

CHILD SEXUAL ABUSE ITS SCOPE AND OUR FAILURE

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CHAPTER 1

INTRODUCTION

The scope of the problem of child sexual abuse within our society is an epidemic of such vast proportions that virtually all children are at risk of abuse. Children are abused by loved ones, friends, family friends, those in whom they place their trust, and those bound to care for them. They are abused by those they hardly know and even those they do not know. Children of all ages are at risk and vulnerable to sexual abuse, whether in their homes, their community, or even over the Internet. Society's response to this tragedy has been to develop programs that identify, assess, and treat the victims, treat or punish the offenders, and teach young children how to deflect approaches. Our failure as a society, however, has resulted in programs, however well-meaning, that fail to identify most victims, substantiate most identified abuse, identify most offenders, treat or punish most identified offenders, and prevent the approaches of offenders.

Why are our policies and programs failing? One premise of this book is that they are failing because they are grounded not in the available knowledge base that explicates the scope of the problem of child sexual abuse, but in historical and sometimes mythical perceptions of this abuse. The child sexual abuse knowledge base for many years had a history of introducing theories and hypotheses that often viewed the victim and even the victim's mother pejoratively. These theories then became a part of the accepted knowledge base on child sexual abuse even before they were rigorously analyzed and sometimes even though empirical findings disputed them. These value-laden, stubborn, and tenacious theories were then used to frame assumptions underlying policies and programs.

A second important premise of this book is that our development of and need to maintain these myth-bound policies and programs must be understood within a sociohistorical context. Only by understanding this sociohistorical context can we also understand why these theories are stubborn and tenacious and why they continue to assume priority over our empirical knowledge base in driving policies and programs. The primary purpose of this chapter is to briefly develop these premises and to relate them to the context of this book.

DEVELOPMENT OF PREMISES

Perhaps the single most influential person in the history of the professional literature on child sexual abuse is Sigmund Freud. Much has now been written about his effect on the developing knowledge base of child sexual abuse. Although he was the first to forward a formal theory of child sexual abuse, he also renounced that theory shortly afterwards. Freud's renunciation of his seduction theory profoundly and negatively influenced the study of child sexual abuse. The denial of the reality of child sexual abuse already entrenched in society was now given legitimacy by Freud's renunciation. This culture of denial shaped not only the manner in which our

professional understanding of child sexual abuse unfolded, but also how we responded to the problem.

Resulting primarily from Freud's influence, child sexual abuse became a nonevent—a report of pure fantasy. In the few cases in which it was recognized to have occurred, it was rationalized as the daughter's seduction of her recalcitrant father. As a result of this unfortunate practice, child sexual abuse became almost synonymous with father-daughter incest. Both were deemed extremely rare events.

In the early 1980s, however, two seminal random surveys on the prevalence of child sexual abuse and its characteristics shattered the illusion that child sexual abuse was rare (Russell, 1983; Wyatt, 1985). Indeed, Russell found that 38% of females in her sample were victims of contact sexual abuse by the time they were 18. Using a similar definition, Wyatt found that 44% of women in her sample were abused. When the weight of this evidence exceeded society's ability to deny its reality, the child sexual abuse knowledge base burgeoned.

Researchers were now challenged to explain the phenomenon of child sexual abuse. Resulting at least in part from Freud's conceptualization of child sexual abuse as being synonymous with father-daughter incest, one of the next theories of child sexual abuse introduced was family systems theory. In this theory, all members of the family were implicated for their roles in initiating and maintaining the abuse. An issue for debate is whether the introduction of the theory guided, or was guided by, the sociohistorical conceptualization of child sexual abuse. Regardless, both psychoanalytic theory's emphasis on the culpability of the daughter and family systems theory's emphasis on the culpability of all family members had an important effect. Both allowed for the continued minimization of the role of society in the manifestation of this tragedy.

The knowledge base in the 1980s now revealed a curious paradox. On the one hand, rigorous random prevalence studies indicated that only approximately 30% of all abuse was intrafamilial and that 7% to 8% was father-daughter incest (Russell, 1984; Wyatt, 1985). On the other hand, the developing knowledge base focused almost exclusively on intrafamilial abuse, especially father-daughter incest. This bias was so extreme that papers indexed on father-daughter incest in a professional bibliographic database now number in the hundreds and those on intrafamilial abuse exceed 2,000, as compared to less than 15 papers indexed on extrafamilial abuse (Bolen, 2000a). Further, not a single known study exists on the most prevalent type of child sexual abuse—that by acquaintances—nor is there a single known study on nonoffending fathers, when 92% to 93% of all victims are not abused by their fathers. Yet, there is a plethora of literature, historically pejorative, on nonoffending mothers. Not surprisingly, some child sexual abuse professionals continue to believe that father-daughter incest is the most prevalent type of abuse.

Not only did biases that prioritized intrafamilial abuse and especially father-daughter incest persist in the developing knowledge base, but they also became codified in policies, programs, and statutes. Methods for identifying, assessing, and treating victims concentrated almost exclusively on intrafamilial abuse, whereas victims of extrafamilial abuse were largely forgotten—a policy that ensured that most victims of child sexual abuse remained unidentified. Another important impact of these biases was that mothers were assumed to be partially at fault for child sexual abuse. Thus, in the early 1980s (and even now) mothers were often charged as co-

offenders in the abuse, even when they did not commit the abuse.¹ Further, nonoffending mothers were given the grave responsibility of protecting the victim from future abuse. The alternative was to lose their children to the system. Importantly, sexual abuse was the only major crime for which mothers—instead of law enforcement officials—had to assume this responsibility for protection of the victim. Further, policies and statutes ensured that, while victims could be removed from their homes, offenders could not. This is perhaps the strangest and most burdensome of all the policies designed to “protect” children.

Another example of how the sociohistorical context allowed myth-bound policies to prevail involves child sexual abuse prevention programs. Partially as a result of the insistence by feminists that children be empowered and partially because of our inability to identify potential offenders, early prevention programs targeted only the potential victim. Introduced in the 1980s, these programs were (and continue to be) designed to help children deflect approaches of offenders. While the effort is admirable, it is difficult to understand how they can be construed as prevention programs (i.e., programs that lower sexual abuse prevalence). For them to be prevention programs, children must not only have the power to deflect the approaches of potential offenders, but these deflections must also be of such magnitude that the prevalence of child sexual abuse is concomitantly lower (Bolen, *in press*). Both are somewhat unrealistic assumptions. Even today, when it seems obvious that prevention programs targeting potential victims instead of offenders are palliative at best, these remain the primary organized prevention programs.

Thus, policies and programs that developed in the early 1980s have simply gained momentum. We are today what we were 20 years ago—just more so. Seldom have conceptual shifts taken place, even as the developing empirical knowledge base has refuted many of the assumptions upon which these early policies and programs were based. Hence, policies, programs, and statutes on child sexual abuse remain myth-bound and myth-driven. As a result, they are sometimes unreasonable, unsuccessful, unsupported, and unconscionable.

