# Contents

The Prevention and Safety Path Progress Chart ............... ii
Preface .......................................................... ix
Introduction .................................................... xvii

1. Initial Reactions ............................................. 3
2. Starting the Treatment Process ............................ 31
3. Disclosing: How Do I Explain What I've Done? ........... 57
4. Learning about Victims ...................................... 87
5. Why Did I Do It? Understanding My Own Sexual Acting Out ........................................ 111
6. Identifying My Grooming and Maintenance Behaviors .... 125
7. Understanding the Chain of Events That Led to My Sexual Behavior Problems .................. 139
8. Controlling and Expressing My Sexual Feelings in Positive Ways ...................................... 167
9. Creating and Following My Relapse Prevention Plan .... 191
10. Understanding Sexual Abuse and Other Traumatic Life Experiences ................................. 213
12. Steps to Personal Accountability: Becoming a Responsible, Sensitive, and Honest Person Who Has Integrity ................................ 261
13. Completing Treatment by Living a Responsible and Healthy Lifestyle .............................. 327
14. Completing My STOP Plan ................................. 335

Conclusion: The Path to Responsible Living Continues ...... 365
Appendix: Important Information for Counselors ........... 367
About the Author ................................................. 369
Thank you for choosing Pathways. The first three editions of the Pathways workbook have been widely used for the past 20 years in many parts of the world. This workbook is designed primarily for adolescents between the ages of 12 and 18 who have sexual behavior problems. Some older clients and some younger clients have also benefited from the Pathways workbook. If Pathways is used with clients with low reading ability, it may be necessary to read the workbook to or with the client. Clients in outpatient as well as residential treatment programs have benefited from the Pathways workbook in the past. This fourth edition is designed for both groups of clients.

As the Pathways workbook has evolved over the past 20 years, divergent theoretical models and treatment rationales have come and gone. Researchers and treatment professionals now have a very clear understanding that children and adolescents with sexual behavior problems are quite different than adult sex offenders, and as a result, the two populations require very different treatment approaches. While the relapse prevention model and cognitive behavioral treatments were widely used for many years, there is now a new push to find evidence-based models that meet the many distinct needs of adolescents with sexual behavior problems. Pathways’ fourth edition utilizes a cognitive behavioral framework, with an emphasis on helping clients to build on existing strengths and to develop healthy lifestyles. Many clinicians around the world currently support and have adopted what is called the “Good Lives Model,” from The Juvenile Sex Offender, 2nd ed., by Howard Barbaree and William Marshall (New York, N.Y., Guilford Press, 2006). The Good Lives Model is a treatment approach that is based on the idea that successful treatment for persons with sexual behavior problems requires that they not only learn adaptive skills but also develop healthy lifestyles in order to prevent re-offense. The Good Lives Model suggests that material well-being, health, productivity, intimacy, safety, community, and emotional well-being are all critical components in helping clients develop “good lives.” Pathways’ fourth edition is focused on strength-based methods that help clients develop healthy and productive lifestyles consistent with the Good Lives Model of rehabilitation. Pathways’ fourth edition incorporates a new Healthy Living Project, which is a type of culminating assignment that clients work on throughout their involvement in their treatment programs. In addition, Pathways continues to utilize a restorative justice theme throughout the workbook that emphasizes concern for development of victim empathy, restitution, and development of personal responsibility. This fourth edition allows clinicians to incorporate other theoretical approaches as well.

I would like to emphasize that professional treatment providers are at their best when they employ a warm, empathetic, rewarding, and guiding/directive style. This edition of Pathways has been developed with that idea in mind. I would also like to emphasize that the no-one-size-fits-all approach is effective with adolescents with sexual behavior problems. Current research continues to show that adolescents with sexual behavior problems are a very diverse group, and represent the entire spectrum of the adolescent population. In my experience, most adolescents do best with a supportive and gentle therapeutic approach by a firm and directive therapist, and relatively few adolescents require the harsh level of confrontation and almost punitive approaches that have sometimes been utilized with adult and adolescent sexual offenders.

