

# **The Clash of Media, Politics, and Sexual Science:**

## **An examination of the controversy surrounding the Psychological Bulletin meta-analysis on the assumed properties of child sexual abuse**

Abstract: Given the recent focus on child sexual abuse (CSA), with significant implications for public policy and therapy, a scientifically valid understanding of CSA is vital. Because most prior reviews of the effects of CSA have been qualitative and based primarily on biased samples, we focused instead on nonclinical samples and the use of quantitative methods. Basic assumptions about CSA that it causes intense harm pervasively regardless of gender were found to be unsupported. Nine months after publication in Psychological Bulletin, our analysis of the college student data came under intense attack by the radical right with assistance from traumatologists associated with the left. This controversy recently culminated with the U.S. House of Representatives condemning the article in a 355-0 vote. We will briefly summarize the methods and findings of our analyses, then focus on subsequent events. Time will be available for attendees to discuss sexual science, the media, and politics.

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### Introduction

On July 12th, this year, the United States House of Representatives voted 355-0 (with 13 members voting „present“) to condemn our study entitled „A meta-analytic examination of assumed properties of child sexual abuse using college samples,“ published in Psychological Bulletin. The Senate quickly followed suit. To our knowledge, never before in the history of this country has a scientific publication been so treated. Over the next half-hour we will describe the sequence of events and the forces behind this unprecedented occurrence. But first, let’s review the study itself.

The Logic Behind our Meta-Analyses and the Results

A tremendous increase in concern over child sexual abuse, or CSA, began in our society in the 1970s and has continued ever since. While positive in that it brought attention to a social problem often ignored in the past, anxiety over CSA reached such heights that it created new problems. From the early 1980s through the early 1990s, day care workers at dozens of sites around the country were arrested and prosecuted on charges of

such crimes as sexually assaulting dozens of children in their care, ritually sacrificing babies, torturing children with weapons, and mutilating animals to scare the children into silence. Almost all of these cases have now been discredited, viewed as the result of a system gone haywire. During the same period, thousands of patients across the country were „recovering“ so-called repressed memories of childhood sexual abuse and sometimes satanic ritual abuse during therapy, resulting in numerous lawsuits against parents and other adults. Diagnoses of multiple personality disorder (MPD) were skyrocketing. The validity of these phenomena are now in serious dispute, owing to extensive research demonstrating the malleability of memory and the power of social influence in the therapeutic setting.

What these cases had in common is the belief that CSA is so traumatic that it produces severe psychopathology. In brief, the thinking goes, memories of the event are repressed as a coping mechanism, but nevertheless produce overt symptoms, which can only be relieved by retrieving the memories. Critics have charged that questionable retrieval methods have produced false memories, leading to the problems just discussed. Because assumptions about CSA have been so central to these phenomena, it follows that systematically and comprehensively testing them is of paramount importance.

Several dozen literature reviews of CSA have been conducted. Most, however, have been narrative reviews that have qualitatively summarized the results of many studies based on clinical or legal samples, concluding that CSA causes such diverse problems as depression, anxiety, dissociation, suicidal ideation, posttraumatic stress disorder (PTSD), and so on. Consistent with common beliefs about the pathogenic nature of all early sexual contact, the reviewers have frequently implied or stated that these symptoms are pervasive in the general population of persons who have experienced CSA. But there are several serious problems with this approach and interpretation. First, we cannot assume that clinical findings generalize; they may be a biased sample of CSA experiences in the general population. Second, we cannot assume that the observed symptoms were caused by CSA, particularly because CSA is frequently confounded with other problems such as emotional neglect and physical abuse. Third, narrative reviews are subjective, meaning that reviewers with an initial belief in the conclusion may fall prey to confirmation bias emphasizing findings that support their view and minimizing or ignoring unsupportive findings.

