Sexual Abuse: Use of CBT

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Ministry of Community Development Youth and Sports (MCYS)

• Key agency in providing care and protection of children from abuse and neglect.

• In 2005, 158 child abuse cases were investigated.
  - Out of 158, 87 had evidence of abuse
  - Out of 87, 30 cases were cases of sexual abuse

• In a research study of girls in a residential facility (Ng. et al, 2005)
  - 39.42% had a history of sexual abuse
  - 38.7% of the sexually abused girls had never reported the abuse
FINDINGS OF S’PORE STUDY

Compared with girls without any history of sexual abuse, sexually abused girls had:

- significantly higher levels of depression, anger, post traumatic stress, dissociation (marginally significant), sexual concerns, delinquency (Trauma Symptom Checklist for Children, Reynolds Adolescent Depression Scale, Youth Self-Report)
- more sexual partners

Of the girls who were sexually abused,

- more than 50% had deliberately self-harmed
- more than 50% had been suicidal
- 35% had made suicidal attempts
CBT Programmes for Child Sexual Abuse

The Psychological Services Unit within MCYS offers a range of specialized individual and group programmes for victims, non-offending carers as well as perpetrators of abuse.

- **Recovery for Kids (R4kids)** (11 hour-and-a-half sessions)
- **Recovery and Empowerment for Survivors of Sexual Abuse (RES)** (12 two-hour sessions)
- **Carers Recovery and Support (CRES)** (8 two-hour sessions)
Other CBT programmes for Child Abuse:

- Support to Provide Abuse Recovery and Knowledge (SPARK) - for boys who have been sexually abused (new)

Programmes for abusive parents

- Positive Parenting Programme (Triple P)

Programmes for children of the mentally ill

- Positive, Optimistic, Well-adjusted, Empowered and Resilient Kids (POWERKids)
- POWERTeens
Stage-Oriented Model of Treatment

• **The Initial Phase:** Pre-Treatment Issues and Stabilization

• **The Middle Phase:** Remembrance and Mourning, Resolutions and Integration of the Trauma

• **The Late Phase:** Reconnection, Re-consolidation and Restructuring

**BASK model**
- behaviour, affect, sensation, knowledge
Ochberg (1993) - 3 principles

• The normalization principle
• The collaborative and empowering principle
• The individuality principle
Therapeutic Approach of Programmes for Child Abuse Victims

- Cognitive-Behavioural
- Abuse-focused
- Competence-based
  - knowledge, comprehension, application, ability to problem-solve (Levenson & Morin, 2001)
Adapted from:

- “Treating sexually abused children and their non-offending parents” - Esther Deblinger & Anne Hope Heflin
  - Short-term, evidence-based therapy model
  - For use primarily with children whose disclosures have been substantiated
  - Most appropriate for children with PTSD and/or confusion or misconception about their sexual abuse experiences.

- Project SAFE Treatment Manual - David Hansen

- Group manual for survivors of sexual abuse - Christine Courtois

- “Managing Traumatic Stress through Art” - Anita Rankin

- “Treatment strategies for abused children” - Cheryl Karp & Traci Butler
Primary objectives of R4Kids and RES

- Help children and adolescents understand and cope with abuse-related emotions, thoughts and behaviors
- Challenge false-beliefs and attributions for the abuse
- Prevent re-abuse of self and others through the use of sex education
**Therapeutic Components**

1. Psycho-education regarding Sexual Abuse, Healthy Sexuality and Personal Safety Skills

2. Coping Skills Training
   - Emotional Expression Skills
   - Cognitive Coping Skills
   - Relaxation Skills

3. Gradual Exposure and Cognitive and Affective Processing

4. Behavioural Management Skills Training
Various techniques include:

- didactic teaching
- expressive therapy
- interactive group discussions
- therapeutic games/activities
- role plays
- take home exercises.
R4kids

Safety and Protection Module
1. I am special
2. What are feelings
3. Sharing feelings
4. Learning about our bodies
5. Learning about touches
6. Let’s talk about taking care of myself (X2 sessions)

