

Sibling Sexual Abuse: *Towards Hope & Healing*

National Symposium on Sexual Behavior of
February 25 – 27, 2025/Norman, Oklahoma

Jacqueline Page, Psy.D.
University of Tennessee Health Science Center-Psychiatry
jpage@uthsc.edu 901.378.2648 (cell)

1

What We'll Talk About

- | | |
|---|---|
| <ul style="list-style-type: none"> • Approximating Best Practice • Informed (Evidence, Culturally, Trauma) • Impact of <ul style="list-style-type: none"> • Abuse • Our Response • Our Language • Defining Sibling & Sibling Sexual Abuse • Prevalence | <ul style="list-style-type: none"> • Some Research Highlights • Proactive Response • Collaboration • Question & Realities of Separation • Reunification • What's Happening • Wrap Up |
|---|---|

2

Throughout Keep In Mind, Think About

- Approximating what we "think" is best practice.
- Culturally Informed.
- Trauma Informed.
- Evidence Informed.
- Impact of
 - The Abuse.
 - Our Response.
 - Our Language.

3

Approximating "Best Practice"

What is "Best Practice"

- "A procedure that has been shown by research and experience to produce optimal results and that is established or proposed as a standard suitable for widespread adoption." *Merriam-Webster*
- "A working method or set of working methods that is officially accepted as being the best to use in a particular business or industry, usually described formally and in detail." *Cambridge Dictionary*
- "A best practice is a method or technique that has been generally accepted as superior to alternatives because it tends to produce superior results." *Wikipedia*

4

Evidence Informed

- Recognizing there is more to know.
- Continuing to strive to learn more.
- Includes interventions, approaches and policies.
- Based on, guided by best available research, clinical expertise, and the lived experiences of survivors and families.
- Not based on myths or assumptions or doing something "because we'll always done it that way."

5

Culturally Informed

- Important and necessary to recognize and understand cultural considerations for youth and their families.
 - Don't assume you know.
- Be willing to admit what you don't know, what you don't understand.
- Talk to people, ask questions and listen.
- Participate in training opportunities, read, etc.
- Caution: Don't just rely on internet.
- Be aware of what is going on at local, state, national, international levels and recognize, this has an impact.
- Respect and appreciate others.

6

Some Cultural Considerations

Language and Communication Styles	Family Relationships	Sexuality	Gender Roles
Religion	Health Beliefs	Behavioral Health Beliefs	Poverty and Economic Concerns
	History of Oppression	Racism	

Adapted from Advocates for Youth

7

Trauma Informed

A framework of thinking and interventions that are directed by a thorough understanding of the profound neurological, biological, psychological, and social effects trauma has on an individual—recognizing that person's constant interdependent needs for safety, connections, and ways to manage emotions/impulses.

From the Crisis Prevention Institute

8

6 Trauma Informed Care Principles

- Safety
- Trustworthiness & Transparency
- Peer Support
- Collaboration & Mutuality
- Empowerment Voice & Choice
- Cultural, Historical & Gender Issues

SAMHSA

- Safety & Stability
- Collaboration & Empowerment
- Resilience & Recovery
- Understanding of Trauma & Stress
- Compassion & Dependability
- Cultural Humility & Responsiveness

Mersey Violence Reduction Partnership

9

Impact of the Abuse

(We'll talk about this more later)

- Child who was abused.
- Sibling who engaged in the sexually abusive behavior.
- Parents/Caregivers.
- Other siblings.
- Family as a whole.
- Extended family.
- Friends.
- Us as professionals, individuals.
- _____
- _____

10

Impact of Our Response

As

- Individuals
- Professionals
- Agencies
- Systems

11

Keep in Mind:

What's Helpful to Those Experiencing Abuse and Trauma

Safety

-Being warm and welcoming, with relationships that are respectful, consistent and predictable.

Trust

-With consistent, reliable and clear information (e.g., in relation to confidentiality).

Choice

-Helping service users to gain autonomy and the skills needed to take control of their lives.

Collaboration

-Working together, paying constant attention to the ways in which the power of the professional and the vulnerability of the service user may be inadvertently reinforced.

Empowerment

-Offering a strengths-based approach."

(From Yates & Allardye)

12

Impact of Our Language

- What about our language?
 - We use words, we as professionals are used to, but what about the families?
 - Does our language put families off, interfere with engagement?
 - Do the words we use have different meaning to the families?
 - Therapy, Separation.
- Shift to first person language in field of working with those who have engaged in sexually abusive behavior.
- What about how we refer to those who have been abused?
- Some are uncomfortable with shifting language or may not agree.

13

Defining Sibling and Sibling Sexual Abuse

14

Who Is A Sibling?

- "Sibling"
 - Biological/blood related sibling
 - Full sibling, Half-sibling.
 - Step-sibling.
 - Adoptive sibling.
 - Foster siblings.
 - Children growing up in the
 - same family, home, household.

15

About Sibling Relationships

- Sibling Relationships
 - Are complex and not defined by one act.
 - "are among the most enduring of interpersonal relationships, providing emotional support throughout the lifespan. Yet, sibling relationships may also be among the most damaging relationships as well" (Hardy)
 - Are the main place where children learn how to navigate peer social relationships and power dynamics. (Caffaro)
 - Siblings are the only people in the world who truly know what it's like to be raised by their parents, even if that feels quite different for each sibling. (Caffaro)
 - Siblings share a wealth of memories with each other, many of these only with each other. (Caffaro)

16

Defining Child Sexual Abuse

- "Child sexual abuse occurs when sexual activity takes place involving a minor.
- Child sexual abuse can take various forms, both physical (such as molest or intercourse) and otherwise. These forms include exposing oneself, sending explicit messages or calls, masturbating in front of the victim or forcing the victim to masturbate, showing pornographic images and so on."
- "Sexual violence and abuse is any behaviour thought to be of a sexual nature which is unwanted and takes place without consent. Sexual violence and abuse can be physical, psychological, verbal or online. Any behaviour of a sexual nature that causes you distress is considered sexual violence or abuse.

The Care Centre (sexual assault care centre) Singapore

ndirectgovernment services (United Kingdom)

17

Reality of Defining Sibling Sexual Abuse

- No universally accepted definition.
- Lack of formal definition.
- Definitions vary and/or interpretations of them vary.

18

Intrafamilial versus Extrafamilial (Youth)

- Definitions for intrafamilial sexual abuse or sibling sexual abuse vary.
 - Nuclear/immediate family only.
 - Some definitions only include full or half siblings not step siblings.
 - Extended family (e.g., cousins, nieces, nephews).
 - "Intra-familial child sexual abuse refers to child sexual abuse (CSA) that occurs within a family environment. Perpetrators may or may not be related to the child. The key consideration is whether the abuser feels like family from the child's point of view." (Centre of Expertise on Child Sexual Abuse)
- Extrafamilial sexual abuse.
 - Sexual abuse by anyone other than a relative.
 - Sexual assaults committed by people from outside the victim's familial environment. (National Institutes of Health)

19

Defining Sibling Sexual Abuse

- Wide range of unwanted sexual behaviour between siblings. (Wade, 2020)
 - Touch/Hand On behaviors
 - Non-Touch/Hands Off behaviors
- Includes sexual behavior between siblings that is "not age appropriate, not transitory, and not motivated by developmentally, mutually appropriate curiosity." (Morrill, 2014)
- "Involves exploitation of power dynamic and some degree of forced or coercive activity." (Schidlow, 2021)

20

Defining Sibling Sexual Abuse

"continuum of childhood sexual behaviors that do not fit the category of age-appropriate curiosity and take place between two siblings or more" (Thompson)

- Difference in age.
- Difference in developmental functioning.
- Take advantage of vulnerabilities.
- Coercion, threats and/or violence.
- Power imbalance.
- Developmentally inappropriate sexual behavior.
- Problematic sexual behaviors.

