



Stop It Now!® Minnesota

Together We Can Prevent the Sexual Abuse of Children

STOP IT NOW! MINNESOTA BYSTANDER RESEARCH REPORT

Note: The names of participants in this research report are fictitious.
All research subjects have been given pseudonyms.



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EXECUTIVE SUMMARY

The Bystanders Intervention Project is designed to develop effective social marketing messages that assist adults to take action to prevent child sexual abuse by adults at risk to abuse. The purpose of this research is to support the work of the project by assessing and understanding the knowledge, attitudes, behaviors, and other factors that appear to facilitate the prevention of child sexual abuse. This information is to be used in the future to shape prevention interventions. (Read more, 7.)

Researchers recruited and interviewed 11 people who had been married to or lived with a partner who sexually abused one or more children living in their home, or who are the parent or step-parent of a child who sexually abused one or more children living in their home. (Read more, page 13).

Because the sample size is small, all findings must be understood with that limitation. The findings are not representative of all people in families where incest takes place, nor are the findings predictive of future behavior.

Primary Findings (Read More, Page 12)

What appears to facilitate preventive action?

- Two participants would have been aided in taking action earlier if counselors and friends had validated their concerns and assisted families in taking action to protect children. Another one would have been aided in taking action earlier if she had believed her young daughter's first report of abuse. It is unlikely the other eight participants could have acted sooner since they reported that they did not have information, observe evidence, or perceive warning signs of abuse.

What appear to be barriers to preventive action?

- An inability to observe/know that abuse is or may be occurring in the future; an unwillingness to acknowledge warning signs that abuse is or may be occurring in the future; seeking help from people who provide inaccurate or inadequate advice; fear of physical violence; fear of having one's children taken away; and fear of "losing everything."

What messages might persuade this audience to take action sooner?

- Education about the warning signs of abuse in children and adults, and information about what to do and where to seek help when concerns arise.
- Most participants did take action as soon as they had clear evidence of abuse.
- These parents and grandparents suggested that other parents should "follow their gut"; believe the child; talk periodically to children about sexual behavior; and know the warning signs and know where to find help when it's needed.
- These parents' and grandparents' stories suggest that counselors need to understand that protecting children is more important than protecting a marriage; any concerns or suspicions, even vague ones, should be acted upon; and that if a parent feels a child needs counseling, the parent should be supported in doing so.

Who is the most effective messenger for this audience?

- No specific information about messengers emerged from the interviews. A sound social marketing approach is to use messengers that are most like the target audience (parents addressing parents, women addressing women, counselors addressing counselors, etc.).

When are preventive messages most likely to be effective?

- All the recommended messages are most likely to be effective before a child is harmed, and as ongoing outreach messages.

Are there “clusters” that may be more effective for targeting messages?

- Target groups, or “clusters,” for messaging include: parents; people seeking mental health or social services; church leaders and religious counselors; others in counseling professions.

Are there meaningful differences between those who do seek help and those who do not?

- Having actionable knowledge that a child has been abused or is at-risk; believing the child is telling the truth; having the personal strength and/or resources to risk everything or risk great upheaval in the family.

Other Findings (Read More, Page 30)

- Most subjects had little or no evidence of abuse.
- Children, especially teens, protect the family from the secret.
- Subjects were open to treatment and most knew where to find it.
- Subjects said treatment helped.
- Subjects were open to the Helpline and website, with few strong preferences.
- Several were coping with unresolved sexual abuse in their childhood.
- Families need resources for navigating the courts and Child Protective Services; for parenting children in foster care; for how to be effective parents in the wake of disclosure; for preventing children from becoming adults with sexual behavior problems.
- Parents have a further set of challenges when parenting a child with sexual behavior problems.
- Participants did not believe this could happen in their family.

These findings outline opportunities for improved education, outreach and interventions to help parents and others before a child is harmed, after disclosure, and even after adjudication and treatment. Families need help with this issue for years, even a lifetime, afterwards.

However, since most participants said they did not know about the abuse until after it occurred and after a child disclosed, challenges exist in how best to accomplish the primary prevention of child sexual abuse.

- We may not yet know enough about how to effectively teach adult bystanders or secondary victims to recognize the warning signs – whether a single suspicious action or a pattern of behavior.
- Bystanders may be in denial about behavior they are able to see.
- Outward observable behavior that points to child sexual abuse may be hard to see until after abuse has already occurred.

It is the view of the researchers that in order to prevent the behavior *before a child is harmed*, primary prevention messages are most effective when aimed at the people who are in the best position to prevent sexual abuse of children: the adults with sexual behavior problems around children.

However, opportunities exist to enhance our understanding of offense cycles so that we may improve our ability to teach the warning signs. Bystanders or secondary victims can benefit from knowing that this can and does happen in families like ours. And we can connect them to information, help and resources so they can better cope with child sexual abuse in their families before, during and after abuse occurs.

We are very grateful to the research participants for having the courage to speak candidly with us about these difficult events in their lives so we may better help others in the future.

RESEARCH PURPOSE, METHODS AND INSTRUMENT

Purpose of the Market Research

The purpose of the Bystanders Intervention Project is to understand the knowledge, attitudes, behaviors, policies, and other factors that appear to facilitate the prevention of child sexual abuse. The goal is to learn what makes it harder – as well as what would make it easier – for adults to take action earlier when they are concerned that adults or young people in their family are at risk to either sexually abuse a child or are at risk to be abused. This information will be used in the future to shape interventions designed for this audience.

Note that this research is not intended to broaden our understanding of effective methods of treatment (for abuse or victims). It is focused, rather, on the “buying” decision of seeking help before abuse occurs.

The Research Questions

The objective of the research is to answer the following research questions:

1. What knowledge, attitudes, behaviors, policies or other factors appear to facilitate preventive action? Preventive action would include calling the Helpline, seeking help, talking with a friend, and/or taking action to protect the child/children before they are harmed. Ideally, people will seek help before the abuse takes place, but we also want people to take action once abuse is discovered.
2. What knowledge, attitudes, and other factors appear to discourage preventive action?
3. What messages might persuade this audience to take preventive action?

4. Who will be the most effective messenger for this audience? (This would include both the messenger used for ads, interviews, presentations or other communications.)
5. *When* are preventive action messages most likely to be effective?
6. Are there “clusters,” such as age groups, professions, venues, or locations that might be more effective when targeting marketing messages at the audience of adults concerned about sexual abuse within their family?
7. Are there meaningful differences between those who do voluntarily seek help and those who do not?

Methods and Instruments

The research is based on interviews with subjects who met the following inclusion criteria.

Target Population for the Research

Interview subject met the following criteria:

- Were between the ages of 18 and 65
- Had been married to or lived with a partner who sexually abused one or more children living in their home, or who are the parent or step-parent of a child who sexually abused one or more children living in their home, and who
- Had completed or were currently receiving specialized treatment, support, or help with a professional therapist or in another type of supportive environment.
- The study excluded persons who do not speak and understand English¹, and those who do not have a full scale IQ of 80 or above as measured by standardized tests.

¹ The project excluded non-English proficient persons primarily because Now! is not yet able to offer services or resources in languages other than English. Data collection in multiple languages is also outside the scope and budget of the current project.

Recruitment

Research subjects were recruited through therapists at Project Pathfinder, Inc., the Center for Sexual Health, the Center for Child Abuse Treatment and Prevention, and Genesis II. They were also recruited directly through the MNCASA listserv, an advertisement on Craig's List, the web sites of Stop It Now! and Stop It Now! Minnesota, and through personal contacts, as appropriate.

Data Collection

Danie Watson of The Watson Group Marketing Communications and Dr. Jane Gilgun, Professor, University of Minnesota, Twin Cities, conducted 10 of the interviews together. Dr. Gilgun conducted one by herself. A series of questions were posed relating to behaviors, thoughts, feelings, attitudes and expectations about seeking help for child sexual abuse (see the Appendix, *Bystander Research Interview Instrument*).

