that he would eventually be able to confess what he had done and confront his illness. The Kellers were as shocked as the Kayes and also expressed considerable guilt to Ellen, blaming themselves for “not bringing Eddie up right.” They all agreed that there would be no further contact between Eddie and the children.

Jim was more inclined than Ellen to press charges. He was unhappy with the family’s decision to keep the incident quiet, but for Ellen’s sake he went along with it. As required by law, the social worker did report the incident to the police, but as the family did not press charges, no arrest was made.

It was agreed that Tom would begin play therapy immediately.

The Kayes

“Find out, please find out,” Ellen begged me at our first parents’ session. “Please find out. Maybe it’s not true. Maybe this is all a dream and Tom was never touched.”

During this first session, I took down all the facts as the Kayes presented them to me, but I made it clear that my role was trying to help Tom overcome his present emotional state and that I would not pry; I would not play detective. Tom had been questioned by his parents, his grandparents, the social worker, and the pediatrician. Enough! Now it was time to begin the healing process. If the Kayes wanted an evaluation to determine whether or not the abuse had taken place, I suggested that they get one at the hospital’s child abuse unit. I wanted to concentrate on working with Tom to help him deal with the trauma—or, if it was not real, on discovering the reasons for his allegations and his current distress. If Tom revealed his “secret” to me through play, he would do so on his own terms. He needed a respite from the constant probing, and he needed someone he could trust and a place where he could just be Tom. He was a little boy who needed to regain a sense of himself, and who needed, as we shall see, to “wash away” the “bad things.”

Once the Kayes had agreed to accept my terms and were willing to regard me as Tom's therapist, not their "detective," I continued to inquire about Tom and his family.

Ellen and Jim were very young, both only twenty-three. They had been in high school together, "not real lovers," but "good friends." They had had occasional sex and had married a few months after Ellen discovered that she was pregnant with Tom, about five and a half years before. Ellen had dropped out of school, but Jim had continued and learned a trade. He was now a draftsman. Ellen had learned word processing and had a thriving free-lance business typing reports and manuscripts.

Tom had started nursery school; he was enrolled when he was four and a half because "he needed friends, and he fought too much with Maureen."

As the Kayes talked about Tom, Ellen cried continuously. Jim was more in control, stony-faced and less overtly distressed. At one point, when Ellen and Jim described the bath scene and Tom's "confession," Ellen broke down and became hysterical. She shook, screamed, and then sobbed with deep sounds like rattles as she gasped for air. Jim sat there, watching and weeping inside.

"Why don't you hold her?" I wanted to shout. "Don't just sit there. Hold her. Comfort her. Cry yourself. It's all right. Hold her—hold each other."

But I didn't. I offered the tissue box to Ellen and tried to soothe them both.

"It's all right," I said. "I know how much pain you must be feeling. It's all right, cry."

I, too, felt pain. How could I not feel compassionate? I wanted to cry as Ellen did, but my crying would hardly have been useful. What I was there to do was offer strength, some suggestions that would help, and an opportunity to talk, to let the Kayes' feelings come out: anger at Eddie; guilt because this had happened and they, as parents, had not stopped it; helplessness because they couldn't go back in time and have their child the way he had been, unsullied and "innocent"

And now hints of Tom's distress over the past year began to form a clearer pattern for his parents. Ellen recalled the incidents when Tom had tried to tell her about Eddie: the "hard pee-pee" and the "soap in the pee-pee." Why hadn't she listened? she asked. His behavior too had changed. He had

nightmares more frequently, and there had been occasional bed-wetting. Ellen: "I thought it was because he was jealous of Maureen. She gets a lot of attention. Were these signs of the abuse?"

- Bed-wetting and nightmares can indicate many things: the new school and, yes, even some regression because of the rivalry with Maureen. You're too hard on yourself, Ellen. You had no real reason to suspect sexual abuse.
- But I'm his mother. I should know these things. I should sense them, feel them. Where was I?
- Ellen, you were there, doing your best for your children.

Over the months to follow, Ellen continued to wallow in her guilt despite all my efforts to reassure her. Jim remained stoical, seething with anger toward Eddie and, as I later found out, toward Ellen. He seemed to blame her for using Eddie as the sitter, and for not, as he put it, "being tuned in to the kids." I witnessed their disputes in my office: the recriminations, the making up and forgiveness, and then the arguments all over again. It was a growing disease they could not cure, a disease inflicted on the Kayes by Eddie's emotional disturbance, acted out on Tom.

"Why," Jim asked, "why in God's name would someone do this to a child?"

I gave the Kayes the reasons that research offers. There are men who, for one reason or another, feel inadequate in relationships with females. They have a poor self-concept, have poor relationships with others, or may even feel threatened by women.

Contrary to popular belief, most sex offenders are not "dirty old men"; they are young and respectable. Most child molesters are also well known to their victims, just as Eddie was well known to Tom: three quarters or more of the offenders are friends, neighbors, or relatives. The research tells us, too, that most abusers were abused themselves as children.

Ellen reassured me that Eddie had never been abused. His parents had been "wonderful people," and her parents were religious, law-abiding, simple, decent folk.

Jim continued, "But Eddie is scared of girls. He talks a good game and even has pin-ups in his room, but he has never once had a girlfriend or even a really close friendship with a guy. All he does is fiddle

with motors. He asks me about cars all the time. He never goes out on weekends. He rents porno videotapes from stores. I know, but so do a lot of guys. He always has his head under the hood of Gramp's car, and when we're over visiting, he pokes under the hood of my pickup truck."

"He's a good kid," Ellen said. "I still can't believe this, but in my heart, somehow, I know it's true. It's killing my folks, and it's killing us. Can Eddie be cured? Can Tom be cured?"

In our society, despite the openness about sex in the popular media and in conversation, it is difficult for many children to understand what is "appropriate touching." The numerous books, videos, and classroom discussions about self-protective skills that reduce children's vulnerability to assault are certainly good preventive measures for the school-aged child, but the preschooler also needs help in recognizing and resisting sexual exploitation. Unfortunately, Tom was a child who received such information too late.

Over the months, I offered the Kayes more information about sex offenders, but during our early sessions, I felt that it was important to focus on Tom and to get a sense of how deeply he had been wounded.

Tom was one of the estimated 500,000 children who are sexually abused each year. For sexually abused children, the abuse continues over a long time, and many remain scarred in some way, by loss of self-esteem, anger, guilt, and depression. Older children who have been sexually abused over long periods of time not only harbor these feelings but may also have problems later in life in forming appropriate sexual relationships. In many cases, they become involved in drug and alcohol abuse and even in prostitution.