This brief analysis demonstrates that the development of child sexual abuse policies and programs is best conceptualized as a shotgun approach. Our policies and programs are messy, inconsistent, and splotchy and have immense cracks through which many of our children fall. Yet, the analogy of cracks in these policies and programs gives too much credence to them, for it suggests continuity and coherence. Instead, a more appropriate analogy is of a partially completed jigsaw puzzle. In this puzzle, few of the exterior pieces are placed, and interior patterns are sparse. Those that are taking shape are so distorted as to be almost unrecognizable. The large number of pieces missing from the puzzle represents the vast numbers of victims unrecognized by our current system. These are our policies.

¹ In the first National Incidence Study (NIS), mothers were charged as perpetrators in 46% of the abuse committed. Finkelhor and Hotaling (1984) found, however, that the vast majority of these women had been charged because of their inability to protect the child and had never physically molested the child. In the latest NCANDS incidence study (U.S. Department of Health & Human Services, 2000c), 27% of all abuse was committed by mothers, a virtual impossibility given that retrospective studies indicate that less than 0.2% of all abuse is committed by mothers (Finkelhor, Hotaling, Lewis, & Smith, 1990; Russell, 1983; Wyatt, 1985).

What is surprising, however, is that the empirical knowledge base is such that if another puzzle represented it, the picture would be much better constructed. Certainly, there would still be significant gaps, but the puzzle would have coherence and continuity. It would have shape and meaning, and emergent patterns would be recognizable even with missing pieces.

Here lies our quandary. We have two puzzles—one representing the empirical knowledge base and one representing assumptions of child sexual abuse policies and programs—that should look identical. Instead, they bear little resemblance. Thus, while the extant knowledge base rather clearly defines the scope of the problem of child sexual abuse, the assumptions undergirding policies, programs, and statutes have little resemblance to that empirical knowledge base. As such, it is not surprising that these policies and programs often fail miserably. Only when the pictures do match—when policies and programs become empirically driven—will we be able to adequately intervene in the tragic problem of child sexual abuse.

The most important premises of this book are that society has a grave responsibility to create a safe environment for *all* children and that *all* victims have the right to appropriate intervention, treatment, and protection from further harm. Yet until history-driven policies, programs, and statutes become empirically driven, our best efforts will fail.

The purposes of this book are three-fold. The first purpose is to illustrate how the sociohistorical and theoretical context shaped the often myth-bound assumptions that drive child sexual abuse policies, programs, and statutes. The second purpose is to clearly explicate the scope of the problem of child sexual abuse—the empirical knowledge base. A final purpose is to make explicit the fallacies between the history-driven policies and the empirical knowledge base while also calling for new programs that are grounded in the available empirical literature.

Finally, it is important to emphasize the unit of analysis for this book. The emphasis in this book is on the implementation of societal-level policies, programs, and statutes that have patterned the identification and assessment of victims of child sexual abuse. Many professionals do exceptional work with victims or offenders of child sexual abuse. This book is not meant to question their clinical wisdom, gained through their years of experience. Instead, it is to suggest that the *types* of child victims, families, and offenders with whom clinicians work are shaped by the policies, programs, and statutes concerning child protection in the United States. Thus, this book is concerned with how the historical conceptualization of child sexual abuse shaped the policies, programs, and statutes that affected how our society identifies and assesses victims and offenders of child sexual abuse as well as nonoffending mothers.

ORGANIZATION OF THE BOOK

Chapters 2 and 3 develop the historical context of the knowledge base for child sexual abuse, with Chapter 2 illustrating how the sociohistorical context informed our socially constructed conceptualization of the problem of child sexual abuse. This chapter briefly reviews the work on child sexual abuse done prior to Freud, his original theory of trauma, its later renunciation, and the impact of its renunciation on

the suppression of the developing knowledge base in child sexual abuse. The 1960s and 1970s enjoyed a resurgence in the awareness of child sexual abuse, with the late 1970s and early 1980s being a pivotal turning point in the knowledge base. The reasons for this resurgence in awareness, within a sociocultural context, are discussed. Moving into the 1990s, the current backlash is also conceptualized within a sociocultural context. The final section of this chapter looks ahead, suggesting how the current and future sociocultural context might affect the future professional response to child sexual abuse.

Chapter 3 attends to the sociohistorical context of the theoretical base for child sexual abuse. Early theories of child sexual abuse other than Freud's are developed and presented in order by how they assigned responsibility for the abuse. Those assigning culpability to the daughter are presented first, followed in order by those assigning culpability to the mother, the family, and the more recent theories that place the blame upon the offender. The importance of reviewing these early theories is to frame how this literature has skewed the developing knowledge base and social policies on child sexual abuse. This chapter concludes by suggesting an agenda for future theoretical development, research, and policy.

The next few chapters explicate the scope of the problem of child sexual abuse. To adequately review the empirical knowledge base of child sexual abuse, however, it is important to first define the parameters for methodologically rigorous research in child sexual abuse. This is the emphasis of Chapter 4. This chapter divides the research issues into those of validity—construct, internal, external, and statistical. Although this chapter is sectioned by terms most familiar to researchers, this chapter is also written for nonresearchers. Thus, technical jargon is avoided and concepts are simplified. Within these content areas, issues such as the definition, operationalization, and measurement of child sexual abuse are discussed.

Chapters 5, 6, and 7 explicate the scope of the problem of child sexual abuse. The purpose of Chapter 5 is to review both incidence studies on reported abuse and random prevalence studies that ascertain the problem of sexual abuse in the general population. Because methodology may critically impact the prevalence of abuse reported in these studies, a brief analysis of the effect of different methodologies on the stated prevalence is presented. Afterwards, incidence and prevalence studies are compared, thus providing some context for determining how well our society identifies actual cases of abuse. The final section of this chapter explicates the scope of the problem of child sexual abuse and delineates policy implications.

Continuing with the explication of the scope of the problem of child sexual abuse, Chapter 6 addresses extrafamilial abuse. Although extrafamilial abuse is the most prevalent type of abuse, its literature base is almost nonexistent. To address this paradox, the first section revisits historical reasons that extrafamilial abuse is minimized. The next section reviews the prevalence of extrafamilial abuse by type of perpetrator, comparing it to reported extrafamilial abuse. The empirical literature is then reviewed for each type of victim/perpetrator relationship. Although this literature is sparse, it is augmented by the author's recent case-by-case analysis of all extrafamilial abuse cases within Russell's (1983) community prevalence study. This literature review, by explicating how vast and unmanageable child sexual abuse is, illustrates the extent of the problem.

Chapter 7 addresses intrafamilial abuse. The first portion of this chapter discusses theories specific to incest. The format for the remainder of the chapter is similar to that of the preceding chapter except that the review of the literature is not inclusive. The reason is simple: the minimal literature on extrafamilial abuse represents new knowledge, whereas the voluminous literature on intrafamilial abuse represents old and mostly familiar knowledge. Instead, this chapter focuses on empirical support for dynamics purported by the various theories on intrafamilial abuse. This chapter also discusses the sociohistorical context for prioritizing intrafamilial abuse and how that context shaped our understanding of intrafamilial abuse. It is shown that many of our perceptions of intrafamilial abuse are indeed myth-bound. A final section discusses the important ramifications of our current conceptualization of intrafamilial abuse and its resultant policies.