21

Defining Sibling Sexual Abuse

- Sibling sexual abuse also occurs between siblings closer in age or even by a younger sibling towards an older sibling.
- More common for the older sibling to be the one engaging in the abusive behavior.
- "A form of harmful sexual behaviour or activity involving the misuse of power and victimising intent or outcome between children who *self-identify* as siblings."

(United Kingdom RCEW National Project on Sibling Sexual Abuse)

22

Think About

- In some jurisdictions, child protective, investigative agencies definitions of sexual abuse include about "intent" of the behavior, was the behavior for sexual gratification.
 - Often this is related to the definition having been written related to an adult sexually abusing a child.
- However, behavior can be abuse even if it was not intended for sexual gratification, intended to be abuse.
- Who investigates sibling sexual abuse? Does it get investigate?

23

Think About

- Need "clear description and analysis of nature of the behaviour alongside its context."
- Details, not just labels of the behavior (labels vary on people's definitions and understanding of developmental norms).
- "Sexual behaviour between siblings who are close in age, or involving no use of force or overt coercion may still be abusive."
- "Boundaries between problematic and abusive behaviour" are "not always straightforward to identify." (From/Adapted from Yates and Allardyce, 2021)
- Sibling Sexual Abuse versus Sibling Sexual Behavior
- Some are shifting to talking about Sibling Sexual Behavior (SSB) instead of only specifically Sibling Sexual Abuse (SSA).

24

Prevalence & Barriers To Reporting

25

How Often Does Sibling Sexual Abuse Occur?

- Difficult to reliably establish prevalence of sibling sexual abuse.
 - Hidden nature.
 - Stigma.
 - Lack of disclosure. (Kelly and Karsna; Yates and Allardyce)
- "Sibling sexual abuse, also known as sibling incest, is the most prevalent form of child sexual abuse" (Yates & Allardyce, 2022).
- Estimated to be up to three times as common as sexual abuse by a parent (Caffaro & Conn-Caffaro, 2005; Krienert & Walsh, 2011; Stroebel, O'Keefe, Beard, et al., 2013).
- Considered the most prevalent form of intrafamilial sexual abuse.
 - Yet, considered least reported to authorities.
 - Often victims of SSA receive the least therapeutic attention. (Snyder, Bank & Burraston)

26

Major US Study: Prevalence & Incidence Krienert, Walsh & Ingold (2024)

- Study is both exploratory and descriptive.
- From the five most recent years (2018–2022) of data from the National Incident-Based Reporting System (NIBRS), the largest available dataset ($N = 30,640$), containing SSA incidents reported to law enforcement.
- Similar study (2011) utilizing data for (2000–2007) had $N = 13,013$.
- Keep in mind realities of NIBRS specific data.
- Study provides a number of specific statistics.

27

Possible Factors Impacting Knowing *True* Prevalence

- "sibling sexual abuse (SSA) may be the most closely kept secret in the field of domestic violence" (Caffaro, 2021).
- Differences in definitions and terminology impacts investigations and responses including how the behavior is classified, labeled.
- Lack of adequate definition distinguishing mutually initiated sibling sexual behavior (e.g., experimentation and exploration in scope of healthy development) and sibling sexual abuse. (Rowntree, 2007; Caffaro, 2014)
- Parents and professionals may often overlook it, fail to recognize it or not believe it. (Ballantine, 2012)
- Aversion to thinking about siblings sexually abusing siblings. Reject the possibility.
- Erroneous belief that it is not as serious, doesn't have cause as much harm as other sexual abuse. (Sanders, 2004)

28

Prevalence

- Research on the frequency of SSA is going to remain varied and incomplete so long as we draw from limited data pools (e.g. police data, support groups for victims of incest, or surveys of university students), apply different definitions of SSA (e.g. whether contact is required, age differences), or fail to differentiate between offending dyads within broader categories (e.g. family)." Wade 2020

29

Concerns Related to COVID

- Reality of COVID and increase of families being at home raised concerns regarding impact on frequency and increase abuse including sibling sexual abuse.
- Situational risk factors converged
 - Domestic violence (direct, indirect, and sexual),
 - At-risk children returning and staying at home,
 - Increased exposure to online sexual content,
 - Parental dysfunction, and
 - Lack of formal and informal support sources.
- Viewed as mutually reinforcing "thus exacerbating the risk of sexual assault among siblings." (Golan, 2022)

30

Reporting

- Barriers to it being reported
 - Individual.
 - Parental/Familial.
 - Systems.
 - Societal.

31

Some Research Highlights

32

Limitations of the Research

- Lack of agreed upon definition of sibling or sibling abuse.
- Some studies
 - Lack comparison group of extrafamilial sexual abuse by youth.
 - Don't use formal assessment instruments/tools.
 - Small number of youth.
 - Don't provide details of definition used.
- By process of the system's response, the youth identified for studies may only reflect those involved in a specific system (e.g., legal involvement) and are not necessarily representative in general of youth engaging in sibling sexual abusive behavior.
- Retrospective studies may be impacted by time passed.
- Should not assume all results can be generalized broadly.
- Despite limitations, the research can be helpful.

33

van Vugt and Garofalo, 2020 (Dutch study)

- Compared youth engaging in intrafamilial to those engaging in extrafamilial sexual abuse.
- Self-report questionnaires and systematic screening of the case files.
- Youth who engaged in intrafamilial sexual abuse
 - Came from larger families,
 - Were enrolled in higher levels of secondary education and
 - Started sexual offending at a younger age.
- Youth who engaged in extrafamilial sexual abuse
 - Were more frequently diagnosed with attention deficit hyperactivity disorder (ADHD) and intellectual disabilities (ID) and
 - Primarily received longer treatment in the context of residential care.
- "However, research on youth who engaged in sexually abusive behavior that has compared these two groups is still too sparse to draw conclusions."

34

Sibling Sexual Abuse

- While abuse can occur in otherwise protective families, factors such as intrafamilial sexual abuse, domestic abuse, extra-marital affairs, physical chastisement, and poor supervision or sexual boundaries increase the likelihood of sibling sexual abuse.

(Woodhouse, 2021)

35

Sibling Sexual Abuse: A Review of Empirical Studies in the Field Bertele & Talmon, 2023

- 15 studies. Sample size: 14,680 individuals.
- "Early onset, an extended duration and frequency, and a particularly high intensity (i.e., involvement of coercion, force, superiority, and manipulation)."
- Later impact on victims
 - Depression, anxiety, impaired self-esteem, and impacted sexual functioning.

36

Risk & Protective factors, Response to Disclosure, Interventions Russell et al. (Australia)

- Systematic review the literature on risk and protective factors, disclosure patterns and responses to disclosure, and therapeutic or other responses to cases of sibling sexual abuse.
- Study's definition of "siblings" included those who lived in same house or frequently spent time together in same environment. Included biological, adoptive, half- step- or foster siblings, cousins.
- After screening of studies, 39 were included in review.

37

Risk Factors Related to Engaging in Abusive Behavior (Russell et al.)

Individual Level

- Many studies mentioned learning disabilities and had either been a victim of abuse from parents themselves or it was assumed abuse had occurred.
- Fewer studies, criminal history, use of drugs/alcohol, sharing a bed and exposure to pornography was mentioned.

Family Level

- Living in dysfunctional family environment.
- Domestic and family violence or parental/marital conflict, as well as divorce or living in a blended family involving stepsiblings.
- Likely to alter the ability of parents to supervise, and/or introduce new siblings with individual risk factors for either perpetration and/or victimization.
- Physically or emotionally distant or absent parents.
- Legal stressors and poverty

38

Protective Factors Related (Russell et al.)

- Only 4 factors across 3 studies (Carlson et al., 2006; Griffee et al., 2016; Tener et al., 2021).
- Maternal Affection
- Sibling moving away; usually the sibling who engaged in the abusive behavior.
- Discovery of the abuse by someone else.
 - Usually by parents and less often by other adults in victim's life.
- Disclosure.
- Issue is most of the factors may stop the abuse but did not prevent it from occurring.