The interviews were designed to be respectful of participants' freedom of choice and were therefore non-coercive; subjects were told they did not have to respond to any questions they did not feel comfortable answering, and could raise their hand or give another signal at any time if they would like to pause or stop the interview. They were encouraged to share thoughts and opinions in their own words. The interview questions covered basic demographics, circumstances surrounding how they got help, life and family circumstances at the time the abuse occurred, when and how the subjects became aware of the abuse, their perceptions about their behavior, good ways to communicate with people like them, what someone might have said or done that might have made a difference, and their reaction to the Helpline.

Descriptive, qualitative and some quantitative data were collected. Each interview was coded and analyzed. The findings of that analysis are included in this report.

Protection of Human Subjects

We limited data collection to those individuals who were currently in treatment or in another type of supportive environment due to the potentially emotional nature of the discussions. At the close of each interview participants were offered written information directing them to resources for help and support.

The subjects were informed during recruitment, and again in writing in the consent form, and again verbally at the beginning of the interview of the limits of confidentiality of the interview. While the interviewers may or may not have fallen under the legal requirements of the mandatory reporting laws, there are ethical and moral considerations—and the integrity of the Stop It Now! program—that apply in the event of disclosure of past or imminent criminal acts, or “duty to warn” circumstances.

The interviewers followed the protocol for mandatory reporting that was developed by Stop It Now! with the cooperation of representatives of law enforcement, treatment providers, child protection advocates, victims’ service providers, the Centers for Disease Control and Prevention, and others. This protocol is used by the staff at the Stop It Now! helpline, and states that if the caller describes a sexual abuse activity towards a child or vulnerable adult and gives identifying information about themselves or the victims the helpline staff will report what has been said to appropriate authorities (callers are informed of this at the beginning of the call). Interviewers also followed, though they may not have been legally required to do so, the Reporting of Maltreatment of Minors Act (Minn.Stat.626.556) which states that “a person who knows or has reason to believe that a child is being neglected or physically or sexually abused...or has

been neglected or physically or sexually abused within the preceding three years, shall immediately report" this information to appropriate authorities.

To reduce the likelihood of disclosure of reportable events, the interview questions were screened and edited to eliminate, to the degree possible, questions that ask directly about the details of criminal acts. Some questions asked indirectly about thoughts, feelings or perceptions about touching a child in a sexual way, but direct questions about actions and plans were omitted.

Risks and Benefits

The risks of participating in this research were as follows:

1. Subjects were asked questions about sexual abuse perpetrated by family members. There was a risk this could provoke anxiety in subjects.
2. Subjects might have revealed information about criminal acts not previously disclosed to law enforcement or child protective services (such as additional family members who were sexually abused) or information that suggests a child is at imminent risk to be harmed.

There were no direct benefits to participating in this research. However, participants were given a \$20 gift certificate to Target Stores in recognition of their time and inconvenience to participate.

RESEARCH PARTICIPANTS

Participants

Eleven people who fit the criteria for participation were interviewed. Three more people responded to recruitment efforts; one did not meet the criteria, and the other two were not available for interview times before the end of the research deadline. The goal had been to interview 30 or more subjects, both men and women, representing diverse backgrounds. Researchers adjusted recruitment efforts midway through the project, but recruitment was difficult throughout. One contributing factor to this may be that the non-offending secondary victims in incest families appear less likely to receive treatment, counseling or supportive services than do offenders and victims.

All subjects were female, ranging in age from 31-65 years². Nine reported that they were of Northern European descent. Two stated they were non-white. None reported that they were gay, lesbian, bisexual, or transgender. One reported that she had been born overseas before immigrating to the United States at a young age.

Summary of Participants' Family Relationships

Name (Pseudonym)	Relationship to abuser	Relationship to child/victim
Alice	Wife	Mother of school-age girl
Betty	Wife	Grandmother to school-age girl
Carla	Grandmother to school-age boy (who had also been a victim)	Mother to school-age girl
Donna	Mother to school-age boy	Mother to school-age girl
Eve	Wife (second marriage)	Mother to teen girl
Frieda	Wife (second marriage)	Mother to teen girl
Greta	Mother to school-age boy	Mother to school-age girl
Hanna	Mother to adult man	Grandmother to teen girl
Isabel	Wife (second marriage)	Mother to teen girl
Joy	Fiancé	Mother to school-age girl
Kay	Wife	Mother to toddler boy

² By census groupings, one subject was between 25-34 years of age; two were 35-44 years; five were 45-54 years; one was 55-59 years; one was 60-64 years; and one was between 65-69 years of age.

RESEARCH QUESTIONS AND FINDINGS

Findings

This report first addresses findings related to the research questions, then discusses other findings that emerged from the research. All of the findings must be viewed within the limitations of the small sample size. The findings are not representative of all people in families where incest takes place, nor are the findings predictive of future behavior.

Nevertheless, these eleven participants gathered their courage and agreed to speak candidly with us about very difficult events in their lives. We can benefit from their experience and wisdom in our efforts to prevent children from being harmed.

Research Question 1: What knowledge, attitudes, behaviors, policies or other factors appear to facilitate preventive action? Preventive action would include calling the Helpline, seeking help, talking with a friend, and/or taking action to protect the child/children before they are harmed. Ideally, people will seek help before the abuse takes place, but we also want people to take action once abuse is discovered.

Findings

Eight of the 11 participants in this research reported that they had no knowledge that the abuse was taking place prior to disclosure, and so did not take action to prevent abuse.

One of the participants, Alice (not her real name), saw warnings signs and sought help, though the counselors she consulted gave her poor and inadequate advice and apparently contributed to an environment in which the abuse continued for longer. Another participant, Eve (not her real name), had earlier

suspicions that there might be “something sexual” between her second husband and her daughter (his stepdaughter), and asked a friend as well as her husband about it; but both told her there was no merit to her suspicions.

Only one participant, Greta (not her real name), took no action when presented with evidence of abuse. Greta did not believe her two-year-old daughter when the girl reported sexual abuse by her older brother.

And I didn't believe her, cause she had said something in the past about it that something had happened between her and her brother like when she was two, and I'm like, you don't even know what that is, so, I didn't believe her. Not that I – and I told her afterwards how badly I felt about the whole situation, and all that. So. I hope in some ways I made up for not believing her. Told her from now on I'd believe her if anything ever came up.

--Greta

Because Greta did not believe her daughter's earlier disclosure the abuse went untreated and unreported until the daughter was six years old and reported it again, this time in more specific detail.

- Alice would have been aided in taking action earlier if the counselors she consulted had validated her concerns and assisted her in taking action to protect her children.
- Eve would have been aided in taking action earlier if her friend had validated her suspicions, or if her husband had admitted to the behavior when confronted.
- Greta would have been aided in taking action earlier if she had believed her young daughter's first report of abuse.
- It is unlikely the other eight participants could have acted sooner since they reported that they did not have information, observe evidence, or perceive warning signs of abuse.

It is important to note that six of the participants had received specific, detailed training in the warnings signs of child sexual abuse through work or volunteer settings—two had even taught child sexual abuse prevention to others—yet only one, Alice, used that knowledge to take action before there was concrete evidence a child was being sexually abused. This training did, however, help them to take prompt and appropriate action once the abuse was disclosed.

Two of the participants, Eve and Frieda (not her real name), learned of the abuse when they asked their teenage daughters about the behavior of other adult men in their acquaintance. Eve was concerned about a youth director at church, and when she asked her daughter whether that man had been sexual towards her, her daughter said no, but then described her stepfather acting sexually towards her. Frieda asked her daughter about the behavior of a family friend, and later that day her daughter disclosed sexual abuse by her father.

- Other parents may be aided in getting help for child sexual abuse by engaging their children in periodic conversation about the sexual behavior of adults (and other children).
- One participant, Alice, said that she wished she had asked her daughter more specific questions earlier. She had concerns about her husband’s sexual behavior, but did not learn the truth until she asked her daughter very specific questions, not about who might have touched her daughter and how, but about who her daughter had touched and how.

