Psychological Effects of Intra-familial Sexual Abuse on Children

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PSYCHOLOGICAL EFFECTS OF INTRA-FAMILIAL SEXUAL ABUSE ON CHILDREN

INTRODUCTION

Sexual behaviours towards children have appeared many times in history and in various cultures. Most often they took the form of ritual sexual violence, e.g. in satanic sects, deviatory sexual behaviours, such as paedophilia or exhibitionism, incestuous relationships, non-sexually motivated aggressive behaviours, or morally accepted sexual behaviours towards children, e.g. in Papua New Guinea (Lew-Starowicz, 2000).

However, it was only in 1962, when H. Kempe described the maltreated-child syndrome, that a significant increase of interest in a variety of forms of sexual behaviours towards children was observed among scholars representing different fields of study. This had its reflection in a number of publications, particularly in medicine, law, and psychology (Lew-Starowicz, 2000).

In Poland the issues of sexual violence and abuse are relatively little known, although numerous scientific publications and information disseminated at symposia reveal the scale of the problem.

In spite of real progress in the field, a large number of areas still cause confusion and remain unexplained, which includes, among others, the subject area connected with incest, the necessity to engage in discussing problems of sexuality with children or even an adult. Difficulties in conducting research have their origins in creating the atmosphere of mysteriousness,
denial, sense of shame as well as in such important issues as raising a child, human sexuality, or the problem of power (Glaser, Frosch, 1995).

Today specialists debate whether it is the epidemic of sexual violence that is spreading or there is a greater allowance for revealing behaviours which were previously hidden for different reasons.

Also, no unified nomenclature has been established, which is another reason of difficulty in encompassing the scale of the phenomenon and its classification. In the literature the following terms are used interchangeably: sexual harassment, maltreatment, sexual abuse, seduction, depraving acts, sexual mistreatment, or sexual violence.

In the present article, a differentiation of terms determining sexual violence towards adults and children has been assumed and used after the Dictionary of Psychology by A. S. Reber.

The term sexual harassment relates to the situation in which one of the parties to the interaction uses their own advantage in order to force the other party to satisfy someone else’s sexual drive. As far as two adult persons are concerned the term implies men’s style of treating women. If a child is involved the term referred to is sexual abuse (Reber, 2000).

Undoubtedly, sexual abuse of children constitutes (alongside physical violence, psychological violence, neglect) one of the forms of wrongful treatment (Pospiszyl, 2000).

Theorists most often divide the term into two categories: abuse involving touch (e.g. intercourse, stimulation of the genitals) and abuse without touch (e.g. verbal stimulation, voyeurism, exposing) (Pacewicz, 1992).

Within the first category one can distinguish abuse involving physical force, threat, power (people acting in this way are called rapists) as well as abuse without the use of physical force, but involving the mechanism of seduction and enticement (so called enticer) (Jaczewski, Radomski, 1986; Pacewicz, 1992).

Among child sexual abusers there are people who were themselves victims of paedophilia and also individuals for whom engaging in sexual contacts with children is surrogate and situational in its character (Travin, Protter, 1995).

Contrary to common opinion perpetrators of most child-orientated sexual activities are not strangers but family members, neighbours, family friends, teachers, acquaintances. The fact is confirmed by a number of studies – 75–80% of all occurrences are the above mentioned cases. Discrepancies appear in relation to the question of what percentage of abusive practices takes place within the immediate family. M. D. Schecter and L. Roberge (1976) argue that it is 10%, whereas according to D. Finkelhor (1979) and D. Russell (1983) it is as much as 50% (Pacewicz, 1992).
The present article concentrates on the issue of intra-familial child sexual abuse. On the basis of review of literature focusing on this problem, an attempt was undertaken to present conditioning factors in incestuous behaviours and their consequences for a child’s development.

INCEST

One of the family problems, which in recent years have grown to an appalling extent, is maltreatment of children. It occurs in different forms and one of them is the use of sexual coercion (Turner, Helms, 1999).

