Karen Franklin, PhD P.O. Box 1084 El Cerrito, CA 94530 USA

17 January 2008

Dear Dr. Franklin:

I urge you to stop misrepresenting the findings reported by my research team. I refer specifically to your statements that "Cantor did not find any statistically meaningful relationship between hebephilia and handedness. In reporting on his findings, he tried to explain away that nonsignificant finding by arguing that a neurological abnormality might still underlie some men's sexual attraction to teens."

http://forensicpsychologist.blogspot.com/2007/10/invasion-of-hebephile-hunters.html

As I have informed you previously, your statement is factually incorrect. My team and I did, in fact, find a statistically meaningful relationship between hebephilia and handedness, which we reported in the study to which you refer in the portion to which I directed your attention on November 6.

Table V. Logistic Regression of Writing Hand onto Sex and Age Group of Predominant Victim Category—Excluding Patients with Intrafamilial Victims

Predictor	В	SE_B	Wald statistic	Odds ratio (e^B)	CI of odds ratio	p
Model one						
Sex of category	0.26	0.42	0.39	1.30	0.57-2.96	.54
Age group of category			6.42			.04
Adult vs. child	1.07	0.46	5.45	2.93	1.19-7.21	.02
Adult vs. pubescem	1.07	0.50	4.51	2.92	1.09-7.85	.03
Model two						
Parient IQ	-0.03	0.01	5.17	0.97	0.95 - 1.00	.02
Patient age at testing	-0.01	0.02	0.82	0.99	0.96-1.02	.36
Sex of category	0.13	0.44	0.09	1.14	0.49-2.68	.76
Age group of category			6.37			.04
Adult vs. child	1.06	0.47	5.13	2.90	1.15-7.28	.02
Adult vs. pubescent	1,13	0.52	(** (479 *);	3.09	1.13-8.46	.03

Note, N = 247; $SE_B = \text{standard error of the regression coefficient; CI = 95% confidence interval.}$

From Cantor, J. M., et al. (2005). Handedness in pedophilia and hebephilia. Archives of Sexual Behavior, 43, p. 457.

I recognize your scholarly right to contest the interpretations of any finding that any scientist reports, but that right does not extend to the willful misrepresentation of findings.

When I read of your first mischaracterization of my work, published on your blog on October 31 and advertised on the psylaw-l listserv, I elected not to pursue the issue beyond informing you and the listserv audience of your error. Not only have you not retracted your misstatement, but you have now repeated it in a series of other public forums that includes the *American Chronicle*, the *California Chronicle*, and the *World Sentinel*, all on December 12, this time in full knowledge that your assertion was a factual error. Moreover, the outlets through which you made your erroneous claim all link readers to your own website, on which you advertise your professional services as a psychologist.

Principle C of the APA Ethical Principles and Code of Conduct contains the rule that psychologists do not engage in intentional misrepresentation of fact. By asserting that my coauthors and I did not find a relationship, when we clearly have, and by re-asserting it after having been informed of your error constitutes knowing and willful misrepresentation. APA Ethical Standard 5.04 states that "when psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements [are] in accord with appropriate psychological literature." Your continued and knowing misrepresentation in the media of the content of my team's contribution to the psychological literature violates that standard.

APA Ethical Standard 1.01 requires that "If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation." This letter is my final attempt in that regard. I urge you to retract your erroneous statements in all the forums in which you distributed them and to issue a public apology, not only to my research team, but also to the readers whom you have misguided.

Sincerely yours,

James M. Cantor, PhD

cc: Dr. Lindsay Childress-Beatty, Deputy Director, APA Ethics Office

Dr. Steven F. Bucky, Dean, California School of Professional Psychology

Dr. Charles Faltz, Director, Professional Affairs, California Psychological Association

Dr. Robert Kahane, Executive Officer, California Board of Psychology

KAREN FRANKLIN, Ph.D. CLINICAL & FORENSIC PSYCHOLOGIST

P.O. Box 1084, El Cerrito, CA 94530 · Telephone: (510) 232-1920 · e-mail: mail@karenfranklin.com

January 31, 2008

James M. Cantor, Ph.D. 250 College Street Toronto, Ontario M5T 1R8

Dear Dr. Cantor:

I am in receipt of your letter dated January 17. I am concerned about the misleading statements you make, and I am writing to correct the record.