39

Disclosure (Russell et al.)

- Many victims did not disclose to parents/family or found professionals dismissive of the seriousness of the behavior.
- When disclosed tended to be at adulthood.
- When disclosed as child/adolescent
 - Typically to mother
 - Negative responses.
- Disbelief. Consistent with several other studies that found responses of, blaming, or minimization.
- Attempts to stop or minimize reoccurrence involved
 - Yelling and lecturing on appropriate behavior, separating siblings by physical proximity,

40

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

- 91 empirical papers; rigorous screening process for inclusion.
- "Given the lack of knowledge in this area, our research question is necessarily broad: *What is known about sibling sexual abuse?*"
- Stage 1 is to "map the research on SSA to establish areas of knowledge and gaps requiring attention."
- "Stage two will explore particular aspects of SSA in more critical depth."
- Keep in mind findings noted does not mean they were found in all the studies, but in a least a number of the studies.
- Gives us information and something to think about.

41

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

- Sibling engaging in abusive behavior typically male.
- Sibling abused typically female.
- Abuse sustained over a long period of time
- Age Differences
 - Ranged from 0 to 12 years.
 - Sibling engaging in abusive behavior usually older than other sibling.
 - There were cases with child engaging in the abusive behavior being younger.
- Range of Abusive Behaviors
 - Exposure, to contact, to vaginal and anal rape and some forms of sexual torture.
 - Studies involving clinical/forensic populations tended to report higher rates of penetrative behaviors compared to non-clinical populations where kissing or fondling were more commonly reported.

42

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Force

- Reported use of force and/or threats, with some abuse characterized by a high degree of violence.
- Other forms of coercion such as bribery, manipulation and leveraging a 'special relationship'.

• Family characteristics

- 59 papers had meaningful information related to this.
- Very limited information on sibling relationship dynamics.
- "Often takes place within context of wider family stress, but in a minority of families it occurs in the absence of any obvious stress."
- "The overall message is SSA can take place in any kind of family with children."

43

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Ethnicity

- Does not appear to affect the likelihood of SSA, but is often unreported or unexamined in the research.

• Family Stress

- Occurs in in families from any socioeconomic background and within households with one or two parents of any marital or relationship status.
- Households with one or two parents of any marital or relationship status.
- Domestic abuse, high levels parental conflict, parental affairs and family discord in homes of sibling engaging in the abusive behavior.
- Financial concerns a relevant factor.

44

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Parental Physical and Emotional Absence

- 13 papers highlighted parental physical and emotional absence
- Parental physical and/or emotional absence may contribute.
- "Parental absence may result in a lack of supervision, older siblings having increased power and caring responsibilities for younger siblings, and children feeling their parents are unavailable so they cannot tell them about the abuse."
- Long working hours, alcohol dependency, substance misuse, parent's physical or mental illness and disability may contribute.

45

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Sexual Boundaries

- Small number of studies, "families' sexual boundaries were described as either very rigid or very loose."
- Some studies highlighted family gendered power relations.
- May include "girls being expected to be sub- missive and domestic, and boys to be dominant, controlling and perhaps sexually active."

46

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Learning Disability and Neurodiversity

- "Children with a learning disability or issues of neurodiversity may be over-represented among boys who have sexually abused siblings, but data on this is scant.
- The prevalence of learning disability and neurodiversity among children responsible, and what relevance this may have to etiology and intervention, require further investigation."

47

Sibling Sexual Abuse: What do we know? What do we need to know? Stage 1 analysis of a 2-stage scoping Yates et al. (2024)

• Experience/History of Abuse

- "Most studies corroborate that a significant proportion of boys who have sexually abused a sibling have experienced abuse and trauma, although not necessarily sexual trauma."
- "Some studies report higher rates of abuse experienced by boys who sexually abused siblings than boys who have abused non-sibling children." (Latzman et al., 2011; O'Brien, 1989; Thomsen et al., 2023; Worling, 1995).
- However, boys who have abused across different contexts (e.g. siblings and non-siblings) have experienced higher rates of abuse than boys who have abused in only one context (e.g. siblings only or non-siblings only) (Richardson et al., 1997; Yates et al., 2012).
- It is likely that children responsible will have experienced significant abuse and trauma, and the degree of this abuse may be one factor differentiating boys abusing in one or in multiple contexts. However, importantly, not all children responsible are reported to have prior abuse experiences."

48

Something to Think About

- Some studies have suggested sibling sexual abuse occurs more in low-income families. (Gioro, 1991; Cyr et al., 2002)

BUT

- It has also been noted that the involved law enforcement, child protective officer or other professionals view of if the abuse occurred or how it is labeled or handled may be influenced by the presentation of the individual siblings, parents and view of how the family functions as a whole.
 - Raises possible question of if how behavior is labeled is impacted by cultural factors such as socio-economic status.
- Youth who engaged in extrafamilial sexual abuse had more criminal history than those engaging in intrafamilial sexual abuse. (Perez, 2017)

49

Focus for Future Research (Yates and Allardyce)

- Population studies to establish prevalence
- Different patterns of sibling sexual behaviour
- SSA within different types of sibling relationships (step-siblings, adoptive siblings, social siblings)
- Different pairings and patterns of sibling sexual abuse (not just brother abusing sister)
- What works related to interventions with families.
- How sibling sexual abuse and abusive dynamics play out online (social media) and in person.

50

Research Needed Russell et al.

- "how to best equip professionals across different sectors to support young people to disclose and discuss SSA.
- "more research across a broad range of sectors where children and young people may disclose any form of abuse but particularly SSA behaviors is required in order to understand what training is required both for working professionals, but also for those undergoing tertiary education and initial training related to these professions (i.e., education, social work, psychology)."
- "need for more research on the reporting of SSA interventions and outcomes for both victims and demonstrators of SSA behaviors.
- "inclusion of clear definition of siblings and rates of sibling sexual abuse in comparison of other groups of the individuals committing the sexual harm."
- "identifying what unique protective factors work within the context of SSA is needed and should aim to identify if the same protective factors for other intrafamilial and extrafamilial abuse are sufficient or if other additional strategies are required."

51

Reality Reminder

- Sibling sexual abuse can occur in family systems where there are a number of strengths and protective factors.
- "Sibling sexual abuse must be understood as a problem of and for the family as a whole, and not just a problem for or about an individual child."
(Yates and Allardyce)

52

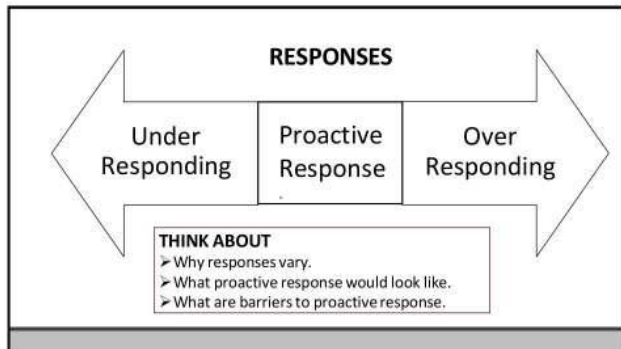
Balanced & Proactive Response

53

"Responses to Sibling Sexual Abuse: Are They as Harmful as the Abuse?" (Rowntree)

- 2007 study examining what adult women survivors shared about family, professionals and community responses to their abuse.
- Older study, but do the beliefs continue to linger even now?
- Beliefs and responses encountered included, Sibling sexual abuse is
 - Natural and normal.
 - Not serious.
 - A family matter.
 - Taboo.
 - All undercover.
- The adult women stressed the importance of being told "it's not your fault" even seeking this out as adults.
- Attitudes and responses impact the person as a child at the time of abuse and continues to impact even as an adult.

