

Introduction

As human beings we share an illogical but common failing...our refusal to acknowledge events and experiences that are, in reality, a fact of our human experience. Our treatment of death comes to mind immediately as an example. Though not as universal as death, child sexual abuse is also a fact of our human experience. Lamentably, we often fail to recognize it as such.

Child sexual abuse is horrible and repulsive, reflecting the darkest side of human behavior. Terrible as child sexual abuse may be, most of us will not acknowledge nor respond to it in an affirmative fashion in the absence of personal experience. As is often the case, only after traumatic experiences are we driven to understand the nature of those events and compelled to act in response. Child sexual abuse has been such an experience for me.

My experience with child sexual abuse is analogous to my experience with racial injustice. Growing up in the south, living in the insulated world of a white, lower middle-class, church-going family, I had no idea there was racial discrimination, oppression, or injustice not common to everyone. Only after I was confronted with the social upheaval of the sixties and seventies did I realize racial injustice had been there all along. I was not guilty of criminal injustice. My excuse was ignorance. My sin was blindness.

Injustice did prevail in my hometown. I could not see it because it was too painful. Too painful, not because of the suffering of the oppressed, but because it revealed a side of human behavior I did not want to believe existed. If I did not acknowledge the oppression, I did not have to encounter the oppressed.

In the same way as racial injustice, child sexual abuse prevails in our society. To accept that truth is too painful. We do not want to believe that people act in such despicable ways. Accordingly, we reject the idea that there are victims. If I do not believe there are persons who sexually abuse children there will be no sexually abused children. Our excuse is ignorance. Our sin is blindness.

I want you to know about the problem of child sexual abuse. What I have written is what I wish I had known. The information in this handbook is not comprehensive but it is adequate to remove an excuse of ignorance. Blindness is cured by truth.

This author is a father not a scholar. My motivation for writing emanates from compelling personal experience and the painful betrayal by persons loved and trusted.

Children No More

With tears welling up in her eyes, she reflected sadly, "I missed being a child".

Those words, spoken by a teenaged girl as she discussed the impact of the sexual abuse that occurred in her early years, describe the essence of the damage that child sexual abuse has on its innocent victims.

From the time of that early traumatic experience, guilt -self-imposed, undeserved and hidden - fermented within her. Now as an adolescent, the full force of this erosive chemistry is manifested. Simmering anger bursts forth in episodes of rage and inexplicable rebellion. The results can be devastating for both her and those who love her.

The words of Jesus in the gospel of Matthew render judgement on those who would rob a child of her innocence.

"... if anyone causes one of these little ones who believe in me to sin, it would be better for him to have a large millstone hung around his neck and to be drowned in the depths of the sea."

Child sexual abuse deserves to be recognized for what it is, a highly significant problem that cuts across all segments of our society. We would like to believe that it doesn't happen in our neighborhood, church, school, or home, but there is a high likelihood that it already has, or will, occur in one or more of those places for a surprising number of children.

There is little recognition of the problem in churches today. The very nature of the church community, - a "safe place", characterized by love and trust, - provides fertile ground for possible sexual abuse.

This booklet is written to inform parents, teachers, ministers and other responsible adults about child sexual abuse. It is by no means an exhaustive treatment of the subject. The intention of this material is to sensitize and inform readers so they can be alert and act responsibly to prevent child sexual abuse and minister to its victims.

"The Spirit of the Lord is on me, because he has anointed me to preach good news to the poor. He has sent me to proclaim freedom for the prisoners and recovery of sight for the blind, to release the oppressed, to proclaim the year of the Lord's favor."

Luke 4:18-19

Two Faces of Child Sexual Abuse

"Don't worry, Mom. I'll be home before dark." Seven-year-old Link let the door slam behind him, jumped on his old red bike and sped off in search of friends with whom he could enjoy the last few hours of daylight.

...when she noticed it was getting dark. She assumed that Link was still at the home of one of his friends. But when she made a number of phone calls and failed to locate him, a knot of worry lodged itself in the pit of her stomach. "let's take a drive and see if we can spot a bike," she suggested to her parents...

About the time that Helen and her mother got into the car to search for Link, another drama was taking place about three and a half blocks away at the home of Richard and Candy Mansfield. The Mansfields, Richard's twelve-year-old daughter, Sabrina, and his three nieces were solemnly making funeral arrangements for Marbles, the family cat, who had just been run over by a car. After much discussion, they agreed to bury Marbles in the woods.

As the girls were gathering flowers to sprinkle on the small grave, Richard Mansfield saw a small figure about seventy-five yards away: a boy, naked and covered in mud, leaning heavily, as if for support, on a big branch. Richard took a step toward the youngster, but the boy backed into the underbrush and disappeared.

"My first thought was that the child had been playing the creek and had lost his clothes," says Richard, a third-grade school teacher. "Yet we couldn't leave the woods without checking further."