The Kayes told me more about Tom. He had always been an active child. Once, Ellen said, when he was two and ran into the street, she had "whipped" him because she was afraid he would do it again and she needed to "teach him a lesson." For most of his five years, Tom had been "wild," and "aggressive when kids came over." As Jim put it, "He does have behavior problems. That's why we thought nursery school would be good for him. You know, teach him how to get along with other kids. We do yell at him a lot—he's always teasing Maureen. I sometimes hit him, send him to his room, or make him stand in a corner. He's been really awful these past six months. Like I said, I thought it was because Maureen gets

into his things, and she tries now to fight back. I never, ever thought it could be anything else than just normal kid fighting.

“Tom is an awkward kid, he can’t throw a ball; he can barely skip or jump. His speech is not clear. We can understand him, but sometimes the words are hard to figure out. It’s getting a little better since nursery school, and since he has more kids to play with. Tom liked to play with me at night, but lately he wants to watch TV when I offer him a game. TV seems to be the only thing he concentrates on. He can be mean and ornery or as sweet as sugar—his moods change so darn fast—but mostly he’s ‘hyper.’ The nightmares have been more frequent, but like Ellen said, we had no reason to suspect anything unusual.”

Ellen and Jim both had praise for the Kellers. Tom adored his grandparents and always wanted to visit.

“Lately, we’ve noticed that Eddie hasn’t been around when we came over,” said Jim. “We thought it was a good sign—maybe he’d found a friend at last. We had no idea that he was avoiding us. God, if only I’d know earlier what that bastard was doing to my kid!”

“Do you think this will stay with Tom all his life?” Ellen asked. “Do you ever get over something like this? Is Tom’s life ruined?”

These were questions I had heard from many distraught parents in cases of sexual abuse, but just as I had told other parents, I told the Kayes that each child is different, and that with good parenting and professional help, a child as young as Tom had a fairly good chance of regaining a positive self-image and feelings of self-worth.

Tom’s Scary World

Tom came to see me a couple of days after my first session with the Kayes. He looked like a miniature professor. He wore glasses with thick lenses that hid his dark brown eyes; he sported a bow tie, a crisp white shirt, and long gray flannel pants; and his expression was serious, almost doleful. But when he spoke, the image of the scholar was immediately shattered. He was difficult to understand because of a lisp, mispronunciations of words, a singsong quality, and a tendency to swallow the last words in a

sentence.

Tom was of average height for his age, but very thin. His brown hair was neatly combed, but he had a cowlick that added to his comical appearance. To top it all off, Tom's nose was runny and well acquainted with his sleeve. I realized that Ellen had groomed Tom for his visit with me, and I let her know that day that it would be perfectly all right if Tom wore jeans or play clothes in the future. He did so after that and appeared more relaxed.

When Tom entered the playroom, he asked me if it were Pee-Wee Herman's house.

- Mom said I was going to a place like on TV.
- No, Tom, it's not Pee-Wee Herman's house, but a place where we can play and talk together. You can tell me how you feel about things, what makes you feel good, and what makes you feel not so good. OK?
- OK. Can Mom come in here, too?
- If you want her to, she can.
- Well, can I go and show her this?

Tom had found a small box of miniature figures. I went with him to the waiting room, where he quickly showed Ellen the toys and then, reassured that she was there, ran ahead of me to the playroom to explore its contents. I had planned to use our first day just to get acquainted and explain the rules, so that I could observe Tom. He was curious about the toys that I had set out for him, opening some drawers and cabinets to look for others, glancing at me each time to be sure I approved. Settling down with one toy seemed to mean to Tom that he would have to forgo the possibility of playing with the others. I explained that he would have time to use all the toys in the future, but he didn't seem to grasp this idea. He was like a child in a candy store, finding it difficult to make a choice, wanting to sample each item, and attracted to the next before he had even finished savoring the previous one.

Tom rarely smiled, and he maintained his serious expression throughout our first session. He listened as I explained who I was but asked no questions; and he seemed guarded and standoffish with me. When our session was drawing to a close, I told him it was time to clean up. He ignored me and

grabbed the doctor's kit and a small bear, jabbing the bear with the plastic hypodermic needle. This was a favorite activity of many of the children; I made a mental note to begin our next session with these particular toys. Perhaps Tom was trying to tell me something. If indeed he was, we didn't have time that day to explore this play more fully. I also felt that I didn't want to create any further anxiety at our first meeting. Tom jabbed the bear once more.

- The doctor does this to me.
- Are you playing doctor?
- Yep, and here goes a shot!
- Tom, you can play doctor next time. Now it's time to clean up.

Tom threw the bear and the kit, scattering its contents all over the floor. He just stared at me.

- Tom, I know you feel angry because you have to stop playing, but time is up. Remember, we clean up before we go. That's a rule here. Please put the toys on the shelf.
- I don't want to.
- I know you want to play, and we will again next time.
- We can start our time together playing with the doctor's kit and the bear. But now it's cleanup time.

Tom ran out of the room, hid behind the door, and waited.

- Tom, please come back. I'm waiting for you. We can clean up together. But you must pick up the toys.

Tom peeked around the door at me.

"Tom," I repeated in a firm but nonthreatening voice, "please pick up the toys. Remember, I explained that we do this so that we can easily find the toys we like again, and so that other children can find them."

Tom came out of his hiding place and looked at me sheepishly. "He's through testing me," I thought

as he picked up the toys and glanced at me for approval.

“Good job, Tom,” I said. “Now let’s go to Mommy. She’s waiting for you.”

I thought about this incident long after Tom left and made notes about my conjectures. Was he angry because I had missed a message he was trying to convey to me about the “shots” and the bear? Or was he angry because he couldn’t have his own way? Was he trying to find out what my role was, how strict I would be about imposing the playroom rules, and how far I would go if he didn’t comply? After all, someone else in his life had made him comply. Would I twist his nose?

These thoughts worried me, and it occurred to me that, in Tom’s eyes, because adults had power, he needed to learn what difference there was in the kinds of requests and demands that adults made. Tom needed to know when he should say “no” to ensure his physical and mental safety. Right now, it seemed that his aggressiveness at home and his defiant stance with me were his way of asserting himself, as well as his way of expressing the guilt and anger he must feel about what Eddie had done to him. And of course, Tom may have felt that he had been “bad” because he had participated in the dreadful secret. Sometimes, children who have been abused feel that they are to blame, that they are “dirty” or “bad,” and that’s why they continue to be victimized.