Pathways is not a treatment program in and of itself. Pathways is a tool that is designed to serve as one component of an overall treatment program.
for adolescents with sexual behavior problems. The stories and exercises in Pathways are designed to complement individual, group, and family therapy. Most therapists ask their clients to complete the work in Pathways in the order in which the material is presented. The exercises in this workbook are structured in a manner that has worked well for many clients in the past. In some cases, however, a therapist might decide to change the order of the client's work in order to meet a specific, individual need. For example, a client who has engaged in sexual behavior with a sibling may benefit from skipping ahead to chapter 11 and working on the clarification process, if the sibling's therapist has requested some early contact between the client and the sibling. In other cases, clients with a strong sexual drive may benefit from doing some early work in chapter 8 in order to learn arousal-control skills.

Pathways utilizes treatment sequencing that has been tested and accepted for the past 20 years. The sequencing in Pathways was developed by using a consensus model of expert clinicians. It should be noted, however, that some clinicians may choose somewhat different sequencing based on their experience and training, or a particular youth's needs, and this is perfectly acceptable. Pathways features an educational approach with low-emotional risk in chapters 1 and 2 to help clients feel motivated, accepted, and optimistic about their potential for successful treatment. Some clients may need more such preliminary work before embarking on the difficult disclosure work in chapter 3. In addition, Pathways introduces basic information about sexuality and arousal control that was not addressed until later chapters in the earlier editions of the book. In our experience, adolescents benefit from immediate education and guidance about how to cope with their sexual feelings. This fourth edition provides additional assignments and stories to help clients cope with a plethora of pornographic stimulation that is increasingly readily available in our society.

Pathways does progress fairly rapidly from introductory material into the sexual behavior disclosure process in chapter 3. It should be noted that some clients may require additional motivational enhancement, support, and self-esteem work before attempting the disclosure process. In some cases, it may be necessary to work directly on self-management skills or even to seek psychiatric consultation or referral to help some higher-needs clients before directly addressing the disclosure issues in chapter 3. Again, it is important to recognize the diverse nature of adolescents with sexual behavior problems. Treatment providers need to be sensitive to the readiness of their clients to fully disclose their sexual behavior history.

Pathways introduces victim empathy in chapter 4, utilizing a low-risk guided-fantasy approach. Intensive work on a client's own abuse issues is delayed until chapter 10, although some clinicians may choose to focus more extensively on such issues earlier by assigning chapter 10 after completion of chapter 4. Some clients may disclose additional victims or their own personal abuse experiences at many different points in treatment. The victim-empathy scrapbook assignment from the third edition has been modified and is now included as a part of a culminating treatment assignment. It is called the "Healthy Living Project," and it starts in chapter 4 to encourage ongoing victim-awareness education as well as the development of a healthy lifestyle. It is my belief that the ultimate goal of treatment for adolescents with sexual behavior problems is for happy, healthy lives for our clients and their loved ones, and for safe communities. Toward that end, the Healthy Living Project is interwoven into different parts of the entire Pathways workbook along with a repeated emphasis on ongoing treatment challenges, which are honesty, responsibility, sensitivity, and integrity.

The assault-cycle concept has been widely used over the past 20 years with adolescents and adults with sexual behavior problems. Clinicians have gradually moved away from the use of the offense cycle with adolescents. In fact, emerging research
tends to indicate that many adolescents with sexual behavior problems do not have established cycles of behavior. The field has shifted toward the use of concepts such as the Offense Behavior Chain to help youth understand their individualized patterns of behaviors, thoughts, and feelings that may have preceded their inappropriate sexual behavior. This edition of Pathways incorporates some of that thinking, and chapter 7 is now less about offense cycles and more about understanding the antecedents to a client's sexual acting out.

Pathways continues to concentrate on the “thinking errors” that clients may use to “fuel” or rationalize their inappropriate behaviors. It is important to understand that thinking errors are somewhat universal, and all of us use them at some time or another to some degree, consciously and unconsciously. Our overall goal is to help the adolescents in our care become healthy, happy, and successful people throughout their current and future lives. The emphasis should be on helping clients understand that excessive use of thinking errors can sometimes contribute to irresponsible or harmful behavior that works against this overall goal.