Again, the family heard rustling in the bushes. This time the child stayed as Mansfield approached, crooning reassuring words. Gently putting his hand on the child's shoulder, he knelt down to examine the boy for injuries. Suddenly a wave of nausea gripped him. Where the boy's penis had been, there was nothing but a gaping, bloody wound.

"Call 911," Mansfield whispered hoarsely, handing his daughter the keys to their front door. Then, as Candy draped her jacket over the youngster's shoulders, he lifted the wounded child into his arms and began the careful walk back to the house.

...the child was so heavily sedated that it was two days before he told police exactly what had happened to him: A man on a bicycle had stopped him and threatened to hurt him unless Link did what he said. The he ordered Link to ride with him on the trails in the woods. once they reached a remote area, the assailant wrapped two cords around Link's neck and raped and stabbed the child before mutilating him. He then left Link for dead in a damp creek bed. Doctors said later that the dampness had helped staunch the flow of blood from the boy's wounds. (Gross 1990)

The story of Link disturbs our deepest sensibilities, and - for many parents - mirrors our greatest fears. Regular media reports of abduction and sexual assault have sensitized many parents to higher awareness of this societal malady. In fact a number of parents consider themselves diligent and well-informed on this topic.

In one sense, however, Link's story deludes and misdirects us. In instances of child sexual

abuse, Link's experience is the exception rather than the rule. It is not that Link is undeserving of our attention; it is that our focus is diverted from a more prevalent and immediate danger lurking near and/or within our homes. For each Link, there are thousands of stories similar to the one that follows:

"Mommy, wake up! Mommy I have to talk to you."

It was nine o'clock on a Saturday morning, and the frantic urgency in my daughter's voice woke me immediately.

"Tricia, what is it? What is wrong?"

Her slender body was tense. As she dug her toe nervously into the carpet, tears streamed down her cheeks.

"Mommy, Todd did sex to me."

I knew immediately whom she was talking about but didn't believe I could be hearing correctly. Why would she be accusing that nice man next door, her best friend's father, our trusted neighbor...yet why would she lie?

I drew Tricia's rigid body closer to me, fighting for calm. "Sex is a lot of things, baby," I said. "I need to know what kind of sex you're talking about."

Her voice was barely audible. "He licked me." She pointed between her legs. "Down there, Mommy."

Any suspicion that I may have had that Tricia was lying or perhaps imagining things disappeared upon hearing those words. A nine-year-old child would never so accurately describe oral sex.

Then she collapsed into hysterical sobs. instinctively, I realized I had to remain calm so she could tell me the whole story. I held her against me and, fighting my own tears, waited for hers to subside.

"Sweetheart," I finally said softly, "Mommy has to ask you some questions. Can you answer them right now?"

She nodded, not looking at me.

"Sweetie, how many times did this happen? Do you remember?" I held my breath, praying that it had been only once.

"It happened for a long time, Mommy. Since I was in the first grade."

So the abuse had been going on for two years, at least. I asked Tricia a few more questions, trying cautiously to find out the extent of Todd's actions. From what she told me, I understood that he had not performed intercourse (subsequent talks over the weeks confirmed this). I then tucked her into bed - her hysteria had brought on a slight fever - and told her I had to make a couple of phone calls. Her tremulous voice stopped me at the door.

"Mommy, are you mad at me?"

"Tricia," I said urgently, "you have nothing to be ashamed of. He was wrong to do what he did. Do you understand?"

Tricia looked skeptical. I had no idea at the time just how long it would be before she understood who was really to blame.

(Thompson 1988)

What is Child Sexual Abuse ?

Definitions:

Childhood sexual abuse is a physical violation of a child's body through any sort of sexual contact or by a psychological violation of a child's personal space through verbal or visual sexual behavior.

The following questions can be beneficial in determining if sexual abuse has occurred:

- > Did anyone ever touch your genitals or have you touch theirs?
 - > Were you ever french kissed, or sexually penetrated in any way?
 - > Were you subject to embarrassing and degrading sexual remarks and taunts?
 - > Were you spied on while dressing or bathing?
 - > Were you given excessive enemas or were your genitals frequently and harshly washed because you were always "dirty"?
 - > Were you shown pornographic pictures or invited to watch X-rated videos?

(Kunzman 1989)

Sexual assault means the forcing of sexual contact. When children are victimized, the sexual contact may involve handling of the child's genitals or requests for sexual handling by older child or adult. Sometimes the contact is oral sex. Sexual contact includes attempts at penetration of the vagina or anus and, rarely, actual penetration. Some kinds of assault involve no physical contact. A child may be forced to look at the genitals of an older child or adult, or the child may be requested to undress and otherwise expose her/himself.