Abuse-Related Module
8. Talking about what happened to me
9. Let’s talk about not-ok touches
10. Let’s talk about dealing with feelings
11. Saying goodbye
12. 3 month follow up

RES
1. Introduction
2. Self-care and self-soothing
3. Safety
4. Understanding sexual abuse & trauma
5. Sexual abuse and the family
6. Sharing what happened to me
7. Managing strong negative feelings
8. Dealing with guilt, shame and loss
9. Managing destructive behaviours
10. Relationships
11. Boundaries, intimacy and trust
12. Decisions
13. 3 month follow up
CBT components

- **Cognitive Restructuring (RES)**
  - Areas of Maladaptive Cognitions
    - abuse attributions
    - responsibility for the abuse
    - the child’s feelings towards the offender
    - social reactions
    - sexuality and body image
  
  - Eliciting & Challenging Dysfunctional Thoughts
    - Role plays – angel and devil
    - Written exercises – Dysfunctional Thought Record
    - Myths/Facts
    - Debates
Info on Sexual Abuse

1. What is sexual abuse?
Child sexual abuse is unwanted sexual contact with a child under 16 years old.

2. What are some examples of sexual abuse?
Some examples of sexual abuse are: being touched on private parts, molested; rape, being asked to touch the private parts of the other person.

3. Who usually commits sexual abuse?
Girls are more likely to be abused within the family and boys are more likely to be abused outside the family. Some are abused both by relatives and strangers. The first experience of abuse may make them at risk of future abuse.

4. How often does sexual abuse usually happen?
Sexual abuse can happen one time or go on for years. Abuse that occurs outside the family is usually of shorter duration because the abuser has less opportunity of contact with child.

5. How does sexual abuse usually happen?
Most sexual abuse does not involve force but does involve some form of manipulation. Force and violence are sometimes used to threaten the child into obeying. Sometimes, the abuser may use threats of harm, rejection or abandonment, or use tricks or blackmail.

6. Why are children more vulnerable?
Children are dependent on adults and are not yet mature – they are easily influenced. Children are also accessible (easy to find) for adults, especially to family members.

7. What are some reactions to sexual abuse?
Each person reacts in a different way. It depends on many factors relating to the abuse, how family relationships were, and other life experiences, whether they had positive relationships with other people, inside and outside family. We will be going into more details about different reactions in Sessions 4 and 6.

8. How do families react to sexual abuse?
The family often tries to deny that the sexual abuse happened and to keep it a secret from relatives and outsiders. When sexual abuse happens outside the family, the family is more likely to help and protect the child.

9. How can you recover from sexual abuse?
To recover from sexual abuse, many survivors benefit from individual counselling and group therapy.
Myths

**MYTHS about Sexual Abuse**

It’s not sexual abuse if you weren’t touched. (For example, a male relative checks to see “how your breasts are developing”, someone insists they have the right to watch you using the toilet, or someone insists on coming in when you are using the shower)

It is not sexual abuse if the acts were done by someone you love.

If it only happens once, it’s not really sexual abuse. You should just ignore it.

It’s not sexual abuse if you weren’t physically forced.

It’s not sexual abuse if you become sexually aroused or if you had an orgasm during the incident.

Sexual abuse is committed by crazy strangers.

**MYTHS about Date Rape**

1. People who put themselves in dangerous places or situations or who wear revealing clothing are asking for trouble. It’s their fault if they are abused.
2. It is not really rape if the victim isn’t a virgin.
3. Agreeing to kiss or pet means that a girl has agreed to have intercourse with a guy.
4. When guys get sexually aroused, they need to have sex because they can’t help themselves.
5. Girls cannot be “sexually abused” by their boyfriends because they already have a relationship.
6. Teenagers lie about being rape to get attention.
### Activity: Challenging Unhelpful Thoughts

