

INCEST/ SEXUAL ABUSE OF CHILDREN

A general overview, including a summary of the 'Accommodation Syndrome'

Background

In many ways the problem of incest/ sexual abuse of children has only recently been discussed publicly. Although many agencies are now beginning to raise the issue the majority of people are not aware of the extent of this problem and are not clear about possible effects on children. At this moment in time there are no 'experts' to tell us exactly how to approach this issue or how best to help children. However it is clear that an understanding of the realities of sexual abuse is crucial for anyone working with children and young people. As Suzanne Sgroi points out "Recognition of sexual molestation in a child is entirely dependent on the individuals inherent willingness to entertain the possibility that the condition exists". (1)

Terminology

The legal definition of incest forbids sexual intercourse between certain close relatives. It is important to point out that many children are abused by trusted adults who are not relatives e.g. neighbours, mother's cohabitee. Although such abuse would not legally be defined as incest, the effects are the same for the child. This paper therefore uses the Incest Survivors Campaign definition of incest i.e. "the sexual of abuse of a child by a trusted adult in a position of power and authority over that child". (2)

In her book "Keeping Safe", Michele Elliot describes sexual assault as "any exploitation of a child under the age of 16 for the sexual pleasure and gratification of the adult. This ranges from obscene telephone calls, indecent exposure and voyeurism such as watching a child undress, to fondling, taking pornographic pictures, attempted intercourse, rape, incest or child prostitution". (3)

Prevalence

In recent years the Strathclyde Rape Crisis Centre has an ever increasing number of calls from women and girls who have suffered sexual abuse. In 1984 46% of calls to the centre dealt with sexual abuse of children either through direct contact with women who have been abused as children or through requests from workers and others seeking advice.

In 1998 a MORI poll estimated that 4 million adults in Britain today have been sexually abused, and a million of today's children will be sexually abused before they reach 15 years of age.

A survey carried out by the Women's Support project found that , of the 1503 women who responded, 53% had suffered sexual harassment as a child, and 21% had, as children, been made to take part in sexual acts they didn't understand or like. Where women were sexually assaulted as children it was found that 6% of assailants were "respected adults"; 13% were strangers; 33% were someone known to the child; and 47% were family members. (4)

A more recent 1991 survey of 1244 young people aged from 16-21 years produced the following figures:

"Including any unwanted sexual event/ interaction that occurred before age 18, over one in two females and one in four males had experienced such an event.

If 'flashing', abuse attempts which were unsuccessfully resisted, and 'less serious' forms of abuse by peers are excluded the prevalence figures are one in five for women and one in fourteen for men.

The forms of abuse which most commonly result in prosecution, and which the general public associate with 'sexual abuse' (all forms of rape and forced masturbation) were experienced by one in twenty women and one in fifty men.

Women are between two and three time more likely to experience sexual abuse than men. Moreover women are more likely to be abused by a family member, and men by a stranger.

The prevalence rates for black and white women and men were the same (17% of the sample were Asian or African- Caribbean).

The vast majority of abuse was by men. Female abusers were 15% in the peer group category, and 5% in the adult category". (5)

The age range of abused children is from birth upwards. As awareness of the problem increases, the age of children treated drops e.g. at the Harborview Assault

Centre in Seattle, 25% of children treated are now aged 5 years or younger.

A child may be abused once, or in other cases the abuse lasts for months or years, often continuing until the child is old enough to leave home.

A child is 3 times more likely to be molested by a recognised trusted adult than by a stranger. Children who have been sexually abused are also more vulnerable to further abuse by other adults.

