

## **Child Sexual Abuse (CSA) Using Hypnosis: A Clinical Forensic Medicine Evidence-Based Case Report (EBCR)**

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### **ABSTRAK**

Kekerasan seksual terhadap anak (CSA) merupakan masalah global yang serius. Pelaku sering menggunakan ancaman atau kekerasan untuk membuat korban tidak berdaya, termasuk menggunakan hipnosis. Penggunaan hipnosis menyulitkan pemeriksaan forensik klinis karena menimbulkan masalah diagnostik dan mempersulit perumusan pendapat ahli forensik. Laporan kasus berbasis bukti ini bertujuan untuk menilai bukti yang tersedia dalam literatur mengenai pemeriksaan forensik dan diagnosis CSA yang menggunakan hipnosis. Pencarian literatur berbasis komputer dilakukan menggunakan kata kunci yang terkait dengan pertanyaan klinis. Pencarian tersebut menghasilkan tujuh artikel yang relevan. Artikel-artikel itu dinilai menggunakan pertanyaan umum dari *Centre for Evidence-Based Medicine, University of Oxford*. Semua artikel menyimpulkan bahwa hipnosis dapat berperan dalam investigasi kriminal ('hipnosis forensik'). Namun, bukti tentang cara penerapan dan manfaatnya belum meyakinkan dan saling bertentangan. Dalam kasus-kasus kejahatan seksual yang menggunakan hipnosis, hipnosis forensik berpotensi membantu korban dalam mengingat kejadian dan dapat membantu dokter forensik dalam merumuskan pendapat ahli yang dapat membuat terang perkara.

***Kata kunci: pemeriksaan forensik klinik, kekerasan seksual terhadap anak, proses penyidikan, hipnosis***

## ABSTRACT

Child sexual abuse (CSA) is a global problem and a serious public health issue. Perpetrators often resort to threats and force to incapacitate their victims, including using hypnosis. The use of hypnosis increases the level of difficulty of clinical forensic examination by presenting a diagnostic issue and complicating the formulation of forensic medical expert opinions. This evidence-based case report (EBCR) aims at assessing the available evidence concerning the forensic examination and diagnosis of hypnosis-facilitated CSA. A comprehensive computer-based literature search was performed using several keywords related to the clinical question. The search yielded seven relevant articles. The articles were appraised using general critical appraisal questions from the Centre for Evidence-Based Medicine, University of Oxford. All articles suggest that there might be a place for hypnosis in a criminal investigation ('forensic hypnosis'). The evidence on the correct application of forensic hypnosis and its benefits are, however, still inconclusive and conflicting. In cases of suspected sexual assault using hypnosis, forensic hypnosis could potentially help memory recall of the victim and aid forward-thinking in drawing a clear and unambiguous conclusion for the forensic medical expert opinion.

**Keywords:** *clinical forensic examination, child sexual abuse, criminal investigation, hypnosis*

## INTRODUCTION

Child sexual abuse (CSA) is a global problem and a serious public health issue. The prevalence of CSA is estimated to be between 41 to 215 per 1,000 children, with negative physical and psychosocial consequences that affect the victims' development into adulthood (Stoltenborgh *et al.*, 2011). In Indonesia, the number of CSAs recorded by the Indonesian Commission for the Protection of Children (*Komisi Perlindungan Anak Indonesia/KPAI*) is rising steadily every year (Ivo Noviana, 2015; Ratih Probosiwi, 2015) and it is suspected that those numbers are just the tip of the iceberg.

From a clinical forensic point of view, CSAs can be classified as complex cases. In addition to difficulties in examining the victims, the lack of eye-witnesses often highlights the importance of the forensic medical expert opinion as vital evidence in the legal proceedings. The paucity and non-specificity of physical findings (Jones *et al.*, 2003; Silva and Barroso, 2017) also present a hurdle in the interpretation and the formulation of forensic medical expert opinions to be presented to legal fact-finders, be it in form of written reports (*visum et repertum/VER*) or verbal expert testimonies.

Sexual assailants often resort to threats and force, such as verbal threats, physical force, and drugs, to incapacitate their victims (Hurley, Parker and Wells, 2006; Anderson, Flynn and Pilgrim, 2017). In some instances, it has also been reported that hypnosis was used to facilitate criminal acts (Clarke-Billings, 2015; SINDOnews, 2019).