Pathways recognizes that not every adolescent with a sexual behavior problem has an identifiable cycle, especially now that many young people are receiving help before their sexual behavior has become repetitive. Pathways emphasizes the importance of learning about other day-to-day behaviors that are problematic for clients. The book emphasizes the importance of countering “maintenance” behaviors, which are behaviors that have an indirect but influential role in sexual misconduct. In this way, Pathways provides a means for working with clients who do not demonstrate ongoing sexual acting out during the treatment process. Pathways emphasizes the development of responsible, honest, and sensitive day-to-day behavior, as well as encouraging clients to develop a sense of integrity in their lives. It is important to understand that while some adolescents with sexual behavior problems have been raised in loving, healthy, and responsible home environments, many have not, so it is important that as clinicians we learn to understand and validate their past experiences in neglectful, abusive and/or irresponsible homes. Rather than simply punishing the irresponsible behaviors of our clients, it is more effective to understand where they learned about such behaviors, and then help motivate them to make lasting personal changes consistent with becoming a more responsible person. It is also important to understand that the therapeutic alliances that treatment providers establish with their clients are probably more important than any workbook ever will be. All treatment providers need to take great care when introducing a change process, and it is important that they work to make sure that a client is ready, willing, and able to change. One analogy is one that a professional colleague shared with me. He noted that after a traffic stop a scary policeman in uniform said, “Slow down,” and that resulted in short-term compliance and safer driving for a while. However, what made that person drive responsibly in the long term was when his wife expressed some empathy for his experience, asked what thought patterns enabled him to speed at his age, got him to explore what would be some of the good benefits of driving more responsibly, and only then implored him to slow down for his own good and for the good of others. Keeping this type of analogy in mind may be helpful in guiding treatment providers to make sure they are paying attention to the importance of developing and maintaining the therapeutic alliance.

Since Pathways is designed to be used early in the treatment process, chapter 8 describes and teaches some arousal-control intervention techniques. It should be noted that many adolescents with sexual behavior problems do have well-established patterns of inappropriate sexual fantasies (we used to call these deviant-arousal patterns). Some experts suggest that as few as one-in-five to one-in-fifteen adolescents with sexual behavior problems have such patterns
of inappropriate fantasies." Pathways further cautions readers that they must be supervised and monitored by an experienced sex-offender treatment provider in order to use the techniques. Controversy surrounds the use of some arousal-control techniques with juveniles, especially masturbation satiation. Many clinicians are understandably reluctant to use this technique due to possible side effects. For this reason, Pathways does not mention that method. The book teaches covert sensitization, however, since it is a recommended method for many young persons with sexual behavior problems. The use of penile plethysmography remains controversial for adolescents, and Pathways explains the procedure briefly in recognition that adolescents may or may not be expected to participate in such activity.

It is also recognized that risks are associated with pairing or connecting a young person’s sexual arousal with sexually abusive thoughts (increasing the risk of acting on those thoughts). In Pathways, we do not want to introduce any inappropriate ideas to our clients, but we do need to tell them that people cannot read minds, and that honesty is one of the most important tenets of treatment. Clients need to be clearly taught that when they are having trouble with inappropriate sexual arousal (thinking of something illegal or hurtful or something that could get them into trouble), they need to tell us, so that we can help them alter those thoughts.

In Pathways, care is taken to minimize sexually explicit discussions of abusive sexual behavior, so that we don’t inadvertently reinforce negative and harmful ideas. Instead of focusing on an unhealthy thought or fantasy and asking clients to re-experience it, Pathways teaches clients how to replace such a thought or fantasy with a healthy one. Again, it should be noted that most adolescents with sexual behavior problems do not have well-established patterns of inappropriate fantasies, and may not need extensive arousal control training. Specific discussions of the details of their inappropriate behavior are usually confined to assessment interviews and individual counseling sessions. In group sessions, counselors should be very careful to minimize the risk of repeating details in any way that could inadvertently lead to some clients becoming aroused, which the therapist knows, with teenagers, is very easy to do. To accomplish this, it is okay in group to have clients talk about why their behavior was wrong or abusive, what was going on with them at the time it occurred (thoughts, feelings, behaviors, and life events), and what the signs of distress or discomfort were that the other person may have experienced.

