Exhibitionism:
Genesis, Dynamics and Treatment

The syndrome of Male Genital Exhibitionism has remained, to date, uncorrectable by any and all currently available psychotherapeutic methods and approaches. Neither the professional literature nor informal polling of collective clinical experience produces many genuinely cured cases. Similarly, theoretical efforts (psychoanalytic and others) to account for the phenomenon have been inconclusive. The same statements can reasonably be made about "sexual offenses" in general.

This paper presents a successfully treated case, and the methods and procedures by which the cure was accomplished, along with some original ideas about the genetic and psychodynamic roots of exhibitionism. These precepts have been checked and validated with several subsequent cases (including child-molesting), and warrant further testing.

Case History

The patient had previously had several courses of psychotherapy, both as inpatient and outpatient, without success. He had been arrested and convicted several times, and had spent time in a mental hospital and in prison.

Results of his most recent treatment have been, among others:
- Both the patient and his wife have accomplished restructuring of their personalities and of their life together.
- He has not been arrested for some time, and it seems extremely unlikely that he will ever be arrested again. He has stopped exposing himself, and, for the reasons enumerated below, it seems extremely unlikely that he would resume the exhibitionistic pattern.
- Whereas originally he was closed-off and secretive, he is now open psychologically.

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Whereas he was originally indecisive, viewing himself as "a leaf driven by the winds of fate," he is now decisive and effective.

Whereas previously he contented himself with (or perhaps insisted upon) non-responsible and low-paying jobs, incongruous with his education and capability, he is now interested in achievement and is concretely involved in obtaining more responsible and remunerative occupation.

His voice has changed from a high-pitched one (conveying the non-verbal message that he was not important or worthwhile) to a vibrant, manly one (that conveys the non-verbal assertion that he is someone).

In contrast with his former personality, he is now open, joyful, confident, vital, autonomous, and responsible.

He no longer needs to assert his personhood in a neurotic, symbolic, or partial way by exposure of his genitals. He is now sure of recognition as a human being who is worthwhile and who has a place in the Universe of human beings. He has traded his place in the shadows for a place in the sun.

**Genesis**

A striking feature in the case history of (at least some) exhibitionists, is the lack of privacy and modesty in the home during the patient's childhood. The arrangements and actual events in this patient's household were such that there was a significant likelihood that someone would walk in upon the patient in his bedroom while he was dressing, or in the bathroom while showering. This failure to provide for privacy continued throughout this patient's childhood, including late adolescence, and specifically included his mother.

There is good reason to think that such a situation may be a determining factor in the psychogenesis of exhibitionism.

The failure to provide for privacy (especially vis-a-vis Mother) implies that "It doesn't make any difference"—i.e., there is nothing there that warrants covering; it doesn't make any difference whether one has a penis or not. The act of exposure in adult life can then be understood as a protest against this indifference, or a statement: "It does make a difference."

The "victim" can respond to the act of exposure with one of several possible reactions. If the response is indifference, it does not gratify the exhibitionist, because it parallels the assumption defended against. A second possible kind of response is for the "victim" to be interested and impressed. In those cases where this includes sexual overtures, the exhibitionist typically flees, confirming that the major significance of the act is non-sexual. (The ultimate distress, wherein the perpetrator is himself "victimized," might result from the response: "Mmm, that is very interesting, but what can it do?")

The preferred response from the victim is that she will become horri-