The next two chapters then turn to a discussion of causality. The overriding question across these two chapters is why child sexual abuse occurs, with Chapter 8 focusing primarily on victims and Chapter 9 focusing on offending behavior. It is inappropriate, however, to discuss causality of child sexual abuse as it relates to victims, because to do so entertains a victim-blaming stance. Instead, the focus must be on how the environment in which children live contributes causally to child sexual abuse. In this perspective, children are at risk because their environment places them at risk. To develop causality, Chapter 8 presents an ecological, transactional, and developmental perspective of child sexual abuse victimization. If, as suggested, child sexual abuse is best explained as a sociocultural phenomenon, then causality is best understood as a function of societal factors, manifesting at the level of the society and community, that are then internalized by families and even the children themselves. As these sociocultural dynamics become internalized by children, they then manifest as vulnerabilities that place children at greater risk to be sexually abused. Understanding how those sociocultural vulnerabilities interact with the familial, developmental, and transactional history of the child is a secondary purpose of this chapter.

Chapter 9 then turns to a discussion of causality as it relates to perpetrators of child sexual abuse. To begin the chapter, the sparse literature on prevalence of abusive behaviors or the likelihood to abuse is presented. Because our literature on perpetrators derives almost exclusively from reported abuse cases, the next section delineates the steps that are required for offenders to become “identified” by the system. With few identified cases of child sexual abuse resulting in convictions, it is also important to compare characteristics of unidentified offenders (i.e., those reported by victims in random prevalence studies) to those of identified offenders. The next portion of the chapter moves to the question of why offenders abuse. The format for this portion of the chapter is similar to that of the previous chapter, with issues of causality being presented within an ecological perspective that emphasizes sociocultural factors. It is suggested that these sociocultural factors operate differently for offenders who are close in age to their victims versus those with greater age disparities. For offenders who are somewhat or much older than their victims, sociocultural values such as the inappropriateness of sex with young children may act as *inhibitors* that must be overcome. For peer offenders, sociocultural values such as entitlement towards sex may instead act as *disinhibitors*. While this chapter emphasizes the sociocultural context, issues such as previous

victimization and social ineptness in the offender are also addressed. Finally, the important implications for primary prevention of child sexual abuse are discussed.

Chapter 10 then moves to a discussion of nonoffending parents. The available literature, however, almost exclusively refers to the nonoffending parent as the mother. This section starts by reviewing this literature within an historical context, analyzing why it has at times been so fiercely pejorative, and discussing how biased and pejorative assumptions have become enacted, formalized, and codified into policies, programs, and statutes. It is concluded that the biases in this literature contribute to expectations of mothers that are unrealistic, untenable, and unreasonable. The negative implications for these unrealistic expectations are also discussed. The final portion of the chapter offers two new models for better framing the reactions of nonoffending guardians to their child's disclosure of abuse. The first model borrows from Hobfoll's (1989, 1991) conservation of resources theory to conceptualize the disclosure of abuse as an extreme stressor for the victim's family. The second model then explicates a humanistic model of guardian support for nonoffending guardians of sexually abused children. This model, grounded in developmental and humanistic principles, conceptualizes the reactions of nonoffending guardians to the disclosure of their child's abuse as hierarchical, with progressively higher stages of guardian support. This chapter concludes with recommendations for changes in current policies that are more sensitive to nonoffending guardians and that are more grounded in the empirical literature.

Chapter 11 discusses the response of professionals to child sexual abuse. The focus of most of this chapter is on the various points of intervention with victims, families, and offenders. For each intervention, factors that influence decisions about that intervention are discussed. This chapter recognizes the efforts and successes of many excellent professionals, while recognizing the biases and failures of the system within which they work. The final section concludes with implications for having a policy-driven, versus an empirically-driven, professional response to child sexual abuse.

The purpose of the final chapter is to synthesize and integrate the important points made in the previous chapters. To do so, this chapter is presented in three parts. The first section compares two conceptualizations of child sexual abuse, one of which derives from the historical and theoretical literature and one that derives from the empirical knowledge base. Next, the basic premise of the book—that society's response to child sexual abuse is bound within its historical conceptualization—is considered by briefly analyzing society's response to child sexual abuse as represented by studies of identified cases. Comparing this response to the previous conceptualizations, it becomes clear that the assumptions grounding society's response to child sexual abuse are most similar to those that derive from the historical conceptualization of child sexual abuse. The next sections then present both short- and long-term recommendations for moving towards a response to child sexual abuse that is grounded within the empirical literature.

CHAPTER 2

HISTORICAL OVERVIEW

INTRODUCTION

Child sexual abuse is a social construction. It is surely a reality—a tragic reality—but the definition and scope of child sexual abuse, and its conceptualization, are socially constructed phenomena. As such, to understand child sexual abuse and society's response to it, the sociocultural context within which it is defined and conceptualized must also be understood. This book is therefore not only concerned with *what* we know about child sexual abuse, but also with *how* we frame what we know about child sexual abuse. While the empirical knowledge base largely frames *what* we know about child sexual abuse, how we conceptualize and make inferences from this knowledge base are impacted critically by the theories that guide our thinking.

The current knowledge base of child sexual abuse is largely atheoretical. In the absence of formal theories of child sexual abuse, however, we continue to frame ideas about the scope and impact of child sexual abuse. Where do these ideas originate? For lack of a better reference, that is, formalized and empirically supported theories of child sexual abuse, ideas may originate from our primary reference point—individuals such as ourselves. Major (1987), in a discussion of how men and women differentially view personal entitlement in issues of justice, states that expectations derive “from similarity biases in the acquisition of social comparison information” (p. 140). In other words, individuals define their expectations based upon the expectations of people like themselves, suggesting that the personal construction of a theoretical orientation is biased towards the sociocultural context of the individual.

With an atheoretical knowledge base, this personal construction of the reality of child sexual abuse is probably inevitable and has been an ongoing problem in the professional literature. In the absence of analyses of specific hypotheses concerning the origins of child sexual abuse, the conceptualization of its origins is left open to interpretation. Because interpretations are necessarily informed (a) by the persons' referents (i.e., individuals most like themselves) (Major, 1987), and (b) the sociocultural environment within which the individuals reside, these theories or hypotheses are often biased and, at best, reflect only a partial truth.

The purpose of this chapter is to discuss how the sociocultural context has informed the conceptualization of child sexual abuse. This chapter briefly reviews the work on child sexual abuse done prior to Freud, Freud's theory of child sexual abuse, its later renunciation, and the impact of Freud's renunciation upon the suppression of the developing knowledge base in child sexual abuse. The 1960s and 1970s enjoyed a resurgence in the awareness of child sexual abuse, with the late 1970s and early 1980s being a pivotal turning point in the knowledge base. The reasons for this resurgence in awareness, within a sociocultural context, are discussed. Moving into the 1990s, the current backlash is also conceptualized within a sociocultural context. The final section looks ahead, suggesting how the current

and future sociocultural context might affect the future professional response to child sexual abuse.