I would wait and watch as Tom, in his own way, directly with words or mutely with toys revealed his story to me. Perhaps this first day with him was the beginning of the unraveling of his scary experience. Tom’s parents believed him completely; rarely can a child of Tom’s age make up the details he described to his parents. My job was now to help him recognize that he was not at fault and that he could learn which adults he could trust.

The next time he came, Tom eagerly ran into the playroom. He was wearing a baseball cap, jeans, and an “Alf” T-shirt, looking more like a boy of five than he had on the previous visit. Before I could stop him, however, he had dumped all the plastic cups and saucers out of their small bin, spotted some cans of Play-Doh, and announced that he wanted to “bake cookies.” This was fine. I watched as he rolled the clay.

- This feels good.
- You like to make things with Play-Doh?

- Yep, I have some at home, but Mommy got mad.
- Why?
- I threw it at Maureen.
- Well, you must have been pretty angry to do that.

Silence.

- Do you fight with Maureen a lot?
- She starts.
- Does she? How?
- She's a ninny.
- How does she start?
- She takes everything.

Tom stopped "baking." As he was putting the clay away, he saw the doctor kit that I had placed on the couch near the bear. Very carefully, he examined the bear, took a spoon from the tea set, and fed the bear. I watched as he played and talked out loud: "Now Teddy, eat your beans. If you don't you get a shot."

Tom handled Teddy brusquely, turning him upside down and giving him a "shot" in his back. Tom did this several times, wearing an angry expression.

- Well, you're really giving Teddy a lot of shots.
- Yep, he's so bad, so bad. He won't do anything I say.
- What do you want him to do?
- Listen, listen, listen!
- Listen to what?

- Nothing!

Tom finished the doctor game and, without my reminding him, picked up all the contents of the kit as well as the plastic dishes and put them away. Tom was again telling me something about the bear, and I needed to be patient. I sensed that his emotions were rather close to the surface, and that he was now just trying to figure out whether or not he could let these feelings emerge in my presence.

Noticing that he was now fingering the crayon box, I asked Tom if he would like to draw. He nodded yes, and I gave him a large pad. This was the beginning of what I called the “missing body series.” Tom drew a large round face with the usual features and lots of brown hair.

- Who is this?
- Me, of course.
- Well, it’s a good face. Can you draw the rest of you?
- Don’t want to.
- Well, I like this face. Do you want to write your name on the top?
- I can do my name. I can print Tom.

He laboriously printed his name in large letters, slanting upward, typical of a five-year-old. He then gave me the picture.

- Here, put it up on the wall.
- We can do that together. Just show me where you want it.

Tom found a place he liked on the wall and taped his drawing to it. He stood back, admiring.

- Now I’m here.
- Yes, you are here.

Tom and I played his two favorite games for the next few sessions: baking cookies and playing doctor. He made more elaborate cookies and alternated between feeding the bear and giving it “shots.”

His nose was never dry. I showed him how to use tissues and how to blow, but he still preferred his sleeve. If I reminded him about the tissues, he would use them, but the sleeve was more convenient.

At the end of each of these sessions, Tom would draw a “face” for me. They were always the same: big brown eyes, a little round nose, and a mouth that was a straight slit across the bottom of the face. He did not draw a body. We put these faces in a folder. Tom wrote his name on the front of it and told me to keep him “safe” inside. He then took his first picture off the wall and added it to the folder so it, too, would be “safe.”

Would Tom ever draw the rest of him? I wondered when that would be. He evidently felt some trust in me, giving me his pictures to keep in the “safe” place, but he was obviously having difficulty dealing with his body image. The lower part of his body was perhaps a part he wanted to deny, and until he could trust me and begin to feel more positive about himself, Tom would remain “bodyless.”

I had no idea whether or not Eddie had used Tom passively, to masturbate with, or had tried to arouse Tom and evoke some sexual response. If so, the sexual abuse had been all the more traumatic. Research indicates that children who have been traumatically sexualized, a process in which, according to Finkelhor and Browne, “a child’s sexuality (including both sexual feelings and sexual attitudes) is shaped in a developmentally inappropriate and interpersonally dysfunctional fashion as a result of sexual abuse,” may later develop confusion and misconceptions about themselves, inappropriate repertoires of sexual behavior, and sometimes unusual emotional associations with sexual activities.

Eddie had used affection, attention, and later, it appears, threats to maintain his relationship with Tom over the year. Certainly, Tom must have been confused by what was happening, especially after he began to attend nursery school: Later, I found out, that the school did have a simple “sex education” program consisting of stories about “good touching” and “bad touching,” and I believe this program was what finally motivated Tom to tell his parents about Eddie.

Tom felt betrayed by Eddie. Eddie had been someone he loved, someone to whom his parents had entrusted him, someone who had given him gifts and had often taken him for a ride in the car to “buy ice cream or hamburgers.” Eddie had been like a big brother to Tom, and now he couldn’t see him anymore. This young man, whom he had adored, had treated Tom with a complete disregard of the effects his

behavior would have on Tom and the family.

As the therapy continued, Tom's attacks on the bear became more violent. I interpreted his behavior as meaning that Tom had been made powerless by Eddie. His territory and body space had been attacked against his will, and now Tom was venting his anger on the toy bear. Perhaps, early in the year, Tom had been passive and more agreeable, but later, as Eddie's abuse continued and as Tom felt more guilty and, perhaps, resisted, these attacks became more frightening and more ugly. Tom had tried to stop Eddie but must have been frustrated in his attempts to do so. He had been trapped by fear and even, to some degree, by a strange kind of loyalty to Eddie. Tom had kept his secret for a long time.

Now, Tom felt "badness," shame, and guilt. We also didn't know whether Eddie had conveyed these feelings to Tom in words. Tom must surely have been sensitive to his parents' reactions when he told them about the abuse. As calm as the Kayes tried to be, shock, disgust, fear, anger, and a desire for revenge—all powerful emotions—had come pouring out. And then there was the visit from the social worker, discussions about police, and finally Tom's visits to me. Tom had seen his grandparents cry; he had been denied further contact with Eddie. Surely, he knew that something of great proportions had occurred and that he was at the center of a family tragedy. He must have felt stigmatized in some way. Fortunately, no one "blamed" Tom, despite the general hysteria. He was not treated as "bad" but given support and love, unlike some sexually abused children who are viewed as "spoiled goods" and even assigned such negative characteristics as being "oversexed." They may be treated as being as blameworthy as their abusers and may be made to feel ashamed. If there are strong religious and cultural taboos in addition to the usual stigma, a child may feel even more different, more estranged, and more morally corrupt than a child who is clearly told that what happened was not his or her fault. Fortunately, Tom was young enough not to comprehend many of the ramifications of his victimization. But it was clear to me that he needed help in regaining his sense of himself and in shedding his anger and guilt.