54



55

Proactive Responding

- Recognizes sibling sexual abuse as an issue, a problem.
- Recognizes complexity of these cases.
- Recognizes needs of all involved.
 - Recognizes the needs may be in conflict.
- Is research and evidence informed.
- Involves collaboration.
- Builds on strengths, protective factors.
- Promotes safety and healing.
- Best interest and well being of child who was abused..
- Support and treatment available (for all)..

56

Barriers to Proactive Responding

- Lack of knowledge.
- Lack of accurate information or rejection of it.
- Policies or legislation that isn't research or evidence informed or supported.
- Decisions based on emotional reaction including at times fear.
- Lack of communication and collaboration.
- Professionals lack confidence dealing with SSA cases.
- Training is lacking.
- Society's view can impact professional response.

57

Effective Collaboration: Quick Look

- Respecting and valuing for the role and responsibility of others.
- Recognizing that there are different perspectives. Be open to that.
- Remembering that different perspectives to help ensure that all aspects are taken into consideration.
- Don't assume everyone knows your role/responsibility or that you know their role/responsibility. Share and ask questions.
- Communicating.
- Keeping in mind that we all want the same thing: *No More Abuse*
- We don't have to agree in order to work together. We're professionals.
- *Synergy vs Silos*

58

Initial Response, First Responder

59

Setting the Tone

- Who is typically first on the scene? They set the tone.
 - Who is the investigative agency? Who takes lead?
 - How does it work if case is handed off.
 - Is more than one agency involved?
- Importance of the trauma informed investigation.
 - Think of how your involvement impacts.
 - Goal is to gather all of the information possible to help make the best decisions to address the behavior and support the healing of the family.
- Demystifying the investigative process to the family.

(Page & Bevans)

60

Engaging & Supporting Caregivers From the Beginning

- Compassion, empathy.
- Recognize the stress, possible trauma.
- What are some common thoughts and questions parents may be having?
 - How did this happen? Is this my fault? How can I keep my other child safe? Is my child going to be an adult sex offender/child molester? How can I help my child?
- Think about our language, our tone.
- What resources can you provide?
- Is there a way to give them hope? Not false promises but hope?
 - Talk about treatment, how it can help.
 - Most children/youth do not continue to abuse.

(Bevans)

61

Whole Family & Restorative Family Approaches

62

Whole Family

- Addressing family as a whole and the whole family.
- Address wider family issues that have "contributed to the abusive behaviour emerging." (Yates and Allardyce, 2023)
- Work in dialogue not silo (separately). (Yates and Allardyce, 2023)
- Synergy not silos. (Page)
- Supporting safety and healing.

63

Whole Family

Exemption Committee In Israel (Tarshish and Tener, 2020)

- Israeli law allows Child Protection Officers (CPOs) to suspend police intervention after the disclosure of SSA, and refer the family to therapy, by applying to an "exemption committee."
- Full exemption involves the family being willing to participate in a holistic protective program to ensure the children's safety, and when the siblings directly involved and their parents receive a stable and constant therapeutic intervention.

Whole Family, Restorative Family Approaches (Australia) (Daly and Wade, 2014)

- Youth Justice Conferences
- Considers sibling sexual abuse and conferences as court diversion.

Restore Pilot Bristol, England

- Stephen Barry initiated original idea. Agencies forming partnerships.
- The sexual abuse is viewed holistically, enables all to move forward more positively through the use of a restorative justice approach.

64

Impact

65

Impact on Sibling Who Was Abused

Responses vary. May include, but not limited to:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Betrayed • Pressured and/or trapped • Powerless • Confusion • Ashamed, Shame • Dirty • Feel responsible • Depression • Low Self-Esteem | <ul style="list-style-type: none"> • Helpless • Anger at sibling, parents • Guilt • Bad • Humiliated • Conflicted • Violation of their trust • Distrustful of others • Difficulty having relationships |
|--|---|

66

Impact On Sibling Who Was Abused

- It is proposed that the marginalization of sibling sexual abuse can result in persisting feelings of
 - Shame,
 - Helplessness and/or
 - Guilt.
- Which can be a factor in development of depression or increased risk of other mental disorders. (Yates, 2020)
- It can be viewed as the feelings being *amplified/intensified*. A sibling is often someone you trust, can count on, has helped you.

67

Impact On Sibling Who Was Abused

- May minimize the abuse.
- View it as mutually initiated, their fault or not abuse since older sibling was involved. (Rowntree, 2007)
- Spectrum of emotions and feelings.
- Ambivalence.
 - "I hate my brother, but I love him too."
 - "He did something bad to me, but I don't want him to be in trouble."

68

Long Term Impact

- Limited studies, but some information.
- Keep in mind, need more studies duplicating findings before can state with certainty specific impact. But what we have provides some insight.
- Minimization of abuse at time of disclosure impacts in negative manner including the abuse being more likely to continue. (Morrill; Caspi; Glaser).
- Impact continues into adulthood; how it continues to impact can vary.
- Self-esteem an area of interest.
 - Considered a construct of well-being that is closely associated with quality of sibling relationship. (Morrill)

69

Long Term Impact (Information from some studies)

- Often impact becomes more severe and effects
 - Social interactions
 - School
 - Work
 - Family Life (Phillips-Green; Monahan)
- "Significant lingering emotional and psychological effects." (Carlson)
- If there hasn't been intervention/opportunity to address the trauma, the emotional impact can be triggered by other life issues (serious illness, caring for aging/dying parent) (Monahan)
- Impacts sense of well-being (Morrill).
- Both males and females at high risk of dating violence in college (Noland et al.)

70

Long Term Impact (Information from some studies)

- Increased risk of re-victimization in interpersonal relationships.
 - May impact how assess/appraisal relationship and possible harmful aspects (Combs-Lane and Smith).
 - May impact ability to recognize and respond proactively to threats.
 - May be more likely to engaged in at-risk behaviors (Finkelhor and Browne)
 - Self-medication, unprotected sex, promiscuity to frigidity (Combs-Lane and Smith)

This isn't saying this is how impacts all, remember resilience, remember response by caregivers at time of abuse impacts, remember treatment, healing is possible.

71

Impact on Sibling Who Engaged in Sexually Abusive Behavior

- Some may find it odd to include this, but the impact is relevant to working with the child who was abused as well as the sibling who abused and family as a whole. The impact on sibling who abused can have domino effect on the child who was abused.
- Some possible impact:
 - Sex Offender Registry.
 - Shunned/Rejected by family.
 - Rejected by friends or friend's parents.
 - Depression. Possible suicidal ideation.
 - Becomes withdrawn.
 - Involvement in school and activities.

72

Impact on Parent(s)

Some examples of impact:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Pain • Guilt • Self blame • Embarrassment • Denial • Feelings of failure • Conflicted feelings • Confusion about loyalties | <ul style="list-style-type: none"> • Unsure how be "good" parent to both children • Afraid to seek support • Afraid to tell anyone • Afraid about future • Failure as a parent • Grieving • Loss |
|--|---|

73

Impact on Parents

(Westergren, Kjellgren & Nygaard)

- Study examined experiences of parents.
- 4 themes identified.
 - Parenting-Insecurity and new parental challenges.
 - Family-the loss of the family as a unit and the family as you knew it.
 - The couple's life-the loss of the love relationship and the fight for keeping the bond.
 - Adaptation-a new way forward.
- Also discussed 3 perspectives
 - Transition from chaos to a new normal.
 - Sibling sexual abuse from a family systems approach.
 - Lacking support from outside the family.

74

Impact on Other Siblings

- Other siblings are more aware than parents think, know something has happened, is going on.
- Array of feelings.
- May be resentful, blame or be angry at the sibling who abused or at the one who was abused.
- Anger at parent(s) for not protecting.
- May not believe it happened or minimize the situation.
- Confusion, Anger, Anxiety or Hurt.
- May feel guilty.
 - They feel they should have protected. May have known something.
- Impacted by the changes and stress.
- Worried about what will happen to their family.