To address these shortcomings, we conducted two reviews of CSA. In the first, published in 1997 in *The Journal of Sex Research*, we included only studies based on national probability samples so as to avoid the all-too-common practice of focusing on clinical samples and then inappropriately inferring to the general population. We analyzed the data quantitatively rather than narratively, to strive for greater objectivity. In particular, we used meta-analysis, a technique that statistically

summarizes data across studies and not only tells us about statistical significance but also about the strength or magnitude of association. We found that, although statistically significant, the association between CSA and adjustment was small: a Pearson correlation of  $r = .07$  for males and  $r = .10$  for females. This contradicted the assumption that CSA produces lasting, intense symptoms. We also found that CSA was confounded with family and social environment, meaning that the assumption that CSA is the cause of maladjustment in the typical case is questionable.

To extend this research, we conducted a second review, the one published in *Psychological Bulletin* in July 1998, on which the subsequent controversy centered. In this review, we focused on studies based on college samples. The rationale was that these studies comprise the largest body of nonclinical research on CSA, that they are more representative of CSA experiences in the general population than are clinical cases (because some 50% of the population in the U.S. has college experience), and they are rich in family environment data, which are relevant to examining whether CSA causes symptoms. As in the first review, we used meta-analysis to increase objectivity. Once again, we found a small association between CSA and adjustment. This association was, in fact, exactly the same as in the national samples, and associations were consistently small across 18 different symptoms. Further, prevalence rates for types of CSA, frequency of occurrence, and the extent of incest were all very similar in both types of samples. We found that CSA was confounded with family environment, and that family environment better accounted for differences in adjustment than CSA did by a factor of almost 10. We also found that self-reported reactions to the CSA and self-reports of harm from the CSA were highly variable, rather than always being negative. For example, 37% of boys reacted positively, 29% neutrally, and 33% negatively.

In sum, testing assumptions about CSA is important. But this testing has to be methodologically sound. We improved over previous reviews by focusing on more generalizable samples and examining their data statistically that is, more objectively. We found that common assumptions about CSA do not hold up well in the general population. CSA-symptom associations are small, the causal connection between these factors is far from certain, and negative reactions are far from pervasive.

## Chronology of the Controversy

### NARTH

Our article appeared in print in July 1998. Nearly half a year later, in December, an organization called the National Association for Research and Therapy of Homosexuality (NARTH) attacked our study on their website. The home page of NARTH's website tells us that the core of its membership consists of psychoanalysts and psychoanalytically-informed psychologists, which describes well its three founders: Charles Socarides, Benjamin Kaufman, and Joseph Nicolosi. These men founded the organization in 1992 to combat what they claim to be the erosion of the scientific study of homosexuality. NARTH states that homosexuality is a mental disorder caused by conscious and unconscious conflicts, is a „sign that deep emotional wounding has occurred,“ and is the cause of intense suffering because it „distorts the natural bond of friendship“ between members of the same sex and „works against . . . the all-important family unit.“

Socarides, NARTH's president, wrote in JAMA in 1970 that „homosexuality is a dread dysfunction, malignant in character, that has risen to epidemic proportions.“ More recently, in 1995, he wrote that the removal of homosexuality as a mental disorder from DSM was a „Trojan Horse which, once admitted into the gates of the heterosexual world, has led to a sexual and social dementia.“ He asserted that homosexuality „is a freedom that cannot be given.“ Nicolosi, NARTH's executive director, has written that gay sex is neurotically driven with an addictive dimension that is not about sex itself, but instead about stabilizing the homosexual's „fragmented personality structure.“ In support of these claims, NARTH cites decades-old psychoanalytic studies based on highly unrepresentative clinical samples (e.g., Bieber, 1962) to argue that homosexuality is caused by factors such as poor family relationships, sexual seduction in childhood or adolescence, a sense of inadequacy with same-sex peers, and self-labeling. To argue that homosexuality is unnatural and therefore pathological, they speak of the „essential male/female design“ and „immutable laws of nature.“ In short, although NARTH claims to be „devoted to scientific inquiry,“ their approach is patently moralistic and lacking in scientific rigor.

