

RAD, Animal Cruelty, and Allegations of Torture: Conducting a Thorough Child Assessment

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Amanda sat on the couch across the room from me drawing on a sketch pad. She was a lovely young girl of fourteen, hair black as coal and straight and smooth as silk. This barely pubescent teen weighed scarcely 100 pounds and with her cheery and naïve smile, she looked as innocent as they come. If I hadn't seen attachment disorders many times before, I could easily be fooled by her carefree air and seemingly open-book candor. Could this child really have done what she had been accused of? I've seen dozens of children who have been accused of animal cruelty, rape, and even murder. I knew better than to be fooled by the crafty façade of which children like this are capable.

The case: The call on my cell phone came to me from the social worker of a foster care agency. As I drove through Atlanta traffic, she explained that two family pets had been horribly violated in a sexual way, injuries so serious that both dogs had required surgery. Objects had been inserted into both dog's vaginas to the point that their uteri were perforated. Amanda was the prime suspect and the case was being investigated by the county sheriff's department. The child's background was classic for reactive attachment disorder (RAD). Very early in life she had been abused both physically and sexually, at which time she was removed from her biological parents' home and placed in foster care. Early attachment problems were present in her case file, including sexual acting out and some indication of cruelty to animals.

Circumstantial evidence pointed to Amanda as well. She was the caretaker of the pets and was often unsupervised. She was the last one to be seen with the dogs before their injuries and her home was in a remote, rural area, making it unlikely some random perpetrator was at fault. My heart sank as I felt certain I had another case of a seriously disturbed child and I made an appointment to do an assessment with Amanda within the next few days.

But things are not always what they seem.

The assessment: I could easily have conducted my in-office assessment, written my report, submitted my bill, and been done with it. But this would not have given me the fullest picture of Amanda and the extenuating circumstances this situation presented. Prior cases like Amanda's that I had worked were clear. Children with RAD often begin displaying disturbing behavior in early childhood – sometimes in infancy. These behaviors become progressively worse until parents or guardians eventually run out of ideas for coping. By the time they come to my office, these children have often sexually assaulted other children, destroyed property, or become incorrigible. None of these things were true for Amanda.

My normal assessment includes, among other things, a number of processes that allow me to observe a child's sexualization, socialization, and attachment. In cases like this I also normally do a minimum of two different assessment appointments. Children may behave very differently from one day to another and this practice has helped me avoid many problems over the years.

Amanda passed these assessments with flying colors. I was at a loss because cursory information on this child made her the most likely suspect, but what I saw in my assessment was inconsistent with a child who could have so cruelly abused an animal in such a sexual way.

Looking through nearly ten years of Amanda's evaluations by other psychologists, I found hints of sexualization and cruelty to animals as I had been initially told, but careful reading put this information in a different context. In the child's early years, there had, indeed, been evidence of sexual acting out as one might see in RAD children. But interestingly, no sexual behaviors had been observed since the child was six years old – a span of nearly nine years. Since that time she had not acted out in any sexual way even a single time.

The "cruelty" to animals that existed in her file was, in my opinion, either a very mild form of cruelty or not cruelty at all. Children often hurt animals, sometimes in very serious ways, but my concern is not the seriousness of the injury. A normal child might very seriously injure or even kill a pet by accident. A RAD child will torment and torture a pet explicitly for the purpose of causing pain even if the pet isn't seriously injured. These are very different motives. I saw no clear evidence of "cruelty" in the recorded behaviors in this child's file.

But this evidence can be deceptive. RAD children often mask their cruel behaviors against both animals and people as seemingly innocent mistakes. I had to be certain I wasn't missing something.

Interviews and supporting information: I needed a fuller picture of this child than I could achieve from my office evaluation and the information in Amanda's file. One of my many professional hats is that of a homicide profiler. When I am looking at a homicide case, I want to know as much as I can, not only about the homicide, but also about the victim, the place, the weapon, and timing of the event. I interview as many people as I can and I look at every piece of evidence available to me. In ethnographic research this is called *triangulation* (looking at evidence from three or more sources), and Amanda's case demanded this type of multidirectional examination. I didn't want to make a decision simply based on my office assessment.

I started my interviews with the houseparents. I needed to know more about the child's history in the nine years they had guardianship and specifically about the last three or four years. This caring and loving couple had treated Amanda like a daughter since her placement in their home and they were certain she was innocent. I knew they could be biased in their perceptions but, unless they were trained to know what I was looking for, they couldn't easily manipulate my impressions.

I was looking for any symptoms of sexualization or cruelty in her *recent* history. RAD doesn't go away by itself and it doesn't improve with time. Instead, the symptoms digress. If she had been cruel to animals early in life, she almost certainly would not stop and cruel behavior would escalate. Likewise, if she truly was a RAD child and she had acted out sexually early on, she would still be engaging in sexual behaviors and, like cruelty to animals, those behaviors would have escalated. Cruelty moves through a digression – objects-to-animals and then animals-to-people. Sexual behaviors digress as well – masturbation, sexual exploration, acting out with consenting others, and finally acting out on others by force.

Children might easily “practice” their sexual exploitation on animals before moving to humans because animals are easier to control. If Amanda had done something so overtly sexual and cruel, there would have to be symptoms of cruelty and sexualization in her recent history. But my interview with her parents turned up no such allegations in any context at any time from any teacher, playmate, sibling, coach, or therapist.