Because program models differ, relapse prevention is taught as a series of techniques rather than as an overall integrated theoretical model. Clients are instructed to identify their “warning signs” and high-risk situations and to develop multiple appropriate coping strategies. They contract with significant others (family, friends, probation officers) to support their efforts at preventing re-offense and sexual misconduct. Establishment of a positive support system that is aware of a young person’s sexual behavior problems and treatment history is encouraged in Pathways.

Chapter 12, which was developed from the 12-step self-help model, is intended to be used in the later stages of treatment. While it is loosely based on a 12-step model, it really is not based on an addiction model since most adolescent sexual misconduct does not represent a lifetime problem behavior. The purpose of chapter 12 is to provide a good structure for clients’ transition into the after-care component of a treatment program and to introduce the idea of an ongoing, post-transition self-monitoring and maintenance of a “good life” or healthy lifestyle. Many programs using addiction or medical models to address sexual offending behavior adopt AA-type language regarding the “recovery” process. Because “recovery” seems to conflict with the message that sexual acting out has no “cure”—only control—in Pathways

* David Burton, PhD, email message to author, August 2010.
Teens are encouraged to adopt a “sexual abuse prevention and safety lifestyle,” and to become a member of the “prevention and safety team” by establishing a healthy and responsible lifestyle.

Previous editions of Pathways did not incorporate chapter quizzes into the workbook. Instead, the quizzes were made available directly from the author. In this fourth edition, we have incorporated quizzes into the end of each chapter. Experience has shown us that the quizzes are a rewarding and helpful way to make sure that clients are actually reading the material in the chapters. The tests also provide the client with a tangible sense of accomplishment.

It is recommended that the chapter quizzes be used in a supportive and educational manner, with the primary purpose being to help clients understand and integrate what they have learned in the readings. The author has made an effort to create simple and concrete quizzes, with multiple-choice and true/false questions. The quizzes do not use pass/fail scores, which therefore allows counselors to review both the questions and the responses with their clients in order to maximize the opportunity for learning. The quizzes are designed to be easy to complete and rewarding for clients, especially for those with writing deficits. Each therapist should point out that some questions have no absolute right and wrong answers. It is usually not helpful to have clients retake an entire chapter quiz if they answer several questions incorrectly. It is more helpful for the counselor to talk with the client, to explain the issue(s) he or she didn’t understand, and to help the client select a more suitable answer. The primary goal with the chapter quizzes is for clients to gain a tangible sense of accomplishment from doing the hard work in each chapter. It is critical for counselors to use the chapter quizzes as learning tools that foster discussion and a sense of achievement for clients.

This edition also changes the way that clients sign each page. The assignment of having clients sign each page was included in earlier editions in order to encourage clients to carefully read and understand all of the information in Pathways. Experience has found that some clients skip the text and only fill out the assignment pages. In order to prevent this, we have included a fun assignment that is kind of like Where’s Waldo. In this assignment clients have to carefully read each chapter to find the cue that tells them how to sign the pages from that point forward. If clients are not catching those cues and changing the way they sign the pages, then they are likely not carefully reading and understanding the material in that chapter.

Two of the exercises in Pathways contain material that requires therapists to talk with the client and use some judgment in determining whether or not the client’s responses are correct. The exercises are Assignment 1B in chapter 1, Legal/Illegal Behaviors, and Assignment 13E in chapter 13, Adolescent Sexual Information Scale (ASIS). Suggestions designed to help therapists successfully use these assignments with their clients are included in an appendix to this book.

We reinforce for all Pathways readers the fact that all human beings are sexual and that nobody would be alive on this planet if it were not for human sexual activity. We do not want to give clients the message, “Never do anything sexual.” We do, however, want to encourage clients to develop the ability to delay gratification and to wait to engage in sexual behavior until they can handle the potential legal, social, financial, and health consequences and until they can also understand how to engage in sexual behavior in healthy, legal, and responsible ways.