After a month of building up trust and allowing Tom to take the lead, I introduced into our play a small bathtub and "anatomically neutral" rubber dolls. I wanted to see what he would do with these before I introduced an "anatomically detailed" boy doll.

Originally, these more realistic dolls were designed to prepare children for the anxieties aroused

by surgery. Now they are used by mental health professionals, physicians, and law enforcement personnel with children who they suspect may have been victims of sexual abuse. Unfortunately, many people using these dolls have little training in their correct use. Research suggests that there is too little agreement about exactly which interactions between a child and a doll indicates that sexual abuse has very likely taken place. When, for example, a child uses a doll to reenact digital penetration of the vagina or the anus, surveys show that most police view this action as an indication that actual penetration has taken place. A mental health professional may interpret it only as exploratory play or curiosity where, indeed, no actual abuse may have occurred. Unfortunately, there are no standardized protocols similar to those in other tests, such as those of intelligence, achievement, aptitude, vocational preference, or even creativity. However, dolls, along with other play materials, such as drawings, and in the context of therapy, appear to be useful in detecting whether a child has been abused.

It is important that any evaluation of the sexual abuse of a child be done over time. As I had told the Kayes, I would use dolls and other materials to offer Tom relief, not to investigate the details of his experience with Eddie. I explained that dolls could be used to help Tom learn about good or bad touching, a continuation or reinforcement of what the nursery school teacher had tried to convey. I believe, too, that dolls should not be used in therapy if a court case is pending. Such use may interfere with the admissibility of evidence based on the child's interaction with the doll during the initial investigation or even when the child testifies during the trial, because the continued play may alter the child's memory of the actual experience. It is appropriate to use dolls in therapy as part of the healing process only after the investigative phase of the case has ended. Tom's parents definitely were not pursuing legal action. Therefore, my decision to introduce the dolls seemed to be justified.

After six visits, Tom was eager to come into the playroom. He usually ran ahead of me and then would wait, owl-like, peering through his thick lenses. Just before his seventh visit, I had placed the small rubber tub, with water in it, on the table and had put a small rubber doll next to it. The doll was naked. Tom enjoyed putting the doll into the water, washing it, and then drying it. He put it "to sleep" on a cushion. I didn't expect any reaction to this doll; after all, it was sexually neutral. Immediately after this rather benign doll play, Tom gravitated toward the doctor's kit and the bear. He jabbed the bear with the "needle" repeatedly.

- Hope you feel this and this and this!
- Tom, you sure like to hurt that bear. Poor bear.
- Well, give it some pills.

Tom took the “pillbox” out of the kit. It was empty. He made believe there were pills in it and gave them to the bear.

“I’m glad you’re making the bear feel better,” I said. “You really gave him a lot of shots.”

Tom threw the bear down and, grabbing the rubber doll, threw it across the room.

- Tom, remember, you can’t throw the toys. Please go and get it. You seem angry at Teddy and angry at the doll.
- Yep. I hate them, hate them.
- That’s a strong feeling, Tom. Can you tell me why you hate the bear and the doll.
- They’re “bad,” “bad,” “bad.”

Tom grew silent and sat on the floor with his head down. I waited. Finally, he looked up at me and told me to pick up the toys.

“No,” I said. “Please pick them up, Tom. You threw them, not I.”

Tom waited, looked at me again, and reluctantly got up and gathered the toys from the floor. He put the doll back on the cushion and put the bear on the shelf. He then asked if he could take a toy home.

- Well, you know you can have a charm or a sticker, Tom, but that’s all. The toys stay here so that other children can share them.
- OK, OK. Are you mad at me?
- No, Tom, I’m not mad at you. I like to play with you, but you must follow the rules.

Tom’s time was up for the day. He chose a dinosaur sticker, put it on his shirt, and said good-bye.

Jim was in the waiting room. He told me that Eddie had been skipping his therapy sessions and that Ellen and he had been fighting a lot lately about it. I set up an appointment to see the Kayes. It was important that we review Tom's progress.

Tom came to see me one more time before my scheduled appointment with Ellen and Jim. I decided to offer Tom the anatomically detailed doll to play with (but not as an investigative technique). I was curious to see his reaction after his experience with the neutral rubber doll. I felt that he trusted me now, and I was concerned about his many "bodyless" self-portraits and his rage against the bear and the doll.

I placed the boy doll, fully clothed, near the tub. I left the neutral doll there as well.

- Tom, would you like to give this doll a bath?
- What's his name?
- Whatever name you want to give him.
- I'll call him Stevie.
- OK.
- Can I take his clothes off?

Tom proceeded to undress the doll. When he removed the overalls, he shouted, "He's got a pee-pee!"

He jumped back quickly, put his hands over his own genital area, and said, "I don't have a pee-pee. My daddy took it."

Tom was clearly upset and looked very pale, but he put the doll in the small tub. He then put the neutral dolls in the tub as well. Tom bathed the neutral doll, assiduously avoiding "Stevie."

- Why does Daddy have your pee-pee?
- He has it forever and ever and ever.
- Will he give it back to you?

- Never! Can I play doctor?

Tom clearly did not want to talk about his “pee-pee,” and I felt that it would not be helpful to continue questioning him now. It seemed wiser to let Tom just play, work out his feelings about his “missing” penis, and also deal with “Stevie,” the doll.

Tom left the dolls in the tub and played “cook,” using Play-Doh to make “hot dogs” and “hamburgers.” He then fed the neutral doll, ignoring Stevie.

- Isn't Stevie hungry?
- No, he never eats. He's sick. I'll take him to the doctor.

Tom took Stevie out of the tub, dried him, and took him to the table. He then gave Stevie all kinds of “medicines” and “shots.”

- I guess Stevie is really sick.
- Yes, sick in the pee-pee.

Tom now put the medicine on the doll's penis and then jabbed the “hypodermic needle” into the penis. After each shot into the penis, Tom asked the doll, “Is your pee-pee OK? Does it hurt?”