With this background in mind, let's now consider NARTH's critique of our meta-analysis. At the beginning of our article we criticized most previous literature reviews of CSA for focusing on clinical samples and then extrapolating from these to the general population, assuming that correlation was synonymous with causation, and ignoring confounds between CSA and other problems such as physical and emotional abuse. In criticizing our paper, NARTH repeated these errors. They listed dire symptom after dire symptom based on mostly clinical samples, asserted or implied that all persons in the population with CSA experiences are so afflicted and that CSA is the unambiguous causal agent, and ignored or dismissed research unsupportive of their view. Their critique of our review was consistent with the poor quality of their „scientific“ analysis of homosexuality.

Despite its shortcomings, NARTH's critique played a key role in a chain reaction that ended in congressional condemnation of our review. In fact, it became a standard „refutation“ of our review for conservatives around the country.

### The Wanderer

The next development occurred in early March when a conservative Catholic newspaper named The Wanderer picked up where NARTH left off. Basing its attack entirely on information from NARTH, The Wanderer article concluded that our review was a „pseudo-professional, pseudo-academic analysis.“ It claimed that „a team of academics from Temple University has endorsed the view that adult-child sexual relations are beneficial . . . and recommends overhauling and euphemizing the language of sexual abuse.“ It expressed regrets that homosexuality was depathologized and feared the same would now happen to pedophilia. In fact, they, as NARTH did, implied connections between homosexuality and pedophilia a favorite conservative theme.

Next, a listener to a Philadelphia radio talk show sent a copy of The Wanderer article to the show's host, who, we were later told, had been

criticizing Temple University for years. The host invited one of us (Philip Tromovitch) to appear on air, whereupon he used this opportunity to sensationalize the study and attack Temple University. An outraged listener, of which there were many as witnessed by the dozens upon dozens of listeners calling Temple's psychology department to air their outrage, sent a letter to conservative radio talk-show host Dr. Laura Schlessinger, informing her about this.

#### Dr. Laura

Dr. Laura runs a nationwide syndicated radio talk show, broadcast daily by about 485 radio stations in the U.S. and Canada, reaching about 20 million listeners. She also has a syndicated newspaper column. *Vanity Fair* magazine dubbed her „the poster girl of the Christian fundamentalists.“ Indeed, she espouses conservative, family-values positions in an often caustic style, which helps account for her huge following of both fans and detractors. Dr. Laura has said that NARTH is an organization she respects and has stated that homosexuality is „a biological developmental error biological mistake.“

In her attack on our article, which began March 22nd, she denounced meta-analysis as putting a bunch of meaningless findings together and stirring them up with mathematics. She asserted that she had never heard of a real scientist using such procedures revealing her ignorance of its widespread use not just in psychology but in other disciplines, such as medicine. Her evidence that our article was „junk science,“ as she repeatedly called it, came from sources such as NARTH, whose verbatim comments she presented without attribution in her mid-April syndicated newspaper column.

#### The World

The conservative attack on our article, or more precisely, the straw-man version of it manufactured by NARTH and Dr. Laura, continued to expand. Another conservative religious newspaper called *The World* articulated more explicitly the homophobic concern implied in prior conservative attacks. The author claimed that the positive reactions reported by males were „abundant evidence that child molesting turns its victims toward homosexuality.“ He lamented the removal of homosexuality as a category of mental illness from DSM, adding that:

„One can only marvel at how the 3 percent of the population that is homosexual exerts such an influence on the culture, while the 80 percent that claims to be Christian and the 43 percent that goes to church every Sunday seem to exert no influence whatsoever.“

#### The Family Research Council

A conservative lobbying group, The Family Research Council or FRC, soon entered the fray. On their website they say their organization exists to „reaffirm and promote nationally . . . the traditional family unit and the Judeo-Christian value system upon which it is built.“ They produce newsletters such as the weekly *CultureFacts*, which they say „keeps watch over political and cultural forces that threaten the traditional family, with a special focus on the homosexual agenda.“ Their website also

features an „in depth“ examination of „homosexual culture,“ where they say that the „FRC believes that homosexuality is unhealthy, immoral and destructive to individuals, families and society.“