(Fay 1979)

INCEST

..incest...any overtly sexual contact between people who are closely related or perceive themselves to be closely related. This definition would include stepparents, stepsiblings, stepgrandparents, and even live-in lovers, if they have assumed a parental role.

(Forward and Buck 1979)

"incestuous assault"... any manual, oral or genital contact or other explicit sexual behavior that an adult family member imposes on a child, who is unable to alter or understand the adult's behavior because of his or her powerlessness in the family and early stage of psychological development. This type of incest is non-consensual because the child has not yet developed an understanding of sexuality that allows him or her to make a free and fully conscious response to the adult's behavior. ...any sexual activity or experience imposed on a child which results in emotional, physical or sexual trauma. (Butler 1978)

Just How Big is the Problem of Child Sexual Abuse ?

The numbers associated with child sexual abuse are startling to the uninitiated. To help understand the magnitude of the problem, several statistical sources are summarized below.

In a national survey using a random sample of 2,627 men and women, **twenty-two percent (27% women and 16% men) said they had been sexually abused as children.**

Applying those percentages to the 1988 population would mean that 38,000,000 adults were sexually assaulted as children and more than 8 million girls and 5 million boys would be sexually abused before 18 years of age. Note: Of those surveyed, one third had never told anyone about their experience. Only 3% of the incidents were reported to the police. (Los Angeles Times 1985)

Of 400 women answering Alfred Kinsey's questionnaire, **25% said they either had sex with adult men while they were children or were approached by men seeking sex.** (Kinsey 1948)

900 randomly chosen women in San Francisco were questioned about their childhood sexual experiences. **The study revealed that 38% had been sexually abused before reaching the age of 18. Two-thirds of the incest victims and four-fifths of the non-relative victims were subjected to at least serious abuse. 28% of the seriously abused women had been abused before the age of 14. 12% were by relatives.** (Russell 1973)

200 men and women were surveyed in a study conducted by the Canadian government in 1984. It was found that **one in every two women and one in every three men had been subjected to some kind of sexual abuse as a child.**

A study of 521 Boston parents revealed that **12% (15% women and 6% men) had been sexually abused before age 16.** (Finkelhor 1981)

A survey of 2250 adolescents ranging from 12 to 20 years old, administered to freshmen in five Christian universities and to church of Christ youth throughout the nation, who volunteered reported that **6% of the respondents had had incestuous experiences.** Note: In the context of the report, marriage therapists were cited as believing that up to 40% of women within conservative and fundamentalist churches have been sexually abused in their formative years. (Lewis, Dodd, Tippens 1989)

In 1978, Dr. Susan Forward, a world renowned authority on incest and sexual abuse, estimated the **victims of incest to run as high as 10 million adults in the United States.**

IMPACT

Numbers alone are sufficient reason to be alarmed about child sexual abuse. When we begin to understand its impact on the victim and the implications to society in general, the picture is complete.

The long term effects of child sexual abuse can be so pervasive that it's sometimes hard to pinpoint exactly how the abuse affects you. It permeates everything: your sense of self, your intimate relationships, your sexuality, your parenting, your work life, even your sanity. Everywhere you look you see its effects.

(Bass, Davis 1988)

One difficulty in dealing with child sexual abuse is the inability to understand the relationship of the original experience to current situations. The personal impact of child sexual abuse is often not apparent until later years. It may begin at adolescence or even later.

The scope of the trauma of child sexual abuse has been the subject of a significant amount of research. There are varying assessments of the type and severity of effects but there seems to be consensus on one point: child sexual abuse victims are at significantly higher risk of experiencing initial and long term mental health impairment.

Not all victims of sexual child abuse are affected in the same way. Factors relating to the ultimate impact of child sexual abuse include the form and duration of the abuse, as well as the identity of the perpetrator.

Less scientific, but somehow as convincing as the aforementioned studies, is the testimony of the victims. One survivor of incest described the experience "as the end of childhood". That description embodies the devastation of the whole child through the loss of innocence and trust and self-worth.

Victims may initially react with fear, anxiety, depression, anger and hostility and inappropriate sexual activity. Long term effects most commonly include depression. Also, it is not unusual for them to experience difficulty in sleeping, anxiety attacks and symptoms of dissociation. A central issue for the victim may well be their low self-esteem. Many victims, particularly incest victims, block out the experience completely, only to re-live it years later.

The experience of childhood sexual abuse may effect significantly the victim's ability handle interpersonal relationships in later years. They can find it difficult to trust others and may have reactions of fear, hostility and a sense of betrayal. Sexual problems may also emerge.

Some therapists believe that the label Post-Traumatic Stress Disorder (PTSD), which has been most often been applied to combat veterans, may also be an appropriate diagnosis for some of those that have been abused.

Their problem is often manifested in antisocial behaviors. Various studies have indicated anywhere from 25 to 75% of prostitutes were sexually abused as children. 44% of the female drug abusers in one drug treatment program are reported to have been victims of incest as children. Another source reports the number closer to 70%.