Tom then pretended he was going back to his “office.” He took the doctor's kit and rode around the playroom on a Big Bird “car,” shouting.

- Pee-pee is gone. Pee-pee is sick. Pee-pee is gone. Pee-pee is sick.
- You're making it better, Tom. You're a good doctor. I'm glad you're making it better.

Tom came back to the dolls, and I told him it was time to start cleaning up. Tom took Stevie to the couch and carefully dressed him. Then he put the other toys away.

- Will you come home with me and play at my house?
- No, Tom, I can visit with you here. I'm pleased that you would like me to come home.

- Yes, I have no friends. Not even one. Not even two!
- I'm your friend, Tom. Maureen and Mommy and Daddy are your friends.
- Eddie is gone!

This was the first time that Tom had mentioned Eddie to me.

- Eddie is still at Grandma's house, but you know that he needs help so he won't do "bad" things to anyone.
- Eddie is bad. Mommy says so.
- Eddie did some things that were bad, I guess. Now he is getting some help.

Tom headed for the waiting room, a clear signal to me that he did not want to talk about Eddie any more that day.

I felt this session had been a breakthrough for Tom. It was the first time he had displayed verbal concern about his body. In their omission of his body, his drawings were significant, but now he had revealed his rejection of his penis—the part of him that reminded him of Eddie and the molestation and the anxiety of the family, which had focused so much attention on the genitals.

Tom's response to the anatomically detailed doll had been one of surprise, shock, and overt anxiety. Generally, when children do find the doll in my room and play with it, they giggle and become somewhat self-conscious, but they do not react as Tom did. The sight of the penis had been unexpected, true, but Tom's reaction suggested to me that he harbored many negative feelings about his own penis. He no longer had a "pee-pee"; his father had it. Did that mean that, in Tom's mind, Jim was protecting Tom and "guarding" Tom's penis? Did it mean that his memories of Eddie's sexual acts were so horrible that Tom needed to deny the part of him that had been contaminated by Eddie? Tom's avoidance of the Stevie doll and then, later, his need to see Stevie as sick suggested that Tom felt "sick," too, and in need of "shots," "medicine," and some help to restore his feeling of well-being. All the anger Tom had previously expressed at the bear was now directed at Stevie. Because Stevie had a penis and was a "little boy," the memories of Tom's experience over the past year came to life and resulted first in Tom's avoidance of the doll, and then in his furious attack on the doll. He desperately wanted both to attack and to cure Stevie—

to punish himself and to cure himself. Tom's reaction did not "prove" the truth of his story or Eddie's guilt, but it was suggestive. It may also have reflected Tom's reaction to his parents' concern about his story.

It was interesting, too, that Tom had wanted me to come home with him after the session. He had revealed much about himself more directly than during our previous visits. In a way, because of his disclosure, I believe that some significant bonding had taken place. Perhaps Tom felt closer to me, more trusting, and viewed me as his protector and friend. He was able now to invite me home: I was an adult whom he could trust.

I saw the Kayes soon after this session. They were upset because Eddie was skipping his therapy appointments. He had confessed to his parents that he had touched Tom but had refused to go into details. The Kayes had sworn to him that they would never involve the police and had urged him to resume his therapy. Jim was less sympathetic toward Eddie, and during their session with me, the tension between Jim and Ellen was palpable.

"How long will Eddie be in treatment?" Ellen asked.

"That's hard for me to answer," I responded. "We don't know much about Eddie's sexual orientation, nor do we know if there have been other such incidents. I'm inclined to doubt it, however, from what you've told me about Eddie."

I did briefly describe the various approaches that have been used with persistent male sex offenders. Jim asked me about Depo-Provera, the controversial synthetic hormone that reduces sexual desire. He had read about it in *Newsweek* and was curious. I told him that it is used in some prisons, but that it has risky side effects. Conventional therapy is the approach more generally used with child molesters, but research tells us that there is really no cure for the perpetual molester, only varying degrees of self-control. Jim felt that the Kellers did not believe Eddie was capable of such "wickedness," as they called it, and that they were not "firm enough" in demanding that Eddie keep his appointments with his therapist.

Ellen was weeping now for her son and for Eddie: "All I want to do is hold Eddie, comfort him. No

one is comforting him. I feel so rotten. I wish I had been there for him, really there, as a sister or even a mother. He's been through a lot. Tom's been through a lot, too. Did he tell you everything? Is there more stuff we need to know? How I wish I had listened when he said Eddie's pee-pee was hard!" Ellen was suffering with mixed emotions: pain for Tom, pity for Eddie, and guilt that she had not heeded Tom's signals. But I repeated my position: I would try to help Tom feel better about himself, but I would not question him directly about details. I shared the main elements that had emerged in my last session with Tom, and I asked Ellen if she and Jim were giving Tom some information about "good and bad touching." I gave them a book to read geared to Tom's age level and an accompanying pamphlet that offered suggestions to parents concerning how to tell children about touching, and how to get children to talk if they are worried.

- It's important that you continue to support Tom if he talks about Eddie and his feelings to you. Research tells us that the one factor that helps children recover from sexual abuse—regardless of the kind, regardless of the duration, and regardless of who abused them—is their being able to talk about it to someone they trust, and that person's being supportive and caring.
- He told us, didn't he?
- Yes, that was good. He trusts you.
- But he's clammed up now. Why?
- Sometimes, after children do tell, they draw back. Putting the incident into words may be overwhelming. It makes the incident more real and stirs up anxiety. Tom also responds to your reactions. He knows what happened was serious. Now he needs to learn that he was not to blame. In his play, he's acting it out, trying to get rid of all the bad feelings. I suspect he'll do this for a while and will also try to accomplish self-healing through play.
- How long will this take?
- You both want "time" answers from me: How long will Eddie's "cure" take? How long will Tom's cure take? To be honest, I don't know. When we see Tom accepting his body, playing less aggressively, balancing his mood swings, sleeping better, and smiling more—we'll know.

Jim responded with an outburst: "That dirty homo—that's what he is. Why didn't he find another

seventeen-year-old homo!”

Ellen was extremely upset by Jim’s remarks; she got up and ran out of the room to the car. Jim and I followed. Ellen was now in tears: “Don’t touch me. How could you? How could you?”

Jim and I both tried to lure Ellen back into the office, but she refused to go.

“Please, please, Ellen. I’m sorry. I’m sorry,” Jim begged.

Ellen refused to speak. I told them to call me and to come back again because we needed to talk further. Jim shook my hand and got into the car, and they rode off.