#### Unhelpful thoughts

<table>
<thead>
<tr>
<th>Unhelpful thoughts</th>
<th>Information to answer back or replacement thought</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of all the children in the world, why did this happen to me?</td>
<td></td>
</tr>
<tr>
<td>When I think about my sexual abuse, sometimes I get so depressed that I just can’t get out of it.</td>
<td></td>
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### Anger/Guilt/Feeling Responsible – Towards Perpetrator or Self

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<td><strong>Anger at Perpetrator</strong>&lt;br&gt;That stupid fool does not deserve to live. I’d like to blow his head off so he can never hurt anyone again</td>
<td><strong>Unhelpful thoughts</strong>&lt;br&gt;I'm so angry that I didn't stop him and that I put myself in such a situation. If I had done this, I would not have been abused</td>
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<td><strong>Anger at Self for not preventing the sexual abuse</strong>&lt;br&gt;I’m so angry that I didn’t stop him and that I put myself in such a situation. If I had done this, I would not have been abused</td>
<td><strong>Information to answer back or replacement thought</strong></td>
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**HANDOUT**
### Anger/Guilt/Feeling Responsible – Towards Perpetrator or Self

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<td></td>
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<tr>
<td>Why did I wait so long to tell? If only I had told when it first started to</td>
<td></td>
</tr>
<tr>
<td>happen, the abuse never would have gone so far!</td>
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**Anger/Guilt at Self: Self-Blame**

I don’t know why my father did this. Maybe if I had been more obedient, he would not have sexually abused me.
• **Skills Building**
  
  - Relaxation
  
  - Grounding Skills
  
  - Assertiveness
  
  - Self-care
  
  - Protective behaviours
This child is saying "NO" to touching the grown-up’s private parts.

Leaves me alone.

Let's talk.

Practice saying "NO" and running away. Pretend the person reading with you is a relative who asks you to touch his private parts. Practice saying "NO" and getting away from the person.

A girl's private parts are covered by her swim suit. The real names for a girl's private parts are breasts, vagina and buttocks.

A girl's breasts are covered by the top part of her swim suit.
A girl's vagina and buttocks are covered by the bottom part of her swim suit.

A boy's private parts are covered by his swim suit. The real names for a boy's private parts are penis and buttocks.

Boys and girls both have buttocks. But a boy has a penis and a girl has a vagina.
• Gradual Exposure, and Cognitive and Affective Processing

“I should have been able to stop it”

“I thought _______ really did care for me”

“I would like to hide from people so I don’t have to talk about it”

“I should have been able to stop it”

“I thought _______ really did care for me”
Worksheet (Sharing what happened to me)

Remember: YOU are in charge of how much or how little you tell. Telling what happened to you can make you feel better.

TODAY I feel __________________ about the possibility of telling other my story.

The WORST thing that can happen while telling my story is:

[ ] I won’t remember telling it
[ ] Someone may laugh
[ ] Someone may not believe me
[ ] I will feel pain
[ ] I will explode with emotion
[ ] I will be embarrassed
[ ] I may cry
[ ] Someone may think I’m strange/weird
[ ] I will have to remember
[ ] Something else, like ____________________________________

3. I NEED the group to:

[ ] be understanding
[ ] not laugh or talk while I am talking
[ ] be patient with me
[ ] ask me questions in a caring way
[ ] tell me what they think and feel about what I just said

4. THE PERSON OR PERSONS who sexually abused me are:

[ ] my mother
[ ] my father
[ ] my stepfather
[ ] my mother’s boyfriend
[ ] my brother and/or sister
[ ] my uncle
[ ] my grandfather
[ ] my family friend
[ ] a stranger
[ ] and/or another person like ____________

5. I was ____________________ years old when this started.

6. This HAPPENED to me:

[ ] one or two times
[ ] many times
[ ] more times than I can count

7. This HAPPENED to me when I was:

[ ] at home
[ ] at a friend’s house
[ ] at a relative’s house
[ ] when my parents were home
[ ] when my parents weren’t home
[ ] somewhere else like ____________________________________