It is important to note that over the past 20 years, professionals’ thinking has changed with regard to teenagers with sexual behavior problems. The idea of teenagers being “sexually deviant” has been replaced with an understanding that most teenagers with sexual behavior problems grow up to become healthy, responsible members of our communities. So, in this edition, we pay substantial attention to defining abusive behavior as consisting of lack of consent, unequal
power, and the concept of coercion. Clients are also encouraged to explore their own understanding of why what they did was wrong. Consistent with this thinking, the term deviant has generally been replaced with terms such as inappropriate.

One of the goals in Pathways is to have clients learn to recognize when something would be abusive and then choose to do something non-abusive instead. Pathways is based on the idea that for most of our clients, it is possible for them to become sexually healthy adults.

The fourth edition of Pathways addresses clients as “people with sexual behavior problems” rather than sexual offenders, a term used in the original Pathways workbook, because many treatment programs for adolescents now serve adjudicated and unadjudicated clients together. The term sexual offender is a legal term that denotes clients who have been through a legal proceeding and have pleaded guilty or have been found guilty of committing an act of sexual misconduct against someone else. Many of the clients using Pathways have not yet gone through a formal court process, and they may not have been formally adjudicated. Therefore, we prefer the use of the more generic term in this edition of Pathways. Many professionals agree that “adolescents with sexual behavior problems” is more appropriate than labeling teenagers with stigmatizing terms such as sexual offenders, predators, sexual abusers, or perpetrators.

In general, clinicians should clarify with clients in advance what they are required by law to do regarding disclosure of additional unreported offenses. Disclosure of all sexual behavior is generally encouraged so that clients will be held accountable, changes in clients’ risk levels can be assessed, and victims may get help. However, misunderstandings between clients and group leaders or counselors can and do occur. Such misunderstandings can destroy trust or hinder the client’s therapeutic work. Pathways allows young people to complete the homework assignments using only the first names of unreported victims, giving clinicians both a window into the client’s previously undisclosed behavior and a way of supporting eventual full disclosure and accountability. In addition, the Pathways’ approach can be modified in accordance with your program’s guidelines.

I would like to thank all of the many professionals who have taken the time over the past 20 years to provide me with feedback about how to improve Pathways for their clients. I continue to encourage professionals to contact me directly with any ideas or feedback about how to improve future editions of this workbook (Timothy Kahn, 515 116th Ave. NE, Suite 145, Bellevue, WA 98004; timothykahn@cs.com).

Many professionals have provided valuable input and feedback about Pathways since the first edition was published in 1990. Staff members at the Friends of Youth Griffin Home in Renton, WA and the Ryther Child Center in Seattle have worked hard to incorporate Pathways into their programs, and have provided excellent ideas about how to improve it as a treatment resource. Jo Langford-Fuchs, M.A. deserves special recognition for his creative work with thinking errors in chapter 3 and his ongoing help in developing intervention tools with this population. My other staff, Krishan Hansen, M.S.W., Carol Almero, M.A., Larraine Lynch, M.S.W., Sarah Pemble, M.A., and Jenna Sandoval, M.A. also have provided me with a great deal of inspiration and encouragement through their caring and sensitive work with clients. I would also like to thank Brent (BJ) Oneal, Ph.D. for his support, collaboration and ongoing work with this population of clients, and for his helpful suggestions about this fourth edition of Pathways.

My loving thanks continue to go to my wife, DeeAnn, who helped me find the time necessary to complete this work.

In addition to my friends and colleagues who have supported and encouraged my work, Robert Freeman-Longo, who pioneered the concept of guided workbooks for adult sexual offenders and assisted greatly in the development of the first
edition of *Pathways*, has my deepest appreciation. Thanks also to David Finkelhor of the Family Violence Research Program at the University of New Hampshire for the use of his “four preconditions” theory and for his helpful comments; to Jan Hindman for the use of her “restitution model” for offender-victim interactions from her book *Just Before Dawn* (1989, AlexAndria Associates); and to Jonathan Ross, Peter Loss, and the offenders in the Forensic Mental Health Services Program for their early use of their 12 Steps for Sex Offenders. I would also like to thank David Burton, Ph.D., and David Prescott, LICSW, for being willing to review the *Pathways* fourth edition manuscript in detail and for providing many helpful and insightful comments and suggestions. I would also like to thank John Bracken for his feedback and suggestions about how to improve several chapters in *Pathways*. In addition, Vermont clinician Tammy Leombruno provided much helpful feedback during the preparation of this fourth edition. Her comments were very valuable.