Incest (Lat. incestus – impure) is commonly defined as sexual relation between close relatives. The meaning of the term close is varied in different cultures but nearly in every case there seems to exist some form of prohibition against this sort of relation, the so-called incest taboo (Reber, 2000; Lew-Starowicz, 2000).

A large portion of biological, ethnological, sociological, physiological and psychological literature seeks origins and rationalization of the prohibition of incest.

One group of theories explicating the prohibition of incestuous relations concentrates on genetic factors, indicating that it helps prevent ill-adapted recessive genes from appearing in a population.

A. Kępiński emphasises that for the sake of eugenics it is advisable that sexual intercourse take place between individuals as little genetically related as possible, that is not within the family group. The law of exogamy, however, is repeatedly violated, if not in deeds then in dreams. For familial environment is often the place of initial sexual contacts, e.g. Freudian Oedipus complex, playing “mum and dad”, playing „doctor” (Kępiński, 1982).

Other conceptions indicate the importance of social factors, postulating that the existence of more than one close sexual relation in a family is a fragile and potentially explosive arrangement (Reber, 2000).

Psychological understanding of incest is broader and encompasses any sexual behaviours towards a child, exhibited by a person with whom the child has close emotional bonds, e.g. father, mother, step-father, step-mother, uncle, grandfather, neighbour, family friend, teacher, priest (Widera-Wysoczańska, 1998; Cielecka-Kuszyk, 2000).

Incidents of child abuse by people who, by right of their profession, are granted social trust are of special significance. Those people’s role should

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be to give support and assistance to a child, not to harm. In an individual
dimension, effects of pathogenic behaviours concern abuse of trust displayed
by children and their parents, and inflicting on child’s psyche changes,
which are hard to estimate. In a social dimension, public trust placed in
specific groups is impaired (Brzeziński, 2004).

CLASSIFICATION AND DETERMINANTS OF INCEST RELATIONS

The most common classification includes endogamic (genuine) incest,
i.e. relations between closely related people, e.g. parents-children, brothers-
sisters. The term exogamic incest relates to a more distant degree of
kinship, e.g. uncle and niece. Also distinguished are: simple incest, e.g.
father-daughter and multiform incest, e.g. father-daughter, the same father-
son (Lew-Starowicz, 2000).

Another classification, which is based on possible causes, distinguishes the following:
- situational incest, for example sexual contacts between siblings sha-
ring one bed,
- psychopathological incest – relates to individuals exhibiting mental
disorders, such as psychoses,
- incest involving paedophilia,
- homosexual incest,
- incest involving familial pathology; according to scholars studying
the phenomenon it is the most common type (Lew-Starowicz, 2000).

There exists a discrepancy between the revealed and hidden cases of
incestuous relations. In Poland, on average 20 people are sentenced for
incest annually. Presumably however, the disproportion between the revealed
and hidden facts is large (Lew-Starowicz, 2000).

Studies indicate that incestuous sexual activities of a child have their
beginnings at approximately the age of 5 to 8 and the average time of
being a victim falls at the age of 11 (Turner, Helms, 1999).

According to approximate data, in Poland nearly two thirds of victims
are six to ten years old (Pacewicz, 1992).

Contrary to common opinions, incest is not exclusively the problem of poor
families; it can be identified in all social groups (Turner, Helms, 1999).

Studies indicate that both in Poland and in the United States relations
between father and daughter constitute 74% of incestuous crimes, between
brother and sister – 18% (Poland) or 19% in the United States. The numbers
are followed by mother-son relations – 7% in Poland and 1% in the USA
(Pacewicz, 1992; Turner, Helms, 1999).
H. V. Henting established similar percentages (1962). In his view sexual intercourse between side line relatives do not exceed 10–15% of the total number of incest occurrences. What is most significant is that two thirds of incest cases occur between father and daughter or step-father and step-daughter (Lerner, 1984).

It is worth mentioning that sexual abuse, and particularly incest, is socially heritable, that is to say patterns of such behaviour are carried over from one generation to the next. Interestingly, it concerns both victimizers and victims (Pacewicz, 1992).