I was distressed by Jim’s accusations and also by the visible strain between the Kayes—over Tom, over Eddie, and over the Kellers’ lack of support for Tom and their belief in and sympathy for Eddie. I was worried about the Kayes’ relationship and would need to refer them for counseling. Like the child, the parents often need help when sexual abuse occurs. The Kayes had been devastated by this upheaval in their lives, and Ellen was especially distraught by the rift that the incident had caused between her parents and Jim.

Ellen called me the next morning and confessed a few things over the telephone: Eddie had been in therapy two years before and had actually been hospitalized for depression and an attempted suicide. Ellen believed he had been suffering a delayed reaction to his parents’ deaths. That was why her folks were so protective of Eddie. She assured me that even though she and Jim had notified the police of the sexual abuse, all charges had been dropped, one contingency being Eddie’s continuation in therapy. Ellen also said that the possibility of Eddie’s being homosexual had occurred to her, too, and that when Jim had said it out loud, her own fears had simply erupted. She apologized for her emotional outburst.

This seemed like a good opportunity to recommend some counseling for the Kayes, and Ellen willingly took down the names of some therapists whom I suggested. We agreed to meet again in a few weeks to discuss Tom’s progress.

As we ended the conversation, Ellen said, “Everyone is being punished: Tom, Jim, my folks, me, Eddie. It makes me want to scream!”

“Ellen, please try to see a counselor. It will help,” I urged.

We said good-bye, and I felt uneasy about the Kayes. Would they be able to weather this storm?

Tom’s Anger, Despair, and Repair

At our next session, shortly after the Kayes’ visit, Tom came in with a new haircut—a crewcut—and looked less bookish. He ran to the shelf, grabbed a bin of plastic spacepeople and some blocks, built a wall, and put the spacepeople behind his wall.

- Everyone will be safe.
- Safe from what?
- Safe from bad people.
- Who’s bad?
- Bad people are bad. Stevie’s bad. Don’t take his clothes off.
- I won’t if you don’t want me to.
- I don’t want that doll to be naked.
- You were the doctor last time and tried to help him, didn’t you?
- I helped him. He can stay on that chair. No more baths for you, Stevie.
- No more baths.
- We’re not supposed to see his pee-pee, and (*shouting*) *no one touches it!* I love Stevie. Stevie is my baby-sitter.
- You have a new baby-sitter named Stevie?
- Well, not for real, but this Stevie can be my baby-sitter.
- This Stevie with his clothes on?
- Yes, this Stevie with his clothes on.

This was a remarkable session. I remember feeling elated and yet a bit anxious. It was all happening so quickly, even though I knew that Ellen was reading about sexual abuse and talking to Tom about it.

Tom was earnestly working through his feelings about Eddie. The Stevie doll, fully clothed, was acceptable and now was a mixture of both Tom and Eddie. Tom had indeed confused his and Eddie's penises and also felt confused about his feelings toward Eddie and himself. Now he was trying to sort them out. He played with the plastic spacepeople for the remainder of the session but maintained the wall between them and Stevie, who was now perched on a small chair behind the wall, separated from Tom and the miniature figures.

- Stevie is watching you play.
- Yes, he can watch.
- He's a good watcher.
- He can take care of us, but he can't come over here.

No, Tom was still not sure he wanted "Stevie," or any "sitter," to come very close despite his protestations of loving the Stevie doll. Progress was being made, however. Tom was beginning to acknowledge that he could begin to trust another sitter, or another grown-up male.

Our next session came after a two-week break during which Ellen, Jim, and the children went off on a short vacation. Unfortunately, at the end of their trip, without alerting the Kellers, the Kayes stopped off to see them. Eddie was home and in the living room. This was the first time Tom had seen him since revealing the molestation to his parents.

Tom was visibly shaken, and Jim asked Eddie to go up to his room. Eddie refused, and the Kayes left after a horrible scene with the Kellers. Jim swore he never wanted to see "the whole damn lot of them again."

Needless to say, Tom's next session demonstrated a setback. He ran around the playroom as if he had gone berserk. He threw "Stevie" on the floor and refused to comply with my attempts to stop him or

control him. He ran into the waiting room and just cried. We sat there for a while, and then, nose running, shirt out, shoe laces undone, and face streaked with tears, he asked if he could come back and play. When we did go back, he stood in the middle of the playroom and announced with tremendous assertion, "I have a pee-pee."

I was startled, delighted, flabbergasted. I must admit that I had not anticipated this announcement after the previous scene.

Tom stood there and said it again.

- I have a pee-pee. No one can touch it but me or Mommy and Daddy.
- Well, that's the way it should be.
- Yes, that's the way.
- Would you like to tell Stevie that?
- Yes.

Tom went to the doll, held it, and made his announcement again. He then told me he would like to draw. He drew himself with a whole body! He asked if he could show the drawing to Ellen.

I was pleased, but apprehensive. What would happen next? Just as Tom was beginning to heal, the Kayes' marriage was floundering.

Unfortunately, my apprehension was accurate. Ellen and Jim had begun counseling, but Jim had refused to continue after a few sessions. He kept telling Ellen that he was OK: "It's your rotten cousin who's to blame." Ellen tried to continue alone, but she, too, stopped after only six sessions.

Tom's behavior in the playroom now began to reflect his anxieties about his parents. He played numerous "monster" games in which the "family" in the dollhouse was attacked by the monster, a plastic spaceman. The Stevie doll was also labeled a "monster" now and was "scary." Tom would knock the family figures down and throw Stevie on the floor. His play seemed to reflect the disruption he was experiencing at home.

Ellen told me each time she brought Tom to therapy that she “was a wreck” and “had to get away.” I tried to persuade her to resume the counseling sessions so that she, at least, would get some relief.

Her response was, “What’s the use? Jim won’t cooperate. He hates my family now and I think he hates me and, I’m ashamed to say this, I think he can’t stand to be around Tom. Tom reminds him of what Eddie did. Jim needs help more than I do, I guess. Now he’s really reacting to the whole event, when at first, I thought he was in control.”

Ellen phoned me often just to talk, and I did try to be her sounding board, but I knew she needed more consistent and sustained help. Meanwhile, Tom began to regress. During the next month, he became preoccupied again with the doctor kit and liked to inflict pain on the Stevie doll. It was as if he needed to exorcise the entire year’s experience. He would jab the syringe into Stevie’s belly button, penis, and “heinie” repeatedly. He used a lot of scatological language, for example:

- [Tom shouted] Stevie is pooh-pooh, pee-pee.
- You sure are mad at Stevie lately.
- He’s pooh-pooh, caa-caa.
- Why is Stevie pooh-pooh, caa-caa?
- Because he is!