Well, initially she told me. I asked her. And she was six at the time. I had asked her many times prior, and she had said no. And I felt like he was doing that to them for quite some time. I'd say for a good couple of years. Because they were petrified of him. They were crying. And at one time she did grab me in the breast, and I knew, these are all warning signs of being molested. Cause I had worked [as a teacher], and just about every kid in

my classroom had been molested. So I knew all the warning signs...I had asked her a couple times in January, and the counselor that I was seeing said to not ask her anymore. And when she came home this particular day, this voice inside my head just said ask her if she's seen her dad naked...I had asked her like the good and bad touch that they kind of give you. You know, has anyone touched you in your breast, and I knew to use that type of terminology – vagina. You know. But one thing that I'd never thought of was to ask her if she'd touched anyone's penis. I had no clue that that was another way they molest kids. I'm really sorry. They never talked about it like that.

--Alice

Alice said that knowing to ask these kinds of questions might have helped her learn the truth sooner.

Research Question 2: What knowledge, attitudes, and other factors appear to discourage preventive action?

Findings

Among these participants, the barriers to getting help sooner included:

- Seeking help from people who provided inaccurate or inadequate advice that did not encourage or support action;
- Fear of physical violence;
- Fear of having one's children taken away by Child Protective Services;
- and
- Fear of "losing everything."

A significant barrier to getting help sooner was seeking help from people who did not validate or outright dismissed concerns. Eve had followed an instinct that there was "something sexual" between her husband and her daughter, and asked both a friend and asked her husband; both dismissed her concerns.

Three of the subjects, Eve, Alice, and Kay (not her real name), sought help from church leaders and Christian counselors. While Eve received supportive, appropriate and prompt help through her church, Alice and Kay had much different experiences.

Alice was seeing warning signs and was actively seeking help.

I had suspected for some time. I told my counselor, who told me I was destroying my marriage with those kind of thoughts – licensed therapist – I will have you know...I told people who were leading in my church. I told my pastor's wife – who didn't know what to say to that. And the leader of my group – I was in a group for women whose husbands did porn. Because that's what I thought I was mostly dealing with, was a man who did porn. And she said Alice, it's normal for you to feel like that, because men who do pornography a lot of women feel like their husbands are molesting their children and they're not...She was just like clueless on how to help me. And I felt like I was going through a lot of people, and they were just not helping me at all. They were very clueless. And I'd really have to say this licensed therapist that I saw was Christian, like in a Christian working environment. And what I've really noticed is that Christian people just don't know what to do. They don't have a clue. And I feel like that's my mission in life. Is to educate the church, and oh my gosh. I have a wall to bang my head against, and a very long road ahead of me. But I'm not going to stop.

--Alice

Kay sought help for marriage problems. While she did not know it until later, her very young son was being sexually abused by her husband by this time.

Well, I did go to a counselor actually before, on my own, to get my own help. But, it was a Christian counseling service. And just became good friend – in fact I still talk to her.

But a lot of the pastors in the church – because I just respected the faith and figured, they would know. They would be able to help me. You know, if the word of God is not going to help me, then what really is? What’s really going to transform our marriage and our life, if that’s supposed to be the Living Word? And I didn’t get any of the answers that I needed. It was more pushed onto me again...A lot of it was about submitting to your husband. That bull crap. You know, and they really took it out of context, about submission really is. It wasn’t about being a door mat, but that’s how they were telling me I should be. Well if you would just do these things, and if you would just satisfy him sexually, you wouldn’t have the problems that you’re having. You’re creating your own mess.

--Kay

Another barrier to seeking help was fear of physical violence. Kay and Alice both feared for their physical safety during this time. Kay’s husband was verbally and physically abusive, and he kept her very isolated. Alice wanted to get help for the threats of violence.

Alice: And I felt very nervous and scared. He had become physically abusive – .

Jane: To you?

Alice: Yeeees. And did that in front of the kids. That’s another horrible story of how the church just smashes and doesn’t know what to do. Oh, you have no clue. I mean, they tell you never to go to a women’s shelter. And finally I had had it, and I said, the next time I feel threatened, I am going to a woman’s shelter. And I don’t care if they’re gonna talk me into a divorce. Maybe the church needs to realize that that’s what has to happen. Because the Bible doesn’t say you can’t get a divorce. It just says God hates divorce. So get it right, read the Bible, and get it straight. But yeah. So I felt very threatened. Cause I

thought, I found out his secret, and he's probably gonna kill me, or the girls.

--Alice

Losing custody of one's children was described as very traumatic for participants who experienced it or are experiencing it. For Donna and Joy (not their real names), their fear that this might happen was a barrier to seeking help.

Joy: Yeah. Actually, I wanted to run away with her. Cause I'd never been in Child Protection, none of that. And I've always heard women talk about that in the meetings [for substance abuse counseling], and how they got their children back. So I did ask somebody, [who] told me don't run.

Jane: But you considered it.

Joy: Yeah. And I didn't.

Jane: Are you glad you didn't?

Joy: Yeah, I'm glad I didn't. And I thank the individual for that advice.

--Joy

Fear of losing everything – home, finances, children, family – was considered by some to be barrier to seeking help, though ultimately these women set aside those fears in order to protect their children.

Danie: Alice, how did you find the strength, or what did it feel like to have all these people around you telling you it wasn't so, and you –

Alice: I hated that. But I knew it instinctively, that once I picked up that phone and called Child Protection that I'd probably lose my house, the car, my friends, my church, everything. I would lose everything. And I thought, is it worth it? You better damn well believe it's worth it. I will not have my kid be molested. I would rather be on the street poor, and have my freedom. And I know that better than anybody. I know that better than anybody. And you will. You will lose everything when you do this. You will lose your marriage, you will lose everything. And to me, that's worth it, if she doesn't have to be molested anymore. I'd rather have it that way.

Danie: So those losses in your life came to pass?

Alice: Yup. They came to pass.

Danie: You had to move out of your house, you –

Alice: Yup. I couldn't afford it. It was hard to find a job. Even though I had a degree and I tried to go back into teaching...

--Alice

Betty (not her real name) also thought she would lose everything because of child sexual abuse in her family.

I thought I was going to lose everything... The first month, it was really bad. I didn't know if I could stay with him, I didn't know – ...nothing was stable. It was pure hell. For both of us. He didn't want me – I didn't know if I was gonna leave, go back to [name of state] where my family was. I didn't know if he got arrested if he would be in jail. Where our living was gonna come from, if we were gonna lose our house.

--Betty

Research question 3: What messages might persuade this audience to take preventive action?

Findings

The experiences reported by the participants in this research suggest two sets of messaging to promote earlier action: messaging for parents and messaging for those who provide counseling to parents and families.

Messages for parents that these participants said could be supportive of preventive action include the following:

- Know the warning signs and know how to find help when it's needed;
- Follow your gut, your intuition, even when others are telling you that your intuition is wrong;
- Believe the child;
- Talk to your child periodically, in age-appropriate language, about potential sexual behavior towards them by adults or other children; and
- When talking with the child, include specific questions about sexual acts that the child may have performed.

Four of the participants, Isabel, Eve, Alice and Greta, when asked what advice they would give to others in a similar situation, talked about trusting your instincts.

Isabel (not her real name) has extensive training in the warning signs of child sexual abuse because of her work in sexual violence prevention, yet did not recognize that her husband was abusing her daughter (his stepdaughter). She did, however, know that there were other problems with her marital relationship including physical and verbal abuse.

Isabel: Another thing, a sound bite would be, please, especially with women, it's in your gut and you know it. Listen to it. It's there. Listen to your gut...

Jane: But you didn't know about the sexual abuse. So listen to your gut in terms of – if there's something going on - -

Isabel: If there's a raised eyebrow, it's a raised eyebrow. And the raised eyebrow, it just may be just the tip of it.

--Isabel

Alice regretted not acting sooner on her instincts.

Alice: I beat myself up for not believing my gut feeling. And that, you know, I wish I had not listened or gave such credence to people. That when you have a gut feeling, it's probably (sic) right.

Jane: And your gut feeling was – I know you said it, but, was –

Alice: Yeah. Was that he's molesting the kids.

Jane: He's molesting my kids. And you would talk to other people and they would say –

Alice: Yep, yep. I even asked him outright, you know, are you? And he would say, no, no, no, I'd never do that.

