



July 26, 2010

Ms. Mary Ellen Turpel-Lafond  
Representative for Children and Youth, Province of B.C.  
Suite 201, 546 Yates Street  
Victoria, BC V8W 1K8

VIA FAX: 250-356-6710

Dear Ms. Turpel-Lafond:

**Re: Youth Forensic Psychiatric Service use of penile plethysmograph**

I write to you as the President of the B.C. Civil Liberties Association, Canada's oldest and most active civil liberties organization on a matter of great concern to our organization, and we hope to yours as well.

Our Association has been made aware of a very unusual and invasive psychological testing and research regime engaged in by the B.C. Forensic Psychiatric Service in relation to youth alleged sex offenders. We understand (please see enclosed annual report excerpt and study from the journal *Sexual Abuse*) that the Service has been using the controversial device called the "penile plethysmograph" on male children who are in their treatment program. A disproportionate number of these male youths are of First Nations heritage. The majority of the children are involved in some aspect of the criminal justice system.

A recently published paper by the Forensic Psychiatric Service (the "Service") describes this "testing" and "research". In this process, children who are believed to be sex offenders are asked to measure their penises and then connect a device called a "penile plethysmograph" to their genitals. Once connected to the device, the child subjects are then shown video of an adult man and woman having consensual sex, as well as still photographs of "children or adolescents in varying states of undress," while a male voice reads "vignettes" describing "coercive, or forced sexual activity."

Images of naked infants (younger than two years of age) and narratives coercive intercourse these infants are also used in the testing, although in the published paper, none of the test subject children had been alleged to be involved in sex offenses involving infants. Narratives describing coercive and forced sex with adolescent males were played to male children who had no history of such activity, and similar narratives of forced sex with adolescent females were played to male children who had no history of such activity.

In the interests of illustrating the traumatic effects that simply the description of what is played for these children has, we reproduce the following summary of the narratives that were read, in detail, to these children. We do not have access to the scripts for these narratives, but according to the published paper they describe:

- (1) coercive sexual activity with a male infant,
- (2) coercive sexual activity with a very young male (aged 2-5),
- (3) coercive sexual activity with a prepubescent male (aged 6-11),
- (4) forced sexual activity with a prepubescent male (aged 6-11),
- (5) coercive sexual activity with a female infant,
- (6) coercive sexual activity with a very young female (aged 2-5),
- (7) coercive sexual activity with a prepubescent female (aged 6-11),
- (8) forced sexual activity with a prepubescent female (aged 6-11),
- (9) nonforced sexual activity with an adolescent female, and
- (10) forced sexual activity with an adolescent female.

During this entire process, the child subjects have a sheet over their laps while they are watched by adult researchers through one-way glass.

Our concern is that during the treatment the adult researchers who published this paper and those adults who are applying this test are in a position of care and control of these children. Subjecting them to vignettes of rape and sexual abuse of children and infants, as well as explicit video of adults having sex is incredibly problematic.

The government's research paper says that the children subjects were "asked to sign a consent form" before the testing was done and "gave written informed consent to allow their data to be used." The idea that children could consent to such potentially traumatic testing is bizarre. There is no ability to consent to such trauma for children, or for children to fully understand the impact that images and narratives such as these could have on them, and therefore consent to them.

Putting aside the fact that these devices are controversial and not widely accepted, even if these devices were 100% reliable in detecting arousal in all adults and all children in all situations, we query whether the benefits of detecting an individuals' arousal to these images and narratives answers the important question about whether or not an individual will act on that arousal. We do not seek to punish thoughts in our society, but rather actions. If the Service wishes to determine the efficacy of their treatment in preventing individuals from acting on their arousal in a manner that is contrary to law, they should survey their alumni for statistics on post treatment offending. If they wish to predict who will commit a crime in the future based on the output of a quasi-medical device, such a wish is the

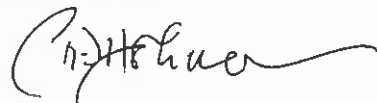
stuff of science fiction and to subject children to traumatic narratives of rape and sexual assault in the aim of obtaining the unobtainable is offensive to those of us who value children and their safety.

We note that in one study alone that we are aware of, 134 children were subjected to this treatment, and the Service says it has been engaged in this conduct since the mid-1990s. I ask you to work urgently to put a stop to this reprehensible practice and to investigate this matter thoroughly, including by interviewing children who have been subjected to this procedure to evaluate the effects of this “treatment” and “research” on them, and to determine whether they may not need further support as a result of the trauma they have been forced to endure here.

I ask you too to review the ethical approval for this study, and to determine what protocol could possibly allow B.C.’s children, especially those most at risk and involved in the criminal justice system, to be subjected to this conduct. Such protocol should be immediately reformed, and your office is in the best position to initiate the protection of children from such abusive research practices.

Thank you, in advance, for your consideration.

Yours truly,

A handwritten signature in black ink, appearing to read "R. Holmes", with a long, sweeping horizontal stroke extending to the right.

Robert Holmes  
*President*

*cc. The Honourable Mary Polak, Minister for Children and Family Services, via fax: 250-387-9722*