Many scholars dealing with the dynamics of incest underscore that when children are first-time victims of incestuous practices they believe that they are uniting their family (E. Stark, 1984; quoted after: Turner, Helms, 1999). Some children give in to a pathogenic arrangement because they desperately need any emotion. In a great deal of instances children are convinced that there is no rescue for them and they behave passively (P. J. Long, I. L. Jackson, 1991; M. Nelson, 1991; N. W. Perry, L. S. Wrightsman, 1991; quoted after: Turner, Helms, 1999).

According to the studies conducted by Z. Lew-Starowicz (1991), 90% of victims of sexual violence have never revealed their experiences to anyone or used any forms of counselling or medical assistance (Pacewicz, 1992).

The interest of many research centres in incestuous relationships has generated the identification of determinants conducive to this type of relationship. Most often three groups of factors are mentioned: social and economical, psychological, and characteristics of family system (Pacewicz, 1992).

The first group of determinants conducive to incestuous relationships comprises poverty, poor education, excessive number of members of the household in one flat, social isolation of the family, and financial dependency on the father-perpetrator.

The second type of the above mentioned determinants is linked with family life dynamics characterized by the authoritarian father, often succumbing to his own impulses and yet believed by the social surrounding to be the so called respectable citizen. The mother excludes herself mentally from family life, assuming a passive attitude.

Victims of incest are not significantly different from other children in the family, although it is claimed that the eldest daughters, who play the role of the dearest child or substitute mother, are most vulnerable.

The third group of explanations considers the properties of a family system which is usually characterized by disordered emotional and sexual ties between parents, tensions and misunderstandings between mothers and daughters (mainly in the aspect of performing the role of a woman), lack of autonomy and disturbances in communication among family members, the
atmosphere of violence, rape, aggression in everyday life, provocative and seductive behaviours displayed by victims towards victimizers (Cielecka-Kuszyk, 2000; Lew-Starowicz, 2000).

In the systemic approach, the coming about of incestuous behaviours in a narrow family circle is linked with limited interaction of the family with its social environment and not fully defined roles and family functions. Frequently incestuous behaviours function as defensive mechanisms aimed at maintaining integrity of the family (Travin, Potter, 1995).

CONSEQUENCES OF INCESTUOUS EXPERIENCES

The scope and type of potential consequences of incestuous experiences is determined by a number of factors. Among the most important are: child's age, type of kinship, emotional interaction between the perpetrator and his victim, duration of incestuous relationship, type of sexual behaviours of the perpetrator, the extent to which the victim participated of his or her own accord, the extent to which the victim behaved provocatively, and finally the extent to which incestuous relationship resulted from using sexual violence by the perpetrator (Glaser, Frosh, 1995; Lew-Starowicz, 2000).

Consequences of sexual abuse can be classified depending on the time of onset (immediate and distant) and the type of after-effects (physical, sexual, psychopathological, familial – see Tab. 1) (Lew-Starowicz, 2000).

Analysis of cases indicates that victims of sexual abuse frequently assume one of two fixed roles or oscillate between them. One of them is the so-called enraged child, which aims its entire anger and hatred at the surrounding world, since they cannot be aimed at the perpetrator. There arise parental problems, auto-destructive behaviours.

The other role is the so-called begging child, asking for rescue, care, love. An individual feels responsible for his or her sexual relationship with an adult.

Some victims of sexual abuse are as if emotionally frozen, others to the contrary – become emotionally oversensitive. Another effect of sexual abuse can be obsessional need to compensate for not having said no (Pacewicz, 1992).