A study of 175 rapists found 75% of them had been sexually abused as children.

Lewis, Dodd and Tippens report that 60% of the psychiatric hospital patients have been sexually abused at one time or another.

A recent "20/20" program contained a segment about troubled adolescents in an in-treatment facility. The interviews of the patients contained a common thread...sexual abuse experiences.

As early as 1896, Sigmund Freud's study of middle class women suffering from hysteria revealed that in each case they had been subjected to childhood sexual abuse, mostly by their fathers. Freud developed and presented his "seduction theory" which concluded that there was a causal relationship between neurosis and sexual abuse. Unfortunately, for reasons that will be discussed later, he withdrew his conclusions a few years later.

Information concerning the impact of child sexual abuse on the individual as well as society is still evolving and the ultimate effects are yet to be known. Although the continuum of effects ranges widely, we can be certain of one thing, the effects of child sexual abuse on its victims are terrible and senseless.

If Child Abuse is Such a Problem, Why Aren't We Talking About It?

Conspiracy of Silence, The Silent Children, By Silence Betrayed, The Best Kept Secret, titles of books concerning child sexual abuse, all imply the shroud of silence that encompasses the subject and which, ironically, retards the healing of the victim while it protects the perpetrator. The words of one victim quoted in The Courage To Heal provide insight into the issue of silence:

"I feel very lonely and isolated. I've always had so much to say, and I've never said it. What's hindered me the most is being so skilled at being silent. Incest has had so much to do with being silenced and silencing myself."

Beyond victim and perpetrator, the silence continues. Seemingly, no one wants to talk about a problem that is more threatening to our children and to society in general than abduction and kidnapping or other more sensational or titillating issues. Breaking silence may be the single most important step in defeating child sexual abuse.

The issue of silence on the subject of child sexual abuse is certainly a complex one and extends deeply into the recesses of our culture and our psyche. However, there are some aspects that are more apparent and worthy of brief discussion here.

Child sexual abuse is a difficult subject to talk about.

Meaningful discussion on sex is rare. It is a paradox of the sexual revolution that we are so much more "open" but we have so little depth when we talk about sex. When parents cannot discuss between themselves their feelings and concerns about their own sexuality, it is not surprising that they are unable to talk to their children about sexuality.

Another dimension of the difficulty in discussing child sexual abuse is that there are significant risks associated with it. Child sexual abuse is illegal and the reporting of it triggers legal mechanisms that can be traumatizing within themselves. The fear of false accusations has precipitated an organized backlash against some efforts to reduce child sexual abuse.

Even in the absence of legal entanglements, the social stigma to both the victim and the perpetrator are such that they can devastate their lives.

Our natural defense mechanisms prevent dialogue about or even admission that child sexual abuse occurs.

The impact of child sexual abuse on our psyche is analogous to the subject of death. The idea is so abhorrent that contemplation of it is more than we are willing to endure. One common defense mechanism is that of denial. If we deny that it exists we do not have to deal with it. Unfortunately, child sexual abuse, like death, cannot be ignored.

Often, even when we are willing to accept the reality of child sexual abuse, there is minimization. A common expression reflecting that defense is, "What's the big deal?"

David Finkelhor, in his book Child Sexual Abuse observed the following:

"The evidence that parents avoid talking to their children about sexual abuse is quite dramatic as is the evidence that this avoidance cuts across most social groupings. The important question for people interested in the field of sexual abuse prevention then becomes 'why?'. We know from other parts of our survey (Boston-1981) that people think that sexual abuse is a serious problem. They rated it much more serious than other potentially traumatic events of childhood such as having a friend die or parents getting a divorce. They acknowledged that it occurs to a great number of children. They know many people in their social network who have been victimized. Yet they do not put this knowledge or concern into action. Faced with their own children, they avoid the subject."

Finkelhor goes on to enumerate the explanations that parents in his survey gave for not talking to their children about sexual abuse. Included were:

They believed that the child was in little danger.

They were fearful of frightening the child.

The child was too young.

They found it difficult to talk about sex.

Parents are not alone in their silence. Society in general continues in what has been described as a conspiracy of silence about child sexual abuse. A dramatic illustration of that covert conspiracy is evident in the story surrounding Sigmund Freud's "seduction theory".

Freud had studied a number of middle class women who were suffering from hysteria (neurosis). In each case the patients had been sexually abuse, primarily by their fathers. Freud in his presentation of his paper "The Etiology of Hysteria" in 1896, concluded that child sexual abuse, particularly incest, was the cause of hysteria. Because hysteria was a common malady, that conclusion clearly implied that sexual abuse was wide spread and the incidence of incest common among the middle class.