8. Before the abuse happened, when I was with the person who did it, I FELT:

[ ] safe
[ ] happy
[ ] comfortable
[ ] sad
[ ] strange/weird
[ ] some other way, like ____________________________________

9. The sexual abuse FELT:

[ ] good sometimes
[ ] shameful
[ ] scary
[ ] painful
[ ] strange/confusing
[ ] I can’t remember
[ ] I’m too scared to remember
[ ] other feelings like ____________________________________

10. AFTER the sexual abuse happened, I thought:

[ ] I did something wrong
[ ] this happens to all girls/boys
[ ] there might be something wrong with my body
[ ] other feelings like ____________________________________
1. THINKING IT WAS MY FAULT
Following are some situations in which women or children wrongly feel they are to blame for the abuse.
It was my fault because I was wearing that dress or those shoes, or put on makeup.
It was my fault because I didn’t behave myself.
It was my fault because I agreed to go on the date.
It was my fault because I cried too much.
It was my fault because I didn’t help out enough.
It was my fault because I was asking for it.
It was my fault because I stayed out late.
It was my fault because I made him angry.
List circumstances in which you were told (or you told yourself) it was your fault:
1. Sometimes I think it was my fault because
____________________________________________
____________________________________________
2. Sometimes I think it was my fault because
___________________________________________
____________________________________________
3. Sometimes I think it was my fault because
___________________________________________
____________________________________________
4. Sometimes I think it was my fault because
___________________________________________
____________________________________________

2. IT REALLY WASN'T MY FAULT
Re-read your last sentences and rewrite them in the following sentences
It was not my fault because
____________________________________________
____________________________________________
It was not my fault because
____________________________________________
____________________________________________
It was not my fault because
____________________________________________
____________________________________________
It was not my fault because
____________________________________________
____________________________________________
Remember: It is not your fault if you had to hurt someone to keep them from hurting you, from hurting you more than they already have, or from hurting someone else.
Who is really to blame for what happened to you?
____________________________________________
____________________________________________
How does it feel to put blame when it belongs?
____________________________________________
____________________________________________
**Education Regarding Child Sexual Abuse, Healthy Sexuality**

- Basic facts regarding child sexual abuse
- Sex education
- Healthy sexuality – sexual desires

<table>
<thead>
<tr>
<th>What is sex meant to be …</th>
<th>What is sex <strong>NOT</strong> meant to be …</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>Bad</td>
</tr>
<tr>
<td>Fun</td>
<td>Dirty</td>
</tr>
<tr>
<td>Joyous</td>
<td>Shameful</td>
</tr>
<tr>
<td>Pleasurable</td>
<td>Hurtful</td>
</tr>
<tr>
<td>Safe</td>
<td>Dangerous</td>
</tr>
<tr>
<td>Private</td>
<td>Secret or furtive</td>
</tr>
<tr>
<td>Personal</td>
<td>Out of control</td>
</tr>
<tr>
<td>A gift</td>
<td>A weapon</td>
</tr>
<tr>
<td>A mutual agreement</td>
<td>A reward</td>
</tr>
<tr>
<td>Something you want to do with someone</td>
<td>Something you do to someone</td>
</tr>
<tr>
<td>Emotional and spiritual and physical</td>
<td>Just physical</td>
</tr>
<tr>
<td></td>
<td>5</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>A</td>
<td><strong>What is sexual abuse?</strong></td>
</tr>
<tr>
<td>B</td>
<td>Name 3 positive ways to self-soothe or comfort yourself when you feel bad.</td>
</tr>
<tr>
<td>C</td>
<td>What are 2 long term effects of sexual abuse.</td>
</tr>
<tr>
<td>D</td>
<td>What’s the difference between healthy and unhealthy relationships?</td>
</tr>
</tbody>
</table>
Observations and Learning points

• Many RES participants revealed that it was the first time they had a chance to discuss the sexual abuse.

• Check-in time was valuable for RES group members.

• CBT strategies e.g. thought challenging, angel and devil – more useful for adolescent group.