It is beyond doubt that sexual abuse can also result in long-lasting effects, which are harmful to the psychophysical development of an affected individual. However, in the literature one can observe controversial views on more distant reverberations of incestuous relations.
Psychological effects of intra-familial sexual abuse on children

Table 1

<table>
<thead>
<tr>
<th>Short-term consequences (child)</th>
<th>Long-term consequences (adult)</th>
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<tbody>
<tr>
<td>Poor academic performance</td>
<td>Adjustment problems (males)</td>
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<td>Anxiety</td>
<td>Anxiety</td>
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<td>Depression</td>
<td>Attachment disorder</td>
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<td>Dissociation</td>
<td>Binge eating in women</td>
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<td>Distress</td>
<td>Bipolar disease</td>
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<td>Emotional problems</td>
<td>Conversion disorder</td>
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<td>Homeless, runaway</td>
<td>Coerces intercourse</td>
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<td>Hostility</td>
<td>Divorce</td>
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<td>Neuroendocrine dysfunction</td>
<td>Children who are sexually abused</td>
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<td>HIV</td>
<td>Sexual abuse offence</td>
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<td>Obsessive compulsive behaviour</td>
<td>Irritable bowel syndrome</td>
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<td>Pregnancy in adolescence</td>
<td>Marital conflict</td>
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<td>Psychotic behaviour</td>
<td>Maternal functioning problems</td>
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<td>Post-traumatic stress disorder</td>
<td>Panic disorder</td>
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<td>Substance abuse</td>
<td>Paternity in teen pregnancy</td>
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<td>Suicide or suicide attempts</td>
<td>Paedophilia</td>
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<td>Somatic problems</td>
<td>Premenstrual distress</td>
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<td>Hopelessness</td>
<td>Post-traumatic stress disorder</td>
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<td>Rape reports</td>
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<td></td>
<td>Sexual dysfunction</td>
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<td></td>
<td>Sexually transmitted disease, including HIV</td>
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<td></td>
<td>Substance abuse</td>
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<td>Urinary retention, chronic</td>
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<tr>
<td></td>
<td>Suicide or suicide attempts</td>
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</table>

Research shows that 52 per cent of women who have been involved in this type of relation consequently display negative behaviours such as loss of trust to men, diminished self-esteem, hostility, negative incestuous cycle. In 30 per cent of cases positive effects have appeared, such as getting to know the body and sexual physiology, positive transfer of a relation to other men (Lew-Starowicz, 2000).

In the studies conducted by J. Baker and R. Duncan (1985) 54 per cent of subjects who had been sexually abused in the past claimed that the experience had detrimental effect in their later life. If it occurred within the family, the rate increased to 67 per cent, and if the perpetrator was the father, the rate reached 75 per cent. Only 4 per cent of the examined subjects expressed the opinion that the experience contributed to improvement in their life quality – they were victims of extra-familial sexual violence (Glasser, Frosh, 1995).

The results of the studies carried out by M. Meyers (1989) in a group of sexually abused men indicated the presence of homo- and bisexualism,
impotence, sexual passiveness, sexual phobias, problems with attitudes towards one’s own body, anxiety disorders and other mental disorders, e.g. predisposition to addiction (Lew-Starowicz, 2000).

M. Cooper and L. Cornier (1990), having reviewed the world’s literature, conclude that among the most frequent after-effects of incest are:
- prostituting oneself in the future;
- using sexual violence towards other people at later age;
- neuroses, depressions, psychosomatic and mental disorders;
- decrease in self-esteem and self-worth;
- gender-role identification disorder.

Among consequences of incest there are suicides. Numerous scholars express the view that pathogenic relations can contribute to the development of homosexual orientation, paedophilia, sadism, incestuous behaviours, and other mental disorders. It is emphasized that apart from disorders in psychosexual development incestuous experiences hinder establishing positive partner relationship or creating family life (Glasser, Frosh, 1995).

Scholars investigating the problem point to the connection between the experience of having been a victim of sexual abuse in childhood and the appearance in adult life of inclination to using this type of violence towards children (Glasser et al., 2001).