At this point, Tom turned to the bear and gleefully called the bear names. He began to lose control, screaming at the bear, then giggling, then screaming, and giggling again. I felt it was time to stop him, and I held him by the shoulders until he calmed down, saying, “Tom, you’re really upset today. Can you tell me why?”

Tom was sobbing, the first time in a while that I had seen him cry. He sat on the floor, and I took two puppets out of the puppet box. Tom liked the rabbit and the cat best.

“Tom, would you like to play with your puppet friends?” I asked. “Here, put these on and talk to me if you can.”

On occasion, Tom had put these puppets on his hands, changed voices, and carried on silly conversations in baby talk. Most of the time, his words were made up and completely unintelligible to me, but he always seemed quiet and peaceful when he played this way. I wanted him to calm down so that perhaps he would reveal what was upsetting him that day. Gradually, Tom stopped weeping and told me that he had seen Eddie on Sunday. Evidently there had been another visit to the Kellers that I didn't know about. I found out from Ellen that evening when I phoned her that she had taken the children to her parents for the weekend to "get away" from Jim—and, of course, Eddie had been home. I told Ellen about Tom's reaction to the visit and begged her not to repeat it until I felt that Tom had gained more strength.

When Tom came for his next session, I asked him to tell me more about the visit if he wanted to, and he was eager to talk about it:

- Daddy didn't come with us. Grandpa bought me a new baseball glove and played with me.
- That's good. You do love your Grandpa.
- Yes, and Grandma, too.

A long silence.

- What is it, Tom?
- I don't love Eddie. No more. He's so bad.
- I know you are angry at him. Did you talk to him on Saturday or Sunday.
- Once. He said, "Hi," to me and went out.
- Did you see him again?
- No. Mommy cried a lot and Grandma cried a lot. Can we play?
- Yes, Tom, we can play.

Tom chose to play with water. He filled the tub but didn't want to use the dolls. He took the plastic pitcher and cups and simply poured water back and forth. He seemed perfectly content to feel the water

and did not want dolls intruding on his pure water play. However, after a while, Tom took the girl doll (also anatomically detailed), undressed her, and asked if he could wash her hair. He then took Stevie, undressed him, and washed his eyes—only his eyes. He poured the water over the girl doll and then dried her and put her on the table.

- This boy (*meaning Stevie*) needs water on his pee-pee—on his heinie. A pee-pee goes in his heinie.
- Tom, who says a pee-pee goes in Stevie’s heinie?
- God says so! *This* doll (*pointing to the girl doll*) has no pee-pee.
- No, she doesn’t. She’s a girl.
- No pee-pee. She’s a girl. I have a pee-pee.
- Yes, you do, Tom.
- I can wash her heinie. I can wash Stevie, too, and clean him all up.
- Yes, you can.

I said to myself, “Tom wants to ‘wash’ away all the bad memories.”

Tom searched in the toy box for something, found a red belt on the dress-up rack, and spanked the girl doll on her “heinie.”

- She doesn’t listen. I’ll make her cry.
- Why doesn’t she listen?
- I’ll hit her again—not too hard!
- Does someone hit you on the heinie?

Tom did not respond but picked up Stevie and brought him to the girl doll: “Watch this, Dorothy. Stevie is peeing on the table.”

Tom dipped Stevie in the tub, turned the doll over, and shouted, “Look, pee-pee comes out. Oh, is he bad. Don’t pee-pee on the table.”

Tom was attempting to re-create through his play some of the unpleasant experiences he had had with Eddie. This play, however, was more calm, more deliberate, than before, when Tom had been more upset, angry, and frightened. As I watched him, I saw that he was the one in control now. He needed to repeat his game until he could master his fears and anxieties, and the more he played, the less worried and anxious he became. What had happened to him could now be talked about with less guilt, less self-blame. Even “God” was the authority who made decisions. Where Tom had got this idea of “God” making the rules about sexual acts, I didn’t know. Perhaps, Eddie had told him this, or perhaps, as many children believe when they need explanations for events that are too confusing or are beyond their ken, “God” had become the source of knowledge.

We were to have many more “doctor” games over the next few weeks. Tom fluctuated between adoring the bear and the Stevie doll and inflicting numerous shots on the “heinie,” on the “pee-pee,” and on the belly button. At one point, Tom decided to “repair” the doll’s penis.

- Is it sick?
- Yep, we need to fix it. There’s a splinter in his pee-pee.

Taking the tweezers out of the kit, Tom pulled the imaginary splinter out of the doll’s penis.

- There, he’s better. All better. No more boo-boo.
- Good, Tom. Stevie’s pee-pee is all better.
- Yes, no one touches it. Only the doctor and his mommy and daddy.
- Yes, you told me that no one touches your pee-pee either, right?
- Right (*shouting*) no one!

I felt that we had come a long way in the few months of therapy—at least in terms of Tom’s acceptance of his body. His drawings were now of a “whole” boy: face, body, arms, and legs. But I was still

concerned about his aggressive behavior. He was disobedient in school, fought with Maureen, and, as Ellen said, “still can’t obey the rules in the house.”

It was time to meet with the Kayes again. I felt that I would like to work more on modifying Tom’s aggressiveness. I would still help him deal with his body image and his identity, but I believed that Tom was self-healing as far as the sexual abuse was concerned. I set a time for our session, wondering if both parents would come. According to Ellen, she and Jim were barely speaking to each other. Surely, the tension in the household must be affecting Tom. It was unfair. Just as he was making some progress, was it possible that he would have to deal with another trauma?

Surprise

Ellen and Jim both came for their session with me.

Despite my warnings, Ellen had taken the children to her parents’ home again: “Tom spoke to Eddie. It was like normal. Look it’s my family. Eddie’s my cousin. He’s getting help.”

Jim interrupted her: “That’s bullshit! He’s drinking, and he’s driving while he’s drinking. I know from the group in town. He’s a mess, and I don’t want my kids near him.”

“*Your* kids,” Ellen said. “You don’t ever talk to them or play with them. We might as well be on another planet.”

I tried to tell them about Tom’s progress and my concern about his reactions to their family squabbles.

Jim interrupted me: “Don’t you know? I’ve moved out!”

“No, I don’t know,” I answered. “That’s important information. I need to know these things, so that I can understand what Tom is experiencing at home, what he has to contend with. How can I help him if I don’t have all the pieces in place?”