THE PERIOD PRIOR TO FREUD

During the last 100 years, Freud has probably had a greater impact than any other person upon the professional knowledge base of child sexual abuse. While his influence fundamentally framed the profession's conceptualization of child sexual abuse prior to the 1960s, it continues to be felt even today. For this reason, the social context of the environment to which Freud was exposed is important to explore.

Child sexual abuse simply was not acknowledged prior to the late 1800s. While it would be reassuring to believe that child sexual abuse did not exist, it of course did. It simply was not labeled as such. Indeed, child sexual abuse has been documented throughout history, with Biblical references to child sexual abuse (Rush, 1980), and more extensive records of abuse in the Roman and Greek civilizations (Gray-Fow, 1987). Even in colonial America, records suggest that child abuse, including child sexual abuse, was widespread (deMause, 1988). DeMause, in *The History of Childhood* (1974), a classic analysis of childhoods in previous historical eras, states:

The history of childhood is a nightmare from which we have only begun to awaken. The further back in history one goes, the lower the level of child care, and the more likely children are to be killed, abandoned, beaten, terrorized, and sexually abused. (p. 1)

This statement suggests that sexual abuse is certainly not a recent phenomenon—only its recognition.

Until the mid-1800s, then, sexual abuse was generally recognized only by its victims (Summit, 1989). Even then, the extreme belief in the ownership of children quite possibly influenced the victim's perception of whether abuse had occurred. Professionals also largely ignored the possibility that abuse had occurred. When faced with psychological trauma in victims of sexual abuse, professionals were likely to treat the victims pejoratively and to label them hysterical.

At the time, hysterical women were the target of contempt and indignation on the part of the physicians, the best of whom regarded the illness as a matter of simulation (manipulation) or "imagination." In the past, thinking it a particular disorder of the womb, they had treated it by extirpation of the clitoris...for some believed [it] would cure the wandering womb by "putting it in its place." (Brandcraft & Stolorow, 1984, p. 94)

The first important work on child sexual abuse may be that of the Frenchman, Ampoise Tardieu (Cunningham, 1988). In 1862, as a forensic-medical expert, he documented 515 cases of sexual offenses, 420 of which were committed on children under the age of 15. During an 11-year period, he cited more than 11,000 cases of completed or attempted rape, 80% of which involved child victims (Masson, 1984). These cases, to be defined as assault, had to present with legal evidence of rape, including tearing of the hymen (Cunningham, 1988). Much of his work focused on how child sexual assault victims may not present with the requisite physical evidence. To a lesser extent, he acknowledged and wrote of the possible

psychological effects of such sexual assaults and was the first professional to write of sexual abuse as a social problem.

Jean Martin Charcot, described by Masson (1984) as “France’s most illustrious neurologist, defender of hypnosis, and physician of hysteria” (p. 14), was also influential in the views of child sexual abuse during this era. While Charcot did recognize that the sexual offenses occurred, he did not share the same compassionate view of the victims as Tardieu. Charcot’s principal emphasis appeared to be on influencing officials to view offenders as mentally ill instead of “vicious” (Cunningham, 1988, p. 347), and he not only suggested that offenders were often “honest family” men (p. 347), but that up to 80% of accusations against them were false.

Another writer on child sexual abuse, Alfred Binet, suggested that all offenders had experienced a critical incident in childhood (Cunningham, 1988). Although he did not state that this critical incident was a history of child sexual abuse, he did make this connection in case studies. Binet also forwarded the idea that children were suggestible and that this suggestibility was related to situational and individual characteristics. His influence was especially felt in the courts, in which suggestibility came to be associated with pathology, thus offering a “rationale for disbelieving the testimony of children, especially those involved in sex crimes” (p. 349).

Other French authors, including Fournier, Bourdin, and Brouardel, also documented cases of rape. Regrettably, the works of these authors were fraught with misconceptions (Masson, 1984). Fournier was a proponent of the offender, whom he often considered “an excellent and perfectly honorable man” (Fournier, as cited by Masson, 1984, p. 43), and believed that children’s assaults were “imaginary” (p. 44). Brouardel also believed that children lied about the sexual assault and that the genesis of these false accusations was hysteria. Bourdin reinforced the view that not only were victims lying, but that they also took pleasure in their lies because of “evil instincts” and “evil passions” (p. 48).

THE EARLY PERIOD: FREUD’S THEORY OF SEDUCTION

It was into this sociocultural environment that Freud moved. In 1885, while finishing his medical studies, he made a several-month study trip to Paris where he worked under Charcot (Masson, 1984), whom he admired. Masson, an expert on Freud, shows that during Freud’s stay in Paris, he was not only exposed through Charcot’s and Tardieu’s writings to the reality and frequency of child sexual abuse, but also probably witnessed autopsies on some of its young victims. Freud also had in his possession the major French books on sexual violence against children and was familiar with the writings of Fournier, Bourdin, and Brouardel.

From Paris, Freud returned to Vienna, where he established his medical practice specializing in nervous disorders (Masson, 1984). Here he introduced a type of therapy that relied on the patient talking while the physician listened. This free association method of treatment allowed his patients to explore hidden emotions in an atmosphere free of judgment and censure (Rush, 1996) and opened for him a view into underlying issues of psychopathology. The most important turning point in Freud’s career was when he began to understand the force called the unconscious,

and he explored this realm not only in his patients, but also through his own self-analysis. This discovery set the stage for his work on child sexual abuse.

By 1896, Freud had formalized his theory on the etiology of hysteria, which he presented to his colleagues in a group of three papers entitled, "The Aetiology of Hysteria" (Rush, 1996). In these papers he presented a sample of 18 patients, labeled hysterical, who he concluded had been victims of childhood sexual assault by various caregivers (Joyce, 1995). In these three papers he further suggested that the abuse itself was responsible for the victims' significant psychopathology (neuroses). These papers, however, offered contradictory information concerning the identify of the perpetrators. He variously implicated teachers and female caretakers (but not mothers), and same-age, opposite-sex children such as brothers (Rush, 1996). Only later, in his private letters to Wilhelm Fliess, his good friend, did he suggest that fathers were most often the offenders.

Rejection of the Theory of Seduction

Freud's colleagues, including Charcot, who "found it preposterous that parents would molest their own children" (Joyce, 1995, p. 200), frankly rejected his theory, a rejection that continued as long as Freud embraced his seduction theory (Masson, 1984). As Masson states, "In accepting the reality of seduction, in believing his patients, Freud was at odds with the entire climate of German medical thinking" (p. 137). It is perhaps not surprising then, that by 1897 Freud had repudiated his own observations. In his now famous letter, he announced to Fliess, "I no longer believe in my *neurotica*" (Freud, as cited in Masson, 1985, p. 264). Freud now believed that most, but not all, of the assaults he reported had never occurred (Masson, 1984). He instead suggested that the young child, needing to release sexual tensions, wished for the sexual attention from her father. He believed that these tensions were universal and unfolded in developmental stages.