The reaction of his colleagues was immediate rejection. In less than two years, Freud, (some believe under the pressure of such rejection), revised his conclusions stating that his error had been in believing that so many occurrences of child sexual abuse had been experienced. Rather, he attributed the stories to fantasy. The explanation for changing his conclusions that he offered one colleague was that it was highly unlikely that so many women had been abused, that "surely such widespread perversions against children are not probable"

The silence likewise extends to the church community. Sexual abuse is impacting all segments of society, creating a desperate need for ministry. The very nature of the church community provides an environment that is extremely vulnerable to the possibility of child sexual abuse. Despite those conditions, there are virtually no specific efforts to prevent occurrences of sexual abuse or minister to victims or perpetrators.

Treatment & Recovery

Once the scope and impact of child sexual abuse is recognized, there are obvious questions that come to mind and require answers. They include: Can the victims of child abuse recover from their trauma? If so, what are the most effective methods of therapy? Where do victims go for help?

Additionally, Can abusers be cured? Likewise, what are the most effective methods of treatment? Where do abusers go for help?

Just as there are relatively few reliable and documented studies on the subject of child sexual abuse, there is also a lack of information concerning the recovery of victims and treatment of abusers. However there are some generalized conclusions that are helpful in providing answers.

Victims

"All sexual abuse is damaging, and the trauma does not end when the abuse stops. If you were abused as a child, you are probably experiencing long-term effects that interfere with your day-to-day functioning. However, it is possible to heal."

(Bass, Davis 1988)

There is general agreement that victims can recover from the experience of child sexual abuse. It is important to understand the seriousness of the effects of child sexual abuse but we must not leave the impression that its effects are necessarily permanent. Davis Finkelhor stated,

"In the rush to draw public attention to the seriousness of the problem of child abuse, we have had the tendency to overstate the inevitability of its traumatic effects. Those who were abused as children also need reassurance that they are not permanently maimed, that many of their efforts to cope and put their past behind them have made them strong and capable individuals."

How long that healing process takes is related to the magnitude of the trauma, when intervention takes place, the resolve of the victim and the resources available to assist in recovery.

In the case of severe trauma the healing process could last for years, requiring extensive counseling and/or psychotherapy, possibly clinical treatment. In many cases successful healing is a matter of convincing the victim that they are not responsible for being abused. In the least severe cases, healing may very well be accomplished by the victim, given certain skills and support.

The earlier that intervention takes place, the sooner the healing process will begin and the less impact that will subsequently be experienced. This makes it essential that children disclose any sexual abuse experience and that the disclosure be received with understanding and compassion.

In most cases, the adult victim requires intervention to achieve healing. Intervention may

come through a spouse, friend, minister, counselor, therapist, psychologist or psychiatrist. Unfortunately, there are few that are knowledgeable or experienced in dealing with the issues related to sexual abuse. John Crewdson (1988) states,

"...the field of sexual-abuse treatment for children is less than ten years old, which means that hardly anyone in it has more than a decade's worth of experience. The understanding of why some victims are more traumatized than others by sexual abuse, and how best to treat those who fall into each category, awaits a good deal more research."

What is the most effective method in achieving recovery? There seems to be no consensus on any particular method and a discussion of the different methods is beyond the scope of this writing. There is, however, no absence of choices. Crewdson points out, there are twenty-one different kinds of counselors listed in the Los Angeles yellow pages. This is a hint of what may be an extremely frustrating experience for the adult victim or the parents of a child victim, as they attempt to find a competent counselor or therapist.

Where do you find help? There are several resources that can make the search easier. A rape crisis center in the community will most likely know of counselors/therapists who are experienced in sexual abuse cases or have counselors on staff and available at little or no cost. Most pediatricians can recommend a therapist who has some experience in the field. Many ministers are qualified as counselors and/or are knowledgeable about resources available in the community.

It is important to know that therapy can be very expensive and should be considered in choosing a therapist. If you have health insurance, check to see if you are entitled to mental health benefits, the conditions under which you are covered and the amount that will be paid. There is not necessarily a correlation between the quality of service and the cost associated with it, so it would be wise to shop around.

A critical aspect in choosing a therapist is how well the client "connects" with the therapist. Connecting simply means that the client feels a sense of trust and openness with the therapist that will permit effective therapy. It often requires visiting with several therapists before a satisfactory relationship is found. Asking pertinent questions initially will help reduce the time and expense of finding an acceptable therapist.

Ellen Bass and Laura Davis in their book Courage to Heal suggest a series of questions to ask at an initial session with a therapist (note that they use the term survivor to describe victims of sexual abuse).

- * Have you ever worked with survivors? What kind of training do you have in this kind of work?
- * How do you work with survivors? What are the techniques you use?
- * If you haven't worked with survivors before, how would you educate yourself on the subject?
- * Would you support my participation in a survivors group?

