

THEORETICAL-PRACTICAL CONSTRUCTS IN RESEARCH ON CHILD SEXUAL ABUSE

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Abstract

The importance of the problem of sexual violence is beyond doubt in contemporary psychological and pedagogical theory and practice both in Russia and in the world. Over the past three years, law enforcement agencies have recorded an increase in crimes that include sexual abuse and sexual exploitation of children and adolescents, with rape and violent acts of a sexual nature accounting for a significant proportion of these crimes. This article discusses an interdisciplinary approach to analyzing the problem of sexual violence against minors. The risk factors of sexual crimes identified in the article may be of interest to practitioners in various fields (lawyers, psychologists, teachers, police, and social workers) for corrective and preventive work with children and adolescents. The authors make a clear distinction between the concepts of a pedophile and a person who commits sexual violence against minors, myths about the identity of the offender, his or her motivation for committing the crime, and experience working with sexual aggressors in the United States in Psychological Centers. The markers presented that identify a child as a possible victim of violence and the psychological consequences of violence described can be relevant to the parent community.

Keywords: violence, sexual violence, pedophilic disorder, age of consent, thinking errors, motivation, social development, coercion.

INTRODUCTION

The modern society is characterized by large-scale transformations in various social spheres from economics, politics, medicine to psychology, pedagogy, and jurisprudence. Along with the positive impact on society, reforms and global civilizational challenges also lead to negative consequences the social sphere specialists record an increase in aggression and violence against the most vulnerable category of citizens - minors. This circumstance stimulates specialists in the social sphere to turn their efforts to the development and implementation of measures aimed at solving the problem of violence against children and adolescents.

Having examined the legislation of Russia and the United States, we see that in the legal interpretation, sexual abuse of children is practically the same. Sexual violence includes not only rape, but also any touching of the genitals of a child by an adult, or an older adolescent, if the child has not reached the age of consent and is not fully aware of what is happening to him (in general, the age of consent in both Russia and the United States 16 years old, in some states, for example California 18 years, in some states 15 years). It is believed that by this age the child is emotionally and mentally mature enough to make such decisions consciously and understand the consequences of these actions. For example, if an adult

(biological parent, guardian, relative, neighbor) starts explicit sexual conversation with a child (under 16), shows him/her pornography, considers it acceptable if the child witnesses his parents' sexual activity, or if a caretaker violates child's boundaries by, for example, walking naked around child at home or washing his/her genital outside of appropriate age, all of these may contribute to development of poor boundaries and excessive interest in sex due to premature sexualization. It is important to emphasize that the age of consent is not only passport data, but also the psychosocial level of development of a child.

According to the Criminal Code of the Russian Federation, sexual violence includes coercion into sexual contact and lecherous actions against persons under the age of sixteen (The Criminal Code, 1996). In a broad sense, violence refers to the use of a child and adolescent by another person to obtain sexual gratification. The following concepts can be found in Russian literature: sexual assault, sexual assault, rape, demoralization, incest, demonstration of pornography to children, exploitation of a child to produce a pornographic product and prostitution. Sexual violence can take the form of showing an adult's genitals to a child or showing pornographic materials to a minor, all types of sexual intercourse, involving a child in filming or watching pornographic films, pictures, etc., including on the Internet.

According to the UN, girls are 1.5-3 times more likely to be subjected to sexual violence, but as for boys, sexual violence against boys is characterized by a lower level of disclosure of information about it by victims. In addition, boys who are victims of male sexual violence must overcome additional psychological difficulties associated with stigma and, often, with sexual identification (Institute of Federalism and Civil Society, 2015).

Methodological Framework

There have been conducted multiple research on the topic, however, there is still not a single specific reason, one specific mechanism for the formation of aggressive sexual behavior towards minors. Let us turn to the biological theory of this problem: are they born by those who further commit sexual violence? Studies of the brain were conducted (Aigner et al., 2000; Galski,

Thornton & Shumsky, 2008), to identify disorders of brain activity, to determine brains' abnormalities. Some studies have found ambiguous confirmation of the biological theory of the formation of aggressive sexual behavior, but most researchers agree that in most cases there are no deviations and there are no statistically significant differences between people who have never committed such crimes and people with proven aggressive sexual behavior against minors.