Having replaced his theory having a universal external etiology with a theory having a universal internal etiology (Masson, 1984), Freud then advanced his theory of the Oedipus complex, which became a "universal and intrapsychic rather than environmental hazard for emotional health" (Summit, 1989, pg. 414). According to the Oedipus complex, the female child initially takes her mother as her love object. When the child sees the male genitalia, however, she immediately recognizes it as superior and consequently falls victim to penis envy. Her father now becomes her new love object (Hall, 1954). It is during this stage, Freud hypothesized, that girls create incestuous fantasies of themselves with their fathers. Freud therefore came to believe that reported cases of incest were simply wishful fantasies for the love object. As Hare-Mustin (1987) states, "patients are made ill by their fantasies, not by what happens to them" (p. 19).

Rationale for Freud's Reversal

What could have caused Freud's complete reversal of thought in such a short time? As the impact of Freud's reversal has become recognized, different authors have

forwarded rationales. This literature, however, often reflects the ideological background of the writer, with psychoanalytically trained professionals sometimes being more muted in their opinions and feminist writers being more provocative. Nonetheless, at least five rationales for his reversal have been forwarded.

The Effect of Professional Censure

When Freud first forwarded his seduction theory, he was young in his career, and the opinion of his colleagues probably mattered greatly (Masson, 1984). His theory of seduction was considered unpopular at the least and, more likely, outrageous. Perhaps an analogy of the pressure Freud might have felt to rescind his theory can be deduced from the current environment. Even today, in an age far more enlightened than the one in which Freud lived, the backlash against a full knowledge of child sexual abuse is great. Professionals have been attacked, sometimes with serious repercussions. These attacks have occurred even though the scope of child sexual abuse is undeniable. Freud, however, was one of the few professionals of his era suggesting that “hysteria” was a result of actual incidents of sexual abuse. Because Freud’s young professional reputation appeared to be at stake (Masson, 1984), he may have felt extreme pressure to rescind his theory.

Freud’s Unresolved Issues

Another rationale for Freud’s renunciation of his seduction theory was forwarded by Westerlund (1986). After analyzing Freud’s letters and other historical writings, she suggested that Freud, after recognizing the existence of certain hysterical features in his brother and several sisters, was on the verge of discovering that his father might have sexually abused one or more of them. In the same letter to Fliess in which he recanted his theory, Freud stated, “In all cases, the *father*, not excluding my own, had to be accused of being perverse” (Freud, as cited in Masson, 1985, p. 264).

How can this statement be interpreted? Westerlund (1986) interprets it to mean that Freud’s father may have been guilty of incest. The context within which this letter was written, however, must be considered. Freud had recently presented a theory in which most or all hysteria was reported to result from a childhood history of sexual abuse. It is especially obvious today that current symptomatology is not *always* the result of child sexual abuse. Perhaps because he had developed a theory of hysteria based only upon a history of child sexual abuse, Freud found himself in the awkward position of having to defend the position that *all* individuals with hysterical features were previously sexually abused. As Armstrong (1996) puts it, “Incest was the (sole) cause of female neurosis, thus female ‘neurotics’ must have experienced incest” (p. 302). Unable to reconcile this apparent conflict, Freud may instead have had impetus to abandon his theory (Rosenfeld, 1987).

It was also during this time that Freud experienced overly affectionate feelings towards his daughter and reported a dream to Fliess in which these feelings occurred (Westerlund, 1986). While Westerlund states that these were incestuous feelings, Freud suggested that as they were in a dream, they were symbolic of his need to suggest that the

father was responsible for neurosis. There is some question whether Freud's "shocking" behavior towards his niece was also perhaps erotic in nature (p, 302). Westerlund cites Jones, Freud's biographer, as stating that it is likely that the cruel behavior with which Freud and his nephew treated his niece had some likely erotic component.

These three experiences, while equivocal, lend weight to Westerlund's (1986) argument that by endorsing a theory in which hysterical symptoms resulted from sexual abuse experiences, Freud may have come dangerously close to acknowledging a side of himself and his father with which he was most uncomfortable. Freud may have had significant personal issues with his original theory because of his own father's possible perpetration, his brother's and sisters' neurotic symptomatology, or his own possible erotic feelings. Westerlund hypothesizes that only by creating the Oedipus complex was Freud able to resolve the very personal nature of his original seduction theory.

Universality of Abuse

Another factor that may have contributed to Freud's renunciation of the seduction theory becomes apparent in one of his letters to Fliess, in which Freud struggles to accept that fathers—and not just a few—could commit acts of incest. As he stated, "The astonishing thing [was] that in every case blame was laid on perverse acts by the father...though it was hardly credible that perverted acts against children were so general" (Freud, as cited in Taubman, 1984, p. 35). As will be discussed later, Olafson, Corwin, and Summit (1993) suggest that the knowledge of the scope of the problem of child sexual abuse is so overwhelming that it is human nature, and the nature of society as a whole, to deny its existence or prevalence.

Theory of Periodicity

One of the more entertaining, although probably no less factual, rationales for Freud's renunciation pertains to a series of events involving Freud, one of his good friends, and one of his patients. While the following is not so much a rationale for rejecting his theory of seduction, it does give an interesting view of the process by which this reversal may have occurred. The following is a brief summary from Masson's (1984) book on Freud's renunciation of the seduction theory.

In the early years of his professional life, Freud worked with a patient, Emma Eckstein, who had been sexually abused as a child by her father (Masson, 1984). This trauma, Freud argued, was responsible for her hysteria. At the time, Freud was good friends with Wilhelm Fliess, a physician who was advancing a theory, perhaps not unusual for its time, that the nose was the center of sexual feelings and that an operation on the nose could correct sexual dysfunction, especially the desire to masturbate. Evidently, Ms. Eckstein may have had this desire, although it is not certain. Regardless, Fliess wanted to operate, and Freud consented.

Fliess had never performed this operation before and apparently made serious mistakes (Masson, 1984). After Ms. Eckstein had a severe and life-threatening hemorrhage, another physician reoperated on her nose and found that Fliess had

inadvertently left a piece of gauze in her nose, causing the subsequent infection and hemorrhage. In Freud's first letter to Fliess after this second operation, Freud was obviously concerned about the error, but already appeared to be rationalizing it. In this letter, Freud said that Fliess had done the best he could and that it was an unfortunate accident. Although Freud expressed concern for his patient, he was "inconsolable" about Fliess' part in the affair (p. 69).

This incident markedly strained the relationship of the two men (Masson, 1984). Freud seemed to need to reconcile this experience so that the operation, and his approval of it, could be justified. The more letters that were written between the two, the softer the recriminations became.

Finally the men, relying on another of Fliess' theories—the theory of periodicity—began to alter the reality of the operation (Masson, 1984). This theory states that the numbers 28 (the female period) and 23 (the male period) are critical numbers and that all events in a person's life are determined by these numbers. Within 15 months of the operation, Freud and Fliess had begun to dismiss Fliess' culpability for the operation. Instead, they now believed that Ms. Eckstein would have bled anyway, as the operation fell on a critical date.

Nine months later, Freud dismissed the event further by stating that the bleeding was a result of Ms. Eckstein's "wish to have Freud by her side" (Masson, 1984, p. 102) and "her own perverse imagination" (p. 106). As Freud stated in his letter to Fliess, "As far as the blood is concerned, you are completely without blame!" (as cited in Masson, 1984, p. 105).