- * Do you think sex with adults is always damaging to children?
- * Do you think that children ever willingly participate in sex with adults?
- * Do you think that women ever fantasize or exaggerate abuse?
- * Do you see family reconciliation as a goal? Why (or why not)?
- * What role do you think forgiveness plays in the healing process?
- * Do you think that it is okay for therapists and clients to socialize or become friends during therapy or after it is over? Are there any circumstances where sex is appropriate between therapist and client?
- * How much do you charge? Is there a sliding scale or the possibility of barter?
- * Can I call you at home? Schedule emergency sessions?

Additionally, it is important for a client with strong religious convictions to know the therapist's beliefs and how they effect his/her approach to therapy. Using these or other appropriate questions will decrease the likelihood of a mismatch between client and therapist.

It is evident that intervention and the process of recovery for the victim of child sexual abuse can be complex and possibly frustrating. More important, however, is that healing and recovery to a full and productive life is possible through the therapy experience.

Abusers

Even as this writing occurs, the CBS Evening News reports the story of a mother and father sentenced to fifteen years in prison for the sexual abuse of their five children over the last twenty-two years. Both mother and father continued to proclaim their innocence, even in the face of their conviction. The children interviewed, spoke of the heart-breaking and emotionally crippling experiences which they were finally able to talk about and ultimately testify to in court.

Who are the abusers? What causes them to perform such despicable acts? Can they be cured? What actions are appropriate for sexual offenders?

"Except for the fact that they like to have sex with children, child abusers look and act pretty much like everybody else. many of them are men and women with jobs and families, liked by their coworkers and neighbors and respected in their communities, the sort of people whose friends will say, 'It can't be true. I know that guy. He's a nice guy.' Researchers who have spent lifetimes searching for the profile of a typical child molester have concluded that there simply isn't any such thing. Child abusers can be rich or poor, smart or stupid, boorish or charming, failed or successful, black or white. Even some of the judges, prosecutors, police officers, and social workers whose job it is to put child molesters behind bars, and protect their victims, have been convicted of molesting children."

(Crewdson 1988)

It is believed that 97% of sexual abuse offenders are heterosexual males. An extensive study showed that the average molester of girl children will molest 62.4 victims in his career while the average boy molester studied offended 30.6 victims. (Sanford 1980)

The Los Angeles Times' 1984 survey which included 1260 adult men who were asked about experiences sexually abusing children, revealed that, at the absolute minimum, one in twenty-five American men are child sexual abusers.

Following are some conclusions about child sexual abusers for which there seems to be general agreement among researchers:

There is no general agreement that abusers can be cured. In the case of confirmed pedophiles, the best alternative may be to lock them up.

The sexual abuser suffers from "addictive behavior" and will have to deal with it all of his/her life.

Most often abusers will deny their actions, even in the face of overwhelming evidence.

Even when abusers accept the reality of their actions they may rationalize them.

The rate of relapse for abusers has not been fully confirmed but indications are that it may range from 6% to as high as 50% for certain categories of offenders.

There is no single factor which can be pointed to as the cause for an abuser's actions.

David Finkelhor writes, "Some of the most glaring deficits in the field of sexual abuse currently concern the work with offenders." Finkelhor continues, "The reasons for the difficulty are readily recognized. Offenders generally deny their offense; they are hard to bring to justice or to treatment; and therapists and criminal justice officials do not relish working with them."

It is clear that emphasis in dealing with child sexual abuse is placed on the victim as it appropriately should be. However, a failure to understand and deal effectively with the abuser assures that abuse will continue and the cycle will not be broken. Significant progress will only come when there is effective treatment of both offender and victim. Otherwise we will never be in a mode of prevention, only reaction. And reaction is necessary because the problem has not been solved.

PREVENTION

As the reality of the magnitude and impact of child sexual abuse sets in, there is an immediate reaction that cries out for an answer to the question... How can it be prevented?

It appears that rather than ineffective prevention efforts, there are just not many prevention efforts at all. The very idea of child sexual abuse is so abhorrent that we routinely refuse to acknowledge the possibility that it could happen. Given to denial and minimization we are paralyzed and silenced, permitting the cycle of abuse to continue unbroken.

Prevention of child sexual abuse is the task of parents and other responsible adults in our society. It is true that children can be taught skills and provided support systems that will permit them to reject sexually abusive initiatives. However, there is little likelihood that a child will successfully defend themselves against sexual abuse in the absence of adult intervention. It is only when informed and concerned parents and other adults take the initiative in prevention effort that there will be substantial progress in reducing child sexual abuse.

It is essential that each responsible adult have a strategy for preventing child sexual abuse. An effective prevention strategy should include both knowledge and skills. Following are some specific areas which should be addressed in developing an effective prevention strategy.

Knowledge

➤ Understanding of and alertness to the problem of child sexual abuse.