--Alice

Eve, too, had suspicions and she wished she had trusted her instincts.

You know, those intuitions are really right, and that you have to follow your gut instinct.

--Eve

Three participants, Joy, Frieda and Eve, urged parents to believe their children.

I would say look out for the warning signs when your children are saying Mommy, I don't want to be left with this person, or like me, like I want to sleep in the bed with you. Like I feel like when your child is telling you something about what happened that you should check into it, not just brush it off, like you don't know what you're talking about. And so, to me, I just feel like a lot of little kids or like teenagers, why would they want to lie?

--Joy

Alice, as mentioned earlier, had advice for others about asking specific questions of children regarding sexual behavior. The experiences of Eve and Frieda, having both learned of the abuse while asking their daughters about someone else's potential sexual misconduct, suggest that regular conversations with children about this topic can lead to disclosures. And finally, while knowledge of child sexual abuse and its warning signs was not a significant factor for these participants in getting help before a child was harmed, it did help Alice, Eve and Isabel to get help sooner and to know what action to take once they had evidence abuse had taken place.

Messages for those who provide counseling to parents and families that could be supportive of preventive action include:

- Protecting the child(ren) is more important than protecting a marriage;
- Any concerns or suspicions, even vague ones, should be acted upon; and

- If the parent feels the child needs counseling, support the parent in securing counseling for the child.

Two participants said the counselors they turned to placed a higher priority on protecting the marriage over acting on suspicions of child abuse. As illustrated earlier by the experiences of Alice and Kay, some counselors may need to better understand the priority of protecting children regardless of the long-term effect on a marriage. Similarly, counselors may need to better understand that even vague suspicions merit action to protect children from harm.

Another participant said that she had difficulty getting counseling for her daughter (a victim) because the counselor did not perceive the child had been harmed very much. For Carla (not her real name), more support was needed from counselors when she was trying to get help for the victim.

Carla: I had asked the therapist, on our first initial meeting, about my daughter. What should I do with her? Should she be being seen? And they said... since they were related, they were both the same age, they weren't concerned because it was exploratory...I tried to reach out and get help, and I just came to roadblock and roadblock and roadblock, and – . You know, [agency] asked me at the time, well, how old are the children, how are they related, what did they do? And I went through the whole same thing, and they said, well, you know, they're related, they're the same age. They weren't concerned because a person wasn't older, or it wasn't a neighbor kid doing it to a family member.

Jane: Did they know about the level of intrusiveness? That's what that would be. The breasts and the vagina and the licking. That's pretty intrusive. And they didn't mention that?

Carla: No, mm.

--Carla

Research Question 4: Who will be the most effective messenger for this audience? (This would include both the messenger used for ads, interviews, presentations or other communications.)

Findings

No specific information about messengers was revealed during the interviews. The best advice we can offer as social marketing professionals is to use messengers who are like the target audience member: parents addressing other parents, women addressing other women, or counselors addressing other counselors.

Research Question 5: When are preventive action messages most likely to be effective?

Findings

All of the recommended messages are most likely to be effective if delivered before abuse occurs, and as ongoing outreach messages that are taught and reinforced again and again.

Because the majority of these participants said they did not have suspicions or see warning signs of abuse before it was fully disclosed, messages about warning signs and other “red flags,” while vitally important, may not always be enough to protect children from child sexual abuse. First, signs of abuse may not be observable until after a child has already been harmed. Second, seeing one

warning sign of sexual abuse may not be enough to alert a bystander to a pattern of behavior. Third, a bystander may be in denial about what he or she has observed.

While participants were motivated to protect the children in their lives from harm, these participants were not successful in doing so. *This is not to suggest that participants were to blame for the wrongful behavior of others, but to acknowledge that although they wanted to protect their children, they apparently lacked the knowledge or ability to do so, even some participants who had had training in the warning signs of child sexual abuse.*

In other words, this finding suggests several possibilities:

- We may not yet know enough about how to effectively teach adult bystanders or secondary victims to recognize the warning signs – whether a single suspicious action or a pattern of behavior.
- Bystanders may be in denial about behavior they are able to see.
- Outward observable behavior that points to child sexual abuse may be hard to see until after abuse has already occurred.

It is the view of the researchers that in order to prevent the behavior *before a child is harmed*, primary prevention messages are most effective when aimed at the people who are in the best position to prevent sexual abuse of children: the adults with sexual behavior problems around children.

Research Question 6: Are there “clusters,” such as age groups, professions, venues, or locations that might be more effective when targeting marketing messages at the audience of adults concerned about sexual abuse within their family?

Findings

Based on this small sample of participants, there are some target groups that would benefit from a focused effort to reach them with messages about child sexual abuse prevention. These groups include:

- Parents;
- People seeking mental health services for issues other than child sexual abuse;
- Church leaders – pastors, ministers, priests – and religious counselors; and
- Others in counseling professions.

Parents would benefit from knowing the warning signs in children and adults and guidance about keeping children safe. (Other recommendations for parent education are detailed later in this report.)

Also, as we found with earlier research about adults at risk to abuse, many people who experience child sexual abuse (as a “bystander” or secondary victim, as a perpetrator, or as a victim) also seek services for other mental health issues, or for learning disabilities, or for social services. In this limited sample of participants, eight (or 72 percent) of the subjects or their family members had already had contact with a mental health or social service agency prior to the disclosure of abuse. Four had sought services for themselves, such as for drug use or for marital problems; four sought help for their children’s learning disabilities. Another sought services (Al-Anon) after her alcoholic son was incarcerated for child sexual abuse.

Because so many of these families have co-existing issues that bring them into contact with mental health and social service agencies, there is an opportunity to work through these agencies to reach out to more families struggling with child sexual abuse.

Further, while this sample size is too small to draw broad conclusions, several of these participants clearly identified shortcomings in the counseling they received through the church or through Christian counselors, and this suggests a fruitful avenue for outreach and education. There is no reason to limit this outreach to faith-based organizations; outreach and training for any organization that provides counseling services has the potential to protect more children from child sexual abuse.

Research Question 7: Are there meaningful differences between those who do voluntarily seek help and those who do not?

Findings

Again, the sample size here is too small to answer this question with certainty, but we can learn from the experiences of these eleven women. The factors that appeared to distinguish those who took action from those who did not were:

- Having actionable knowledge that a child has been abused or is at risk;
- Believing the child is telling the truth about the abuse; and
- Having the personal strength and/or resources to risk everything or risk great upheaval in the family.

Kay's experience provides insight into the moment of choice, the moment at which she took action to protect her children at very significant risk to herself.

Jane: So you got in the car. You had the car seat, you had the clothes on your back. You probably had a little bit of money. A credit card maybe. So, there you were. And did you say – and you called your parents, right?

Kay: Mhm.

Jane: And did they say go to a hotel? How did you know what to do next?

Kay: When I got on the phone, I mean I couldn't even say anything. My father could hear [my ex-husband] screaming at me. And I said, I need your help. And he said, give the phone to [my ex-husband]. So he settled him down for me. And my mother apparently was calling 911 on her cell phone. And within ten minutes – I just knew, pack a bag, just pack it. But I stood there. Like I can't believe I'm going to do this. What am I going to do? Are you kidding me? Like how am I going to do this? And I barely packed anything. When the police came – he had taken my wallet, my keys, everything out of my purse. Everything was gone and in his possession. And the cops said, you need to give it back to her. That is hers. That is not yours. And so they gave it back to me – or he gave it back to me actually, in their presence. And I said, I'm leaving... And I told him I would never come back. And I walked out. And I drove around for probably a couple of hours, maybe an hour and a half. And I went to an ATM right away and took out as much money as I could... You can only take \$200 out. But it was something. I was able to talk to my father, and he said I want you to go to this hotel, and you identify yourself as this. And so I got to the hotel – I just wanted to make sure nobody was following me. I just knew he was probably going to be looking. And when I got to the hotel I was the only one... And that's where I stayed for three days. And waited and waited. It was really a bizarre situation. So I really didn't have a plan. I just knew something else had to happen. I really struggled. I had this overwhelming sense to just go back. Cause I probably was wrong. But I didn't...