Freud now had reason to state that hysteria was not caused by real events, but by fantasized events. Perhaps it was a small step, then, to state not only that Ms. Eckstein's abuse was an incestuous fantasy, but that all female children have incestuous fantasies. As Masson (1984) states:

From 1894 through 1897, no subjects so preoccupied Freud as the reality of seduction and the fate of Emma Eckstein. The two topics seemed bound together. It is, in my opinion, no coincidence that once Freud had determined that Emma Eckstein's hemorrhages were hysterical, the result of sexual fantasies, he was free to abandon the seduction hypothesis. (p. 107)

Psychoanalytic Perspective

All viewpoints discussed to this point are antagonistic to Freud's renunciation. Other viewpoints in the professional literature, mostly by psychoanalysts, are more sympathetic to Freud's renunciation. These viewpoints provide a balance to the literature presented thus far.

Both Powell and Boer (1994) and Tabin (1993), among others (see Rosenfeld, 1987, for example), take issue with the previous viewpoints, suggesting instead that Freud had important reasons for abandoning his seduction theory. Tabin first points out that only two of the 18 cases upon which the original seduction theory was based could be corroborated. The patients' disclosures themselves were often not willingly forthcoming, and Powell and Boer even suggest that the abuse memories were confabulations brought on by Freud's use of strongly suggestible statements. As

Tabin states, “His patients were not pleading from the couch that he accept their accounts of abuse in childhood. Furthermore, none of his cases showed any benefit from his interpretation that he could not otherwise explain in conventional terms. Indeed, these patients all fled from treatment” (p. 292). As reported in a letter to Fliess in 1897, Freud returned from vacation only to discover that he had no patients, after which he felt resigned to surrender “his dream that his theory would win him eternal fame” (p. 292).

The second major point of Tabin (1993) is that Freud continued throughout his lifetime to be aware not only of the childhood histories of sexual abuse in certain of his patients, but also its consequences. Thus, while he continued to attach greatest meaning to intrapsychic phenomena, he did not ignore the actual events.

Summary

Different authors have presented rationales for Freud’s renunciation of his theory of seduction. One very possible rationale is that Freud advanced this theory in an era that was not amenable to its acceptance. Because of the response of his colleagues and the newness of his practice, he may have felt great pressure to rescind the theory. To accept the theory may also have meant his acceptance of his own father’s “perverted” acts (Freud, as cited in Taubman, 1984, p. 35) and that he would have to look closer at his own possible sexual feelings towards his daughter and niece. Finally, to admit that so many of his hysterical patients were also victims of child sexual abuse would force him to accept a far greater prevalence of child sexual abuse than was comfortable.

The actual rationales for Freud’s renunciation must be left for historians to decide. Awesome societal forces framed the environment in which Freud repudiated his theory. Given the sociocultural environment in which Freud lived, the far easier path was to renounce his theory of seduction and to embrace a theory that his colleagues and society could tolerate.

It is interesting to speculate how the professional response to child sexual abuse in the following decades might have differed had Freud strongly held to his original position. Perhaps the best way to frame what might have been is as a paradigm shift. Kuhn (1970) conceptualizes paradigm shifts as scientific revolutions initiated by the introduction of a theory that does not just rework what is already known, but requires a complete reconstruction and re-evaluation of prior knowledge. Because new paradigms confront the established paradigm, however, they are not readily accepted into the developing knowledge base. Indeed, many scientists who have introduced these paradigm shifts have been censured, and future generations have been left to resurrect their work.

Surely, with Freud’s developing reputation, had he held to his theory of seduction, he might have initiated a scientific revolution of sorts in the understanding and conceptualization of child sexual abuse. Because of the societal forces already in place, however, even had Freud defended his theory of seduction, it might have been rejected by his colleagues for some time to come. Yet Freud did not choose this path, but instead bowed to pressure. By renouncing the seduction theory, he rationalized

the perverted acts away, and they disappeared into thin air as the overactive imagination of a young child whose incestuous wish is played out through an incestuous fantasy.

The Effect of Freud's Renunciation

The renunciation of Freud's seduction theory and later, the forwarding of the Oedipus complex, profoundly affected the mental health profession. Psychoanalytic theory became the foundation for psychiatry for many years to come, with the Oedipus complex being the core of that theory. To use psychoanalytic theory, however, Freud's original theory of seduction had to be renounced. As Anna Freud wrote, "Keeping the seduction theory would mean to abandon the Oedipus complex, and with it the whole importance of phantasy life, conscious or unconscious phantasy. In fact, I think there would have been no psychoanalysis afterwards" (as cited in Masson, 1984, p. 113). The development of the knowledge base on child sexual abuse was thus effectively suppressed.

To accept psychoanalytic theory, however, was to negate the client's reality and to place the clinician in the role of expert. These experts, then, were thought to know more than the clients themselves about their clients' reality. Patients who disagreed with their clinicians' interpretations that their sexual abuse was simply a fantasy were said to be experiencing resistance (Lerman, 1988). Even when clinicians acknowledged the sexual abuse, victims were often blamed for seducing their fathers so that they might fulfill their incestuous fantasies (Rush, 1996).

This emphasis on intrapsychic versus extrapsychic phenomena in the etiology of the victim's psychopathology (Westerlund, 1986) also influenced the continued blaming of victims, effectively silencing them. As Rush (1996) states:

Any attempt on the part of the child or her family to expose the violator also exposes her own alleged innate sexual motives and shames her more than the offender; concealment is the only recourse. The dilemma of the sexual abuse of children has provided a system of foolproof emotional blackmail: if the victim incriminates the abuser, she incriminates herself: (p. 275)

Finally, by blaming the victim, the social environment could then be held blameless. Westerlund (1986) states:

When Freud relegated women's reports of sexual abuse by their fathers to fantasy, he...claimed a biological determinant rather than a sociocultural determinant for female neurosis. The incestuous wish for the father was to be seen as inherent in the daughter's nature, the result of her physical deiciency and intrinsic biological inferiority. Seduction fantasies were inevitable, they were representations of the innate female need to compensate themselves for their lack of a penis.... Freud was seduced into and seduced others into protecting the sexual of fender and thus betrayed the sexual victim. (pp. 307-308)

Freud advanced his original seduction theory after discovering that many of his "hysterical" female clients were reporting histories of incestuous abuse. He was then confronted with the knowledge that many fathers, possibly even his own, sexually abused their daughters. Given the opportunity to publicly identify this behavior in

some fathers, he reneged, choosing instead to define "normal" behavior as girls having precocious sexual wishes that had to be fulfilled through vivid fantasy lives. He thus effectively colluded with a society that wished to deny the existence of child sexual abuse, while modeling a pattern of removing blame from the offender and placing it on the victim.

"With Freud's retraction of the seduction theory, he left behind at once the simple explanation for the trauma, his endorsement of the intrinsic strengths of the post-traumatic patient, and his intrepid strategies for undoing the traumatic effects" (Summit, 1989, p. 423). Possibly in no other clinical population has one person had such a significant and detrimental effect on the outcome of so many. With his reversal of the seduction theory, he colluded with a society not willing to know the truth.