In support of their beliefs about homosexuality, the FRC has posted a series of articles, presented as „scientific,“ attacking homosexuality. In one, NARTH executive director Joseph Nicolosi claims that people cannot decide their sexual identity until they are in their 20s. In another, written by Thomas Landass entitled „The Evelyn Hooker Study and the Normalization of Homosexuality,“ the author attempts to undermine the credibility of Hooker’s landmark 1957 study. To do so, he complains that Hooker says in the text of her article that the subjects’ IQ range was from 90 to 135, but the table shows the lowest IQ as 91. He also notes that the average education for the homosexual subjects was 14.0, not the 13.9 that Hooker reported. He argued that, although minor in degree, these discrepancies suggest that we cannot trust Hooker as a researcher, and elsewhere repeatedly called her a „rat-runner,“ implying that we could not trust her measurements of humans.

On May 12th the FRC held a press conference in Washington, DC, to attack our study and demand that the American Psychological Association (APA) repudiate it. Participants included Dr. Laura, whom they have praised on their website for her defense of the family; Judith Reisman, known for her unsupported claims that Kinsey and his colleagues sexually abused hundreds of children in their research and for her more recent attacks on Vern Bullough, historian of sexuality and former president of SSSS, by falsely calling him „a self-confessed pedophile;“ a representative from NARTH; and three conservative Republican congressmen. In their press release they presented a straw-man version of our article by saying it was „based on the premise that a child can actually consent to sex with an adult.“

#### Congress Attacks APA with Misinformation From a New Group

Two days after this press conference, Dr. Raymond Fowler, CEO of the APA, appeared on MSNBC with one of the congressmen. The congressman said that our study was „a very, very bad study . . . based on some very, very bad data“ and that it should never have been published. Fowler replied that, „Well, with all due respect, it isn’t a bad study. It’s been peer-reviewed by the same principles as any kind of scientific publication. It’s been examined by statistical experts. It’s a good study.“ The congressman disagreed, saying that our study was based on „what they call meta-analysis, where they take a whole bunch of studies and put them together. But a whole bunch of studies that they put in this study were never peer-reviewed, and 60% of them were based on one study done over 40 years ago in 1946 [sic].“

After the show Dr. Fowler contacted us and asked what was going on with this 60% figure, saying that members of Congress were using it as „major data for discrediting“ both the APA and us. He also indicated that the source of this criticism was Paul J. Fink, former president of the American Psychiatric Association and current president of a new group called the Leadership Council for Mental Health, Justice and the Media, for whom Fink was speaking. Fowler said that Fink had sent a letter to Dr. Laura with these criticisms, which eventually ended up in the hands of Congress. Fowler wrote to Fink, asking him what his organization was all

about and what were its exact criticisms.

Fink claimed that, of the 59 studies we used, over 60% of the data came from one single study conducted 40 years ago by Landis (1956). He asserted that we „loaded“ our analysis with these data, implying that we intentionally tried to skew the results to minimize negative outcomes. We pointed out to Fowler that the Landis study was not used at all in our meta-analyses of symptoms, the core of our article. We further noted that we had used the Landis data in two secondary analyses, one on self-reported reactions to CSA and the other on self-reported effects of CSA. Ironically, the Landis data were the most negative of all studies in terms of reactions. His sample was the largest, comprising a third not 60% of the data on reactions. In our review we calculated the weighted means across samples, so that completely contrary to Fink’s claim we handled the Landis data in a way that maximized the reporting of negative outcomes. Dropping the Landis study would mean that positive reactions for boys would go from 37% up to 50% and negatives would drop from 33% to 24%. The trend is similar for females. In our analysis of self-reported effects, in which there were very few studies and the Landis data were the least negative and where they did account for about 60% of the data we calculated unweighted means, which avoided any minimization of negative outcomes, again, contrary to Fink’s accusation.