The use of hypnosis increases the level of difficulty of clinical forensic examination in that there is no standard or widely accepted medical test to confirm whether hypnosis has in fact

been used to incapacitate the victim. This presents a diagnostic issue and complicates the formulation of forensic medical expert opinions. Hence, this evidence-based case report (EBCR) aims at assessing the available evidence concerning the forensic examination and diagnosis of hypnosis-facilitated CSA.

## **CASE**

A 16-year-old girl ('J') was brought by the police for clinical forensic examination with the following information: J claimed that around three hours prior to the examination she was riding in an online taxi. When she was arriving at her destination, the driver asked to shake her hand, and afterwards, J claimed to become sleepy and unconscious. J claimed to have woken up a few minutes later when her mobile phone rang (she was not sure how long she was sleeping). When awakened, J found that the driver's hand was gripping her upper right thigh under her skirt. According to J, her underwear was still in place; she did not feel pain in her thighs and pubic area, nor when urinating. She also denied having been given drinks/food by the driver before the incident. J claimed to be able to remember everything before shaking hands with the driver and after waking up. She denied a history of frequent fainting or other diseases, as well as taking any medications.

On physical examination, J's vital signs were normal, and no injuries, fluids, or stains were found on the thighs, the pubic area, any other body parts, or her clothes. The hymen was intact, and no tears/bruises/bleeding/fluid was found in the genitalia and anus. Her urine drug tests were negative for amphetamines, opiates, marijuana, and benzodiazepines. J was consulted to a psychiatrist (who practices hypnotherapy) who tried using hypnosis to interview her and enhance her memory recall during the time she was 'sleeping'. Even while being hypnotized, J still could not remember the events clearly and could add nothing to her pre-hypnosis statement. The psychiatrist diagnosed her with amnesia (memory loss) with a history of unconsciousness with no apparent medical cause.

The police asked whether there were any signs of sexual assault and whether her memory loss was caused by hypnosis. The clinical (forensic) question for this EBCR is: "In cases of suspected sexual assault using hypnosis, is there a role for forensic hypnosis, in addition to the standard operating procedure of clinical forensic examination, in producing a clear and unambiguous conclusion?"

## **METHODS**

A comprehensive computer-based literature search was performed on 11 – 12 April 2019 to answer the clinical question. The searching process used the English and Indonesian versions of the following keywords and their derivatives: 'forensic examination', 'child sexual abuse', 'sexual assault', 'crime', and 'hypnosis', which were combined using Boolean operators, such as 'AND' and 'OR'. Due to its exploratory nature, no limits were placed on the search. Several searches were conducted to ensure that all the relevant articles were identified. All titles and

abstracts from the initial search results were screened and reviewed. Articles were excluded if they are not written in English or Indonesian. Snowballing by checking the reference lists of relevant articles were also performed. The full texts of all relevant articles were reviewed individually.

## RESULTS AND DISCUSSION

The initial search yielded 38 results, but only seven articles were deemed as relevant based on the title and abstract screening process. Because the articles did not fit into conventional types of studies, it was decided that in this EBCR no standard critical appraisal tools could be used. Instead, each article was reviewed using the general questions available at the website of the Centre for Evidence-Based Medicine, University of Oxford, as follows:

1. Does this study address a clearly focused question?
2. Did the study use valid methods to address this question?
3. Are the valid results of this study important?
4. Are these valid, important results applicable to my patient or population?

The summary of the appraisal of the seven articles is shown in Table 1.

The seven relevant articles can be classified based on the relationship between hypnosis and crime that they discuss, i.e. (1) the (ab)use of hypnosis in crime and (2) solving a crime using hypnosis. Due to the 'unconventional' nature of the subject, especially from a medical point of view, it is quite difficult to draw certain conclusions and recommendations for practice from the articles.

All articles conclude that there might be a place for hypnosis in a criminal investigation, i.e. as a tool to aid the interviewing process called 'forensic hypnosis'. Some of the articles even provide some sort of practical guidelines on how to appropriately implement 'forensic hypnosis'.

The evidence set forth and discussed in the articles range from anecdotal case studies to literature reviews, but none of them is in the form of actual experimental studies. This issue makes the assessment of the clinical importance quite problematic. Additionally, the results of some articles are inconclusive and/or conflicting, which complicates the issue of applying the results to actual clinical cases even further.