75

Impact on Extended Family

- Family may not share it with extended family members.
- Parents may not be sure what to share or how to share.
- Child who was abused may not want other family members to know.
- Parents are embarrassed, fear judgment.
- Extended family may realize something is going on, but don't know what or how to give support or help.
- If it is shared.
 - Individual reactions vary.
 - Extended family can be a source of support or stress.
 - May not be sure what to do, how to react.

76

Impact on Family as a Whole

- Family unit is disrupted.
- Trust has been violated.
- Range of reactions, feelings and levels of stress
- Parents are stressed which impacts interactions with family members.
- There is an unknown about the future of the family as a whole.

77

Impact on Friends & Support Systems

- Parents may
 - Turn to others for help and support or
 - Pull away from friends.
 - Withdraw and isolate
- Others realize something is going on, but don't know what.
- If know about the abuse, varying responses.
 - Provide support.
 - Want to help but don't know how.
 - Withdraw from relationship.
 - Judge or blame or perceived as doing so.

78

Impact on You, the Professional

- Experience increased feelings of responsibility about what happens.
- Begin second guessing decisions.
- Feel pressured to reunite family, if there has been separation.
- If have children, may experience increase concern about physical contact between siblings, normal developmental behaviors, play.
 - Read into innocent physical contact.
 - Become hypervigilant.
- Become overprotective.
- "Sibling abuse cases are considered some of the most complicated and anxiety provoking that we may encounter." (Kambouridis and Flanagan)

79

Question of Separation

80

The Question of Separation: Differing Viewpoints

- 1) If there is *adequate* safety plan with a *reasonable* expectation that parents will follow it, then the sibling who engaged in the abusive behavior can remain in the home with the sibling they abused.
- 2) *Initially* there is not enough information for an *informed* decision that the siblings can remain together and therefore the sibling who engaged in the abusive behavior needs to leave the home at least *initially* while the situation is more thoroughly assessed, and plans are developed.
- 3) *Longer term* separation is needed as it takes time for the healing process and for individuals and family to be ready. Short term separation is not adequate.

Caution against assuming a safety plan that addresses sexual and physical safety is enough when talking about well-being of child who was abused.

81

Power of Language

Are there other terms that describe the process that may not be as frightening, sound as harsh, inadvertently give message it will automatically be long term?

Other possible words to use?

- Moment to Pause.
- Pausing.
- A Breather.
- A Break.
- Taking a moment.
- Taking some time.
- Stop Gap

Page, Maltar & Feniak

82

Separate or Not: Some Considerations

- What is in the best interest of child who was abused?
- Physical, sexual, emotional safety and well-being of child who was abused.
- Is a safety plan enough?
- Do you have enough information? What don't you know? What do you need to know?
- Safety, well-being of other children or vulnerable person(s) in the home.
- Sibling who engaged in the abusive behavior should be the one to leave, not the child who was abused.

83

Informed Decision (Yates & Allardce)

Considerations to help inform decision about living arrangements & contact.

- Likely impact, *including the emotional impact*, of the behaviour upon the child who has been harmed.
- Views of the child who has been harmed, however expressed.
- Quality and value of the sibling relationship.
- Evidence-based assessment of the risks of future sibling sexual behaviour taking place.
- Protective abilities and capacities of the parents.
- Age and developmental stages of the respective children.
- Level to which the family's physical environment is conducive to safety.

84

Separation

Thinking About It

- What is the purpose of separation?
- How might this purpose/intention impact the sibling who was abused?
- What does the child who was abused want? What do they need?
- All decision making comes with consequences.
 - Favorable or unfavorable.
 - Intended or unintended
- Separation and reunification should be held side by side, provides thread and message of hope to children, youth, and families

Page, Maltar & Feniak

85

Reality of Separating

- Challenges include:
 - Where will the sibling who engaged in abusive behavior go?
 - Logistics for parents.
 - Responding to questions about why youth left the home.
- May be needed but may also be an unpopular decision.
- Just because it may be needed, doesn't mean there isn't a downside.
 - Disrupts the family system; impacts everyone.
 - Impacts view of family, how family views the future.
- The right choice is often not the easy choice.

Safety and well-being of the child who was abused are priorities.

86

Initial Safety Decisions

If both children remain in the home

- Can the caregiver follow the safety plan and provide necessary supervision and support to both children?
- Does caregiver understand the seriousness of the situation?

The sibling who engaged in the abusive behaviors temporarily leaves the home while investigation takes place and treatment is initiated.

- Placements can include staying with family, friends.

87

Safety Indictors

Queensland Government Child Safety Practice Manual

- Not a checklist.
- To guide decision making about if youth with harmful sexual behaviours can remain in the home while assessment is carried out.
- Also, useful when considering reunification after separation.

88

Mapping Tool

Sophie King-Hill and Abby Gilsenan

- Based on research with children and families impacted by sibling sexual behavior (SSB), and the practitioners supporting them.
- Research was conducted as part of the National Project on Sibling Sexual Abuse across the University of Birmingham, the University of West England and Purple Leaf (the preventative wing of the West Mercia Rape and Sexual Abuse Support Centre).
- Tool is designed to be used in conjunction with Yates and Allardyce (2021) *Sibling Sexual Abuse: A knowledge and practice overview published by the Centre of Expertise on Child Sexual Abuse*.

89

Separation: What Does It Actually Mean & How Long Is Long "Enough"?

- May be necessary but not intended to be forever.
- It is intended to be temporary.
- Can there be communication?
 - What type, when, how, who supervises?
- When does face to face (or virtual) contact begin?
 - Who decides?
 - How is it decided?
 - What impacts decisions?

90

Planning for Safety

91

Safety Planning

- Addresses the immediate issue of safety.
- Basic safety plan/guidelines needed even if separation occurs.
- Will be adjusted and further developed; this is initial plan.
- Approach in a calm, supportive and assertive manner.
- Keep in mind impact of the situation on the parents/caregivers and how this may impact their response to your involvement.
- Parents/Caregivers may need extra support in helping with safety planning. They are in crisis, unsure what to do or in denial anything needs to be done.

92

Safety Planning: Some Things To Consider

- Approach in a collaborative manner as much as possible.
- Clearly identify the problem and who needs to be protected.
- What strengths are present? How can we build on them?
- What vulnerabilities are present? How can they be addressed?
- Other risk considerations, concerns? What can mitigate them?
- Identify when the behavior has occurred; this helps with developing the plan.
- Are there other children who are frequently at the home?
- Input from parents/caregivers, youth who engaged in the abusive behavior and child who was abused.

93

Safety Planning: Some Things To Consider

- Identify who will be involved in the plan. Who is responsible for what?
 - Clear expectations for youth who engaged in the sexually abusive behavior.
 - Clear expectations for parents/caregivers/adults involved.
- Are the caregivers willing to implement the plan? Able to implement the plan?
- Word as what to do as much as possible. There will be some do not, cannot do.
- Who can caregivers/parents contact if have questions or concerns?
- How monitor impact on child who was abused, other children. Hear their voices.
- How will issues with the plan be addressed?
 - Who is contacted?
 - What happens?
- How can we support the implementation?

94

Safety Planning: Some Things To Consider

Supervision

- What does "supervision" mean?
 - Visual, Auditory, what is "direct"
 - Explain. Give examples)
- Who is providing?
- When is it needed?
- Where is it needed?
- How is it done?
- Layout of home.
- Arrangement of furniture.
(can impact visual supervision)
- Sleeping arrangements.

- Personal hygiene/self-care.
- Technology/Multi-media.
- Privacy
- Boundaries.
- Physical contact rules.
- Appropriate attire.
- What is okay?
- What about the other children, child who was abused? Supporting their well-being and safety.

95

Reunification

96

Why Reunite?

- Sibling relationships: "One of the most important and enduring relational environments in the life of a family." (Monahan)
- Cultural aspects: Terminating a family relationship is considered an extreme step. (Tener)
- Most adults, adolescents, or children who have sexually abused a child will eventually return to their community and often to their family. (Wickland & DeMichele)
- Human instinct: Restore connection with someone who has played a significant role in one's life. (McCullough)
- Relational complexity and paradoxical nature. (Tener)

97

Why Consider Reunification?