Why does Incest happen

Very often the first response to this question is “men who abuse children must be mad”. However, statistics show that only a tiny percentage of convicted child molesters are in need of psychiatric or medical help. It is also commonly assumed that child molesters are ‘sex starved’ and/or unhappily married. Again this belief does not match up to reality- many offenders are found to come from “normal” family homes. In fact studies suggest that they tend to be hard working devoted family men, better educated, more law abiding and more religious than average. (6)

Feminist organisations believe that sexual abuse of children has to be viewed within the context of culturally acceptable and encouraged male dominance. The problem of male violence manifests itself as sexual abuse of children, rape, violence against women and domestic violence. The belief that women and children are subordinate to men and particular to the husband/father is accepted and supported by society in many ways. It is not uncommon to hear people say “don’t interfere it’s a family matter”, or “you shouldn’t come between man and wife”.

In cases of rape and domestic violence blame is very often transferred from the person responsible and turned on to the victim. Similarly in incest it is all too easy to blame the child, the mother, the offender’s mother, or, as in family therapy, the whole family. In particular many ‘professionals’ blame the mother:

- for marrying violent men
- for not knowing
- for suspecting but not telling
- because she was abused herself.

However, all attempts at blaming people other than the abuser must be seen as red herrings.

Psychiatrists and experts in this field cannot find any “identifying” features amongst abusers- so how are women supposed to identify an abuser before they marry him.

People will very readily talk about ‘colluding mothers’ but we should ask ourselves- if you are told, or began to suspect that your brother or husband or friend was abusing his children would you go straight to the police?

Contrary to popular myth, most mothers are not aware of ongoing sexual abuse. Marriage demands considerable blind trust and denial for survival. A woman does not commit her life and security to a man she believes capable of molesting her children. The ‘obvious’ clues to sexual abuse are usually only obvious in retrospect.

In this powerless position women are expected to be more aware, more resourceful and more courageous than doctors, teachers, social workers ect., who make up a society which through denial colludes with child abuse. Professional workers often condemn ‘colluding’ mothers in one breath, and in the next say “I’m sure there is incest in such and such a family but I don’t know what to do about it”.

The Accommodation Syndrome

Even when faced with the evidence, it is often difficult for people to believe that incest happens- that children are abused without anyone finding out, or without them attempting to tell. Roland Summit has produced a paper on the ‘Child Sexual Abuse Accommodation Syndrome’ which identifies five ‘stages’ in incestuous abuse which highlight the difficulties children face. (6)

The five stages are:-

i) Secrecy

Virtually no child is prepared for the possibility of molestation by a trusted adult. That possibility is a well kept secret even among adults. The child is entirely dependent on the abuser for whatever reality is assigned to the experience. The secrecy is both the source of fear and the promise of safety- “everything will be alright if you don’t tell”.

If the child has never been warned of the possibility of the abuse, then they have little option but to believe if they are told “Don’t tell because no-one will believe you” “I’ll kill you” “you’ll get sent away”. As well as the pressure of carrying the secret, the child may come to believe that she is responsible for keeping the whole family together.

The average child never directly asks about child sexual abuse and never directly tells. Fear of being blamed, or not being believed or fear induced by specific threats by the abuser keep children silent. Once the child has kept silent it becomes obvious that there is no second

chance. "Why didn't you tell me?" "how could you keep such a thing from me?".

Anyone working with a child whom they suspect has been abused should always assume that the child has been threatened. What children need is the permission and power to share their secret and the possibility of a non-punitive, supportive response.

(ii) *Helplessness*

Children may be given permission to avoid the attentions of strangers but they are required to be obedient and affectionate to any adults entrusted with their care. A child may say "I don't like daddy bathing me" or "I hate uncle John". Adults are not likely to pick up on this and the child may well be told off for being a nuisance, or for being rude. The child may feel that their mother by dismissing their complaints is condoning the abuse.

It is sometimes assumed that if a child doesn't complain, they are in some way consenting to the abuse, or at least are not damaged by it. It should be clear that no child has equal power to say no to a parental figure or to anticipate the consequences of sexual involvement with an adult. It should be clear that the adult bears sole responsibility of any sexual activity with a child.

Adults may expect children to forcibly resist abuse, to cry for help, to try to escape but the natural reaction is to feign sleep, to shut off, to cope silently. Small creatures simply do not call on force to deal with overwhelming threat and confusion. Trusted adults define a child's reality and when there is no place to run they have no choice but to try to hide.