All articles recommend that further research is essential before forensic hypnosis can be integrated into the standard operating procedure of criminal investigation. This statement is quite understandable given the fact that the first of the seven articles were published in 1981, which is 34 years prior to the most recent of them, and yet no concrete guidelines are currently in place.

<b>Article (chronologic order)</b>	<b>Does this study address a clearly focused question?</b>	<b>Did the study use valid methods to address this question?</b>	<b>Are the valid results of this study important?</b>	<b>Are these valid, important results applicable to my patient or population?</b>
Wagstaff, 1981	Yes	In the form of a narrative literature review	Yes, but conflicting/inconclusive and recommends further research	Possibly, it includes literature about victims of rape
Wagstaff, 1982	Yes	In the form of a narrative literature review	Yes, but conflicting/inconclusive and recommends further research	Possibly, it includes literature about victims of rape
Waxman, 1983	Yes	In the form of a narrative literature review	Yes, but conflicting/inconclusive and recommends further research	Possibly, it includes literature about the use of hypnosis on victims of 'intensely frightening or humiliating experience.'
Amabile and Jobe, 2018	Yes	In the form of a case study and narrative literature review	Yes, but advises implementing the results with caution	Possibly, it discusses the inclusion of hypnosis-facilitated memory recall as legal evidence
Wagstaff, 2008	Yes	In the form of a narrative literature review	Yes, it discusses the misconceptions about forensic hypnosis	Not directly applicable
Wester and Hammond, 2011	Yes	In the form of several case studies	Possibly, it discusses the application of forensic hypnosis in real-life cases	Possibly, it discusses 1 case where hypnosis was used on a rape victim
Tyrrell, 2015	Yes	Not really, it is more in the form of an opinion paper	Possibly, the author opines that hypnosis is like a double-edged sword	Possibly, it discusses the uses and abuses of hypnosis

From a forensic medical point of view, crimes using hypnosis present several peculiar obstacles in examining the victim. First, crimes using hypnosis rarely leave physical evidence

that can be discovered upon forensic examination. Unlike physical force used to restrain the victim, for example, hypnosis is believed to incapacitate the victim by inducing a deep REM-sleep/trance-like state (Tyrrell, 2015) and cause the victim to act ‘under duress’ (Wagstaff, 2008). Second, in many instances, hypnosis causes a sort of memory loss, where the victim remembers nothing of the events occurring while being hypnotized. This, of course, presents additional difficulties in cases where there are seldom eyewitnesses, as in CSAs. In interpreting evidence and drawing conclusions, forensic medical practitioners should favour forward-thinking from victim/witness accounts to backward thinking from physical evidence only (Young, 2018), and this is virtually impossible in victims with memory loss. Third, there is the issue of logic versus empiricism (Bostock, 1990). As (forensic) medical doctors, we are trained to use ‘the scientific method’ and conduct ‘evidence-based practice’, which we place on a high pedestal. Yet, how are we supposed to handle cases in which the experience of the victim, i.e. being hypnotized, is very much real to him/her, when there is little ‘evidence’ on which we can ‘base our practice’? Even now, hypnosis is mostly still considered a ‘pseudo-science’ by mainstream medicine and is not taught in most medical school curricula. How can we appropriately integrate ‘forensic hypnosis’ into our standard operating procedure of clinical forensic examination if the very notion of hypnosis itself defies our understanding of human pathophysiology?

The available published literature currently does not have a clear answer to the above questions. So, for the time being, it might be best to remember that forensic medicine does not, and should not, work in a vacuum. Collaboration with other specialties is essential, including with medical professionals trained in hypnosis, who could help us collect the necessary information to formulate our ‘evidence-based’ expert opinion.

## CONCLUSION

There is insufficient evidence concerning the use of forensic hypnosis in the clinical forensic examination of CSA victims. If we treat the recommendations of some of the articles with great caution, however, we could answer the clinical question of this EBCR as follows: “In cases of suspected sexual assault using hypnosis, forensic hypnosis could potentially help memory recall of the victim and aid forward-thinking in drawing a clear and unambiguous conclusion for the forensic medical expert opinion.”

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