I also give my thanks and respect to the hundreds of children, adolescents, and adults with sexual behavior problems who had the courage and commitment to admit to their behavior and participate in treatment for their sexual behavior problems. People with sexual behavior problems and/or sexual offense histories often face embarrassment, rejection, anger, and hatred from others, making it difficult and scary for them to admit to their problems. People who are brave enough to admit to their mistakes and participate in counseling deserve our support and understanding. With intensive and specialized treatment there is hope that most young people with sexual behavior problems can and will change their behavior in order to become responsible and healthy citizens in our society.

Please note that there is a companion book for parents that is designed to complement the *Pathways* workbook. It is called *Healthy Families: A Guide for Parents of Children and Adolescents with Sexual Behavior Problems*. It is also available from the Safer Society Press, and that book helps parents become more fully involved in their child’s treatment. It is strongly recommended that parents of youth using *Pathways* be provided with copies of the parent’s guide *Healthy Families*.

Treatment of juveniles with sexual behavior problems continues to be a rapidly evolving field. Thank you for your work with this difficult and potentially rewarding population. Each client who responds to your treatment may then, in turn, be able to avoid creating additional victims who will suffer from a lifetime of trauma. We salute your efforts and again thank you for using *Pathways*. 
Welcome to Pathways—you are not alone. You need to know that many other young people around the world are struggling with sexual behavior problems. Thousands of teenagers very much like you have abused someone sexually or have gotten into trouble for their sexual behavior. The good news is that this workbook will help you to understand and change your sexual behavior problems while also providing you with strong skills and knowledge for the rest of your life. It is up to you to remember the information you have gained from this book and to use the skills and treatment concepts as you move forward in life. You can use this step-by-step book from the first day that your sexual behavior is discovered all the way through to the end of your treatment. But remember that Pathways is a starting point in your treatment process; when you complete Pathways, it does not mean that you are done with treatment.

The most important life goal for you is to learn how to be a sensitive, honest, and responsible person each day, for the rest of your life. Another important goal is for you to develop integrity and make and follow through on a personal promise to never hurt anyone else ever again.

Change is hard work, and successful completion of this workbook may take a very long time. Your counselor and your treatment group, if you have one, will help you every step of the way. You will notice that there are two small check boxes at the top of every page in Pathways. You are asked to put your initials in the left-hand box after you have read the page and have done the assignments on that page. After your counselor has checked your work to make sure that you understood it, the counselor will put his or her initials in the right-hand box. Throughout Pathways you will be instructed to sign the small boxes in different ways, to make sure that you are reading every page in the workbook. The instruction to change the way you sign the boxes will appear at random times in the text of various chapters. When you find new instructions, you should sign the boxes according to those latest instructions. On that page and the pages that follow, change the way you sign the boxes until you come to a new set of instructions for signing boxes. It is a challenge to make sure that you find all the different instructions for how to sign the boxes, as you read through the book.

Pathways uses an educational and relapse prevention (RP) approach to treatment, but it also is designed to help you build onto your existing strengths and positive behaviors. This treatment approach has two main parts. The first part is the internal one, teaching you about what goes on inside you as you learn how to apply self-control, how to make good decisions, and how to control and express your feelings in healthy ways. The second part is the external part, in which you will be learning to look for and accept help from other people in your support system throughout your treatment process. Teenagers dealing with the same issues you are facing have found that when they have good support systems, they are often more successful in treatment than others who go through treatment without support. Family involvement has also been found to be very important. A parent’s guide for Pathways, called Healthy Families, is also available; your parents, foster parents, or group home staff will be encouraged to read that book so that they can support your work in this book.

A single book can’t replace individual and group therapy by trained counselors, however, but it can be a very important addition to a counseling program. In Pathways, you will learn new and non-hurtful ways to deal with your past experiences, your feelings, your relationships,
your thoughts, and your behavior patterns. In addition, by successfully practicing the skills you learn here, you will become a lifetime member of the Sexual Abuse Prevention and Safety Team so that you can actually help improve the lives of other people by helping to prevent more sexual violations from occurring.