They base their viewpoint on the victim-to-victimizer cycle on data according to which sexual behaviours exhibited in adulthood are the more deviatory the stronger and more traumatic were one’s own experiences of sexual abuse in childhood. Moreover, as it is shown in the authors’ studies, the choice of a victim is dependant, among others, on his or her age, which most often is the same as or near to the age at which the present perpetrator suffered abuse as a child. A tendency to molest victims in the identical or similar manner to one’s own experiences has also been observed. The conception of the abuse cycle certainly needs some further studies and cannot be generalized, at the least because of the fact that there is a considerable percentage of perpetrators who themselves have never suffered similar behaviour from adults, either in the family, or outside. Nevertheless, studies of M. Glasser et al. (2001) indicate that from among the examined victims of sexual abuse in childhood, 59 per cent are perpetrators of sexual harassment towards children. It may be significant that a greater probability of occurrence of such a connection concerns paedophilia (61%) rather than incestuous relations (51%) (Glasser et al., 2001).

One of the most comprehensive academic works on the effects of incest and sexual harassment of children are studies by David Finkelhor (1988).

In Finkelhor’s view trauma resulting from being sexually abused gives rise to four types of traumatogenic dynamics. Each type causes alteration in cognitive and emotional orientation towards the world; distorts the concept
of "I", way of thinking, personal aptitudes and ability to experience positive feelings towards people. The author distinguishes four types of dynamics: traumatic sexualization, betrayal, stigmatization and accusation or powerlessness (Turner, Helms, 1999).

Traumatic sexualization is connected with conditions in which the child is molested. The following processes take place here:
- rewarding a child’s sexual behaviour which is not adequate to his or her stage of development;
- a child learns to take advantage of his or her sexual behaviour, treating it as a means of manipulation of people;
- exposing childish sexuality to trauma as the child associates his/her own negative memories with attempting any sexual activity;
- children feel lost – they receive from the perpetrator untrue information about sexual behaviours and sex morality.

Influence of the above can be revealed in various forms in subsequent behaviour of the victim:
- occupation with sex, compulsive masturbation, child’s knowledge and behaviour inadequate in relation to his/her age group;
- sexual harassment of peers (mainly boys), promiscuity;
- in adulthood: aversion to sex, difficulty in reaching arousal, having retrospections when undertaking sexual activity.

The second type of traumatogenic dynamics is linked with experiencing betrayal by a child. Children feel betrayed when they discover that someone on whom they are dependant made them suffer harm, for example they realize that a person trusted by them dismisses their positive mood or made them do something by way of deception. In later life there appear numerous symptoms connected with suffering betrayal, e.g. hostility, anger, distrust of people, of intimate relations, antisocial behaviours.

The third type of dynamics determined by D. Finkelhor is stigmatization. It relates to receiving by a child negative messages such as "you have humiliated yourself", "you are deprived of positive qualities", "you are to be blamed for your acquired experiences". Such statements can be communicated verbally and non-verbally, both by molesters and by the social surrounding, regarding sexual molestation as deviation and crime.

In the course of studies on this type of dynamics, it was concluded that children who have been subjected to sexual violence feel isolated, induced to auto-destructive behaviours. It happens that they belong to socially condemned groups (crime, drugs). Sometimes being condemned can lead to depression or suicide attempts.

Powerlessness is the fourth type of traumatogenic dynamics described by the author. It appears when a child is unable to act in accordance with his/her own will and wishes, and when he/she is at risk of suffering severe
injuries. The feeling is intensified by unsuccessful attempts to stop the abuse, to defend oneself or outwit the perpetrator. The author of the model indicates that feeling powerlessness leads to experiencing fear, anxiety, reducing the ability to cope in difficult situations, and displaying compensation reactions, such as the need to dominate, to exercise control (Glaser, Frosh, 1995).

The model presented above contains factors acknowledged both by clinicists and researchers, yet it seems that it should take into account two more elements, namely: a sense of isolation and fear as well as confusion resulting from the special character of the phenomenon of sexual abuse (Glaser, Frosh, 1995).

The model proposed by D. Finkelhor, regardless of the critique, can be helpful in analysing the roots of child sexual abuse. It also reveals the perpetrator’s responsibility for situations of maltreatment. Furthermore, the author brings to attention the fact that unfulfilment of emotional needs of individuals in the family evidently facilitates sexual abuse. He underscores the significance of factors that determine the increase of a child’s susceptibility to victimization.