The second criticism from Fink’s group, and one repeated by congressmen and by other critics in the media, was that many of the studies we included were never peer reviewed. As premier meta-analyst Robert Rosenthal has argued, unpublished data „should indeed be cited and employed in meta-analytic computations as long as the data were well collected“ it is in fact standard practice for reviewers conducting analyses to attempt to locate and include unpublished data. The unpublished data we included came almost entirely from doctoral dissertations, which, as most academics know, are generally well supervised by a group of Ph.D.s from design, through data collection, to presentation. Even more importantly, in our review we actually compared the CSA-symptom association in the unpublished and published studies a fact that has been completely ignored by our critics. The mean associations were both small (unpublished data  $r = .08$ ; published data  $r = .11$ ) and were not statistically significantly different, and certainly not different in a practical sense. In short, the unpublished and the published data were telling the same story.

Despite the erroneous nature of these criticisms, Fink’s group provided them to Dr. Laura, and eventually to certain congressmen who then used them as a justification for attacking the APA for publishing what almost all of the critics now routinely referred to as „junk science.“

More on the Leadership Council for Mental Health, Justice, and the Media

Fink’s group presents itself as a nonprofit organization whose mission is „to disseminate accurate information about the psychological sciences to the public.“ They claim to be composed of national leaders in psychology, medicine, law, and journalism, who are „committed to promoting the ethical application of science to public welfare.“ However, their membership appears to consist mainly of persons who practice or advocate what has been termed „recovered memory therapy,“ which is typically centered on

psychoanalytic or psychodynamic assumptions, particularly the repression of memories of CSA experiences. Many of their members have expressed support for a belief in multiple personality disorder (MPD), and some have even expressed belief in the reality of satanic ritual abuse (SRA) presumably perpetrated by large and well-organized but completely hidden cults (both of these areas have been fraught with controversy and supporters of these beliefs have been strongly criticized by many other therapists and researchers). Some of the Leadership Council's key members have been sued by former patients who claimed they received false diagnoses of MPD, causing severe iatrogenic harm in them and their family members.

In correspondence to APA, Fink wrote that his group's goals are to „preserve the integrity of dynamic psychotherapy and the utilization of anemnesis [sic].“ He wrote that „we also want to protect GOOD psychotherapists from attack and from financial ruin as a result of suits that are costly both financially and emotionally.“ He complained about the „destructive theories that justify a trivialization of sexual abuse“ and about the „effort to reduce and destroy psychotherapy by undermining some of the basic principles by which we conduct our work.“ These statements suggest that the Leadership Council has a very clear agenda: to protect the practice of recovered memory therapy and diagnoses of MPD from lawsuits and from ideas that challenge the validity of these practices. Our finding that CSA is not strongly associated with maladjustment in the general population, and our conclusion that more focus is needed on other childhood problems such as emotional neglect and physical abuse, call into question some basic assumptions of recovered memory therapy: that early sexual experience is typically very traumatic, often resulting in repressed memories, which produce neuroses during adulthood, which will persist unless and until these memories are recovered, permitting abreaction (relief of symptoms). Thus, the Leadership Council has a strong motive to attack, and even distort, our analyses.

#### Despite APA Concessions, Congress Condemns our Study

Thanks to a coalition of right-wing conservatives, two sorts of psychoanalysts anti-homosexual and repressed memory advocates and conservative Republican congressmen, the APA found itself in the middle of a storm. As Fowler commented to us on June 8th, he was „in hand to hand combat with congressmen, talk show hosts, the Christian Right and the American Psychiatric Association.“ This pressure, especially from Congress with whom the APA must negotiate for political support and funding for both clinical treatment and behavioral research proved to be too great. On June 9th, Fowler wrote a letter to Congressman Tom Delay, one of the conservative Republicans who appeared at the FRC's May 12th press conference. He began by stating that he commended Representative DeLay for his strong stand against sexual abuse. Later he wrote that our article „included opinions of the authors that are inconsistent with APA's stated and deeply held positions“ and that „sexual activity between children and adults should never be considered or labeled harmless.“ Finally, Fowler offered a series of unprecedented concessions, among them that the APA would seek independent evaluation of the scientific quality of our article thus overriding the independence of the peer-review process and that its journal editors would be asked to „fully consider the social policy implications of articles on controversial topics.“



Despite these concessions, on July 12th the U.S. House of Representatives voted 355-0 to condemn certain conclusions of our article; the Senate quickly followed suit. The APA itself was not attacked in the final version of the resolution, which stated, among other things:

Whereas all credible studies in this area . . . condemn child sexual abuse as criminal and harmful to children; . . .