- The abuse and hurt doesn't negate other positive and healthy aspects and components of the sibling relationship.
- The sibling who was abused often wants to have some contact and/or some type of a relationship with their sibling.
- Healing is possible.
- Rebuilding and rejoining a family takes time, patience and can be a challenging process, but in many cases the challenge is well worth the positive outcome.
- Family being family is important.
- "Although it is important to preserve and restore families, it is most important to keep children safe." (Thomas, 2010)

98

Individualized Decisions

- Not an automatic decision.
- Policies or attitudes of there will always be reunification or when it will occur can be problematic just as policies or attitudes that reunification should never occur are problematic.
- While reunification is often possible and appropriate, this is decided on a case-by-case basis with individualized decisions for the specific case, circumstances and situation.

99

Again, Consider Our Language

- How do we refer to the process? Think what is user friendly language.
- Professionals talk about clarification, reconciliation, reunification.
- It is a process, but does labeling the components of it hinder or help?
- If labeling, what labels/terms do we use?
- Are professionals involved using the same terms? Meaning the same thing?
- Are we using terms the family understands, including the child?
- Does the label give a message of hope?
- Just some things to think about.

100

Some Examples of Language Used

- Reunification
- Reconciliation
- Clarification
- Reconnection
- Re-Uniting
- Re-Engagement
- Restoring Relationships

- Family Resolution
- Family Restoration
- Restorative Practice
- Restorative Justice
- That Together Thing
(term a child used for the process)

101

Clarification & Reunification

(From Tabachnick & Pollard-NSVRC Publication)

- The ultimate goal of family reunification is healing, as well as preserving the safety of the child, the family, and the public (Gilligan & Bumby).
- The driving force for any family reunification effort must begin and end with the best interest of the child, with the focus on the health of the child's long-term adjustment (Gil & Roizner-Hayes; Hewitt).

102

Reconciliation & Reunification (Schladale)

- Family reconciliation is the process of supporting families in this effort when their child has behaved in sexually harmful ways. It is a process of healing emotional wounds caused by harmful behavior.
- "family reunification" represents the physical rejoining of family members with a youth who has been removed from the home.
- Reconciliation and reunification are culturally informed. They are processes that utilize the strengths, protective factors, and cultural perspectives of each youth and family in order to best meet their needs for healing and harm reduction.

103

About Reunification (Davis and Maltar)

- "Reunification is a process with no timeline
- Process is driven by child/youth who experienced sexual abuse
- Accountability and responsibility are necessary to move beyond safety
- Resolution is part of the process of making restoration, making amends, making peace
- Family relationships are changed through a resolution process."

(Sources/Credited: Berry; Crisci; Barbour; DiGiorgio-Miller; Gil; Roizner-Hayes; Skau; Falls.)

104

Clarification-

(Adapted from Tabachnick & Pollard-NSVRC Publication)

- The goal of the family clarification process is to
 - facilitate healing for the child and the family
 - offer the person who harmed a child the opportunity to take responsibility for his or her actions.
- When the people involved speak together about what happened and have a chance to discuss the role each person played in the situation, it can offer the person causing the harm a chance to take full responsibility for his or her actions.
- The clarification process may also serve as a point of assessment for possible future family contact, interaction, or reunification

105

The Process

- Supports & Promotes healing.
- Takes time.
- Builds on strengths/protective factors.
- Supports expression of feelings.
- Facilitates communication.
- Re-establishes communication and familial relationships.
- Supports processing and coping with the sexual abuse.
- Involves development of a plan for emotional, physical and sexual safety of the child who was abused and family.

106

The Process (Page & Murphy)

- Reunification requires dedication and patience.
 - Utilizes the strengths and protective factors present within the individuals and within the family system.
 - Builds on these to help promote the healing process.
- Reconciliation/clarification provides an opportunity for the expression of feelings and for healthy communication.
- Process can be viewed as reconstructing or reshaping the family, making the family stronger and family dynamics being altered in a healthy way.
- Process is progressive starting with limited contact and building towards the siblings spending more time around each other (supervised) and in cases of full reunification the sibling who abused returning home where their sibling they abused lives.
- Important to continuously assess safety, and well-being, and make needed responses and adjustments.

107

Communication

- Communication
 - Within the family
 - Between professionals and the family
 - Among professionals.
- Family communication patterns.
- Strengthening communication.

108

Who? When? Stressful Question

- Best interest, safety and well being are always priorities; drive the decision.
- Needs to be well thought out.
- No magic answer. No set amount of time after separation.
- Recognize you may feel torn, pressured or question yourself.
- Not decided by one person. Involve the team even if small.
 - Others involved in the case are involved in the decision-making process.
 - Reminder: Different perspectives helps ensure things aren't overlooked.
- Readiness of the sibling who was abused is priority, but you also need to look at others' readiness.
- It is not uncommon for one person to be "ready," but others aren't.
 - That becomes something to be processed in and of itself.
- Decisions are individualized to the specific case and situation. Be flexible.

109

Don't Assume

- Do not assume that "because a child is showing no outward signs of harm that they have not been harmed."
- "Children may miss their siblings or seem happy to see them, but this does not necessarily mean that they have not been harmed or that time spent with their sibling does not compound or perpetuate harm caused."

(Yates & Allardyce)

110

Listen & Observe (Adapted from Rich)

Listen to the:

- Feelings.
- Thoughts.
- Experiences.

Listen to the:

- Wishes.
- Needs.
- Fears.
- Hopes.
- Concerns.

Pay Attention to the:

- Behaviors.
- Non-Verbals.
- What's not being said.
- Changes in communication.
- Changes in activity level.

111

Framework, Approaches

112

A Framework of Hope

Believe

- In the healing process.
- That reunification is often possible and can be appropriate and healthy.

Focus

- On child who was abused best interest and well-being.
- Healthy lives for all.

Reach Out

- To other professionals involved with the case.
- To colleagues who have experience with reunification.

Recognize

- Working with sibling abuse cases can be complex and stressful.

113

Five Steps Towards Reconnection and/or Reunification

- Treatment for Everyone.
- Assessment of Readiness.
- Clarification.
- Safety Planning.
- Reconnection and/or Reunification.
- Process can be halted at any time.

Tabachnick, J., & Pollard, P. (2016). *Considering family reconnections and reunification after child sexual abuse: A road map for advocates and service providers*. Enola, PA: National Sexual Violence Resource Center.

114

VORS

(Radius Child & Youth Services; Falls and Maltar)

VORS Principle

- *Voice*
 - Empowerment, Bear Witness
- *Openness*
 - Listen, Communicate, No Secrets
- *Responsibility*
 - Initiation, "Both AND" Position, Accountability Axiom
- *Safety*
 - Consistent, Predictable, No-shaming, "New Normal"

115

Continuum Approach

Don't think, all or nothing. Think continuum!

Page

116

Hope & Healing

- Communication
- Support
- Safety & Wellbeing
- Listen
- Observe

Page

117

Some General Considerations

- Assessment of strengths and vulnerabilities.
- Individual, family and community supports.
- Parent/Caregiver prepared to support and encourage children throughout the process.
- Treatment progress and therapeutic change in individuals, parental unit and family. Readiness.
- Development of plan for response to concerning or risk behavior.
- Monitoring and supervision addressed.
- Development of plan that supports a successful outcome.
- Development of plan that helps ensure safety and being prepared to address concerns while promoting a healthy outcome

118

What Contributes to Successful Reunification

- Having hope. Believing reunification is possible.
- Treatment providers' ongoing communication.
- Team respects & listens to one another. Recognizes others' roles.
- Treatment for all.
- Caregiver involvement.
 - Acknowledge the abuse. Hold the sibling who abused accountable while supporting them moving forward.
- Professionals directly involved in the process.
 - Are knowledgeable about sibling sexual abuse and reunification process.
 - If newer to working with sibling cases or haven't been involved in reunification process, have supervisor/colleague who can guide and support them.
- Synergy not silos!