CONCLUSIONS

Sexual drive is one of the most significant phenomenon both in an individual’s and species’ existence, for it ensures continuity of life. It is stressed that sexual activities, apart from performing the function of procreation, are closely linked with mental sensations, thus considerably affecting an individual’s frame of mind (Jaczewski, Radomski, 1989).

It also encompasses behaviours associated with motherhood, in this way generating a fundamental difference in the activity structure of sexual life between the female and male gender. A general rule states that motherhood and duties associated with it are women’s attributes, although there are exceptions (Kępiński, 1982).

Therefore, after the definition of sexual health by the World Health Organization, satisfaction of sexual drive should add to human well-being, since it integrates biological, emotional, intellectual, and social aspects of sexual life, components significant for a positive development of personality, communication, and love (Gierowski et al., 2000).

It needs emphasizing that drawing the line between norm and deviation is probably more problematic in the field of sexuality than in any other field of human life. So grand is the variety of forms of behaviour and the range of experiences that from dawn of time they have constituted an abundant topic for scholars, artists, or writers.
Nevertheless, it is beyond doubt that sexual abuse of children is an unacceptable and morally blameworthy phenomenal. A sexually abused child suffers direct harm. An indirect source of trauma is silence and negation of what has happened, which doom the child to a lonely immersion in pain and shame. Numerous cultural and moral norms, which demand to treat the body as something absolutely private, something not to be talked about to anyone, act to the disadvantage of victims of sexual violence. There is also another hindrance, namely the language barrier, which means lack of non-vulgar terms enabling discussion about the problems of sex.

One needs to be aware that not everyone finds it easy to face their own sexuality with joy. For some it turns out to be a tragedy, others misinterpret it and yet others control it in an inappropriate way (Dzieiewiecki, 2000). Improperly lived sexual life, which is accompanied by a sense of guilt because of past experiences, socially unacceptable behaviours or lack of opportunities for realization of sexual aims, can lead to great frustration, and thus to some behaviours in this sphere of life need to be forbidden by law and prosecuted in order to protect man from extremely painful consequences of disordered sexuality. Human sexuality needs developing, forming a mature attitude, which takes place in the process of sex education, when people discover the mystery of their own sexuality, learn to control it so that it contributes to growth of an individual (Dzieiewiecki, 2000).

REFERENCES

Brzeziński J. (2004), Zawioallo czlowiek nie zawiód, “Charaktery”, 8, 19
Dzieiewiecki M. (2000), Cielesność, płciowość, seksualność, Wydawnictwo „Jedność”, Kielce
Jaczewski A., Radomski J. (1986), Wychowanie seksualne i problemy seksuologiczne wieku rozwojowego, PZWL, Warszawa
Kępiński A. (1982), Z psychopatologii życia seksualnego, PZWL, Warszawa
Lew-Starowicz Z. (2000), Seksuologia sądowa, PZWL, Warszawa
Pacewicz A. (1992), O nadużyciach seksualnych wobec dzieci, IPZIT, Warszawa

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PSYCHOLOGICZNE EFEKTY SEKSUALNEGO WYKORZYSTYWANIA DZIECI W RODZINIE

Referat poświęcony jest psychologicznym konsekwencjom seksualnego wykorzystywania dzieci w rodzinie. Wprowadza w tematykę przemocy seksualnej, ze szczególnym zwróceniem uwagi na problem kazirodztwa i jego determinanty. Przedstawia krótko- i długoterminowe zagrożenia związane z doświadczeniem przemocy seksualnej w okresie dzieciństwa, w tym, związek pomiędzy byciem ofiarą a następnie sprawcą tego rodzaju przemocy. Autorki artykułu podkreślają potrzebę wnikliwej analizy problemu ze względu na negatywne konsekwencje dotyczące funkcjonowania w życiu dorosłym.

Słowa kluczowe: wykorzystanie seksualne dziecka, kazirodztwo, konsekwencje przemocy seksualnej.