Whereas the Psychological Bulletin has recently published a severely flawed study, entitled "A Meta-Analytic Examination of Assumed Properties of Child Sexual Abuse Using College Samples" . . .

That Congress . . . condemns and denounces all suggestions in the article . . . that indicate that sexual relationships between adults and „willing“ children are less harmful than believed and might be positive for „willing“ children . . . [and] any suggestion that sexual relations between children and adults regardless of the child’s frame of mind are anything but abusive [and] destructive . . .

[and that Congress] encourages competent investigations to continue to research the effects of child sexual abuse using the best methodology, so that the public, and public policymakers, may act upon accurate information.

Nicely capturing the essence of these events, an anonymous attendee, unknown to us, at this year’s APA conference in Boston posted a sticker around the site that read, „If the US Congress says that ‘The sun revolves around the earth,’ then that fact will be given most careful consideration in all articles published by the APA.“

#### An Answer to Two Common Attacks

Throughout the controversy, two vehement criticisms emerged repeatedly: that we wrote of some experiences labeled as CSA as being willing or consenting, and that we suggested that value-neutral terms such as adult-child sex or adult-adolescent sex should be used in place of the term „child sexual abuse“ under certain circumstances. NARTH asserted that non-coerced sex is a misnomer and that using value-neutral terms constitutes a „repetition of the steps by which homosexuality was normalized.“ Dr. Laura agreed that such contacts are never willing and that value-neutral terms were an attempt to normalize pedophilia, which will further destroy the family. The Family Research Council claimed that our study was „based on the premise that children can actually consent to sex with an adult.“ Their spokeswoman added that „children cannot consent to sex and any study that does not accept this premise should be dismissed,“ and also that „adult-child sex is always reprehensible, always harmful and always forced.“ The Leadership Council claimed that we made „an artificial distinction between force and consent“ and that „value-neutral terminology normalizes child sexual abuse.“ Steven Mirin, Medical Director of the American Psychiatric Association, in a letter written to the FRC, similarly rejected the notion of consent and asserted that „academic hair-splitting over whether the act should be considered adult-child sex or child sexual abuse . . . is not in the public interest and obfuscates the moral issue involved.“ Congress enclosed the term

willing in quotation marks in its resolution and denounced the suggestion that „willing“ children are less harmed than believed. Fowler of the APA wrote in his letter to Tom DeLay that:

Clearly, the article included opinions of the authors that are inconsistent with APA’s stated and deeply held positions. . . . It is the position of the Association that sexual activity between children and adults should never be considered or labeled as harmless or acceptable. Furthermore, it is the position of the Association that children cannot consent to sexual activity with adults.  
Terminology and Definition of CSA

In our original drafts, we did not suggest the use of value-neutral terms. In fact, our lengthy section in the Discussion entitled „Child sexual abuse as a construct reconsidered“ had not been written. In accepting our article for publication, the action editor wrote that the „major and most difficult issue to address is the central one raised by Reviewer A concerning the conceptual and definitional issues . . . [that] might need to be reconsidered in light of your findings.“ After noting that 37% of males reacted positively to their CSA experience at the time, and 42% in retrospect, he wrote:

Although these experiences might meet legal and social definitions, the data suggest that the operationalizations employed might not sufficiently contextualize the events in such a way that adequately captures the essence of „abuse.“ Please note that I am not condoning behaviors that meet current definitions of CSA any more than I condone illicit substance use in minors. Indeed, both types of behaviors are legally and socially proscribed. Both, however, need to be contextualized in order to carefully assess their pathogenicity. . . . [P]erhaps we need to be more thoughtful about how we define CSA at a psychological level. That is, current definitions may not be sufficiently probing. I base this conclusion on the data regarding the extent that such experiences were positive, and the extent that such experiences correlate with outcome in men if the CSA was unwanted. . . . I’m not encouraging a conceptual definition that requires harm as an effect . . . but one which captures the essence of „abuse“ . . . . With respect to the „big picture,“ I think you need to . . . spend more time in your discussion elaborating the conceptual and operational implications of your review. I believe that, in doing this, you can make the substantive contribution sufficient to warrant publication in Psychological Bulletin.

