RELATIONAL RECOVERY FOLLOWING SIBLING SEXUAL ABUSE

DR ANNE WELFARE
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Presenter’s Background

- 30 years at The Bouverie Centre as a therapist and lecturer
- Founding member and 11 years in Sexual Abuse Team At Bouverie
- PhD – research into the pathways of recovery for families who have experienced Sibling Sexual Abuse (2001 to 2010)
- 3 years as a Principal Practitioner in the Child Protection system in Victoria
- Board Member for Therapeutic Treatment Orders for Young People with Sexually Abusive Behaviours.
Acknowledgments

While the information in this presentation emerged from my PhD research, the theoretical scaffolding for the research was a collaborative effort with my fellow Sexual Abuse Team members including:

Dr Jenny Dwyer, Pam Rycroft, Dr Karen Sutherland, Robyn Miller, Robyn Elliott, Dr Simon Bridge
Why the focus upon Sibling Sexual Abuse?

• More and more cases were flooding into our centre for treatment

• Studies indicate that Sibling Sexual Abuse is the most common form of Intrafamilial Sexual Abuse.

• this is a “speed dating” presentation due to the time limitations – normally train people in this over one day
SSA is more prevalent than Intergenerational Family Sexual abuse

- Finkelhor (1979) reports 15% college students report SSA compared to 4% report father SA, and that SSA represented 94% of all family incest.

- Goldman and Goldman (1988) – an Australian study reported SSA was 57% of all family incest

- SSA is 5 times greater than other family sexual abuse (Caffaro & Conn-Caffaro, 2005)
Nature of the Abuse more serious

- SSA is more likely to involve coercion, force, and penetration than father or stepfather abuse.
My Research

- 81% involved penile penetration.
- Higher number of violence and coercion than grooming methods.
- Medium age of victim 8 years old.
- Medium age of offender 13 years old.
- 4/27 victims abused by other family members (father, grandfather)
- 58% victims are now not in relationships (average age at interview was mid 30s).
Disclosure – the tip of the iceberg

A disclosure of SSA is much less likely to occur in childhood compared to IFIGSA

Epidemiological studies

- Carlson et al (2006) – 19%
- Lamb and Coakley (1993) – 14% SSA and peer compared to 50% IGSA
- My research 17% only disclosed at the time

- Thus you are likely to be dealing with this with adult families – but these treatment recommendations still apply
Impact of Late or No Disclosure

- Increased severity of symptomatology for victims (Ullman, 2007)
- Establishment of pattern of offending behaviour for YPSAB
- Doyle (1996): the secret of the SSA impacts on family relationships and remarkably, victims are more likely to lose their relationship with their parents than they are for IGSA, even when good relationships prior to abuse.
Why the low rates of disclosure at the time?

- Some researchers speculate that victims feel more complicit when it is a sibling – but victims in my research all experienced abuse as abuse: not complicity.

- In my research, abused sisters were mostly very close to parents and many nominated that it was protection of parents that inhibited disclosure. That is, the more functional and close families are, the less likely will disclosure occur.

- ...although - Attuned parents facilitated some disclosures.

- Some sisters attempted disclosure but parents were blocked to hearing: disclosure is interactional.
Myths about SSA families

- Early studies attempted to find commonality in a family functioning or typology that generated the SSA – these studies were descriptive and perjorative.

  eg
  - Sexual boundary issues
  - Favoured victim or favoured YPSAB
  - Violence or sexual victimisation of YPSAB.
  - Rigid families or permissive families
  - Families with lack of attunement
  - Mutual care and support
  - Patriarchal attitudes
Heterogeneity of Families

- SSA happens in good well functioning families as well as dysfunctional families.
- Multiples reasons for offending behaviour – some lie outside family dynamics
- Availability of younger sibling is major reason offending occurs within the family rather than an outside family member (Hatch)

- Ryan and O’Brien have considered the family dynamics as less important in aetiology but important in the perpetuation of the abuse and treatment outcomes.
So what causes a young person to sexually abuse a child?

- 1. Prior sexual victimisation
- 2. Exposure to pornography
- 4. Emotional Victimisation
- 5. Attachment disruptions or early failures to attach.
- 6. Bullying
- 7. Comorbid problems – ADHS, Aspergers, ID, Conduct Disorder, PTSD.
Recovery

- Specialist therapy for the YPSAB and trauma therapy for the victim
- Plus an **integrative family approach** for relational healing for both YPSAB and victim
- The family response to the SSA is CRITICAL to the recovery of both the victim and the young person with sexually abusive behaviours. The legal and therapeutic systems need to find a way to maximise a family's ability to do the work required for full recovery.
Therapeutic Treatment Orders in Victoria