Neuropsychological research provides evidence that both adolescents and adults who have perpetrated sexual assault have deficits in their executive functioning. That is, these are the functions of control, control of impulsivity, regulation of cognitive functions. This fact is confirmed in the practice of clinical psychologists dealing with this problem. Particularly striking evidence of this fact is found when working with adolescents with a history of severe ADHD, increased impulsivity, hyperactivity, and poor self-control (Tastan & Davoudi, 2013; Joyal, Plante-Beaulieu & Chanterac, 2014).

As for the hormonal background and its connection with the manifestation of sexual aggression, there is no concrete evidence of a connection. Some researchers say that those who commit sexual violence have a low level of testosterone, while other researchers claim an increased level of testosterone (Wong & Grave, 2018; Yildirim & Derksen, 2012).

Another science that is looking for an answer to the question of the causes of aggressive sexual behavior is genetics. Several years ago, a large-scale study was carried out in Sweden (Långström et al., 2015), because of which evidence was found that a certain predisposition to sexual violence is transmitted through the male line. That is, if there is a man in the family who has committed sexual violence, then this behavior is more common among other male relatives than among those who have not found this fact in the family. However, the authors of this genetic study themselves pointed to many limitations and called for caution in the interpretation and further use of the information obtained.

It is also necessary to separate the concepts of "a person who has sexually abused children", "a pedophile" and "a person who has a pedophilic

disorder,” since even among specialists there is some confusion in these concepts, which is categorically unacceptable for those who work toward addressing the issue of prevention, correction, and direct work with criminals. In Russian language, the concept of "pedophile" has become, in fact, is used to refer to all who commit sexual violence against children. This is fundamentally wrong, since only about 5 % of criminals who committed violence against minors can be attributed to pedophiles. The remaining 95 % of criminals do not meet the criterion, which is meant: pedophilia is a disorder, that is, it is what is included in the International Classification of Diseases (World Health Organization, 2020). According to this classification, this is a person who either has an exclusively sexual interest in children (that is, he is never sexually attracted to adults) or has a predominant interest in children, that is, a person can have a permanent adult sexual partner. That is, the very fact of being in a romantic relationship with another adult does not at all guarantee the absence of disorder, which is a very important circumstance for a practicing psychologist. Not every person who has committed sexual assault meets these criteria. Then it is important to understand who are these 95 % who commit sexual crimes against children, if there is scientific evidence that there is also no genetic predisposition. Part of the research (Hermann, Nunes & Maimone, 2016; Kingston & Bradford, 2013; Kingston & Firestone, 2008; Malamuth et al., 1995) in this area says that the cause of sexual violence is partly toxic masculinity, control, and strength. Today, it is safe to say that there is a number of factors (risk factors and protective factors) that must be combined at the same time in order for sexual violence to occur. For example, there is convincing evidence that people who commit sexual violence do not have well-developed social skills (Marshall & Marshall, 2000), lack of self-confidence while growing up, which in turn didn't let them to make plenty of friends their age, to meet their need for communication, including intimate communication with people of their own age. At the same time, specialists need to be quite careful in their judgments and, of course, it is unacceptable for every modest teenager who has no friends who is the object of bullying, shows impulsiveness in relations with others (quickly makes friends and quickly loses them) to be classified as potential criminals.

Another factor influencing the development of deviant sexual behavior is the presence of thinking errors. This factor finds its confirmation in cognitive theories based on the practical activities of psychologists involved in the therapy of deviant sexual behavior. What is usually called thinking errors and, which is an explanation, or rather a justification of their illegal actions toward children (D'Urso et al., 2018). The most common thinking errors are: “my actions did not cause any harm to the child”, “the child was able to decide whether he wanted to have sex with an adult or not,” or seeing the child as an equal emotionally. For example, the person may say the following: "yes, she was ten, but she was not like all ten-year-old girls, she understood what was happening, she wanted it, she provoked and set it all up herself."