Jane: So as soon as you knew that the kids weren't safe, that's when you thought, I'm gone.

Kay: Mhm.

--Kay

ADDITIONAL FINDINGS

Most Subjects Had Little or No Evidence of Abuse

The goal of the research is to better understand how to persuade people—the non-offending “bystanders” or secondary victims in families with incest—to take preventive action and/or seek help earlier. An underlying assumption of that goal is that the person has conscious knowledge of the abuse or risk of abuse, and has not acted quickly enough on the knowledge.

Among those we interviewed, however, we saw little evidence that this was commonly the case.

As researchers with experience investigating child sexual abuse, we expected to hear that participants, looking back on their family circumstances, would have seen warning signs that they did not, at the time, understand to be red flags of abuse. We understand that people can easily miss the signs of abuse. Any of us may be fooled by those who abuse and work to keep the behavior hidden.

A majority of participants did say that they had not imagined child sexual abuse could or would occur in their family. It is possible that this belief may have fostered denial that the abuse was occurring, or contributed to an inability to observe an emerging pattern of grooming or abuse. (This topic is discussed in more detail on page 45.)

Most of the subjects described having no knowledge of the abuse prior to disclosure, and taking action immediately or soon after disclosure. In a few cases, there were warning signs that, at the time, were understandably explained away, and were only identified later by the subject as behavior that might, looking back, indicate a sexual relationship between the perpetrator and victim.

Betty could look back to a close relationship between her husband and granddaughter.

He tickled her a lot. And thereto, he said, that's kinda where everything started was with the tickling. And he tickled the other girls too. I mean he played with them, pretty much tried to be equal. And they'd all go for walks with him. We've always had a dog, or dogs. So they've always gone for walks and stuff like that, but nothing ever happened with any of the other girls.

--Betty

Isabel wanted her blended family to work, and was pleased to see her new husband getting along with her daughter. In retrospect, she saw behavior in her daughter that was a red flag.

What I did see, in retrospect, is later years, down the road, was [older daughter], her boundaries, missing. Some of her boundaries missing. And coming out of the bathroom naked, and walking around upstairs or whatever without covering. And I know this is classic. But I didn't see it. I also missed that [older daughter] became a – [2nd ex-husband] made [older daughter] his partner, his date. His partner in doing things and going places. Skiing or whatever. Or her first concert. And I missed it... I thought it was he's being a dad to my [older daughter]. He's being a dad.

--Isabel

Hanna, whose adult son abused his teenage step daughter and her friend, looked back on an incident when her son was in junior high school.

The only think I can think of that was a concern when [my son] was growing up, he was in junior high, and there were about five boys, and there was a neighborhood girl, and I don't know how the whole thing started, but I guess they were heckling her, and pushed

her off – I don't know if they pushed her off her bike or what, but then touched her inappropriately on her breast.

--Hanna

She also noticed a change in her son around the time of the abuse, but did not connect it with sexual behavior problems.

You know, he wouldn't show up for family functions. And when I would call, usually his wife would answer, and she'd say, oh, either one of the kids weren't feeling well, or he wasn't feeling well, or – And I told my husband, I said I think he's drinking in excess. And I did, I asked him, I said, are you drinking?

--Hanna

Donna noticed physical changes in her toddler, but did not attribute them to sexual abuse.

[My younger daughter] would get – I'm really sad to say, [my younger daughter] would get rashes in her vulva. And I worried about her being diabetic, since I'm diabetic. I simply thought that was – so I had made a little note in my head to get her sugars tested.

--Donna

Joy said her fiancé bought her daughter a gift that she now thinks was a way to buy her silence.

I guess he would buy her some things. Cause she wanted a dog. That one I really remember. She wanted a dog. And one day when I came home there was a black Pomeranian, beautiful dog, and stuff. And I guess he said that he thought she wanted a dog.

--Joy

She also looks back on her daughter's reluctance for her to marry this man.

Now, you know when I'm thinking about it, she says, Mom, I don't want you to marry him. She did say that to me. See, as you're talking to me, stuff is coming back. That she didn't want me to marry him, and she was like, sometimes she'll say, I don't like him. I says why? Why you don't like him? But she'd just say, I just don't. I just don't want you to marry – especially stressing that, that she didn't want me to marry him. Even though I let that slide over my head. I was like, well, he's new. She'll get over it, and love him, or what not.

--Joy

Carla knew her grandson had been a victim of earlier sexual abuse (by one of the boy's friends), but did not see this as a red flag that he would be abused again by her young daughter when the children were both seven years old.

Only one of the subjects, Alice, saw clear indications of sexual behavior problems in her husband and children; for example, she once found her husband watching a pornographic video with the children in the room. Alice made numerous attempts to get help, only to find counselors and therapists who did not validate her concerns and instructed her to dismiss her worries.

It is not clear why so few of these participants, even in retrospect, were unable to see warning signs of abuse. It may be attributable to the small sample size, or it may be that people who now see that there were signs of abuse that they missed felt too ashamed about it to come forward to be interviewed. Or it may be that seeing no warning signs at all is more common than we know.

As mentioned earlier, while participants were motivated to protect the children in their lives from harm, these participants were not successful in doing so. We may need to improve our understanding of offense patterns and family systems so we are better able to educate people in how to recognize abuse earlier; to accept that it is possible in their own family; and to provide support and resources that help them act once concerns arise.

Children, Especially Teens, Protect the Family from the Secret

Among these participants, the disclosure of the sexual abuse most often followed disclosure by the child to an adult. But it appears that in all these cases the abuse continued for a time before the child disclosed. And in cases when the victim was a teenager, participants described efforts by the child to protect others from the secret of the abuse. While this finding does not help develop our understanding of how to prevent child sexual abuse before it occurs, it does help us understand what may happen inside a family after abuse has begun.

For example, Eve's teenage daughter told her of the abuse when Eve asked her if she had ever "had any experience with any inappropriate touch," and the girl replied hesitantly, saying, "Actually I don't know, but I might have, or I might have dreamed it."

She's the one that said something. And she's right. If she had pretended like it never happened and just thought it was a dream and never said anything, we would have never – but he would have never gotten help. And that she finally figured out. He was better off for it.

--Eve

Hanna's step granddaughter and a friend had been raped by her son, but did not report it for some time.

I asked my step granddaughter, I said why didn't you tell grandma? She said, I didn't want to hurt you, grandma.

--Hanna

Frieda said her daughter felt guilty that by revealing the abuse she had harmed her stepfather.

Frieda: ...him going to the workhouse really bothered her. I tried to explain to her that's his punishment, or that's the legal way of punishing him. But, you know, that's the part she felt guilty about.

Jane: How did you know she felt guilty about it?

Frieda: Well, we had discussions we had had, and, you know. Because even now, she still, she loves [my husband]. That's her dad.

--Frieda

- Children, especially teens, might benefit from hearing a message that they are *helping* the abuser and the family by reporting the abuse.
- Adults would also benefit from hearing this message.

Subjects Open to Treatment and Most Knew Where to Find It

Participants in this research described almost no hesitation about seeking treatment for the family members involved in the abuse, and for themselves. Only one, Hanna, waited years before seeking services, and then got help for another mental health issue.

Not only were participants open to treatment and counseling, most but not all had a good idea where to go to find services, although some struggled quite a bit in obtaining the necessary services.

I just wanted to have a healed family, one that was a functional family. And I think the majority of people do want that.

--Betty

I felt ...bad, because, here I was with my daughter, I didn't know what was gonna happen to her, and I didn't want her to re-offend. And then here's my grandson, it happened to him, and he doesn't know how to deal with his emotions and what all happened to him, and nobody's helpin' me.

--Carla

Treatment Helped

With the exception of Kay's and Alice's experience with counseling through their churches, participants also reported that treatment helped.