Pathways is written for boys and girls with many different types of sexual behavior problems. When you are in treatment, you may be called a client. Some clients who are using this book have touched younger children in sexual ways. Other clients have acted out in other sexual ways by exposing their private parts or by spying on other people. Some clients have been physically violent or forceful in making another person do sexual things. Other clients have gotten into trouble for sexual harassment, or they have been too preoccupied with sex and pornography. Other clients have problems with stealing underwear, making obscene phone calls, or spending too much time doing sexual behaviors.

Teenagers and young adults commit more than half of the child molestation cases that are reported to the police. Some abusers have also caused serious physical harm to victims. Some have even killed their victims. Even though we know that the harm caused by sexual abuse or sexual violence can run deep and can last a very long time, many teenagers with sexual behavior problems believe that what they did caused no real harm to the persons they abused. In Pathways, you are encouraged to begin to learn about how sexual behavior and sexual abuse can hurt other people. The purpose for showing you the harm that you have done is not to make you feel worse about what you have done, but to help you become a more sensitive, honest, and responsible person in all parts of your life. On these pages, you will be taught about direct victims as well as about indirect victims. A direct victim is a person who has been abused or victimized in some direct way. For example, a child you’ve touched sexually while babysitting is a direct victim. A woman at home who looks out of her window and sees you spying on her by looking in her window is a direct victim. If you have broken into someone’s house and taken some of their belongings, then they are direct victims, too. An indirect victim is any person who is hurt, distressed, or embarrassed by another person’s behavior, or who is impacted second-hand in any other way by the actions of another person. For example, the parent of a child who is abused is an indirect victim. Your own parents are also indirect victims because of the time, money, and shame that resulted when you were caught for sexual misconduct. Your brother or sister may also be indirect victims. For example, if you end up being listed on the Internet as a sexual offender and your siblings see the listing, it may cause them to feel deeply embarrassed.

It is important to know that even the simple touching of a child's private parts can be very frightening and upsetting for the child and for the child's family. Going into somebody's house and taking items like underwear may seem like it doesn't hurt anyone, but it can be very upsetting and scary for many families, and especially so for the person whose personal items were stolen. No matter what your sexual problems might be, it is important to remember that most people consider sexual behavior problems to be a very serious matter.

It can be very frightening, embarrassing, and confusing to discuss or be confronted about your sexual behavior. Sometimes you might feel alone or feel as if you are the only person who has ever done these kinds of things. Remember, though, you are not alone, even though you might sometimes feel that way. Every single human being has sexual feelings, and as a result, many people find that they also have problems with sexual behaviors, especially when they are young.

This workbook is designed to help you learn helpful tools that you can use every day to develop a healthy and offense-free lifestyle. By making these changes and by doing this work, you will earn the respect of your family and everyone else involved in your life.
Pathways was first published in 1990. Since that time, almost 50,000 young people have completed the workbook. All of the stories you will read in Pathways are the experiences of real teenagers. Through their stories, you will be learning about their successes and mistakes as they worked to overcome their own sexual behavior problems. More boys than girls are in treatment for sexual behavior problems, just as more boys than girls are in detention centers and jails. While boys and girls with sexual behavior problems are different in some ways, the treatment process for both genders is often similar.

It is important to understand that studies have shown that teenagers with sexual behavior problems often have other problems as well. For example, one study showed that half of all teenagers with sexual behavior problems were arrested within two years for other criminal behavior that was not necessarily sexual behavior. For this reason, Pathways will ask you to focus on all of your behavior patterns, and not just your sexual behavior.

Jenny, who is 14, started working in the Pathways workbook and then wrote the following words about her experiences a year later:

Pathways helped me learn to talk about what I had done to the kids I was babysitting. I was very scared when I went to talk with my counselor for the first time. He asked me very personal questions, and I was very scared that I would get taken away from my home and put in detention. It helped me a lot to talk with some other teenagers who were already in treatment. They seemed like normal kids, and they convinced me that it was okay and important to learn to talk about what I had done. By the time I got to chapter 3 in Pathways, I decided to open up and write down what I had done. My counselor was very understanding and supportive. After I got more comfortable, he helped me to talk more fully with my parents about what I had done.