Ellen said she was “sorry,” that she “just forgot” to tell me. Clearly, she hadn’t had the courage to tell

me when she brought Tom to therapy twice a week. She hadn't really forgotten but was ashamed and embarrassed or may not have fully understood the impact that this separation would have on Tom. Tom already blamed himself for the part he had played in Eddie's drama, and now I was very much afraid that he would blame himself for his parents' breakup. Being at the center of so much distress, he was fully aware of the disruptions in his parents' and grandparents' lives.

I felt numb and helpless. Unfortunately, the many facets of the lives of clients are beyond the control of the therapist. I asked the Kayes if they would consider marriage counseling. Both shook their heads.

"No," Ellen said. "This goes way back. Jim knows I never loved him. We married because I was pregnant." Here again, Tom had been the innocent "cause" of unhappiness.

"I just want to be totally free of Jim," Ellen went on. "He can visit the kids if he wants to, but I'm filing for a divorce."

Jim sat there stony-faced, as he had on other occasions, and finally agreed that divorce "was for the best," saying that he "could never feel right about Ellen's family again."

Years of resentment toward Ellen, toward Tom, and toward the Kellers had now come to a head: "I just want out. I'll do what's right for them all financially, but I need space."

"Will you please let Tom continue with his therapy?" I asked. They both agreed. But they were adamant in their refusal to try any form of counseling for themselves.

The Kayes left. With a sinking feeling inside, I sat there long after they had driven away. This is the unpredictable nature of psychotherapy with children. Just as I was making progress with Tom, his parents had shattered his world. There was not much that I could do except hope and pray that Tom would continue to see me. I was annoyed and resentful, and I felt betrayed. Why wouldn't Tom's parents try to continue in marriage counseling? Why weren't they concerned about how their divorce would affect Tom? Why hadn't Ellen been more open with me? Did she think of herself as a failure? First, she'd been unable to prevent the sexual abuse of her child, and now her marriage was falling apart. Perhaps she felt inadequate as a parent and as a wife. These were painful issues for Ellen herself to confront. But

what would be their impact on Tom?

Ellen brought Tom to see me one more time and then decided to terminate his therapy. If her reasons were financial, I told her, I would continue to see him at a much reduced fee, or she could bring him to a clinic.

Her answer: “No, it’s not money. I just can’t deal with all this now. Please try to understand. I just don’t want to think about any of this until I know where I’m going.”

In his last session, Tom was unusually quiet. I explained that we would say good-bye now, and he asked me if I would keep his pictures in my playroom: “Keep them here where I play. Keep them safe, Dorothy. Keep my pictures where no one can touch them. Keep them in the folder.”

I promised that I would.

Tom wanted to play a special game this last time. It was a game called “fishing.” He sat the Stevie doll on the couch near him and spread out the seashells from a bucket all over the rug. He pretended he had a “fishing pole” and gave a “pole” to Stevie.

- We’re fishing for big fish and for gold and silver treasure.
- Great. You have a friend, I see, fishing with you.
- Yep, we’re friends.

And so they sat there, quietly “fishing,” sharing a little make-believe game—the kind of wholesome play that I hoped would continue for Tom. We said good-bye and Tom gave me a big hug. As he and Ellen drove away, he waved from the car window and threw me a kiss.

One Year Later

Approximately a year later, I had a phone call from Ellen. She was divorced and had moved to another state. She was now visiting her parents and wondered if I could see Tom: “He isn’t sleeping well. He has scary dreams and wakes up in a cold sweat. I don’t know if he’s thinking about Eddie again, but I

need help. Can we come? I need you to give me the name of someone where I live now. Please, can we come?"

Of course I would see Tom. I was curious about him. I had not heard from the Kayes since our last visit.

Tom remembered the way to the playroom and ran right in. He had grown taller and heavier, but he still had his cowlick. He was missing a tooth, his glasses were as thick-lensed as I had remembered, and he was still awkward in his movements, but his speech had improved significantly. I had been so used to deciphering his difficult speech pattern that it was pure pleasure to be able to understand him so easily.

Tom told me that he saw Jim "a lot": "Dad lets me come every two weeks, and all Christmas and Easter. I can stay with him this summer for one month." He also told me that he liked his new school, missed his grandparents, and had a cat named Tweezer. Tom was in first grade and reading now.

Gradually, Tom told me that he "can't sleep" and had "scary dreams of monsters and mean people who come to hurt me."

- Is there something bothering you, Tom?
- No. I can't remember anything that bothers me.

Tom was certainly bothered by something but, whatever it was, was denying and repressing it. I asked him if he would like to draw another picture for our folder.

- Do you still have it?
- Of course, I do.
- OK, I'll draw two pictures: one of me and one of anything.
- Good.

Tom drew himself: a face with two dots for eyes, a dot for a nose, and a slit for a mouth, very much

like his first face drawing for me of so long ago. He added a square torso—no legs, just a square under the face. Protruding from the square about midway, he drew what looked like a stump for an arm. When I asked Tom if it was his arm, he wouldn't answer and instead asked to draw another picture: dozens of circles, one with features added that made it into a face.

- What is this, Tom?
- It's me all over.

Yes, it was Tom—all over the page, as if he were coming apart. Tom then read a story to me, choosing a book about a space adventure and reading very well. Finally, when our time was up, I told him to write to me if he wanted to. I also said that I would help Mommy find another “play” person for him nearer to home so that he could talk about what was bothering him. Reaching into his pocket, Tom brought out an apple: “This is for you. When I knew I would see you, I saved it from lunch for you.”

I accepted this apple with as much love as if Tom had given me a great treasure. It was, I believe, a sign of the trust he had in me. How I wished we could continue to work together toward a more permanent healing.

I gave Ellen the names of people in her area whom I respected, but I haven't heard from her since.

I put Tom's drawing in his folder among the many drawings of bodyless faces and the few of a whole person. Would Tom ever become that “whole person”?

I often think about Tom and his struggle to restore himself and to find his own identity. I wonder how he is doing now, and I ask myself repeatedly if I could have done anything more for his family, but I realize that a psychotherapist who chooses to work with children is subject to the whims and vagaries of their parents. Like Tom, I was powerless over the events in his life and had to accept my limitations. It is a help to believe that, wherever he is, Tom still preserves both in his memory and in his fantasies, some of the mutual trust and sharing that characterized our relationship. Perhaps it sustains him as he faces new challenges.