Reviewer A had noted that the definitions for CSA have been too broad, such that the „result is poor predictive utility.“ The idea is that differences in adjustment would be better accounted for if the term CSA were restricted to a subset of the very wide range of experiences that are currently labeled CSA, and that this would advance understanding of CSA and prediction of its effects. Hence, our assignment was to reconceptualize the term „child sexual abuse.“ We carefully outlined the problems caused in the past by the mixing of morality and science in other areas of sexuality; we noted how several researchers came to question their broad usage of the term „child sexual abuse“ after gathering empirical data; we provided the scientific rationale for reconsidering terminology (to improve predictive validity); and finally, based on this background, we made our suggestions. Our actions were a direct consequence

of the editorial process, and we believe they were well grounded in science.

## Consent

We were also attacked repeatedly for using the construct of consent. The argument was that „children“ cannot consent, so our supposed premise was false. In Webster’s 3rd New International Dictionary, the first definition of consent is: „compliance or approval especially of what is done or proposed by another.“ This definition can be termed „simple consent,“ of which children and adolescents are certainly capable; in fact, ethical guidelines for research with adolescents and children typically require researchers to obtain the agreement or assent of the participant. The second definition is: „capable, deliberate, and voluntary agreement to or concurrence in some act or purpose implying physical and mental power and free action.“ This second definition is „informed consent,“ which the law takes into account and which is also the typical ethical and social definition. Thus, the term „consent“ clearly does not always or inevitably imply informed consent. More important from a scientific view is the value of simple consent in discriminating reactions or outcomes. If simple consent discriminates, then it is scientifically valid for use in research, irrespective of moral or ethical objections.

Many studies in our review distinguished between consenting and forced acts. We merely compiled the relevant data and examined the value of consent as a predictor of outcomes. It had utility, it did discriminate, and it was therefore scientifically valid to use as a construct. The studies we reviewed generally defined CSA either as a child or adolescent’s sexual experience that was unwanted regardless of partner’s age, or as wanted or unwanted experiences with someone older typically, at least 5 years older. We merely contrasted study effects from these two groups to examine the value of „consent“ as a predictor of outcomes. This analysis clearly demonstrated the utility of distinguishing unwanted from wanted (i.e., consenting) experiences in terms of predicting outcome.

The procedure that we used, however, was not completely satisfactory, because the second category (which included both wanted and unwanted experiences) overlapped with the first (which only included unwanted experiences). Unfortunately, researchers almost never analyzed outcome data as a function of consent. The first and only study that we are aware of that has cleanly done this was published earlier this year in BMJ (formerly The British Medical Journal). Coxell and his colleagues, all abuse researchers, examined a nonclinical sample of nearly 2,500 men in Great Britain, recruited from general medical practices. They were interested in psychological correlates of non-consenting sexual experiences, but also inquired about sexual things the men had done prior to age 16 with someone at least 5 years older that they had wanted to do, so as not to miss these „abusive“ experiences. Throughout their paper they distinguished repeatedly between consensual sex and non-consensual sex their terms. They found that 5.3% of the men had had non-consenting sex prior to age 16 (with peers or persons significantly older), but that 7.7% had had consensual sex prior to age 16 with persons significantly older. We examined the findings reported for their key dependent measure, which was whether the men had reported a psychological problem of at least two weeks duration sometime in their life. We compared their results for three

groups of men on this measure: those with no CSA prior to age 16, those with consensual CSA, and those with non-consenting CSA. The results were that the consenting group had no more problems than the control group, with a very small effect size ( $r = .02$ ). However, the non-consenting group had significantly more problems than either of these groups, with an effect size of  $r = .10$  when compared to the control group and a somewhat larger effect size when compared to the consenting group ( $r = .15$ ). These results, obtained by abuse researchers using a huge nonclinical sample where consent served as an explicit key moderating variable, provide very strong support for the utility of the simple consent construct.