• Issue of self-harm for RES group members.
• RES group members asked for support group for sexual abuse victims

• Many unsupported by non offending mothers. Those who had support from mothers fared better than those who did not receive support.

• RES group members requested for mothers to receive help to understand them better

• Conflicted emotions with regard to the perpetrator

• Ambivalent about disclosure of abuse and making police report
...this shows that she thinks that I’m making a false report and that I’m lying...

Am I really my mother’s daughter?!!...
Carers’ Recovery and Support (CRES)

• Maternal support (non-offending parent) is most important for recovery of children (Everson et al., 1989); both the short and long term (Corcoran, 1998).

• Non-offending parent suffers significant levels of distress following a child’s disclosure of abuse (Deblinger et al., 1993)

• Children who receive more support from non-offending parents appear to suffer less post abuse symptomatology (Conte & Schuerman, 1987; Everson et al, 1989)

• A parent’s failure to believe and support a child who reports abuse may compound a child's feelings of betrayal and isolation. (Adams-Tucker, 1982)

• Personal safety skills - more effective if parent is involved (David Finkelhor et al., 1995)
Carers’ Recovery and Support (CRES)

Primary Objective:
To provide carers with:
• the necessary understanding of their child’s experience
• essential skills to enable them to help their child, as well as themselves
• cope with the related emotions, thoughts and behaviors
• knowledge and practical skills to prevent future sexual abuse.
1. Understanding child sexual abuse
2. Understanding the impact of sexual abuse
3. Talking about sexual abuse to your child
4. Coping with feelings
5. Sharing what happened and family issues
6. Prevention, sex education and assertiveness
7. Coping with stress and grief
8. Review
CBT COMPONENTS

- **Cognitive Restructuring**
  - Identifying abuse-related feelings (anger, depression/grief, stress) and underlying thoughts
  - Disputing dysfunctional, inaccurate thoughts, and non-productive thoughts
  - Common areas of emotional distress and dysfunctional thoughts
    - responsibility/guilt
    - sadness
    - anger – at child or parent or perpetrator
    - confusion
Activity: Challenging Unhelpful Thoughts

Responsibility/Guilt

- Of all the children in the world, why did this happen to my child? How could I have been such a fool? Why couldn’t I see this guy is a loser? I am a lousy, lousy mother. I could not even keep my daughter from being sexually abused. I did not even know the abuse was going on!

- I should have been looking out more for my daughter. I should have been supervising him all the time so I could have protected him.
Anger at perpetrator
• That scumbag does not deserve to live. I’d like to blow his head off so he can never hurt anyone again.

Anger at self for not preventing the sexual abuse
• I’m so angry that I didn’t prepare my child for this. If I had taught her how to respond to a jerk like that, she would not have been abused.

Anger at child for participating in sexual abuse incident
• I don’t know why Tiffany did not just hit him or come home. We’ve talked about how to handle situations like this, and I’m really frustrated that she let this happen.

Anger at child for not disclosing the sexual abuse incident earlier
• Why did she have to wait so long to tell? If only she had told when it first started happening, the abuse never would have gone so far!
• **Skills training/ Empowerment**
  - Improving communication and relationship with their child
  - Learning how to talk to their children directly about the abuse experience
  - Imparting to children assertiveness skills and sex education
  - Behaviour management skills: understanding children’s behaviours
  - Managing fear and sleep problems
  - Dealing with inappropriate sexual behaviour
Discussing Sexual Abuse with Your Child: Opening lines of communication

Sexually abused children may process their sexually abusive experience over a course of many years. As a parent of a sexually abused child, it is important that you maintain lines of open communication with your child. If he or she has questions in the future as we expect they will, you are the person who is most likely to be available to respond to those questions or concerns.

- Encourage questions
  - Try to encourage your child to ask questions even if you don't know the answers. You can praise them for asking and try to help them find out the information.

- Reinforce the sharing of problems
  - Reinforce them for sharing their problems with you.
  - You can say something like, “Problems always seem bigger when you keep them to yourself and they get smaller when you share them with someone else.”