These comments came from Sam, who is 16:

I was kind of angry and scared when I first came to see my counselor. I had not yet gone to court, and I wasn’t sure what was going to happen to me. I thought that the other kids in the treatment program would be strange, but they weren’t. They seemed very normal. It was weird to hear them talk about what their sexual behavior problems were. After hearing them talk, it was much easier for me to admit to what I had done. They explained about denial, and I found out that most teenagers leave out details of their sexual behavior because they are afraid of getting caught or they are afraid of their parents rejecting them. After working in Pathways and starting my treatment group, I realized that I was not alone and that I could earn back the respect of my family by succeeding in this treatment program.

Pathways is designed to be used in individual therapy or in a therapy group with other young people. You might be able to read this workbook by yourself and complete the assignments on your own. If that’s true, great! If you are having trouble reading and understanding the words or assignments, ask for help from your counselor. To get the most benefit from Pathways, your counselor may give you additional assignments in some chapters. You will do well on the assignments if you read each chapter carefully and ask questions about anything you do not understand. Completing Pathways will not “cure” you of your problem—there is no cure—but the book will teach you how to recognize and control your problem behaviors. You can’t be cured because you don’t have a disease. Your sexual behavior resulted from choices and decisions that you made, not from a strange disease that took over your body.
Treatment has a lot in common with activities like dieting. All human beings have sexual feelings throughout their lives, just like everyone needs to eat food throughout their lives. Every person who has ever tried to lose weight knows that short-term diets do not work.

What does allow dieting to be successful are the following four steps: 1) education about the nutritional value of different foods; 2) serious changes in the way you think about food and cope with the urges to eat; 3) the development and repeated practice of exercise routines; and 4) the establishment of a support system and a healthy environment. Treatment for sexual problems is similar. To make lasting changes in your lifestyle and behavior, you will need to learn about your sexual feelings, practice healthy control skills, and develop a support system of people who will help you make these positive changes in your life.

Treatment for sexual behavior problems, however, is different than many treatments for other addictive behaviors, like alcoholism. With alcoholism, many treatment programs teach clients to never drink again and to avoid places where people are drinking. With sexual behavior problems, it is accepted that clients will have sexual feelings throughout their lives but it is also expected that healthy sexual behavior should be learned and practiced. For this reason, Pathways teaches about healthy and responsible sexuality while it also addresses unhealthy and inappropriate sexual behavior.

Later in Pathways, during Step 5 of chapter 12, you will practice changing irresponsible patterns of behavior into positive behaviors. You will learn about something called delayed gratification, and will learn to do what you need to do rather than what you want. Teenagers with sexual behavior problems often act on impulse, without thinking about the consequences. In chapter 12, you will learn that impulsive behavior is called “Feeding your PIG.” A PIG is a “Problem with what is known as Immediate Gratification” or “Instant Gratification.” Gratification means to get what you want, and instant gratification means to get what you want immediately—as quickly as you can—which is often done without thinking about the consequences involved. Instant gratification is a very important treatment concept to master, and it will help you live a better life.

Since you are different from every other teenager with a sexual behavior problem and have a certain level of education and ability, some parts of the workbook may seem too hard or too easy for you. This is to be expected. In spite of these kinds of differences, it will be up to you to do your best in Pathways by asking for help from others or by even doing extra work, when necessary.

Since many of the assignments in this book involve writing, you may find it easier to do the assignments on a computer, if there is one you can use. At the end of each chapter there are short quizzes that you will be also asked to complete. The quizzes are designed to be open book, meaning that you can look back through the chapter to find the answers. The purpose of the quizzes is to make sure that you are learning what is taught in each chapter, and to give you a sense of progress and achievement as you do all the work in this book.

Remember that it takes hard work and commitment to complete both Pathways and your overall treatment program. When you do succeed, you will be well on your way toward reaching that important goal of becoming a sensitive, honest, and responsible person with integrity. Good luck!