Book Review


Reviewed by Eric Medcalf

When a boy is sexually abused he suffers an assault on his body, his developing personality and on his manhood. Our socialisation tells us that men are not supposed to be victims. We are meant to be in control of our environment. To be abused sexually by an adult man, or a woman is a challenge to the way we see ourselves and a betrayal of the trust that is necessary for healthy development. The consequences are distortions of inter- and intra-personal functioning, dissociative patterns, misplaced aggression and, often, repeated failure to engage in satisfying relationships with others. Typically men find it difficult to disclose their abuse histories and to seek treatment. They fear the reactions of others, that their experience will be minimised or redefined as some kind of lucky initiation into manhood. It is estimated that the proportion of men coming forward is still a small percentage of those who have suffered at the hands of predatory adults, most of whom will have been in positions of trust.

Since the (re)emergence into public debate of the reality of the sexual abuse of children by adults, psychotherapists have had to develop a multi-faceted perspective on a phenomenon which is at all times political, social, spiritual and psychological. Ever since Freud was forced by public and professional pressure to revise his theory of incest, psychotherapists have had to work with their patients’, society’s and their own complex personal reactions to the sexual abuse of children.

In “Betrayed as Boys” Gartner builds upon a growing literature that has entered both public and clinical arenas to raise awareness, increase skills and perhaps also to play a role in the prevention of future abuse. He draws upon the work of other therapists and researchers, many of whom have been trailblazers in raising the level of awareness and skill in this field, and combines them with his own thinking and experience to produce a work which is of considerable value to both experienced and trainee therapists. He writes relevant and moving vignettes from his work with sexually abused men in individual, group and family settings, using them to illustrate discussions on causes, effects and treatment.

The breadth of this book is impressive. Gartner can draw us down from the sociopolitical to the intensely personal. Both the macro and the micro must be accommodated and worked with in therapy. For example, in discussing issues such as male sexual abuse as
“initiation” he comments on the role of media in perpetuating myths that are unhelpful in promoting defences against the reality and pain of abuse. The balance between description of practice and literature review in this book is to be applauded, they interweave throughout. At the end I felt I had a real sense of Gartner as a man and as a therapist.

Richard Gartner practises as an individual, family and group psychotherapist, supervisor and teacher. From his writing it appears to me that his analytical basis is eclectic. Like many others in this field he draws from classical analytic concepts at the same time as acknowledging the usefulness of cognitive behavioural techniques. The humanity of his responses to his patients, informed by his honest reflection and wide study supports once again the research findings that it is the personality of the therapist and their relationship with the patient that is the most reliable predictor of clinical outcome. To succeed in any trauma work the therapist has to be “real”. We cannot remain unmoved by the stories told and the reactions shown, and of course, in picking up this book as readers we can expect to be affected by what we read.

Much has been written on the effects of sexual child abuse. In his concentration on the effects on men Gartner acknowledges that there is much that is similar to the effects on women but also declares that there are affects that are specific to men, not least being the attack on their sense of manhood – men are not supposed to be victims. The author’s colleague Dr Sue Shapiro presents this quite succinctly when she says:

childhood sexual abuse does more damage to boys’ sense of themselves as “men” than to girls’ sense of themselves as “women”. Perhaps this is because being a victim is unfortunately congruent with traditional views of femininity.

Wisely, Gartner asked Dr. Shapiro to write a section for the book from the perspective of a female therapist working with men. Whilst this is within the explicit context of a discussion about therapist gender choice I found Shapiro’s contribution provided a useful commentary on other aspects of the work. At times she comments directly, at others she provides other perspectives on issues such as eroticised transference, unwitting countertransference and “seductive undercurrents” (p291). Like her colleague she is impressively open about her own reactions.

The degree to which Gartner is willing to share his own vulnerabilities is impressive. His reflection on his own countertransferential responses clearly has made for success in working with a group of patients that provides considerable personal challenge to the psychotherapist. A powerful example of this is his description of his reactions when his patient “Patrick” (whose story permeates the text) removed his pants in session:

..my interior life was chaotic as we struggled about the meaning of what he had done. I felt tantalized and seduced, stimulated to have exciting but bewildering feelings while feeling dimly that I might be humiliated because of the inappropriateness of those feelings to the situation. …I wondered what would happen if my colleagues found out that my patient had partially disrobed during a session. I wondered whether in some way I had been unconsciously seductive with Patrick, and whether his getting undressed was a response to inappropriate behaviour on my part. (p249)

There is much discussion of transference in the patient/therapist relationship. This has value beyond the specific focus of the book. The chapter entitled “The Patient-Therapist Dyad” would make a useful introduction to the principles of working with transference. I would have liked both Gartner and Dr Shapiro to have de-
scribed more the use they make of disclosure of their own responses in their work. There are tantalising glimpses of this within the book, including a powerful description by Shapiro of an erotic dream she experienced and then (by implication in her writing) shared with her patient. A discussion of the thinking that supports the degree and timing of such disclosure would have been helpful from both writers.

I particularly enjoyed the chapter on “Dissociation and Multiple Self States”. It is not so long ago that there was a generalisation that women dissociated whilst men acted out. Gartner’s discussion of the topic of dissociation as a reaction to trauma reflects the increasing attention to this area in the literature. The movement towards a DSM diagnostic of “Complex Post Traumatic Stress Disorder is built almost entirely upon the experience of clinicians in working with dissociative patients who have suffered from persistent abuse in their childhoods. It was good to see Gartner referring to Briere’s assertion of “…dissociation as an adaptational talent rather than as a pathological defence.” (p155). Gartner avoids an overemphasis on diagnostic categorisation. To promote positive and non-pathological ways of describing a person’s attempts to retain a sense of identity in the face of overwhelming trauma must be helpful. In a discussion on multiple dissociated selves he asserts recent notions of a natural and healthy multiplicity, quoting Shakespeare: “to thine own selves be true” Laertes advises Hamlet.

The author writes helpfully about his experience of running groups with abused men. He presents arguments from experience and research in discussion of issues such as mixing gay and straight men in a group (he affirms Lew’s position that “..we are dealing with issues of sexual child abuse, not sexual orientation”) and whether to have abusers and victims in the same group (not unless the abuser did so as a child or adolescent and was not now a perpetrator). Groupwork with abused men is not as available as it needs to be, this chapter in particular will be helpful to therapists embarking on such work. And hopefully encourage others to consider it as an option.

In summary, this is a book to which I will return. It connects on an academic, practical and emotional level and as such will provide much to therapists working with men. In that way it will hopefully also serve to provide help to those many men who increasingly are deciding to acknowledge their abuse histories and seek assistance in their journeys to recovery. To accompany these men on their journey can be a very stormy ride, to have Richard Gartner’s book by our side can offer stimulation, support and comfort.

Eric Medcalf, BA (Hons); Cert.Appl.Soc.Stud. (Aberdeen); C.Q.S.W.; Dip. Psychother. (Sheffield); MNZAC. Psychotherapist and Supervisor in Private Practice, Wellington, New Zealand Email: eric.medcalf@paradise.net.nz.