- Encourage the expression of feelings in an appropriate manner
  - Encourage your children to share their feelings with you. Tell them there is no wrong and right way to feel, and that it is helpful to talk about their feelings. However, your child need to know that there are appropriate/effective & inappropriate/ineffective ways of showing their feelings
  - Encourage your child to express feelings through art, music, writing, song, talking
  - Children also need help to recognise and label feelings.
  - Tell your child how you are feeling too.

- Special parent-child time
  - Set aside special times in the house that are just for you and your child to talk and do activities.
• **Gradual Exposure Work**

- Helping parent confront and cope with discussions about the child’s abuse

- Enable parents to model for their child how thoughts and discussions of the abuse can be tolerated without significant distress and need not be avoided.

- Sharing what happened
• **Focus on sexual abuse**
  - Common feelings of parents
  - Understanding child sexual abuse
  - Parent disclosure
  - Family reaction to disclosure
  - Effects of abuse on the family
  - Signs and symptoms of abuse
  - Prevention/protection strategies
  - Personal safety and safety planning

• **Individual Growth Work**
  - Past history of abuse
  - Dependence on offender
  - Dealing with feelings
Your child may show a wide range of behaviours as a result of the abuse. Now, looking back, some of their behaviours may make sense.

- These include: lying, stealing, crying a lot, being defiant, missing school, school performance dropping, being aggressive or being withdrawn. As you can see, some of the behaviours are opposite from others. Many children show some of these behaviours but others seem normal.
- Some other behaviours include:
  - Low self-esteem - describing themselves as bad, stupid, ugly or useless
  - Ongoing learning problems - learning becomes hard to concentrate on when children have experienced so much stress
  - Difficulty forming trusting and positive relationships - they often believe they are wrong, have little faith in themselves and have problems making friends
  - Lack of self-respect - because a child who was abused has not had her rights respected by an adult, someone they should be able to trust. This destroys their ability to respect themselves.
  - Confusion about their own role within the family - the blurring of the boundaries between them as a child and them as a sexual being can make it difficult for a child to find a correct role for him/herself within the family
  - Ongoing anger that cannot seem to be resolved - this is one of the most common feelings. Sometimes the child finds it difficult to work out why they are so angry
  - Soiling or wetting
  - Guilt - they may feel guilty for not stopping the abuse, for telling someone about the abuse or the effect of the disclosure on the other family members
  - Self-destructive behaviours - stemming from low self-esteem
  - Depression - depressed or withdrawn

### Signs of Sexual Abuse

There are various lists of possible physical and behavioral indicators of child sexual abuse, some of which are:

- Waking up during the night sweating, screaming or shaking with nightmares.
- Masturbating excessively.
- Showing unusually aggressive behavior toward family members, friends, toys, and pets.
- Complaining of pain while urinating or having a bowel movement, or exhibiting symptoms of genital infections such as offensive odors, or symptoms of a sexually transmitted disease.
- Having symptoms indicating evidence of physical traumas to the genital or anal area.
- Begins wetting the bed.
- Experiencing a loss of appetite or other eating problems, including unexplained gagging.
- Showing unusual fear of a certain place or location.
- Developing frequent unexplained health problems.
Observations and Learning Points

• Psycho-education on the CBT model and skills building suited participants well
• Experienced conflicted feelings about the perpetrator and feelings of self-blame.
• Many perceived themselves to be supportive but some children did not share that perception.
• Many had questions about how to show more support to children
• Most were uncomfortable about providing sex education to their children.
• Guilt feelings for not having protected their child.
• Fears of relatives and neighbours knowing.
• Forming a support group amongst participants
• Give “permission” to separate the abusive behavior from the person
Attachment-Trauma Problems - trauma can affect attachment relationship, parental responsiveness, abuse

Protective Environment

Self-Identity
Relationship Building
Explore Trauma
Mourn Losses
Affect Tolerance and Modulation
Behavioural Mastery

Consolidation

ATTACHMENT THERAPY
(Beverly James)
Thank you