THE MIDDLE PERIOD: 1900 THROUGH 1970

Most of Freud's many followers continued to embrace the Oedipus complex and its rationale for reports of child sexual abuse. Of note, however, two of the most distinguished of his followers, Carl Jung and Otto Rank, either broke with Freud or denounced his seduction theory. Interestingly, both men, as children, had probably been sexually abused (Goldwert, 1986). Goldwert suggests that their sexual abuse may have been one reason they came to resist Freud's emphasis on sexuality and the Oedipus complex.

Then in 1932, Sandor Ferenczi, one of Freud's most cherished colleagues, presented a paper even over the objections of Freud (Olafson et al., 1993) that suggested that children were being sexually abused (Summit, 1989). In his "Confusion of Tongues Between Adults and the Child," Ferenczi addressed not only the sexual abuse, but also the denial of this abuse by the adult world. Shortly thereafter, Freud and the professional community denounced Ferenczi for attempting to revive interest in the importance of childhood sexual assault (Summit, 1989) and after Ferenczi's death, with Freud's agreement, the publication was suppressed (Olafson et al., 1993). Although he may have been an early proponent of child sexual abuse victims, Ferenczi also had his own significant problems. Tabin (1993) suggests that these problems included "sexual play with his own medical patients" (p. 294) and "exchang[ing] kisses with his patients as a part of their treatment" (p. 295), although these incidents may have occurred earlier in his career. The confusing information again suggests that the exact historical events are unclear and are open to the interpretation of the presenter. Although Masson (1984) convincingly argues that Ferenczi was attempting to revive interest in child sexual abuse, even over the objections of Freud and other psychoanalysts, other viewpoints do exist.

For the next 30 years, hardly a word in the psychiatric community was said about sexual abuse. Typical of the few writings of this period were two studies by Bender, who recognized that the incest had occurred, but placed the blame for the abuse on the seductive nature of the daughter (Bender & Blau, 1937; Bender & Grugett, 1952). For example, in 1937, Bender and Blau wrote that they frequently considered "the possibility that the child might have been the actual seducer rather than the one innocently seduced" (p. 514). Even 15 years later, Bender and Grugett

(1952) concluded that "it was highly probable that the child had used his charm in the role of the seducer" (p. 826).

The next major event occurred in the 1950s when Kinsey, Pomeroy, Martin, and Gebhard (1953) published a survey reporting that 24% of the 4,441 female participants were, as children, sexually abused by adult men. Even though the large majority of these victims reported being frightened by this experience, Kinsey et al. stated instead, in a famous quote, "It is difficult to understand why a child, except for its cultural conditioning, should be disturbed at having its genitalia touched, or disturbed at seeing the genitalia of other persons, or disturbed at even more specific sexual contacts" (as cited in Olafson et al., 1993, p. 15). They suggested instead that the children were disturbed more by the reactions of the adults who discovered the contact than by the contact itself. Kinsey et al. were concerned, however, about the offenders who were often imprisoned for "accidental exposure of the genitalia while intoxicated, for nude swimming, and for the bestowal of 'grandfatherly affection'" (p. 15).

Between 1940 and 1965, three other nonrandom surveys reported that between 17% and 28% of respondents were sexually abused as children (Gagnon, 1965; Landis, 1940, 1956). Even after these surveys were published, however, the scope of the problem of child sexual abuse, although more clearly defined, was largely ignored by both the professional and lay communities (Herman, 1981). This era was thus largely marked by the suppression and distortion of information concerning the scope of child sexual abuse.

1970s AND 1980s

While no clear line divides this earlier era of suppression and distortion from the modern era in which the scope of child sexual abuse was acknowledged, it probably occurred sometime in the 1970s. During this period, several key events occurred. The C. Henry Kempe National Center for the Prevention and Treatment of Child Abuse and Neglect opened, the National Center on Child Abuse and Neglect (NCCAN) was established, and NCCAN funded the first comprehensive study on the incidence of child abuse and neglect (NIS-1) (Kinnear, 1995). Then in 1978, Russell (1983) conducted the first random community prevalence survey, consisting of a sample of 930 adult women in the San Francisco area and found that 38% of the respondents had experienced childhood contact sexual abuse. Because of the methodological rigor of her study (Bolen & Scannapieco, 1999), it was difficult to discount, even though it did generate considerable controversy. By the early 1980s, studies of child sexual abuse were beginning to proliferate, and the knowledge base began to develop rapidly.

What could account for this sudden interest in child sexual abuse? First may have been the impact of the Vietnam War and the political and social environment of the late 1960s and 1970s. This was a period of profound social consciousness-raising as society "grappled with the moral dilemmas posed by the Vietnam War" and all it represented (Vander Mey & Neff, 1986, p. 13). No longer was the status quo taken for granted, but it was often the impetus for controversy and rebellion. Social consciousness-raising and revolution in thought were rampant. Within this sociocultural

context, it was probably far more difficult to suppress the “discovery” of child sexual abuse.

Another important factor was the developing feminist movement, which brought with it a heightened sensitivity to issues of females. Florence Rush’s book, *The Best Kept Secret*, was published in 1980, followed in 1981 by Judith Herman’s classic study on father-daughter incest. These and other feminist writings suggested that child sexual abuse was symptomatic and a direct derivative of living in a patriarchal society. Sexual abuse was conceptualized as a symptom of a greater problem—a male sense of entitlement to use females and children for sexual enjoyment (Herman, 1981). Sexual abuse of children and rape of females were thus conceptualized similarly. Consequently, while others were attempting to understand why child sexual abuse was so prevalent, feminists were instead attempting to understand why more children were not sexually abused. As Herman (1990) stated in a later feminist analysis of sexual assault,

If, as many feminists argue, the social definition of sexuality involves the erotization of male dominance and female submission, then the use of coercive means to achieve sexual conquest may represent a crude exaggeration of prevailing norms, but not a departure from them....The unanswered question posed by feminists is not why some men rape, but why most men do not. (pp. 177-178)

By the end of the 1980s, the scope of the problem of child sexual abuse was more clearly defined. Several random community surveys (Russell, 1983; Wyatt, 1985) and even a national prevalence survey (Timmick, 1985) had now been conducted. While prevalence rates for child sexual abuse differed based upon the studies’ methodologies, one fact was certain: Child sexual abuse, both for male and female children, was a substantial problem.

This knowledge brought with it a significant professional response, and numerous treatment centers were established for child and adult victims. Clinicians became sensitive to preventing what they termed “system-induced trauma” to victims (Conte, 1991, p. 12). Child sexual abuse also came to be viewed as a multidisciplinary problem. Treatment, evaluation, and assessment protocol were developed, and the response to child sexual abuse across all mental health professions burgeoned. While professionals were now trying to respond to the scope of the problem of child sexual abuse, however, empirical knowledge lagged. Studies in the 1980s were largely descriptive, answering broad questions about *who* and *how bad*. They were not yet sophisticated enough to answer questions about better treatment or assessment protocol. This lack of an empirical base for clinical protocols thus set the stage for the 1990s.