It's actually ..I think we have such a closer family because of it. It's the four of us that really went through the counseling ... I would never want anybody to go through it, but the fact that we have, and where we've come out, like [my daughter] even says the positives are so much stronger than the negatives – . She said, we talked about sex then with my dad in the room. You know, when we were going through the counseling. Most girls at 15, 16, 17 don't get that. So she actually learned. She felt like she learned. And those are tough years, those teenage years.

--Eve

[Counseling] really, really opened up our relationship at the time. And it still is. It's pretty open. Sometimes we get pretty old in our ways, and then we stop and think that, ok, we gotta do something just a little different. Make life enjoyable instead of just coming home, watching TV, going to bed.

[Later in the interview]

And I feel very lucky that we got the help that we did, and that we are together, and that my son and his family are ok with this. You know, that we're all ok. And it's important that [granddaughter/victim] and [my husband] are ok with themselves.

--Betty

...I think of myself as a good mom. I thought of myself as a good mom before. I think of myself as a better mom now, because I am healthier.

--Frieda

I'm just really grateful today that I let go of the relationship [with ex-fiancé], and now, like I said, focusing on me and her and getting over this. You know, talking about it. She doesn't want to – see, in my family, it was always shhhh, don't say nothing. Dress your outside up so everybody think that you're ok. And I used to do that, but I dressed up cause I liked to anyway. But before, everything's fine, when it really wasn't fine.

--Joy

You know, when I hear myself speak about it now? There's so much liberation. Which of course is freedom. But this – I don't know, it's like a lifetime course. I mean, we're going to deal with this for the rest of our life, but, it's ok, because we've already got the victory in it. It's just going to be a matter of, you know, honing and guiding and making sure that my children and I always have this open communication to be able to openly speak

about it. Which we do. Because there's going to be a lot of questions later on in life, I'm sure too. There will always be things. And to not allow it to grab a bitter root in my heart. Cause that's not helpful.

--Kay

Subjects Open to the Helpline and Website, With Few Strong Preferences

Most participants were open to the idea of calling a helpline or visiting a web site. Most said it was appealing to have a place like that where they could find help. *Among those few who expressed a preference, there was a preference for the helpline to be answered by a woman rather than a man; by a professional or at least a trained and knowledgeable volunteer; and by someone local rather than in another state.*

The website was appealing to those who ordinarily seek information on the web. Participants also expressed openness to Stop It Now! Minnesota posting videos on YouTube, though they generally said that this sounded appealing to younger people.

Several Were Coping With Unresolved Sexual Abuse in their Childhood

Four participants (36 percent) appeared to have unresolved issues with child sexual abuse in their own lives, and this may have contributed in some measure to the blurry sexual boundaries they described in the home during the time of the abuse of their child(ren).

Donna, for example, described prolonged sexual abuse by her father in her youth, abuse that she says her mother was aware of, and Donna said she had difficulties knowing how to set sexual boundaries in her home with her children.

Donna: Since [my younger son] was a baby, he's always woken up with an erect penis, and he's always been sort of fascinated by his penis. But you know, to me, this was---my mother caught me masturbating once and tied my arms to my bedpost and beat me. So, I thought, you know, it could be this way, and this is how I think of my mother most of the time. This was what she did, I'll do this.

Jane: So, when [your younger son] had erections, would you say gee, you got an erection and just let it go, or – ?

Donna: I'd go, there it is again. Or, penises feel good, don't they? So, looking back I wish I'd had deeper boundaries, but you know, I'm my mother's daughter, and I didn't grow up with that many boundaries.

--Donna

Families Need Resources

Child sexual abuse is disruptive to families in many ways. The parents who participated in this research were working to heal themselves and their family members, especially the children, and nearly all described difficulty in finding the resources they needed.

Participant said they needed resources or classes for:

- Navigating the courts and Child Protective Services;
- Parenting when the children are in foster care;
- Books or information on how to be effective parents for their children in the wake of the disclosures; and
- Preventing the children from becoming adults with sexual behavior problems.

Donna had many unanswered questions about how to deal with having her children in foster care, and other aspects of dealing with children who have been sexually abused.

Jane: So. Maybe we need a list of support services for parents whose children are in the foster care system because of sexual abuse.

Donna: And [agency] had a really good thing about child abuse and how to parent your child. So I mean, what are we supposed to – if I was not educated, and my three kids are taken, and even if I am educated, my three kids are taken. How am I supposed to parent the one that remains at home? And how do I parent them successfully in an hour a frickin' week? You know...So, how do I get the judge to increase our visits? How can we talk to 'em by phone maybe once or twice a week? We can't do any of that yet. How do I appeal decisions?

--Donna

(Later in the interview)

Well, and there are some things that I thought would be – like in our very first interaction, which was just unfortunate, [my oldest daughter] started thinking that we were a wrong family. Nobody ever gave me any help in how do I frame what happened to her, when she's scared out of her head in kindergarten and hauled out of school, and asked questions about her family. So that's one, so I'll put a star by that for you.... Ok. So [my younger daughter] gets her penetration exam. How does she not think, if I bring her to – I mean I can almost hear her saying, 'if mom brought me to a place where strange men examined me and told me I was beautiful, why shouldn't I share this with others who might become beautiful?' Nobody ever gave me any – obviously I needed help, but nobody ever gave me any advice about how to frame the penetration exam for her.

--Donna

Frieda also expressed a need for more resources to help her cope with what she and her family were going through.

Frieda: Cause even now, and I've been in the system for a year and a half. I still don't know. Every time we have a meeting or a court date, it's like, oh, I learned something else.

Jane: And there was nobody to educate [inaudible] the Child Protection workers didn't say, look. This is what's going to happen,

Frieda: Right.

Jane: This is why, and... If you want to find more information, here it is. Or here's a pamphlet or brochure or something to read, or call so and so and she's got all the information you need. You didn't get any of that.

Frieda: No. Even still now, I don't feel like I totally know my way...Like, when I go to court it'll go into permanency. I don't totally understand what that means...I wish there was a way that CPS could be educated on. ..like I said, I feel bad for them, cause I wouldn't want that job. And I'm sure it's a tough job. But not every case is the same. And that they should deal with every case, individually. And just, I don't know if there should be like an education class on these are the things that are going to happen. Because generally, everybody goes through the same things.

Jane: Right. This is what this means, this is what that means. The fact that your kids were taken from you from school, this is the law, this is what the law says has to happen, this is when you can see them, these are the conditions. This is what you have to do.

Frieda: Right...Yeah. Even like an orientation or something that you have to go to.

--Frieda

Excerpts from these interviews can only begin to communicate the depth of sorrow, fear and frustration that some of these parents said they felt when their children were taken from them, and as they dealt with the courts, law enforcement, CPS, social workers, guardians ad leitem, and sometimes a revolving roster of therapists providing treatment for their children.

Frieda struggled with now knowing how to navigate the system, and with people “dropping the ball” in relation to caring for her daughter.

But even my daughter, she hasn't seen her – you're supposed to see your social worker twice a month, and she hasn't seen a social worker since we went to court...and we're going to go to court on the 28th, for our civil. Adults that are supposed to be helping her along with way I think have dropped the ball several times. We have a guardian ad leitem. Her one job is to find out for the kids and not be for the county or the – you know. And [my daughter] sees her at court, and that's it. It's like how the hell does she know anything?

--Frieda

Donna described feeling racial discrimination in her dealings with law enforcement.

Donna: I can't remember all the insulting things the first officer said, but I brought a tape recorder, and I said, you guys don't mind if I tape record this, do you? And all of a sudden he was so much nicer.

[Later in the interview]

But I think [racial discrimination] comes into play for me because when the second officer sat down, his first question was, [Donna's last name, which reflects her ethnicity], is that your real name or did you just make that up? ...I kinda went, oh fuck. I wanna get my kid and get the hell out of here as fast as I can. And I think – then he accused me of making up the story that I told...

--Donna

- Better information and resources would have helped Donna and Frieda to better understand how to parent their children during this difficult time, and how to work with the court and social services systems to make it possible to reunite their families sooner and in a way that helps their children cope with surviving the abuse.
- Law enforcement, the courts and social services need to improve the quality and fairness of services provided to families experiencing child sexual abuse.