119

3 Core Considerations

120

3 Core Considerations

- The sibling who was sexually abused
- The sibling who engaged in the sexually abusive behavior
- The parental/caregiver Unit

121

Child Who Was Sexually Abused Some Highlights of Some Things to Consider

- Interested in having contact.
 - Do their words match their behaviors?
- How is treatment going?
- Ready for contact.
- Reduction in any trauma related symptoms that may have been present.
- Able to talk with therapist or parent about feelings, thoughts, etc.
- They recognize it was their sibling's responsibility, not theirs.
- The therapist working with the child who was abused supports contact.

(Some content adapted from Bonner; Bonner & Chaffin)

122

Child Who Was Abused (Davis and Maltar)

- Trauma-focused assessment.
- Willing for reunification to begin.
- Able to discuss the sexual abuse.
- Holds person who sexually harmed them responsible for consequences following disclosure.
- Is able to discuss feelings and needs.
- Does not blame self for sexual abuse.
- Able to report any further abuse or high-risk situations.
- Feels safe and protected in the home.
- Knows and can carry out safety plans.

123

Sibling Who Engaged in Sexually Abusive Behavior Some Highlights of Some Things to Consider

- Where the adolescent is within his/her treatment?
- Making consistent progress in treatment?
- Progress related to sexually abusive behaviors.
- Exhibits behavioral and emotional regulation.
- Responsibility for abusive behavior.
- Involvement in development of safety plan.
- Recognizes, agrees to and has ability to abide by safety rules.
- Recognizes and acknowledges impact on sibling they abuse, family, other siblings, etc.
- The therapist working with the sibling who abused supports contact.

124

Sibling Who Engaged in the Abusive Behavior (Davis and Maltar)

- Comprehensive assessment focused on sexually abusive behaviour.
- Acknowledges abuse and accepts full responsibility.
- Shows awareness of high-risk situations and their needs in this regard.
- Can discuss and demonstrate strategies for coping differently with high-risk situations and address their needs.
- Developed realistic prevention plans/strategies and safety plans.
- Empathy for the child who was victimized and understanding of impact of their sexually abusive behaviour.
- Apologized to the child who was victimized and the family for the abusive behaviour.
- Independent wish to reunify with family.
- Accepts reunification plans & limits.

125

Parental/Caregiver Unit, Family

- *Parents' involvement & progress is crucial. Includes, but not limited to:*
 - Know what happened, recognize impact of abuse and under risk.
 - Understand and agree to the responsibility that comes with reunification.
 - Able to discuss tough, uncomfortable topics.
 - Involved in developing safety rules and identifying supervision needs.
 - Willing to talk about involving support people.
 - Support both children as well as any other children in the home.
 - Able to talk to sibling who was abused, sibling who engaged in sexually abusive behavior and other children in the home about feelings, safety rules, etc. as needed.
 - Are willing and able to do what is necessary for safety and well being.
 - Willing to share when there are concerns, issues, problems.
- (Some content adapted from Bonner; Bonner & Chaffin)

126

Family Related (Adapted from Davis and Maltar)

- Holds adolescent accountable for the abuse and does not blame the child who was abused.
- Can discuss the abuse openly.
- Puts needs of protection of child who was abused first.
- Aware of the offending adolescent's risk factors/needs, sexual abuse prevention strategies, and safety plans.
- Able to report any further abuse or high-risk situations.
- Able to demonstrate healthy communication and interaction.
- Able to demonstrate healthy support systems (i.e. not isolate themselves).
- Demonstrates ability to supervise adolescent and protect children.

127

Other Siblings/Children in the Home

- Have they been having contact?
- Impact on the other children; their readiness.
- What do they know about the situation, why sibling left the home?
- Have they had an opportunity to share their feelings, talk about it?
- How do they feel about the sibling beginning contact, spending time with family, possibly returning home?
- Do they feel safe and protected?
- Do they feel they can let caregivers know if uncomfortable?

128

More Considerations

129

It's Not Always the Same Route Destination: Reconnect

- Just like in travel there are multiple routes, paths to a destination.
- Think about it, the route may
 - Be direct.
 - Avoid major highways.
 - Include walking.
 - Include air travel.
 - Include detours.
 - Have delays.
- Different ways of travel.
- You may have an anticipated destination in mind, and you have a plan mapped out of how to get there, but you have to be prepared to adjust and adapt depending on how things are going.

130

Reunification

A Process, Not a Single Event or Point in Time

- Something can be "therapeutic" even if it's not a "formal" therapy session.
- Think About
 - What is therapeutic and supports the process?
 - Does the initial contact, communication have to be a joint "therapy session"?
 - What is goal, intent of first contact, communication?
- Can it be more informal on the surface, but therapeutic at the same time?
- How long have they been separated, had no contact?
- How old is the child who was abused?
- Given the individual situation, what makes sense in regard to how first contact, communication is handled?
- What does child who was abused want, need, what are they most comfortable with.

131

I CAN, We CAN! It Matters.

- Some things will have changed, but how can the siblings maintain their sibling relationship.
- What can they do together? Help family identify.
- Help the family think about how to adapt activities to meet safety rules.
 - Supervision is often the key to making this work.
 - Can support people help?
- Get creative. Think outside the box.
- Reinforce sibling relationship can be repaired, rebuilt in a healthy way. That healing can occur. That there is hope.
- Help the family be family.

132

Ongoing Assessment & Being Prepared

- Monitoring for impact of contact, reunification process continuing.
- Have a plan for if the child who was abused or others feel unsafe.
 - Who do they tell? What happens with the information?
- What to do if a problem.
 - When and who can parents contact about problems, concerns or questions?
- If safety is in question, assess the situation and take action.
- If safety is compromised or people uncomfortable, slow down/stop contact until physical, sexual and emotional safety are restored and comfort is restored.
- Role of support people.
- Plan for the future.

133

Real Life/Real World

134

Common Dilemmas, Challenges & Questions

- | | |
|--|--|
| <ul style="list-style-type: none"> • Unintended distractions, pressure. • How, When, Who involved? • What type of contact, when? • Therapists, Team working together. • Court restrictions. • Parents differing views re: reunification. • Joint custody. Blended family. • Communication/Contact before "official" therapeutic session. | <ul style="list-style-type: none"> • Communication/Contact before "official" therapeutic session. • Therapeutic letter writing/Responsibility letter writing. • First face to face contact. • First "formal" therapy session. • Apology. • Alarms? Cameras? • Physical contact. • Planning/Preparing for safety. |
|--|--|

135

Unintended Distractions, Pressures

- Parents distracted
 - impacts the victim, other siblings
- Pressure on victim
 - Deliberate, unintended, perceived
- Parents
 - feel torn and pulled in different directions
 - have mixed feelings
 - afraid it will never be safe
 - are overwhelmed by restrictions and responsibilities

136

Initial Contact

(Taken from Yates and Allardyce with key words italicized)

- Requires considerable *preparation*.
- *Communication* between the professionals supporting the respective siblings will be necessary
- *Assessment* of the desire of the *child who has been harmed* to confront the child who has harmed them,
- *Assessment* of the *child who has harmed* progress in intervention work (DeMaio et al).
- Initial contact should be *staged* and set at a pace defined by the child who has been harmed.
- Start with professionals *exchanging* information.
- Move on to messages or letters forming a shuttle dialogue between the children.
- Eventually to a face-to-face meeting if the process so far indicates that this is *appropriate*.

137

Contact/Communication Before Formal Session?

Communication before formal session/therapeutic letter?

- Child who was abused is asking to talk to the sibling who abused them when he/she calls home.
- Child who was abused wants to send something or a message to sibling when parents visit him/her.
- What about contact around birthdays, holidays?
- Can there be letters (not responsibility letter), calls, messages, cards, virtual contact?
- See each other in therapeutic, but not therapy session?