It should also be made clear that when Congress, the Leadership Council, the Family Research Council, or even the APA is talking about „children“ in the context of sexual relations with adults, they are not using biological definitions of childhood, but instead are referring to minors under the age of consent, which is generally from 16 to 18 in the U.S. Thus, they are talking not only about prepubescent children, but also adolescents. It is thus informative to review what the APA has had to say in the past about adolescents' ability to provide informed consent in a different context. In an October, 1989 amicus brief to the U.S. Supreme Court, the APA argued, based on a review of the developmental literature, that pregnant girls do not need parental consent to obtain abortions, because they are capable, in an informed consent sense, to decide for themselves. They wrote:

Psychological theory and research about cognitive, social and moral development strongly supports the conclusion that most adolescents are competent to make informed decisions about important life situations. . . . In fact, by middle adolescence (age 14-15) young people develop abilities similar to adults in reasoning about moral dilemmas, understanding social rules and laws, and reasoning about interpersonal relationships and interpersonal problems. . . . By middle adolescence most young people develop an adult-like identity and understanding of self. . . . Thus, by age 14 most adolescents have developed adult-like intellectual and social capacities including specific abilities outlined in the law as necessary for understanding treatment alternatives, considering risks and benefits, and giving legally competent consent. . . . [Additionally,] there are some 11-to-13-year-olds who possess adult-like capabilities in these areas.

In view of these conclusions, which are based on the developmental literature, it seems inconsistent to reject even simple consent as a moderating variable in a rigorously peer-reviewed article, given that many of the CSA episodes analyzed involved adolescents. In short, the scientific data demonstrate the utility of consent, in the sense of simple consent or willingness, as a moderating variable. Thus, simple consent is a valid scientific construct for predicting and understanding the outcomes associated with CSA experiences.

## Conclusion

AAAS Declines Independent Review; Criticizes Politicization, Misrepresentation of Our Article

The most recent development of which we are aware was the decision of the American Association for the Advancement of Science (AAAS) regarding the

APA's request that they perform an independent review of our Psychological Bulletin article. On September 15th, the AAAS Committee on Scientific Freedom and Responsibility voted not to conduct the evaluation. Their letter communicating this decision to the APA is very important in terms of the rationale behind their decision. The Committee reported that „ . . . two independent consultants were asked to assist the Committee in determining what assessment criteria and effort would be involved in conducting a full-scale evaluation of the underlying science and methodology,“ and that they made their decision „taking into account the views of the two consultants and extensive background materials on reactions to the published article.“ They stated that „We see no reason to second-guess the process of peer review used by the APA journal in its decision to publish“ and went on to say that „we saw no clear evidence of improper application of methodology or other questionable practices on the part of the article's authors.“ In rebuke of our critics, they went on to say that:

The Committee also wishes to express its grave concerns with the politicization of the debate over the article's methods and findings . . . we found it deeply disconcerting that so many of the comments made by those in the political arena and in the media indicate a lack of understanding of the analysis presented by the authors or misrepresented the article's findings. All citizens, especially those in a position of public trust, have a responsibility to be accurate about the evidence that informs their public statements. We see little indication of that from the most vocal on this matter, behavior that the Committee finds very distressing.

#### Concluding Remarks

Our meta-analysis was accepted for publication in APA's most prestigious journal after a rigorous peer-review because it was seen as advancing the field. We believe it did. It brought methodological rigor into an area that needed this. Issues of generalizability, causation, and validity of constructs in relation to CSA were systematically addressed issues that are at the very center of sound science. But our research has been severely attacked by a coalition of psychoanalysts and religious conservatives who have succeeded in mischaracterizing our research as „junk science,“ having it condemned by the U.S. government, and pressuring the APA to act politically at the expense of scientific integrity. We see little evidence that our critics are truly concerned with issues of generalizability, causation, statistical precision, or rigorous assessment of assumptions. Their push is patently not toward scientific advancement. We do not claim to have issued some final truth on CSA, but we can confidently assert that we adhered to true scientific methodology in its pursuit.

[end]