- Treatment of the YPSAB is very different to treatment of an adult offender of sexual behaviour – Victoria has specialist services funded for this now which are linked to TTO’s and are effectively diversionary programmes that make sure these young people are in therapy.
- Effectively each agency has developed their own processes but focuses upon the recovery of the YPSAB and may not necessarily be integrative with the family and victim work.
Recovery of the Young Person with the SAB

- We initially believed that all YPSABs were on the pathway to paedophilia and that we needed to strongly intervene to correct this.
- However we now know that WITHOUT therapeutic involvement, a YPSAB is only 2 to 15% likely to continue to reoffend.
- With therapeutic involvement, this likelihood is halved.
- *(Alexander 1999; Prescott 2006; Chaffin 2008)*,
- Not reoffending is only one part of the recovery.
adolescents who sexually abuse are different from adults who sexually offend (Chaffin et al. 2008)…..in the past treatment was the same for adult pedophiles.

however

‘… the field of adult sex offender treatment does not take into account developmental stages and moral development’. (Longo)
The young person or adult who abused as a young person needs parental involvement and the parent taking a strong position to help them truly face up to and be accountable – often difficult for the now adult.

True recovery involves a process – owning up, understanding their abuse impact, then finding a way forward to self respect and relational healing – a parent’s ability to juggle both strong accountability but also compassion and respect for their child is critical....
Victim Recovery

- Different for age of disclosure. The older the victim, the more damage (trauma and relational) that has been done.
- Victim often needs the trauma related therapy around PTSD.
- Most critically, whatever the age, the victim needs the belief and validation of the severity of their experiences understood by their parents.
- Victims require recognition which involves emotional distress in their parents understanding of the situation.
- Victims care less about the acknowledgment of the abuse from the YPSAB but need their parents to be holding their YPSAB accountable.
Victims Recovery Needs

- Need clear **validation** of their trauma from parents
- Need parents to be **emotionally distressed** by the situation (accountability axiom) – parents often numbed out initially or hide distress.
- Need **intimate justice** to be served by the parents – parents are the arbitrators of justice in families between siblings – even when children grown, this becomes central.
- Need **nurturance** from their parents but often full of rage and anger (particularly if validation and accountability not obtained) and repel parents....
Accountability Axion (Jory & Anderson, 2000) for Intimate Justice

- Developed for relationship violence but applies well for SSA

- The “anguish of accountability” is necessary in the recovery of DV offenders. This involves offenders who have hurt their loved ones truly understanding the impact of their actions and suffering great distress with this realization: “a psychological reaction to adopting and maintaining an ethical stance”
the pain and distress that the victims experience as “anguish of abuse”: “the lingering pain and insidious conflict experienced by someone who has been violated” (Jory and Anderson, 2000, p.331). Their accountability axiom states that “to the degree an individual fails to embrace the anguish of accountability for his or her own actions and attitudes, the anguish of abuse will be shifted to others in the emotional system” (Jory and Anderson, 2000, p330).
Accountability Axiom applied to SSA

victims require an emotional and often distressed reaction from their parents at disclosure. To some extent, this is passing the “anguish of abuse” to their parents and helping reduce this for the victim. The parents, in turn, need to interact with their offender son to obtain an “anguish of accountability” in order for the victim’s distress to be dealt with. That is, they need to find a way to obtain emotional justice for the victim.
Perspective of Parents

- The recovery of BOTH victim and YPSAB involves connectedness/attachment and emotional involvement...can this be achieved with the same caregivers?

- In order to support the YPSAB, parents sometimes need to minimise/block their knowledge of the impact for the victim.

- Most parents are driven by the need to reunite the family – they are overwhelmed by loss of the family unit and loss of their identity.....reintegration of the family can overtake the needs of their children.
Common Family Responses to the Discovery of Sibling Sexual Response

- Relief that their victimised child is now safe and a belief that this child will be ok now that the abuse has stopped or been disclosed.
- Primarily focus upon the YPSAB with a determination to fix them so that they don’t grow up to be a paedophile.
- Rejection of the young person with the SAB
- Disbelief and minimisation of the SA – invalidation for the victim
Optimal Recovery is Relational

- Parents are critical in providing the support and emotional connection to both children to allow their recovery. Both children need this support.
- This is a very difficult task for a parent – most treating agencies work only with either a victim or an “offender”. Early work requires a focus upon the parents to help them with this.
- “Intimate Justice” is also required and a YPSAB needs a parent to also hold them accountable and the victim also needs this positioning of the parent.
What about the other siblings?

- Impact is often profound for these children.
- They often can lose their sense of family and identity.
- Most difficult group for me to recruit for research!
- They are often overlooked by distressed parents caring for the other children.
- They need to be involved and part of the therapeutic work.
- Often dilemmas around their age and age-appropriate information.