Result and Discussions

Thus, it should be noted that most therapeutic programs are developed because of working with thinking process, and, specifically, thinking errors of people who have committed sexual violence. The duration of work with a client is on average two years with weekly therapeutic work with a psychologist. The criterion that determines the client's readiness to end therapy is, first, the formed ability of the client (offender) to talk about the committed crime consciously but not in socially desired terms, identification of thinking errors and getting rid of thinking errors. Therapy for working with people who have sexually abused children is based on cognitive-behavioral therapy, which has low rate of relapses. Therapy can consist of the following blocks: acceptance of responsibility for the crime committed; working on thinking errors; working with aggressiveness and self-control; work with sexual motivation (pedophilic disorder); control of environmental factors through the prohibition of visiting places where children can meet, for example, parks, playgrounds, etc. such a person should never be alone with the child in the room, cannot bathe him, change his clothes, etc. (if a blood child becomes a victim, then the victim and the perpetrator should never live together and they will never have personal contact); work with personal (individual) characteristics, behavior and beliefs: toxic masculinity, weak self-control, prolonged depression, aggressiveness.

In addition to therapy, another means of correcting and controlling of behavior of a sex offender in several countries, including United States and Canada is a regular polygraph testing (on average every 6 months). In addition, polygraphy survey data allow you to obtain additional information about the client's progress in psychotherapy in terms of adherence to the program rules and conditions of early release, the client accepting responsibility for his actions and openness in therapy. The regularity of the polygraph examination has a positive effect on the client's motivation and involvement in therapy (Grubin et al., 2019).

It is believed that there are several components of motivation for committing the crime of sexual violence. On the one hand, this is sexual motivation, which may include features directly related to pedophilic disorder (sexual interest in children). Most importantly, however, child sexual attraction and pedophilic disorder do not have to be present for the crime to be committed. Also, it is worth remembering that this motivation is not the only one. Often, sexual crimes are committed because of aggression, revenge, that is, there is no sexual component at all. Of course, pedophilic disorder significantly increases the risk of committing a crime, but importantly, it does not provide any guarantee that a person with a pedophilic disorder will commit a crime. A fair number of people who meet the ICD 11 criteria for pedophilic disorder never sexually abuse children. However, it is statistically confirmed that those who do not qualify for persons with a pedophilic disorder also commit these crimes (Watter & Hall, 2020). In addition, it can be emotional closeness, rather even congruence with children, a sense of unity, a feeling of being on the same level with the child (Demidova et al., 2020; Pipatshukiat, 2020).

Another important factor in the commission of a crime is overcoming barriers - internal barriers and external barriers (Lussier, McCuish & Cale, 2020). That is, a combination of the internal characteristics of this person with external capabilities and circumstances conducive to the commission of a crime now. Undoubtedly, situational moments have an impact on the commission of a crime: a state of alcoholic or drug intoxication, a state of passion, strong emotions at a given moment in time and how, the top of the situation, the presence of a

vulnerable child nearby (in the same room alone).

Increased sexual desire, hypersexuality, in general, not exclusively in relation to children, plays a rather serious role as a risk factor (Marshall, 2016). For example, statistically proven people with increased sex drive are much more likely to watch child pornography (Seto et al., 2015; Seto, Reeves & Jung, 2010). This is not because they are interested in children, it is because the rest of the pornography has become less interesting and they want to see and feel something more forbidden, exciting, and more deviant. It has been statistically proven that viewing child pornography is one of the factors that increase the risk of committing a crime. There is evidence that people who are constantly looking for new sexual partners, novelty in sexual contacts, tend to force their partners to have sex (Klein et al., 2015; Seto & Eke, 2015; Seto, Reeves & Jung, 2010) and, on this basis, additional sexual aggression can develop, which can lead to the commission of crimes.