Parenting a Minor with Sexual Behavior Problems

Parents in families where one child abused another child face a further set of challenges.

- Being the parent of a child you love who has been violated, it is natural to feel anger toward the person who violated your child – and yet the one who committed the abuse is another child you also love.
- When the child who abused is a teenager, it can be hard to sort out normal teenage misbehavior – or pushing boundaries or learning boundaries – from signs of further sexual behavior problems; and
- Concerns about how to keep other children, such as neighbors, safe going forward.

Greta's son had sexually abused her daughter. She talked about the challenges of helping both children to heal while dealing with her own conflicted feelings. She also described her difficulties parenting a teenage boy who also has sexual behavior problems. Greta herself is a survivor of child sexual abuse.

I don't want to lash out at my son, and yet my husband says I haven't forgiven him, and it's really difficult to deal with him now, cause it's, like I'm saying, he pushes buttons. And it's very difficult...And it's hard raising a teenager in the first place, but dealing with this on the top of it is difficult.

[Later in the interview]

It was, because it made me relive mine, over and over and over again in my head. And so that's what made it post-traumatic stress. Because like I'm reliving it while I'm trying to help my daughter, and help her. So I put myself back in her shoes each time I'm trying to remind myself that things aren't normal between the two of them. And that's really difficult, because they get along really well...I mean he's really a great kid, for the most part. And then this stupid thing he did... And, if I'm lying down in bed, and he'll come crawl in with me, or crawl next to me. It's like I don't feel comfortable with that boundary. And those boundaries are just uncomfortable. And so it's like I'll get up and I have no problems hugging him when I'm standing up, it's just when I'm in a lying down position it's just – and then he'll get on top of you. And I'm like, this isn't right, and I'll tell him that. And I don't know what part of me is saying that, or if it's natural boundaries or not natural boundaries, or what, because I have a warped sense of what is natural in the first place, when it comes to a man.

--Greta

As parents in families where incest has occurred, several of these participants also described ongoing difficulties dealing with ex-partners and worrying about the safety of their children and the children of others. Isabel talked of significant challenges in this area.

It gets tiresome even worrying about [keeping the children safe]. It really does... You know, [2nd ex-husband] is picking up [younger daughter from school], and has been for the last year, and bringing her to her dance team practice, and then bringing her [and her daughter's friend] home... For three months I let [2nd ex-husband] bring both girls home. To my house... and [2nd ex-husband] said, and called "I'm bringing both girls home. Why don't I just drop [younger daughter] off," – and then it would be him bringing [daughter's friend] home? No. Bring her here. You know, that kind of thing?

--Isabel

- These interviews also suggest there is a significant need among parents for information and resources that go well beyond the timeframe of adjudication and treatment to address the long term challenges of being part of a family in which incest has taken place.

"I Never Thought This Could Happen in My Family"

Most participants in this research (55 percent) commented that they had never thought that child sexual abuse could happen in their families. For some, this may have contributed to an inability to recognize that seemingly harmless behavior was in fact a warning sign of abusive behavior.

I had read an article about a woman who had lived through a child abuse case and divorced her husband, and I read it and thought, oh thank God I've never had to go through that. I would never ever want to live through something like that. And a month later, everything hit the ceiling.

--Kay

Yeah, you don't think it's gonna happen in your family. Huh-uh. You know it's out there, but, you think you know your husband.

--Eve

This is not to happen in the home. And – it's just not to happen in my home. I mean, it didn't even cross my mind that it could even occur.

--Isabel

Society stigmatizes child sexual abuse. If we view sexual abuse as a tragedy that “could never happen to me and my family,” perhaps that makes some of us less likely to look for it in our own families. Stop It Now! Minnesota might help families to prevent child sexual abuse by continuing the work of educating people about warning signs, while also emphasizing that it *can* happen in families like our own.

CONCLUDING REMARKS: OPPORTUNITIES TO PREVENT CHILD SEXUAL ABUSE

Complicated Behaviors within Complex Family Systems

Prevention of child sexual abuse is complicated by normal human weaknesses, defense mechanisms and fears, and the complexity of human interaction within families. Stress on a family – such as job demands, financial worries or substance abuse – may further cloud the perceptions of people in families where incest is taking place.

It can be very difficult to observe that child sexual abuse is taking place in a family, and those who abuse children often go to extraordinary lengths to silence the child and keep the behavior secret; it is hard to see what you cannot see. This may be particularly true during the grooming phase, before the abuse occurs.

It is also a normal human defense mechanism to deny something that is painful or incongruent to believe. Confronted with evidence of abuse, it can be very difficult to believe that someone you love – and thought you knew – could do something you find so monstrous; it does not seem real. If the loved one tells you no abuse is occurring, that may be easier or more comfortable or more logical to believe.

Further, once faced with concrete evidence of abuse, it is common to be fearful and ashamed of confronting a loved one with the evidence, and fearful of what the consequences may be of revealing this information to authorities, to family, to friends. People in this situation may not know where to go for help.

Need Exists for a More Complete Understanding of How to Help Bystanders Take Action to Prevent Abuse

Since most participants said they were unaware of the abuse until after it occurred and after a child disclosed, challenges exist in how best to accomplish the primary prevention of child sexual abuse by helping bystanders or secondary victims and secondary victims to take action sooner.

As mentioned above, it is the view of the researchers that in order to prevent the behavior *before a child is harmed*, primary prevention messages are most effective when aimed at the people who are in the best position to prevent sexual abuse of children: the adults with sexual behavior problems around children.

It is also vital that adult bystanders or secondary victims have the knowledge and resources to take action whenever possible.

- We would benefit from reexamining how best to effectively teach adult bystanders to recognize the warning signs – whether a single suspicious action or a pattern of behavior.
- With more investigation of offense patterns, we may learn how better to recognize early indicators of abuse; we may also learn that outward observable behavior that points to child sexual abuse may not commonly be visible until after abuse has already occurred.
- We would benefit from a better understanding of the contradictory cultural attitudes about sex that contribute to harmful sexual behavior. We live in a highly-sexualized culture in which sexualized images of children are becoming commonplace, yet our culture discourages open discussion about healthy/unhealthy sexual behavior and creates a climate in which seeking help for confusing or unhealthy sexual thoughts or behaviors is considered shameful. And it is very difficult for most people to know how to begin a conversation with a loved one when they have concerns.

- We need to do a better job of communicating that yes, this can happen in families like ours, yours and mine, to people we know and love.

These findings outline opportunities for improved education, outreach and interventions to help parents and others before a child is harmed, after disclosure, and even after adjudication and treatment. Families need help with this issue for years, even a lifetime, afterwards.

In addition, we can help adult bystanders or secondary victims by connecting them to information, help and resources so they can better cope with child sexual abuse in their families before, during and after abuse occurs.

In closing, we cannot thank the research participants enough for having the courage to speak candidly with us about these difficult events in their lives so we may better help others in the future.

APPENDIX

Stop It Now! Minnesota/Interview Instrument

PART 1: INTRODUCTION (With informed consent, 20 minutes)

My name is Danie Watson. I am working with Dr. Jane Gilgun of the University of Minnesota School of Social Work, and Stop It Now! Minnesota, on a research project. We are trying to better understand how to help people and families who have difficulty with sexual behavior with children. You have been asked to participate because you are an adult who has been married to or has lived with a spouse or partner who sexually abused one or more children in your home; or you are the parent or step-parent of a child who has sexually abused one or more children living in your home.

If you choose to complete the interview, this is what will be happening today. I will ask you a series of questions relating to thoughts, behaviors, feelings, and attitudes about being in a family in which sexual abuse towards children took takes place; what might have made it possible to recognize earlier, ways to communicate with people with similar experiences, your reaction to the idea of a helpline, and some demographic information. I want to hear from you, in your own words, about your experiences and opinions. There are no right or wrong answers. You may discontinue the interview at any time. You do not need to respond to any questions you do not feel comfortable answering. You will still receive your gift certificate.