1990s

The climate of the 1990s can be framed by a single word—backlash. This backlash started as a series of controversies over the developing knowledge base, with two areas receiving particular attention. The first issue was whether females were being underidentified as offenders. The second issue was whether mothers involved in

custody or divorce disputes were falsely and maliciously charging their ex-partners with sexually abusing their child. Shortly, however, controversies began erupting concerning the techniques used by clinicians. In probably the first major attack, clinicians were accused of leading young children to make false charges of ritual abuse. In the 1990s these attacks on clinicians gained in momentum and became more generalized so that clinicians working with both children and adults were now involved. Clinicians working with children were accused of using aggressive, suggestive, and leading techniques that placed the veracity of the child's disclosure into jeopardy. Clinicians working with adult clients were accused of leading their clients to falsely disclose histories of childhood sexual abuse. Regretfully, many of these attacks were hostile and even vicious.

While much has been written concerning this backlash, it is beyond the scope of this book to review this substantial literature. More salient to this book is the need to frame the backlash within the ideology of the 1980s and 1990s and to understand why the environment of the 1990s was ripe for a backlash.

The first reason that the climate was ripe for a backlash is the state of empirical research in the 1980s. In relation to the needs of clinicians and others directly involved in the assessment and identification of victims, the empirical knowledge base for child sexual abuse was clearly inadequate. The development of a knowledge base is complex, with the beginning phase marked by descriptive and exploratory research. Only then does research move to answering questions framed in a more sophisticated manner. Research in child sexual abuse is so new that there simply has not been enough time to develop an empirical base with sufficient breadth and depth. This problem has been inevitable given the short history of the empirical base.

Because of the seriousness of the issue of child sexual abuse, however, clinicians were forced to make clinical judgments beyond the limits of the empirical research base available. Inevitably, these judgments were questioned. One reason for the backlash, therefore, is to ask the important question: What is the basis for clinical judgments? Regretfully, however, this discussion has often been pointed and personal.

A second reason for the backlash was explored by Olafson, Corwin, and Summit (1993). It is their thesis that a cycle of discovery and suppression of child sexual abuse over time exists. In their view, the knowledge of child sexual abuse is so overwhelming that it must be denied. They state:

If we were really to take into account the role sexual coercion and violence play in shaping human culture and personal identity, fundamental structures of thought could well be shaken and changed. Such great shifts in world view unsettle even those whose privileges and self-images are not directly threatened by them (Kuhn, 1970). Indeed, information about the prevalence and impact of sexual abuse may constitute unwelcome news on all shades of the political spectrumThe full realization that child sexual victimization is as common and as noxious as current research suggests would necessitate costly efforts to protect children from sexual assault.

It remains to be seen whether the current backlash will succeed in resuppressing awareness of sexual abuse....If this occurs, it will not happen because child sexual abuse is peripheral to major social interests, but because it is so central that as a society we choose to reject our knowledge of it rather than make the changes in our thinking, our institutions, and our daily lives that sustained awareness of child sexual victimization demands.(p.19)

A final reason for this backlash is similar, but framed within a feminist perspective. As Olafson et al. (1993) state, “It can be argued that the intensity of the current debate is fueled by the defense of gender and professional privilege and hierarchy” (p. 17). This quote speaks to one of the foremost statistics of child sexual abuse—that approximately 95% of offenders are male (Finkelhor, Hotaling, Lewis, & Smith, 1990; Russell, 1983; Wyatt, 1985), whereas approximately 70% of victims are female (Finkelhor & Baron, 1986). Further, with 30% to 40% of all girls being sexually abused prior to their 18th birthday (Bolen & Scannapieco, 1999), “common sense would suggest that some comparable percentage of the male population has been doing the victimizing” (Herman, 1990, p. 178). While Herman’s statement may be somewhat of an exaggeration, as most offenders abuse multiple children (Abel et al., 1987, 1988a; Ballard et al., 1990), it is probable that a significant minority of men within society have committed, or are at risk to commit, sexual abuse (Bagley, Wood, & Young, 1994; Briere & Runtz, 1989).

To internalize this knowledge is paramount to a social revolution. One of the hallmarks of patriarchy is that it is founded upon the premise of the benevolent male taking care of the less-positioned female. History, however, suggests that the image of the benevolent patriarch is a myth. Instead, the prevalence of child sexual abuse suggests that the more likely reality may be one of male entitlement, male domination, and male subjugation of females and children. To truly understand the scope of child sexual abuse thus brings with it a responsibility to advocate, not only for the safety of children, but for the reform of basic tenets that undergird modern society and that may foster child sexual abuse—something the privileged majority do not willingly seek, as their power base would be disrupted. Instead, it becomes critical that the scope of the problem of child sexual abuse be suppressed.

In this context, the current backlash is about a far greater controversy than simply whether children and adults create or are implanted with false memories, whether leading questions influence victims, whether dissociative disorders can be induced, and all the other issues that have come to the fore in recent years. These controversies are better framed as screen issues for a far greater and underlying issue—that of the basic structure and privilege of members within society.

LOOKING FORWARD

Where will we be in 10 years? This is a difficult question for even those with crystal balls. What can be considered, however, is social forces that may shape the future agenda for child sexual abuse research, treatment, and policy decisions.

Perhaps the most important issue is the current environment of conservatism. This environment, and its concomitant political agenda, have already radically affected issues of children. While great gains for children’s rights were made between 1960 and 1990, the country is experiencing a current reversal of these rights. As legitimized in the current welfare “reform” act, the federal government no longer views children as having innate rights to be fed, sheltered, and clothed. Guardians and more specifically, single mothers, are punished as well. Some of the most marginalized members of society are thus in grave danger of being completely without resources.

This environment of conservatism bodes poorly for the rights of children not to be sexually abused. If, as feminists contend, child sexual abuse is related to the abuse of power, then depowering the powerless and empowering the powerful may serve to tip the scales in favor of greater access to the sexual violation of children. When children are abused, the current conservative environment may also make it more difficult for the victims to be heard and especially, to be believed.

There is also grave concern that punishing the guardians of these children will increase the children's risk of abuse. Single mothers on welfare are now required to return to work, although the so-called welfare reform laws often exclude the resources these women need to find employment sufficient to afford safe child care. Although findings remain inconsistent, some community prevalence surveys suggest that children are at greater risk of abuse when their mothers work than when they do not, and this relationship is especially apparent for children living only with females (Bolen, 1998b). It may be that these findings reflect an issue of supervision as children lose the protective influence of their mothers and sometimes, safe alternative caretakers. *If* inadequate supervision is the issue, then the recent passage of the child welfare reform bill, which forces single mothers back into the work force without providing adequate funding for safe child care, may have ominous implications for the risk of their children to be sexually abused.

The current environment of political conservatism and the "reform" laws may thus have dire consequences for the protection of children. While the intended effects of these supposed reforms are chilling, the unintended effects may be even greater. In a climate that strengthens the disparity of power between adults and children, males and females, and whites and persons of color, the obvious losers are the less powerful. Whether this environment will contribute to an increased rate of sexual abuse of children remains to be seen. The possibility, however, cannot be discounted.