First, you imply that you had previously attempted to contact me directly regarding your concerns. In fact, your current letter is your first and only direct contact with me on this issue. Our prior communications consisted of our respective contributions on the "PSYLAW" listserv to a broader discussion among psychologists and attorneys of the construct of hebephilia. Appendix C, attached, represents the entirety of our communications, to the best of my knowledge.

As can be seen from this exchange, it was only in your fourth email to PSYLAW (Appendix C, page 8) that you raised any concern about my blog essay (attached as Appendix A). In that email, you take issue with my use of the term "teens" as opposed to "pubescent children," as follows:

"The only professional thing for you to do is to demonstrate where I say anything about attraction to teens (rather than to pubescent children) or to correct your erroneous blog."

Pursuant to that request, I responded to the listserv on Nov. 6 by providing the source of my statement. I clarified that I used the term "teens" (rather than "pubescent children") in order to minimize jargon. I further recommended that PSYLAW listserv members read your article themselves and draw their own conclusions (Appendix C, p. 9).

That, I believed, was the end of the story. I received no direct communication from you nor engaged in any further dialogue on the listserv on this topic — until yesterday, when I received your letter. After reading your letter, I conducted a search of PSYLAW's online archives and found that you had sent one subsequent email to the discussion group, which I never received. (As you know, the volume on that listserv is enormous; many posts end up in my spam files.) Nevertheless, you never sent a single email directly to me or even cc'd me on any of these list posts. In that final post you take issue for the first time with my characterization of your findings, stating that I referenced only your "correlational results" and "ignore[d] the group-based

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analyses." You did not request a correction. Rather, like me, you encouraged people to read your article and related literature and decide for themselves.

I will turn now to your reference, in your letter of Jan. 17, to Table V of your article, which you cite as evidence that your team found a statistically significant relationship between hebephilia and handedness. By including only Table V in your letter, you mischaracterize the overall tenor of your group's findings.

As I understand your research (Appendix B), you and your colleagues were attempting to measure the relationship, if any, between handedness and sexual attraction to either children or "pubescent children." You operationalized sexual attraction via phallometry. You found no significant differences in handedness between teleiophiles (those primarily attracted to adults) and hebephiles (Tables I and II). As I pointed out in my critique, you attempted to argue away that nonsignificant finding (p. 452, column 1). Failing to find a significant relationship, you conducted follow-up research using victim age as a proxy for sexual attraction. As you and your colleagues point out, this is problematic because some offenders choose victims based on opportunity rather than "actual erotic preferences." Even using this less precise measure, you initially failed to find a significant relationship between handedness and hebephilia (Table III). You then removed from analyses all cases with any history of intrafamilial victims. Yet even then, your phallometric results remained nonsignificant as to hebephilia (Table IV). This final manipulation did, however, create a single significant finding, of a group difference between teleiophiles and hebephiles in victim age only (Table V).

Thus, it would have been more accurate for me to state, "Cantor and colleagues did not find any statistically meaningful relationship between hebephilia and handedness when using phallometry (penile erections) to measure primary erotic attraction" rather than stating, as I did, that "Cantor did not find any statistically meaningful relationship between hebephilia and handedness." I am happy to make this change, and I would have done so immediately had you communicated your specific concern to me.

Given these facts, I am particularly concerned that you falsely accuse me of "willful misrepresentation." Scientific knowledge is advanced through vigorous scholarly discourse. This was my aim in engaging with your research, as part of a larger discussion about the construct of "hebephilia" and its resurgence in the service of civil commitment. Far from being unethical, such dialogue – especially on a topic with grave public-policy implications – is crucial and benefits both the scientific community and the public at large.

Sincerely,

cc:

Karen Franklin, Ph.D.

Dr. Lindsay Childress-Beatty, Deputy Director, APA Ethics Office

Dr. Steven F. Bucky, Dean California School of Professional Psychology

Dr. Charles Faltz, Director, Professional Affairs, California Psychological Association

Dr. Robert Kahane, Executive Officer, California Board of Psychology

250 College Street Toronto, Ontario Canada M5T 1R8 Tel: 416 535-8501

250, rue College Toronto (Ontario)

Canada M5T 1R8 Tél.: 416 535-8501

www.camh.net



James M. Cantor, PhD 250 College Street Toronto, Ontario M5T 1R8

Karen Franklin, PhD P.O. Box 1084 El Cerrito, CA 94530 USA

6 January 2009

Dear Dr. Franklin:

I must urge you once again to stop misrepresenting the statements made by my research team regarding hebephilia. As I wrote to you previously, I recognize your scholarly right to contest any statement any scientist makes, but that right does not extend to the willful misrepresentation of our statements. It is unfortunate that despite my having previously alerted your licensing and other groups to your behaviour, you continue to misrepresent, in print, the content of my team's publications.