It is important that you know and understand that there are limits to the confidentiality of our conversation. If you describe previously undisclosed sexual abuse activity towards a child or vulnerable adult and give information that identifies you beyond your first name, or identifies the victim or victims, then I will have to report what has been said to the appropriate authorities. I will also have to report it if you give information of your intent, or someone else's intent, to harm you or someone else in the future.

Except for that kind of information, though, your responses are confidential. I am making an audio recording of your answers, but your full name will not be associated with your answers in any way. No one outside the research team will be told you are participating in this study. The answers you and others give to me will be written about collectively, but we will use a made-up name for you, and no one outside of this room will be able to identify that the answers came from you. Your responses are confidential.

Thank you for participating. Your cooperation will, hopefully, help us help many individuals. Do you have any questions or concerns before we begin?

How will you let us know if there's a question you'd prefer not to answer?

So tonight or tomorrow or a week from now, if you are feeling concerned or upset about something we've discussed, is there someone you can call for support?

Okay, let's begin.

PART 2: BASIC DEMOGRAPHICS (5 minutes)

[INTERVIEWER FILL IN: ___MALE ___FEMALE ___TRANSGENDER

Let me start with a few basics questions.

1. Do you work? What do you do?
2. Are you married or in a significant relationship?
3. Tell me about your children? What are their ages?
4. Do you regularly take part in activities that connect you with other people, such as playing sports, or going to a church or other faith community? What are they?
5. What do you do for fun or to relax?
6. What is your age [census groupings]?
 - 15 to 19 years
 - 20 to 24
 - 25 to 34
 - 35 to 44
 - 45 to 54
 - 55 to 59

- 60 to 46
- 65 to 69
- 70 to 74
- 75 to 84
- 85 or older

[INTERVIEWER, IF THE SUBJECT IS NOT 18-65 YEARS, END THE INTERVIEW.]

7. How do you describe yourself racially or ethnically?

PART 3: LIFE CIRCUMSTANCES AND THE DECISION TO GET HELP (25 minutes)

We're here to talk about your thoughts and opinions around getting help for sexual behaviors within families. We have about an hour and there are 24 questions left in the interview, so I am going to get right down to those questions. Remember, if you don't want to answer a question, it's okay to tell me that.

8. How did you learn that your spouse/partner/child had behaved sexually around your child/children?
9. Tell me, how did you get help or support for the sexually abused child(ren) in your family? (Select all that apply)
- Own initiative
 - Legally required
 - Family urged
 - Employer urged
 - Other (fill in) _____

10. Now that you know that sexual abuse took place in your family, and as you think back, what was your family life like at that time?

Probe: Were you working? Who in the family was earning money?

Probe: What was your relationship with your spouse or partner like at the time? Your child/children? Your parents?

Probe: What were the relationships between the children in the household like?

Probe: Did you have friends you could talk to? Did you feel alone?

Probe: Were you enjoying life? Feeling sad?

11. Now that you know that sexual abuse was going on, looking back on those days are there cues about the incest that you now understand and that you didn't understand then? Maybe you saw or heard something and back then it didn't seem to mean anything, or seemed to mean something different.

Probe: Did you have any suspicions back then that something like sexual abuse or inappropriate sexual behavior was going on?

Probe: Maybe a feeling that something seemed odd or different?

Probe: What was happening that you noticed?

Probe: Did someone else tell you they'd noticed something suspicious?

Probe: What was happening that they noticed?

Probe: What happened after that?

12. When did you learn the whole story of what had happened?

Probe: What were your thoughts and feelings after hearing the whole story?

Probe: [Ask more about the thoughts and feelings the interviewee describes.

Probe: Did you have any idea what to do about what had happened?

Probe: How did you feel about the safety of your children?

Probe: Did you think it was possible to change the situation? Why or why not?

13. You told me earlier about how you [[and possibly your family members]] got help or support about the incest that happened in your family. When you first thought about or were told about getting help, how did you feel about what you needed to do or about what was suggested?

Probe: What did you think might happen?

Probe: What did you think you had to gain (or protect)?

14. Was there anything back then that felt uncomfortable to you about getting help or support?

Probe: What did you think might happen?

Probe: Did you think you had something to lose (or protect)? What?

Probe: Had you heard anything about what might happen to someone, a parent like you, who called the police or contacted someone in child protection services about sexual abuse of a child?

Probe: How about what might happen to other family members?

15. Had you thought about seeking help for any personal or family issues on earlier occasions, but didn't?

Yes No

Probe: What were these issues?

Probe: Did you know where to go for help?

Probe: What, if anything, did you try at that time?

Probe: Did you talk to anyone about it?

Probe: What did you think someone might say if you talked to them about it? Did you think they would believe you? Get angry? Be sympathetic?

Probe: How did you overcome those barriers when you did act later? What was different?

16. Did you ever seek help for another concern, like depression, alcohol use, or relationship problems?

Yes No

Probe: Please tell me more about that.

17. Did anyone ever try to talk with you about what was happening in your family prior to the time you received help?

Probe: What happened?

Probe: How did you respond?

Probe: Was any part of it helpful? Discouraging?

18. Was there someone in particular that you listen to, or would have listened to, about getting help if they had talked with you?

Probe: Who? Another parent, a doctor, a member of the clergy, a friend, a teacher?

Probe: Tell me more. What could they say? How could they say it?

19. How did you feel after your first meeting to talk to someone about what had happened or was happening in your family?

APPROXIMATE MID-POINT OF INTERVIEW (40 MINUTES REMAINING)

PART 4: PERCEPTIONS ABOUT CHILD SEXUAL ABUSE (15 minutes)

Now I need to ask you some questions about you and what you thought about the abuse that happened in your family.

20. Back before all this happened, what did you know about child sexual abuse or incest? Had you heard anything about it?

Probe: Where had you heard about it?

Probe: Did you ever think anything like that could happen to your child/children?

21. Now that you've learned more and had time to look back on what happened, were there any hints or warning signs that something was going on? Things that you did not understand at the time but make sense to you now?

22. Once you had learned what was happening, what were your views about whether your spouse's/partner's/child's behavior was right or wrong?

23. Once you had learned what was happening, were you aware that what your partner/ spouse/child was doing was or could be illegal?

Probe: How did this come to your attention?

Probe: Were you worried about your spouse/partner/child getting caught?

Probe: Did knowing it was or could be illegal change anything?

24. Once you learned what was happening, were you worried that friends, family or neighbors might find out about it?

25. Once you learned what was happening, did you ever feel like your spouse's/partner's/ child's behavior was like an illness?

26. It's not uncommon for people whose children have been sexually abused to feel awful about it. Have you felt that way?

Yes No

Probe: Please tell me more.

PART 5: WHAT MIGHT HAVE MADE A DIFFERENCE (10 minutes)

27. Is there anything someone might have said or done to get your family help earlier?

Probe: Is there anything you know now that you didn't know then that would have made a difference?

28. What would you most like to say to others like you whose children are being sexually abused or who may be at risk for sexually abusing a child?

PART 6: REACTION TO THE HELPLINE (10 minutes)

29. Once you learned what was happening, if you had known that a confidential, toll-free helpline existed – a place to talk and figure out your options – would you have called it?

Probe: Why or why not?

Probe: Would you have a preference whether a man or a woman answered the helpline?

Probe: If the person who answered was a volunteer or a professional?

Probe: If the person who answered was local or somewhere else?

Probe: How about going to a web site? Would that be better? Why or why not?

Probe: What do you think of this idea of a helpline as a way to help or support people who might be going through what you've experienced? Do you think it will work?

30. Do you have any other suggestions on what we can do to help individuals who are in families where a child is being sexually abused to seek help on their own?

PART 7: CLOSING THOUGHTS (5 minutes)

Thank you very much for sharing your thoughts and opinions with me today.

31. When you think about this research, and your participation here today, can you imagine something good, something positive that might come out of this?

Probe: Is there anything negative you think might happen as a result of this research or you being here today?

32. Is there anything else you would like to add or ask?

I appreciate that this may not have been easy for you to help us with our research. Please accept my sincere thanks, and, if you want, here is some information for you, or to share with others about resources that are available for getting help.

[Offer resource and information sheet.]

[Offer gift certificate.]