I was also interested in Amanda's ability to connect with other human beings, to show and receive affection. RAD children have trouble with both. The comments of the house parents were consistent with what I observed in my evaluation. The child had no troubles in any context – school, church, athletics, or home. Amanda seemed to be a loving child who, although socially awkward, got along well with others and would not intentionally hurt anyone or anything.

I also needed the investigative perspective of the sheriff's deputy even though I knew he was already convinced that Amanda was to blame. For good reason, he saw no other logical suspect and he had focused all of his investigative resources on her, but he was waiting for my evaluation before proceeding. He provided me with the basic facts of the case. During our first conversation, I derived a clearer picture of how this event could have taken place. The timing of events and other facts confirmed the information I received from the house parents, a very important confirmation that allowed me to dismiss the possibility that they were attempting to deceive me. It also helped me create a visual image of the event, how Amanda might have injured these dogs without being detected as well as how difficult that might have been for her to do so.

Armed with that information, I realized it was at least possible that Amanda was just beginning to exhibit cruel behavior. I needed to know what the dogs experienced so, with the consent of my client, I called the veterinarian who conducted the surgeries. My main question: “Would someone have known she was hurting these animals or would the animals simply have stood still and allowed the abuse?” After all, Amanda was a tiny little girl and these were large, full-grown dogs. Could she have restrained them? This vet said the dogs would have been howling, struggling, and whimpering. “No question,” he said, “The perpetrator would have known these dogs were in serious pain.” This was consistent with RAD children *intending* to do harm, but left me wondering how Amanda could have controlled them long enough to do this.

I wanted a second opinion. I called a university with a respected veterinary program and talked to the department chair. I sent him photographs of the objects used in the abuse and gave him a summary of the case. His answer to my question? The dogs would have simply stood there and accepted the abuse! The perpetrator may not have known he/she was causing serious, life-threatening pain, he said. This could be consistent with a child just beginning to act out on animals and didn't exonerate Amanda.

Now what? I had two completely opposing opinions so what could I do? I chose to dismiss the "pain" component since I couldn't be certain which veterinarian to believe. What was uncontested was the fact that both female dogs had large objects inserted into their vaginas. This was clearly a sexual behavior. Most adults couldn't even find a dog's vagina. The most obvious rear orifice in a female dog is the anus. This told me that this perpetrator had to deliberately seek out the vagina and, therefore, this was almost certainly not the first time he/she had acted out sexually, which was inconsistent with Amanda's history. Was it possible for a child to go from simple show-me-yours sexual acting out nine years earlier to vaginally violating not one, but two animals at the same time? I hardly saw that as possible.

Conclusions: After nearly two weeks of study, interviews, telephone calls, and assessments, my final conclusion was that Amanda had nothing to do with the abuse to these animals. I believed that the loving and caring foster family had helped her weather a very difficult start to life and their interventions had been effective in counteracting the problems of early attachment issues. She measured low normal in IQ and it seemed inconceivable to me that this child could have been so cunning that she could hide this type of serious dysfunction from everyone in her environment for so long. While it wasn't impossible, it was highly improbable.

It was my recommendation that the foster care agency carefully investigate other possible perpetrators among the children in the home and that the sheriff's department look into other possible suspects from nearby homes, hunters, or others that might be known to be in this remote area. In my final telephone call with the investigating officer from the sheriff's department, he asked me the obvious question. "If this child didn't do it, then who did?" Occam's Razor tells us that the simplest solution is most often the correct one. That just wasn't the case here. I didn't want to sound trite, but the person he should investigate really wasn't my problem and I said so, although not so bluntly.

But in my final evaluation I remained tentative. The risks to others was very high if I was wrong. Therefore, I proposed that the child should be reevaluated at six months and I recommended she be evaluated by an expert in dissociative identity disorder. The only way I could fathom that she could possibly commit these acts and yet hide them from everyone for so long was the remote possibility of DID. I suggested that either I was right and Amanda had nothing to do with this or she was the most clever, sly, and dangerous child I had ever seen.

So why couldn't I have simply skipped all the phone calls and gone with my evaluation? After all, it appears I was right, wasn't I? There was certainly a possibility that I was wrong and if I was, the risks

that posed to Amanda, her family, animals in her environment, and others was scary. If I concluded that Amanda was not the perpetrator and I was wrong, she would be free to act out on other animals. Not only that, this behavior was so cruel that it would be a very small step to acting out on humans – younger or weaker siblings or playmates. She would be a risk to everyone she came into contact with.

On the other hand, if I concluded that Amanda did in fact commit this act, she would have been removed from the home. She had lived in this stable, loving home for most of her life and if my conclusions were wrong, she would be unfairly uprooted, stigmatized, and very difficult to place in the foster care system. The progress she had made might quickly be undone and my mistake could have life-long consequences for her. Both of these possible outcomes had serious consequences.

Follow-up: One year later, my conclusions seem to have been proven correct. The follow-up for DID resulted in no indication of multiple personalities and the psychologist's conclusions were the same as mine. Subsequent evaluations also rendered conclusions consistent with my original evaluation and no other incidents have occurred in the family home or environs. To my knowledge no other perpetrator has been pursued or apprehended.

This case presents four very important lessons for therapists:

1. Cover every base – avoid the temptation to lean too heavily on any single piece of information or single assessment for conclusions. Assessment processes, interviews, case material, and other sources of information can provide triangulation and help confirm or disconfirm information that might be presented in a child's file.
2. Material in case files may not be objective and there may be other ways to see the behaviors recorded therein. Read with objectivity and caution.
3. Be tentative in your conclusions.
4. Follow up for certainty. If I was wrong in this case my recommended follow-up could literally have saved someone's life.