

INSTITUTIONAL CHILD SEXUAL ABUSE: IMPACTS AND RESPONSES

Many countries are now dealing with cases of large-scale institutional child sexual abuse. The institutional aspects of child sexual abuse include: inadequate procedures to protect children; values that place the reputations of organisations above bringing child sex offenders to justice; marginalization of victims and whistleblowers; failure to involve police authorities to investigate criminality; and people in authority misusing their power to target vulnerable children through paedophile networks and organized crime syndicates. The hidden and insidious nature of institutional child sexual abuse makes it impossible to estimate its true extent.

The profound impact of child sexual abuse on victims and survivors is often underestimated and misunderstood by professionals, and by society in general. The media may reject or vilify survivors who seem inconsistent or unreliable. Only a small proportion of survivors report their childhood abuse, many have significant mental or physical health problems, and some may take their own lives. It is essential to educate professionals and the wider society about these complex issues in order to promote better understanding and acceptance.

Children subjected to severe and ongoing abuse cope by developing various psychological strategies, known as accommodation to abuse. The child may feel that something is very wrong but the abuser suppress their natural response by telling them it is normal. Most perpetrators have a close relationship with the victim, as a family member on whom the child depends, or a trusted adult in a position of authority and power. One function of accommodation is to protect the secret of the abuse. It is commonly induced by such threats as rejecting or sending the child away, abusing another child in their stead, killing a pet, or even killing the victim. Most crippling is the assertion that no-one will believe them, an assertion that only too often turns out to be correct. Abusers may also deliberately induce guilt in the child about instigating the sexual acts. In organised abuse the child is trained to bring in other victims. Once the victim believes that they must accept the abuse and can never tell, the abuser is protected.

Child victims often dissociate during abuse. This protects the victim from the trauma of the experience, altering the state of consciousness so that extreme, fearful physical sensations and emotions are numbed or frozen. With repeated trauma the abusive experiences become separated from other parts of the child's life and eventually, they become inaccessible to the child's recall. Over a long period, this may lead to the development of multiple personality, or dissociative identity disorder, in which the traumatic experience becomes encapsulated in a separate compartment from the rest of the personality. The person can somehow carry on with life, as they have effectively become unaware of the abusive experiences. This can continue undetected into adulthood, because the person appears to behave in a normal way.

These dynamics create immense obstacles in accessing the justice system. The way investigations are carried out is determined by evidential standards for proving abuse. Survivors with mental health problems are particularly likely to be accused of non-cooperation, unreliability, fabrication or malicious allegations. Since sexual abuse is by nature a secret and private crime, there are unlikely to be witnesses, and with historical abuse it is hard to obtain independent corroboration, or forensic evidence.

Police interviews are deemed to be most valuable where the survivor gives a spontaneous account of the experience without questioning or prompting. However, victims of long-term abuse simply cannot give a straightforward account of experiences that have become meshed together into one long nightmare. The process of remembering may induce dissociative flashbacks, producing secondary trauma. The U.K. Government has set up an independent public inquiry into child sexual abuse led by Hon. Lowell

Goddard. However, some survivors and their supporters do not have confidence in the public inquiry and have therefore established a separate United Kingdom Child Sex Abuse People's Tribunal (UKCSAPT). This is an independent body of experts that is examining cases of institutional child sex abuse by providing a forum where survivors, supporters, and witnesses can speak freely. The objectives are: to raise potential avenues of inquiry related to the context, nature, and depth of institutional child sex abuse; to provide a safe space free from interference and scrutiny; to independently establish how institutional policies and judicial systems have failed survivors and failed to protect the best interests of the child; and to independently determine and discuss constructive remedies which could best address the allegations and issues brought forth.

The UKCSAPT panel received 24 written submissions; 18 from survivors, 4 from professionals, one from a journalist/whistleblower and one from the administrator of a charity. Four witnesses also gave verbal testimony. In this very small sample, the tribunal panel has nevertheless recognised patterns found in larger research studies, including how children become vulnerable, how abusers gain access to them, and impediments in accessing the criminal justice system.

The UKCSAPT tribunal panel proposes that institutional child sexual abuse should be approached through the lens of social rather than criminal harm. Although the panel would welcome changes in the criminal justice system to assist survivors, in reality the UK adversarial system rarely achieves justice for them.

A social harm approach to child sexual abuse begins with a focus on the social origin of these heinous harms. Whilst human agency (that is, the actions of individuals) is acknowledged as important, more important still is a focus upon the wider social structures that create and sustain child sexual abuse. This perspective on the social aspects, or the socially determining contexts of child sexual abuse, would prioritise societal education, and interdisciplinary training for professionals working with vulnerable children and adult survivors across all service sectors.

UKCSAPT recommends the establishment of a non-governmental commission for survivors, who would be able to develop a bond of trust with an advocate who would be assisted in the steps necessary to access justice. Specialist mental health services, linked with the police would be created to facilitate the process of disclosure. In cases of organized and ritual abuse an external agency, possibly a national crime agency, should provide independent scrutiny of local police services. It is only when such progressive measures are implemented that we can say that children will be safer and that survivors will be heard.

The author

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