In our article that you cite (Blanchard, Lykins, Wherrett, et al.; in press), we made explicit that we use the term "hebephilia" to refer to individuals with an erotic preference for pubescent individuals, ages 11–14. We have never used the term to refer to attraction to minors older than that, and we have never made any statement about a DSM diagnosis for such individuals. In your new article in *The California Psychologist*, however, you claimed that "...hebephilia (or the erotic attraction to adolescents) has been proposed for inclusion [in the DSM] (Blanchard, Lykins, Wherrett, et al. (in press)," which is demonstrably false. We did *not* propose including a diagnosis for attraction to adolescents, whose ages range to the late teens and early 20s.

That you, or anyone else, might use the term hebephilia differently from how my team does is irrelevant: To attribute to us a proposal to include in the DSM a category for individuals attracted to adolescents is demonstrably false. We have never made any such proposal. In fact, in our article, we wrote the precise opposite.

Principle C of the APA Ethical Principles and Code of Conduct contains the rule that psychologists do not engage in intentional misrepresentation of fact. APA Ethical Standard 5.04 states that "when psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements [are] in accord with appropriate psychological literature." Your continued and knowing misrepresentation in the media of the content of my team's contribution to the psychological literature violates that standard.

A PAHO/WHO Collaborating Centre Un Centre collaborateur OPS/OMS

> Affiliated with the University of Toronto Affilié à l'Université de Toronto

APA Ethical Standard 1.01 requires that "If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation." You have previously misrepresented our statements on this topic, and you did not retract those mischaracterizations until I brought it to the attention of your licensing and other boards. So, this letter will be my final attempt in that regard. I urge you to retract your erroneous statements in all the forums in which you distributed them and to issue a public apology, not only to my research team, but also to the readers whom you have misguided.

Sincerely yours,

James M. Cantor, PhD

encl: My team's article (relevant section highlighted)

Franklin article misrepresenting that article (relevant section highlighted)

Prior issue

Franklin response upon retracting previous misrepresentation

cc: Dr. Lindsay Childress-Beatty, Deputy Director, APA Ethics Office

Dr. Morgan T. Sammons, Dean, California School of Professional Psychology

Dr. Charles Faltz, Director, Professional Affairs, California Psychological Association

Dr. Robert Kahane, Executive Officer, California Board of Psychology

P.O. Box 1084, El Cerrito, CA 94530 · Phone & Fax: (510) 232-1920 · e-mail: mail@karenfranklin.com

January 30, 2009

James Cantor, Ph.D. 250 College Street Toronto, Ontario M5T 1R8

Dear Dr. Cantor,

I am in receipt of your letter dated January 6, 2009 regarding my article entitled "Diagnostic Controversies in Forensic Psychology Practice" which appeared in the January/February 2009 edition of *The California Psychologist*. In response to your comments, I acknowledge my error in inadvertently conflating the more standard definition of "hebephilia" with the more narrow operationalization you applied in your research. I am aware that you also sent a letter to the editors of the *California Psychologist*, and the magazine is publishing your letter along with a clarification from me. I anticipate these steps resolve your concerns.

Sincerely,

Karen Franklin, Ph.D.

James Cantor

From:

James Cantor

Sent: To: January 6, 2009 5:51 PM 'editor@cpapsych.org'

lo: Subject:

Letter to the editor.

Editor, The California Psychologist 1231 I Street, Ste 204 Sacramento, CA 95814

Dear Editor:

I write to correct a misrepresentation of my colleague's and my views in a recent issue of *The California Psychologist*. The author of the problematic article, Karen Franklin, falsely attributed to us the belief that sexual attraction to adolescents should be added to the DSM as a diagnostic category. Specifically, she wrote, "hebephilia (or the erotic attraction to adolescents) has been proposed for inclusion [in the DSM] (Blanchard, Lykins, Wherrett, et al., in press)." Her assertion is incorrect.