Adults easily forget the absolute powerlessness of the child and find it hard to believe that children would submit to sexual abuse quietly but the threat of loss of love or loss of family security is more frightening to a child than the threat of violence.

Children are easily ashamed and intimidated both by helplessness and by their inability to communicate their feelings to uncomprehending adults. They need an adult advocate to translate the child's world into an adult-acceptable language. This advocate has to recognise that no matter the circumstances the child had no choice but to submit quietly and keep it secret.

Men who use children for their own sexual gratification soon learn that dependant children are helpless to resist or complain.

(iii) *Entrapment and Accommodation*

For the reasons outlined above early intervention is unusual and therefore children who suffer continued sexual abuse must learn to accommodate that reality into their lives. To make some sense of the abuse children may grow to believe that they must have provoked or deserved the assaults. However, the anger and rage at being abused will find expression for girls most usually in self destructive behaviour which reinforces her self hate.

The Incest Survivors Campaign have compiled a list of possible signs of sexual abuse. This includes urinary infections, VD, self mutilation, obsessive dependency, shutting off, incontinence, bedwetting, knowledge of sexual details, pregnancy, anorexia or obsessive eating, self-neglect, depression, drug and/or alcohol problems, truancy, disrupting school, running away, fear of going to bed, insomnia, nightmares, falling asleep during the day, waking with cramps, throat infections, secretiveness, obsessive fears etc.

The list cites behaviour patterns common to all distressed children. Although all these behaviour patterns, especially when occurring in isolation may not be a reaction to sexual abuse, we must accept child abuse as a primary possibility.

Much of what is eventually labelled as adolescent or adult psychopathology can be traced back to the natural reactions of a healthy child to an unnatural and unhealthy environment.

Learning to live with sexual abuse damages children's ability to trust, love and develop. Anyone working with the child, or the grown up still shattered by the abuse, may be tested and provoked to prove that trust is impossible, and that the only secure reality is negative expectations and self-hate. It is all too easy to join the parents and all of adult society in rejecting such a child.

(iv) *Delayed, Conflicting and Unconvincing Disclosure*

Most ongoing sexual abuse is never disclosed, at least not outside the immediate family. If family conflict triggers disclosure it is usually only after some years of continuing abuse. If after an especially punishing family fight and a belittling showdown of authority by the father, the girl is finally driven by anger to let go of the secret, she finds she is seeking understanding and intervention at the very time she is least likely to find them. Authorities, and possibly her own family, are alienated by the pattern of delinquency and rebelling anger. People assume that she has invented the story in retaliation against her parents attempt to achieve reasonable control.

The average adult, including mothers, teachers, doctors, social workers, judges and jurors, cannot believe that a normal, truthful child would tolerate incest without immediately reporting it. A child of any age faces an unbelieving audience when she complains of ongoing sexual abuse, but an adolescent who has already been branded as a trouble maker and an ungrateful child risks not only disbelief but humiliation and punishment as well.

(v) Retraction

Whatever a child says about sexual abuse, she is likely to reverse it. The family may be shattered, the child will be questioned, but the father may remain in the home in the meantime.

Once again the child bears the responsibility of either preserving or destroying the family. The 'bad' choice is tell the truth, the 'good' choice is to capitulate, restore the lie and save the family.

Unless there is special support for the child, and immediate intervention to put responsibility on the abuser, the girl will follow the 'normal' course and retract her complaint. The mother will also need support and a chance to express shock, grief and anger, so that she is in a better position to support the child and maintain a family base.

If this help is not available and the child does retract her statement then this confirms adult expectations that children can't be trusted. It confirms the child's belief that no-one can help- and it makes it that bit less likely that the next child who dares to tell, will be believed.

What can be done?

