

CSW Guidelines Victims of Intra-familial Child Sexual Abuse

Issues	Therapeutic Goals	Process
<p>Grief and loss issues- Betrayal first by the offender and then by unsupportive adults, loss of innocence, loss of reputation, sometimes the loss of the offender. The loss of contact with family members and friends while in foster care.</p>	<p>Victim will adapt to parent and sibling loss if placed in OHC; victim will adapt to changed relationship with parent if perpetrator is removed from the home</p>	<p>Victims express grief and loss in a variety of ways. Disruptive behavior is often an expression of grief. Counseling is very important, preferably with a licensed experienced therapist with whom the victim can have an on-going relationship for an extended period. Individual as well as group counseling is ideal.</p>
<p>Attribution of responsibility - Victims may find it more comfortable to assume the world is a fair and safe place, and that they have brought the abuse on themselves</p>	<p>Victim will place responsibility for the sexual abuse and all that the family has endured since the disclosure on the adults in the situation</p>	<p>Victims may feel they had some role of responsibility in the abuse, as this increases their sense of power in the situation. This is a delicate issue to be addressed in the therapeutic situation.</p>
<p>Self protection - Victim may need to learn about healthy boundaries and family rules.</p>	<p>Victim will develop self protection skills, including healthy boundaries in relationships.</p>	<p>Victims work through the symptomatology resulting from the abuse, including boundary issues and premature sexualization.</p>
<p>Family role realignment - In some families, the offender is more "valuable" than the victim, leading the family to focus on the disclosure as the problem, rather than the abuse. In other families, the victim was told she was a rival to her mother for the offender's attention, effectively making her a peer to the adults.</p>	<p>Victim will adapt to a role consistent with their age and developmental level. The NOP who may have been subjugated by the offender must be accepted as the leader of the family.</p>	<p>Adults in the family must first assume appropriate roles, including healthy discipline. When adults assume appropriate roles, children are then more likely to conform to family rules. Many families require conjoint and family work to reestablish these roles.</p>
<p>Trauma issues - Victims are likely to be experiencing complex trauma, due to the multiple traumas incest victims typically endure.</p>	<p>Victim will process trauma associated memories, thoughts and experiences. Victim will adapt to becoming trauma survivors.</p>	<p>Sensitive and nuanced treatment will keep the victim in a frame of mind to work on recovery issues, without over-stimulating the child and provoking withdrawal or dissociation.</p>
<p>Identity issues - The expected developmental issues of childhood and adolescence are complicated by incest. The inevitable distortion of roles may be absorbed by the child or adolescent, and should be addressed and made explicit in treatment.</p>	<p>Victim will resume interrupted or correct distorted development of their identity. Sub-issues include reducing acute distress, learning to regulate affect, and identifying and countering thoughts that underlie negative emotional states.</p>	<p>Victims in appropriate treatment will examine their beliefs regarding what the abuse implies about them as people. Messages from the perpetrator and others will be examined for their veracity.</p>
<p>Safe places to tell the story- Victims vary widely in the degree to which they wish to discuss details of the abuse. Many victims benefit from group treatment by seeing that they are not alone in their experiences.</p>	<p>Victim will discuss the abuse to the extent she or he wishes, and gain solace from knowing that others have also experienced sexual abuse and survived.</p>	<p>The victim may also wish to have conjoint or family sessions, to share her or his feelings regarding the abuse with family members. Good communication between the therapists working with the family is important.</p>
<p>Reunification and safety – The parent-child attachment is threatened when there is an ambivalent response from the NOP. This is complicated with adolescent victims, who are developmentally readying themselves to separate from the family.</p>	<p>Victim will participate in developing a Family Safety Plan.</p>	<p>The NOP's ability to express belief and support to the victim is vital to successful reunification. NOP ambivalence, combined with the betrayal and damage of the abuse, can make reunification very difficult, especially with adolescents.</p>