Advice: Be flexible. What is best for the individual case?

138

Contact/Communication Before Formal Session

- Think about the therapeutic context of contact.
- Would/Could contact be therapeutic?
- Are there any restrictions prohibiting contact (e.g., court, agency)?
- Is there a clinical contraindication to the contact?
- Is there ongoing, open communication between therapists?
- Are caregivers actively involved in treatment?
- What are therapists, caregivers, other team members' thoughts?
- What is the child who was abused saying (through words and actions)?
- What is youth who engaged in the behavior saying (through words and actions)?
- Do you have a clear plan or is one being developed?
- If contact occurs, how will it be monitored, supervised?
- How will impact be assessed?

139

First Face to Face Contact

Does the first face to face contact have to be a formal "therapy" session?

- Can it just be visiting with therapist present?
- Does it have to occur in an office?
- Can it involve activities?
- Who decides?
- If contact occurs, preferably both therapists involved.

Advice: Be flexible. What is best for the individual case?

140

First In-Person Contact

Discuss & Plan

- Setting.
 - Where is comfortable, less stressful for the child who was abused?
 - If office setting, their therapist's office is probably more comfortable but have to consider others being seen at that setting. Need to think it through.
- Who arrives when, who arrives first, where do they wait?
- Who all will be there? Will caregivers be in room the full time?
- Arrangement of room. Where does the child who was abused want people sitting.
- Being prepared if someone needs a break.
- Monitoring afterwards for impact, any concerns, questions.

141

First In-Person Contact Discuss & Plan

- If possible, arrange for the child who was abused to meet the other treatment provider involved before the session. Consider a virtual meeting.
- What is goal of first contact? What is intended to be discussed?
 - What does the child who was abused want, need?
- What are rules regarding physical contact?
- Ensure child who was abused has prepared for the contact with his/her therapist.
- Ensure the sibling who engaged in the abusive behavior has prepared for session with his/her therapist.
- Make sure caregivers understand their role in the session.
- A plan for communicating if becoming overwhelmed; a signal, knowing it's okay to leave room, etc.

142

Clarification/Responsibility/Ownership Letter

- Is it always needed, why?
- Purpose of letter, how will it be used?
- Has child who was abused requested it? Has their therapist?
- Who all does youth who abused write a letter to?
- Avoid it being scripted.
- How to provide feedback and it still be the youth's letter, youth's voice. Requires balance.
- What about youth with problems in written expression or has low intellectual functioning?

Advice: Be flexible. What is best for the individual case, situation?

143

The First Together Formal "Therapy" Session

- Foundation
 - Best interest of child who was abused.
 - Therapists are in agreement for session; preferably both involved.
 - Parents are involved in decision.
 - Team has been involved in the discussion and decision.

144

First Together Formal "Therapy" Session

- Therapists talk ahead of time.
 - Hopefully have been talking throughout.
- Who takes the lead?
- Be clear about what child who was abused wants in/from the session?
- Don't try to do too much, let it be what it is. A beginning, moving forward.
- Lots of preparation, but the "therapy talk" time may be limited.
 - Age of child who was abused, emotions, length of time apart impact.
- Use role plays to help prepare. Who is in role of child who was abused?
- Is often highly emotional for parents/caregivers.

145

First Together Formal "Therapy" Session

- Language congruent with child who was abused age, developmental status.
- Sibling who engaged in abusive behavior takes responsibility.
 - Recognize they hurt their sibling, recognize the abuse.
 - Stop and think about what detail is or isn't needed. Think of purpose of session.
 - Clear they made the decision, nothing the sibling did, not sibling's fault.
 - Can talk some about work they have been doing, skills they are building.
 - Basic safety rules, emphasize for when around other children also, not just sibling who was abused.
- Is there something the child who was abused wants to say, share, ask, hear?
- Plan for time for the family to just be together; if therapeutically supported.

146

Possible Tough Questions To Address

- Sibling who engaged in sexually abusive behavior needs to be prepared for some tough questions. Not necessarily all in first session but be prepared for these type of questions.
 - Why did you do it?
 - Will you do it again?
 - What's changed?
 - Can I trust you?
 - Do you still love me?

147

Apology

Should the sibling who engaged in abusive behavior apologize to the sibling he/she/they abused?

- What does the child who was abused want/need?
- What is their therapist's input? Parent's input?
- Apologies have different meanings to different people.
- Think about what "I'm sorry" means to a child.
- Think about possible cultural, religious meaning of apology.
- If parents want apology, that can be done in separate session.

148

What About Physical Contact?

Be Prepared

Can there be physical contact of any type?

- Contact is human nature.
- Can they hug? Can they high-five?
- Is child who was abused wanting physical contact?
- When can it occur, who supervises?
- Is this a trigger for the sibling who engaged in the sexually abusive behavior?
- Is it a trigger for the child who was abused?
- Needs to be discussed.
- Is there a creative way to handle?

Advice: Be flexible. What is best for the individual case, situation?

149

What About Alarms, Cameras, Motion Sensors?

- If considering any of these, ask how and why would they be used?
- Think reasons you are considering.
- Think about the downside.
 - False sense of security.
 - Cameras have to be monitored or information is old when reviewed.
 - Message it gives. Is this a natural environment?
 - Malfunction or can be disconnected.
- Would you recommend for youth to be at home without it? Why not?
 - If wouldn't recommend, agree then think through why?
- Is this a core component of the safety plan or an adjunct to the safety plan?
 - If core component, suggest re-thinking the situation.

Advice: Think it through, don't just do it.

150

Safety & Well-Being

- Often a large focus is about when there is first discussion about contact, starting the process of reunification.
- Ongoing monitoring after contact begins is just as important.
- Awareness of how things are going throughout the process matters.
- Adjusting the process as needed/when needed.
 - Prepare families adjustments may be needed and that this is a part of ensuring the process moves forward in a healthy manner.
 - Adjusting to change takes time.
- Priority is safety & well-being.

151

Being Safe & Healthy

Supporting Safety & Well-Being

- Safety Rules, Boundaries, Privacy, Supervision.
- Ongoing assessment of situation and safety.

Re-Building

- Sibling relationship, family relationship.
- Don't just focus on what can't do, focus on *what can they do*.

Recognize

- If either sibling, other siblings or parents are struggling.
- If there is a detrimental impact. How is this being monitored?

Identify

- And address behaviors that make child who was abused, other children in the home feel uncomfortable or unsafe.

152

Being Safe & Healthy

Be Prepared

- What to do if a problem.
 - When and who can parents contact about problems, concerns or questions?
- Have a plan for if the child who was abused or others feel unsafe.
 - Who do they tell, what happens with the information.
- If safety is in question, assess the situation and take action.
- If safety is compromised or people uncomfortable, slow down/stop contact until physical, sexual and emotional safety are restored and comfort is restored.
- Plan for the future.

153

When Reunification Isn't Possible

- Some level of reunification is often appropriate (think continuum).
- If no level of reunification is supported or possible, or not at the time, we still need to address this.
 - Support and guidance are needed.
 - Help the individuals and family cope with the situation.
 - Adjust how healing process continues.

154

Take Home Reminders

- Different Roles, Same Goals
- Priority of best interest & well-being of the child who was abused.
- Safety, well-being and healthy development for all.
- Reunification is often possible and appropriate.
- Healing takes time, effort and patience plus working together.
- Be proactive, supportive and provide a message of hope.
- Individualize our decisions.
- Language matters.
- Remember to take care of **you**! Take time to breathe.

155

Contact Information

Jacqueline (Jacque) Page, Psy.D.
 Department of Psychiatry
 University of Tennessee Health Science Center
 Email: jpage@uthsc.edu
 Phone: 901.378.2648 (cell) 901.448.2418 (office)
 Address: 920 Madison Ave. Suite 200
 Memphis, TN 38163

156