It is important for specialists to pay attention to the fact that the presence of the listed factors is not enough to commit sexual violence against children. One of the most important components in this problem is the presence or absence of self-control and the level of development of self-regulation. For example, there is a stereotype that a pedophile or a person who sexually abuses a child is a middle-aged man showing aggression, using physical force against a child (Dvoryanchikov & Gutnik, 2012). The factors are very different. First, one third of all crimes of sexual violence are committed by adolescents, not adults; secondly, an attack, as a physical act, occurs only rarely, those who abuse children act carefully, gently, through the establishment of close, often friendly relations. This is largely due to the peculiarities of their social development, their emotional unity with children or those who are much younger. It should be emphasized that for adolescence, the difference of 3 years is a very significant difference in age. It is easy for a teenager with such a difference in age to gain the trust of a child, to carry out coercion, to carry out manipulation, to win friendship through the purchase of sweets, ice cream, toys. Indeed, most cases of sexual violence occurs in the family (about 40% of sexual abusers of minors are relatives of victims of violence (Institute of

Federalism and Civil Society, 2015) and more often it is a stepfather and daughter than a blood father and daughter. It is only the accessibility of the child as such that acts as such, for example, sexual violence against boys is committed by persons, regardless of their sexual orientation (Långström & Hanson, 2006).

It is often very difficult to identify the fact of abuse since offender's act carefully, know what to say to children so that children do not betray them, do not tell adults about what happened (Schmidt, Mokros & Banse, 2013). Some children do not show any emotional or behavioral changes and symptoms for a long time, and parents may find out about what happened after several years. That is why, the most important factor influencing the disclosure of information about abuse is trustful relationships in the family, the presence of contact with the parent, the ability of the child to freely tell the parents about what worries him. Of course, attention should be paid to emotional, behavioral changes, a sharp decline in academic performance, the dynamics of the relationship between a child and an adult family member, for example, the appearance of a fear of communication or excessive friendliness. The typical symptoms of the manifestation of sexual trauma should be known to all people in helping professions. When working with children who have been subjected to violence, it is also important for the specialist to know and understand the characteristics of the behavior of persons who commit sexual crimes against minors. This is especially valuable when working with children who are unable or unwilling to talk about sexual abuse against them. Then the psychologist can build his work, conversation, questioning with the child based on the knowledge of what the adult could tell the child, under what circumstances it could happen, what emotional aspects were affected, manipulations.

A frequently asked question when working with a child victim was the fact of a crime or whether the child lied and falsely accused another person. Modern research on lies (Lamb et al., 2011; Saywitz, Lyon & Goodman, 2011) tells us that children lie and deliberately accuse an adult very rarely, on average about 5 percent. If we talk about the scenario by which it becomes known about the committed abuse, it is often the situation the child goes to the school

psychologist and informs him of abuse. Frequently, it happens after he/she hears from friends or from the schoolteacher in the classroom that what happened to him/her was outside of normal and was abusive. At the next stage, the psychologist is usually obliged to inform the appropriate protection or guardianship authorities, specific for the country, about the fact of the conversation with the child and about the information that was received. In many countries, there is a practice of removing a child from a family in the event of an immediate threat to the life or health of the family. However, in most cases, the child returns to the family immediately after the end of the proceedings, of course, in the absence of evidence of abuse of the child. During the proceedings, the child is assigned a forensic examination, as well as a mandatory medical examination in the hospital. The examination consists of a series of open questions about what happened. Unfortunately, not every child is psycho-emotionally ready to answer such questions. Additionally, the influence of others and their reactions, subsequent events and personal experiences of trauma can negatively affect the child's ability to talk about what happened. In this regard, situations regularly arise when, in the process of forensic examination, a child begins to deny everything, or changes his words, which significantly complicates the work of specialists. Such situations arise either when the child is asked many times, or when he was given to understand how to answer the questions of the examination and that it is categorically impossible to say. In this case, the child is assigned additional diagnostics with psychologists. The need for additional expertise may also arise if the police, social workers, or parents have a suspicion that there have been additional cases of sexual violence, suspicion of additional participants, etc. During diagnostics, psychologists also ask the child very specific and detailed questions, carry out additional diagnostics of the child's emotional state (Katz & Hamama, 2013), diagnose the presence of psychological trauma, collect information from social workers, parents, the child's own words (for example, that a five-year-old child knows about sex, how much he describes in detail the genitals of the offender, etc.) and on the basis of this, a conclusion is made about the fact of committing sexual violence. That is why it is extremely important to have special knowledge about the