It is unlikely that anyone will be effective in preventing child sexual abuse if they are not informed. An understanding of the character and nature of child sexual abuse, the victim and the perpetrator can eliminate misunderstanding and promote productive action. Phrases such as "I never dreamed ...", "I can't believe...", often spoken by parents of victims, indicate a lack of information.

In addition to the information contained here, a bibliography of numerous books and publications is provided. A trip to the library can produce more than adequate resources for both adult and child on the subject.

➤ A basic knowledge of the child development process.

Some hold the assumption that parenting is intuitive. Unfortunately, that is not true. Parenting is a learned skill. Without knowledge of the child development process, parenting can become a trial and error experience and there will be a lot of both ...trials and errors.

Many of the myths surrounding child sexual abuse are related to misinformation about the nature of children and their development process. For adults it is difficult to understand why a child will feel guilty about being sexually abused until they understand the patterns of moral reasoning that children follow. Likewise, the susceptibility of children to sexual abuse is not a mystery when their psychology is understood.

A sincere interest in a child's welfare can be most effective when parents are accurately informed about the nature and character of children.

Skills

➤ Proper Supervision

Common sense is the best approach. Child sexual abuse occurs when the child and abuser are alone. Most often the abuser will be someone the child knows. Be sensitive to situations where your child is alone with an adult or older child. Be cautious of exclusive relationships between your child and an adult or older child.

Do not hesitate to "check it out ". Develop the habit of randomly visiting locations where your child spends time away from you. Listen to hints about "weird" persons. If there is smoke there is fire.

➤ Effective Communication

Developing the ability to communicate about sexual abuse is essential for both parent and child. The greatest fear of an abuser is that the child will tell someone about the incident. Children need to be trained to understand what sexual abuse is and the proper vocabulary to communicate accurately about it.

It is very difficult for many parents to talk about sex and sexual abuse. However, without such skills there is little chance that they will be able to teach their children. Deficiencies in the area of communication can be overcome. Many resources are available for self-help for those willing to avail themselves to them.

➤ Crisis Training

Parents do not hesitate to tell their children what to do in case of fire, tornado or other similar dangers. The same should be true in case of child sexual abuse. There are certain actions that children can be taught to use in the case of an attempted sexual abuse. Learn what methods are effective and train your child.

Training a child to act appropriately in the face of sexual abuse is no different than training for other crises. Teach them proper procedures and review regularly. Using "what if" scenarios can be very helpful.

SO WHAT CAN WE DO NOW?

Hopefully, the information contained herein has touched you in some way. **If you are a victim** and in need of healing, tell someone you can trust so that healing can begin.

If you are a parent, seek further understanding about sexual abuse. Learn what you need to do to inform and protect your child and others. If you are otherwise an adult, accept responsibility for becoming informed and alert to child sexual abuse. Take action when needed.

If you are an abuser, seek assistance. The problem is serious and difficult and without intervention there may be little hope of change.

There is no immunity to the effects of child sexual abuse in our society.

Bibliography

- Bass, Ellen and Laura Davis. The Courage to Heal. New York: Harper's and Row, 1988.
- Blanche, Ruth C. "The Nightmare of the Sexually Abused Child". USA Today 114 (Nov. '85) p. 54.
- Butler, Sandra. Conspiracy of Silence. Volcano, Calif.: Volcano Press, 1978.
- Check, William A.. Child Abuse. New York: Chelsea House Publishers, 1989.
- "Children and Sexual Abuse: The Typical Molester is Not a Stranger to His Young Victim" Parents Magazine 57 (Sept '82) p.6.
- Cohn, Anne H. It Shouldn't Hurt To Be a Child. Chicago: National Committee for the Prevention of Child Abuse, 1987.
- Crowdson, John. By Silence Betrayed. Boston: Little, Brown and Company, 1988.
- Daugherty, Lynn B.. Why Me?. Racine, Wis.: Mother Courage Press, 1984.
- De Jong, Allan R. and S. Jean Evans and Ann Goldfarb. "Sexual Abuse: What You Must Know." Patient Care 23 (Feb. 15, '89) p. 145.
- Dulmas, Lynn. "Abused Child, Troubled Adult: A Life of trauma Awaits Young Victims". Health 20 (May '88) p. 18.
- Engel, Beverly. The Right to Innocence. New York: Ivy Books, 1989.
- Fay, Jennifer. He Told Me Not To Tell. Raton, Washington: King County Rape Relief, 1979.
- Finkelhor, David. A Sourcebook on Child Sexual Abuse. Beverly Hills, Calif.: Sage Publications, 1986.
- Finkelhor, David. Child Sexual Abuse. New York: The Free Press, 1984.
- Finkelhor, David. "How Widespread is Child Sexual Abuse?" Children Today 13 (July-Aug '84) p.45.
- Forward, Susan and Craig Buck. Betrayal of Innocence. New York: Penguin Books, 1978.
- Gil, Eliana. I Told My Secret. Walnut Creek, Calif.: Launch Press, 1986.