If we accept the arguments in the 'Accommodation Syndrome', then we must find some way of educating children about the possibility of sexual abuse, and give them the means to tell at once. It must be clear that sexual abuse is the responsibility of the adult involved, that such abuse is always wrong, and that it will be the abuser, nor the child who will be punished.

Recent interest in sexual abuse creates new hazards for the child victim, since it increases the likelihood of discovery but fails to protect the victim against the secondary assaults of an inconsistent interventions system.

We must believe those children who have already been abused and provide them with a safe and consistent means of escape. Work undertaken with abused children shows that if children are believed and action is taken to protect the child and to stop the

abuse many of the damaging long-term effects can be reduced or removed. This must involve inter-agency work particularly between social services, police and health services. Teachers, and other workers who spend time with children have an important role to play.

Although we are only in the early stages of doing anything to combat child sexual abuse, there is an increasing amount of information and material available which is suitable for work with children.

It is important to remember that work with children in this area needs to be well planned, sensitively handled, and well supported. Agencies and organisations attempting to provide services and support for children should draw on the experience and strength of adult survivors of sexual abuse to help develop appropriate services.

Contact with voluntary organisations such as Rape Crisis Centres, Women's Aid, Incest Survivors' Groups, and other women's organisations or groups should be seen as essential for statutory organisations dealing with abused children and women. Such organisations have invaluable experience and expertise to offer.

The following material may be useful for anyone wanting to learn more. All materials are available from the Women's Support Project Resource Library.

A. Material for children to see and discuss

1. Something Happened to me.
By Phyllis E. Sweet
(A children's book on sexual abuse)
2. Katie's Yucky Problem
By Lynda Morgan
(A story about a young girl who is worried about her friend who has been abused)
3. The Willow Street Kids
By Michele Elliot
(Stories to read to children to help safeguard them against sexual abuse)
4. Feeling Yes, Feeling No Series
Educational Media International
VHS, 71 mins
(A series of videos aimed at different age groups designed to warn children about the possibility of abuse)
5. Out in the Open
By Ouaine Bain and Maureen Sanders
Practical and Positive advice and support.

B. Material for adults intending to raise the issue of sexual abuse with children

1. Keeping Safe
By Michele Elliot
(A practical guide to talking with children)
2. No is Not Enough
By Adams, Fay and Loreen Martin
(Helping teenagers avoid sexual assault)
3. No More Secrets
By Adams and Fay
(Advice on how to talk to children about abuse)
4. Information leaflets on 'Working with Suspicion', 'Handling Disclosure' and 'Working with Abused Children'.
By Working Party on Violence Against Women and Children, c/o Women's Support Project
(Practical information on how to approach a situation involving sexual abuse)

To borrow materials, or for more information, write or phone to Isabell Robertson, 31 Stockwell St, Glasgow G1 4RZ Tel: 0141 552 2211 Fax: 0141 552 1876 Email: isabell@wsproject.demon.co.uk Qwertyphone (text phone for deaf people): 0141 552 9979

References

- (1) Handbook of Clinical Intervention in Child Sexual Abuse
By Susanne Sgroi
Pub. Lexington Books 1982
- (2) The Incest Survivors' Campaign were set up in 1980, in London, and were the first national organisations of survivors. They have since disbanded.
- (3) Keeping Safe- A Practical Guide to Talking to Children
By Michele Elliot
Pub Bedford Square Press, London, 1986
- (4) Women's Support Project Survey of 1503 women, carried out in 1989.
Unpublished, but details available from Women's Support Project, 31 Stockwell St, Glasgow G1 4RZ
- (5) An exploratory study of the prevalence of sexual abuse in a sample of 16-21 year olds
By Liz Kelly, Linda Regan, and Sheila Burton
Child Abuse Studies Unit, Polytechnic of North London, 1991
- (6) Forward, S. and Buck, C., 'Betrayal of Innocence'
Pub Penguin
- (7) Child Sexual Abuse Accommodation Syndrome
By Doctor Roland Summit
Child Abuse and Neglect, Volume 7, 1983

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