peculiarities of the experience of trauma in children and the peculiarities of information disclosure. If the child makes contact and confirms the original story in his/her interview, the case is referred to the police and the court. The police then work on finding the evidence.

Quite often, specialists working in the field of violence and abuse have a question about the personality of the offender himself and whether it is possible, even before he commits a crime, to work with his thinking errors: imaginary equality, shifting of responsibility, misinterpretation of actions, etc. In many countries there are specialized psychological centers, which proactively help people with pedophilic disorder and paraphilia to prevent the commission of a crime. For example, in Germany these are the centers of the Prevention Project Dunkelfeld network (Rettenberger, 2018), in the USA the Medlin Treatment Center, and other psychological centers and support groups. In Canada, Sweden and Norway, there are a few government-funded therapeutic programs (Schmucker & Lösel, 2017; Ward & Durrant, 2021). In Russia, this work is carried out by the N. N. V.P. Serbian". There are separate therapeutic programs for children, for adolescents who behave sexually or have suspended sentences for offenses related to sexual behavior. Also, in North America and Europe there are support groups for people with problems on this spectrum, working in a similar way to support groups for people with addictions. The presence of such support groups makes it possible to provide counseling and preventive assistance to a wider population for whom psychotherapy is inaccessible. These groups are different in their composition and often include professional psychologists or consultants who work with thinking errors, and with emotions, and with self-control, somewhere these are groups where people meet and talk about their problems, but also in this case, it is a good prevention of crimes (Mann, Hanson & Thornton, 2010). The development of similar support groups is one of the most important areas of development in the field of correction and prevention of deviant sexual behavior in Russia.

Conclusion

As a result of the theoretical and methodological analysis of the problem of sexual violence and the description of the practical work of psychologists, the authors of the article emphasize the need to study this issue both in an interdisciplinary discourse and in an international context. The experience of psychologists, in particular the United States, can also be useful for Russian specialists working in various sectors of the social sphere with minors who have been subjected to sexual violence. Specialists in the social sphere need to have knowledge not only about victims of violence, but also about the personality of sexual aggressors, in this regard, the authors of the article purposefully carried out an intersection in the description of not only victims of violence, but also the offenders themselves. At the same time, the wide and aggressive prevalence of sexual crimes poses a challenge for specialists to organize preventive and educational work with minors and their parents. First, it is necessary to inform children and adolescents in a language they understand about "good and bad touches", why you should not touch your brothers and sisters, how this can affect them emotionally, physically, mentally. The provision of individual and group therapeutic assistance to minors should be based on the already existing international experience in providing psychological assistance to children and adolescents, as well as knowledge of the consequences of sexual violence. Speaking about the consequences, it should be said that there are a large number of options from very severe forms, such as post-traumatic stress disorder, depression, anxiety, changes in behavior, in particular, an increase in aggression, an increase in sexualization, running away from home and others to minimal emotional consequences associated with the experience of one strong emotion (anger, fear, etc.) and/or feelings (for example, shame) (Nutskova, 2018). At the same time, even if the consequences are minimal, both a specialist psychologist and a mother (most often) need to work with the child. An undoubtedly significant role in solving the problem of violence should be played by the state and law enforcement agencies, on the one hand, through the formation of public opinion condemning this phenomenon, on the other hand, by increasing the general awareness of the population about the problem

of violence, its forms, consequences, and available resources (including on the Internet) for survivors of sexual violence.

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