Gil, Eliana. Outgrowing The Pain. New York: Dell Publishing, 1983.

Glenn, H. Stephen, and Jane Nelson. Raising Children for Success. Fair Oaks, Calif.: Sunrise Press, 1987.

Gordon, Mary Ebbitt. "Touch of Evil: Memories of a Molested Child". Mademoiselle 93 (March '87) p.188.

Gross, Andrea. "The Little Boy From Tacoma". Ladies' Home Journal 107 (May '90) p.160.

Hart-Rossi, Janie. Protect Your Child From Child Abuse. Seattle: Parenting Press, Inc., 1984.

Hechler, David. The Battle and the Backlash. Lexington, Mass.: D. C. Heath and Company, 1988.

"Helping Molested Children" U.S. News and World Report 100 (Mar. 10 '86) p.66.

"If Your Child Has Been Abused...(special report on child abuse)". McCall's 114 (Feb. '87) p. 94.

Kessner, Ellen. "Childhood Trauma: What Are They Doing To You Now?". Cosmopolitan 198 (May '85) p.254.

Kensley, Alfred, et al. Sexual Behavior in the Human Female. Philadelphia: W. D. Saunders, Co. 1948.

Kohn, Alfie. "Shattered Innocence". Psychology Today 21 (Feb. '87) p.54.

Kunzman, Kristin A. Healing From Childhood Sexual Abuse. Center Valley, Mn.: Hazelden, 1989.

Lawren, Bill. "Child-Sex Victims (Research on Aftereffects)" Omni 7 (Mar. '85) p.37.

Lewis, David and Carley Dodd and Darryl Tippens. Shattering the Silence. Nashville: The Gospel Advocate, 1989.

Lickona, Thomas. Raising Good Children. New York: Bantam Books, 1983

Livezey, Lois Gehr. "Sexual and Family Violence: a Growing Issue For the Churches". The Christian Century 104 (Oct. 28, '87) p.938.

Magnuson, Ed. "Child Abuse: The Ultimate Betrayal". Time 122 (Sept. 5, '83) p.20.

- Russell, Diana. "The Incidence and Prevalence of Intrafamilial and Extrafamilial Sexual Abuse of Female Children". International Journal of Child Abuse and Neglect. 7 (1983).
- Rush, Florence. The Best Kept Secret. New York: McGraw-Hill, 1980.
- Sandford, Linda Tschirhart. The Silent Children. New York: McGraw-Hill, 1980.
- "A Senator Recalls a Wrong". Time 123 (May 7, '84) p. 27.
- Stark, Elizabeth. "The Unspeakable Family Secret" Psychology Today 18 (May '84) p.20.
- Stolley, Richard B. "The Story We Wish We Didn't Have to Print" (editorial). Life 7 (Dec. '84) p. 4.
- Talan, Jamie. "Sex Abuse: Bloody Witches". Psychology Today 22 (Nov. '88) p. 13.
- Tarvis, Carol. "Sexual Abuse and Secret Desires-Did Freud Lie?" Vogue 173 (Nov. '83) p. 252.
- Taylor, John. "Acting Out a Secret". Newsweek 100 (Aug. 9, '82) p.46.
- Terr, Lenore. Too Scared To Cry. New York: Harper and Row, 1990.
- Thompson, Diane. "Our 'Nice' Neighbor Was Sexually Abusing Our Daughter". McCall's 114 (Feb. '87) p. 93.

Books for Children

- Anderson, Deborah and Martha Finne. Margaret's Story. Minneapolis: Dillon Press, Inc., 1986.
- Boegehold, Betty. You Can Say "No". Racine, Wis.: Western Publishing, 1985.
- Buschman, Janis and Debbie Hundley. Strangers Don't Look Like The Big Bad Wolf. Edmonds, Washington: The Charles Franklin Press, 1985.
- Cohen, Mary Ann. Feel Safe. Racine, Wis.: Western Publishing, 1985.
- Dayee, Frances S.. Private Zone. New York: Warner Books, 1982.
- Girard, Linda Walvoord. My Body Is Private. Niles, Illinois: Albert Whitman & Co., 1984.
- Girard, Linda Walvoord. Who Is A Stranger And What Should I Do?. Niles, Illinois: Albert Whitman & Co., 1985.

Hindman, Jan. A Touching Book. Durkee, Oregon: McClure-Hindman Associates, 1985.

Joyce, Irma. Never Talk To Strangers. Racine, Wisconsin: Western Publishing Co., 1967.

O'Hyde, Margaret. Sexual Abuse, Let's Talk About It.
Philadelphia: The Westminster Press, 1984.

Terkel, Susan N. and Janice E. Rench. Feeling Safe Feeling Strong. Minneapolis: Lerner Publications Company, 1984.