In our proposal, we were both explicit and specific in recommending a diagnostic category for the erotic preference in pubescent children ages 11–14, not to adolescents in general. In fact, not only did we *not* propose a diagnosis for attraction to adolescents, but we explicitly *excluded* from our recommendation attraction to adolescents (which we called "ephebophilia," and defined as a sexual preference in minors ages 15 and older).

I recognize and support Franklin's right to disagree with us and to argue that a sexual preference for people ages 11–14 is a non-pathological variant of human sexuality. She does not, however, have the right to misrepresent our statements nor to fault us in your periodical for statements we never made.

My colleagues and I are owed an apology for and a correction to Dr. Franklin's error.

Sincerely yours,

James M. Cantor, Ph.D., C.Psych.
Psychologist, Centre for Addiction and Mental Health
Asst. Professor, Univ. of Toronto School of Medicine
250 College Street, Toronto, Ontario, Canada M5T 1R8

James Cantor

From: Kirwan Rockefeller [Kirwan.Rockefeller@unx.uci.edu]

Sent: January 13, 2009 2:07 PM

To: James Cantor

Cc: Jo Linder-Crow; Patricia VanWoerkom **Subject:** CA Psychologist Letter to the Editor

Dear Dr. Cantor:

Thank you for submitting a letter to the Editor for The California Psychologist.

We would like to print you letter in our March/April 2009 issue, dependent upon space availability. Once we arrive at the graphic layout process for this issue (within the next two weeks), we will have a better idea of available space.

Second, our Editorial Review Board has also reviewed your letter and they have requested some editing. The Review Board has established The California Psychologist to be a venue whereby we are providing an opportunity to clarify and provide our readers with accurate information and professional clarification when needed. As stated in our Publication Guidelines (see link below) "The California Psychologist reserves the right to unilaterally reject or edit articles or letters which it deems not to be in the best interests of these objectives, or which by their tone, content or appearance are not in keeping with the goals of the publication."

http://www.cpapsych.org/displaycommon.cfm?an=1&subarticlenbr=49

The edited version of your letter appears here:

Editor, The California Psychologist 1231 I Street, Ste 204 Sacramento, CA 95814

Dear Editor:

I write to correct a misrepresentation of my colleague's and my views in a recent issue of *The California Psychologist*. The author of the problematic article, Karen Franklin, falsely attributed to us the belief that sexual attraction to adolescents should be added to the DSM as a diagnostic category. Specifically, she wrote, "hebephilia (or the erotic attraction to adolescents) has been proposed for inclusion [in the DSM] (Blanchard, Lykins, Wherrett, et al., in press)." Her assertion is incorrect.

In our proposal, we were both explicit and specific in recommending a diagnostic category for the erotic preference in pubescent children ages 11–14, not to adolescents in general. In fact, not only did we *not* propose a diagnosis for attraction to adolescents, but we explicitly *excluded* from our recommendation attraction to adolescents (which we called "ephebophilia," and defined as a sexual preference in minors ages 15 and older).

Sincerely yours,

James M. Cantor, Ph.D., C.Psych.
Psychologist, Centre for Addiction and Mental Health
Asst. Professor, Univ. of Toronto School of Medicine
250 College Street, Toronto, Ontario, Canada M5T 1R8

Dr. Franklin's response appears here:

Hebephilia (sometimes used interchangeably with ephebophilia) is an obscure term. My research into its origins and usage found it customarily defined in the manner that I defined it – as an erotic attraction to adolescents or postpubescent children. However, in their research study, Cantor and his colleagues did operationalize it more narrowly as a primary sexual attraction to 11- to 14-year-olds.

sic psychologists and the six responses ay be previewed online

indicovity, as a printary social areaction to 11 to 11 year state.
By way of background, hebephilia and its application is very controversial among forent involved in sex offender work. Readers may want to review the Blanchard et al article (including one by myself) in the <i>Archives of Sexual Behavior</i> . The series of articles may at http://tinyurl.com/hebephilia .
Karen Franklin, Ph.D.
Kirwan Rockefeller, Ph.D.
Editor, The California Psychologist
Kirwan Rockefeller, Ph.D.
Director, Continuing Education
UC Irvine
PO Box 6050
Irvine, CA 92616
949-824-5990 voice
KRockefe@uci.edu
www.extension.uci.edu
This email has been scanned by the CAMH Email Security System.