

## Ways to Support a Caregiver When their Child has been the Victim of Sexual Abuse

Friends, relatives, teachers, and other supporters of parents often don't know how to be helpful following child sexual abuse, because this topic isn't widely talked about. Parents and caregivers of abused children frequently report feeling alone, while in other situations of grief and loss society has developed traditions and rituals to provide help and support.

Parents of child sexual abuse victims face the huge task of helping their child to heal at a time when they (the parent) are dealing with their own grief and violation of trust, and while navigating unfamiliar systems. They must make decisions about mental health services and make sense out of sometimes intimidating legal systems. They and their child may have to testify against someone they used to trust as family. Or, they may be struggling with the fact that there was not enough evidence to hold the offender accountable. Some parents are thrown into the role of head of household and primary breadwinner as well as single parent. Others are grieving the abuse of one child by another in the immediate family. In the meantime, their child and family is in crisis and they are left to pick up the pieces and go on. All of these situations have a direct impact on functioning.

### **General Information:**

- Approximately one out of every four girls and one out of every six boys is sexually abused prior to age 18.
- Many children do not tell.
- The majority of sex offenders are known to their victims.
- Most sex offenders are male.
- Juveniles commit almost half of all sexual crimes against children.
- Child sexual abuse is a criminal act of choice.
- Some people mistakenly believe that each family member plays a part in keeping the abuse going and thus each holds a part of the responsibility. The stereotype is that the caregiver knew on some level that the abuse was happening. However, in the majority of cases, the caregiver was the last to know.
- Many children do not tell for a period of time for a variety of reasons. Some are threatened not to tell, some care about the offender and don't want the offender to get in trouble, some know that their caregiver will be upset and want to protect his/her feelings. Other children are too young to understand that what is happening is abuse.
- Whatever the child did or did not do, s/he was never responsible. The offender holds the sole responsibility for the abuse. If there is no offender, there is no abuse.

The persons closest to the offender will often be in denial. Families sometimes divide their loyalties in situations of child sexual abuse, which can add to the caregiver's grief. Some members blame the parent or even the victim for the abuse, rather than placing responsibility on the person who chose to offend.

Child victims who receive support from their caregiver(s) and receive counseling (if indicated) fare better in the long run. Support to the caregiver is vital in order for him/her to adequately support the child victim.

### **What to Expect:**

Caregivers often experience grief when they learn of the abuse of their child. Many professionals who work with victims of abuse use a framework that describes grief in stages. These stages can be similar to those that a person would experience if they lost a loved one to death. Over a period of weeks or months the caregiver may have strong emotional reactions and changes of moods; possible periods of depression with physical signs of distress like sleep difficulties, changes of appetite, loss of concentration, and crying. Grief is very individual; it is the process of saying “good-bye” to how things used to be prior to the abuse, coming to terms with it, and finding resolution and happiness again. The ideal is to move through the stages and not to get “stuck” in one stage for an extended period of time, which can slow the recovery process. Not everyone will experience all of these stages; not everyone will experience the stages in this order; sometimes caregivers cycle through some of the stages more than once.

### **The General Stages of Grief:**

**Stage 1: Denial and Shock** - Caregivers usually experience shock at hearing about the abuse and imagining it happening to their child. This imagining can cause secondary trauma for the caregiver, because they are so connected to their child. Denial may follow, denial that it could really be true. Caregivers report feeling like “it’s all a bad dream” and “tomorrow things will be back to normal.” In this stage, some family members are tempted to question the child over and over about what happened, which is not good for the child and can interfere with a professional interview later.

**Stage 2: Anger** - Anger can have more than one focus. Caregivers are often most angry with themselves for not knowing and not protecting. They also can feel angry about being betrayed by the offender, having their trust in the offender violated, waiting for the investigation process to unfold, or feeling angry that investigators and other professionals aren’t taking things as seriously as the caregiver thinks they should be or moving fast enough. Caregivers also report feeling anger at the suspect and wanting to harm him/her and “take care of the situation” themselves. Other feelings might include guilt, betrayal, hate and confusion.

**Stage 3: Bargaining** - This is the “what if/if only” stage when the caregiver tries to “bargain away” the abuse, to undo in his/her mind what happened with the hopes of quickly moving back to normal life. Many caregivers grapple with guilt and forgiving themselves. Examples: “If only I hadn’t worked that night,” or “What if I had never married him?” In this stage, some caregivers are overly attentive to their child’s needs and wants, hoping that will erase or make up for things. Some resist discussing or dealing with the abuse, to try to ignore it or sweep it under the rug. Others busy themselves in a multitude of activities so there is less time to think about what happened. If this stage is successfully negotiated, the caregiver will recognize that the only one solely responsible for the abuse is the offender who chose to offend.

**Stage 4: Depression** - Depression is a normal grief reaction. Expect it. Signs of depression may include withdrawal and isolation, apathy, eating too much or too little, easily tearful, sleeping too much or too little, or caring less about appearance. Prolonged depression with no periods of lighter mood is a sign to seek professional help.

**Stage 5: Acceptance** - Acceptance does not mean forgetting, but it means that the caregiver no longer feels all the stages so intensely. Acceptance means that there are other things in life to focus on and that life can go on. Acceptance is possible.

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## **How You Can Help:**

- Do be aware that if the caregiver has an abuse history, this situation may trigger memories and feelings. S/he may need to seek professional support for him/herself in order to be available for the child victim. The Children's Center Family Support Services is a resource with support, referrals, and a support/information workshops for caregivers and their support persons.
- Do be aware that if you have an abuse history yourself, this situation could trigger your own memories and feelings. You may need to get support for yourself, likely someone else besides the caregiver.
- Do remember that the caregiver's challenges and grief will likely dominate your time together, at least for awhile.
- Do be willing to witness great pain and believe the unbelievable. Find your own healthy ways to process that pain in order not to be consumed by it.
- Do listen without giving your opinion, unless asked. Sit with your friend/relative and let them talk.
- Do try to understand. Be as empathetic as you can. Validate the caregiver's feelings as a part of the grief process and not as something to be rushed through.
- Do ask him/her how you can help; what are the immediate needs?
- Do learn all you can about child sexual abuse, healing, and resources in the community. Contact the Children's Center Family Support Services at 503-655-7725, identify yourself as a support person and request an educational packet
- Do lighten his/her load, if you can, by meeting a basic need (bring over a meal, take home their laundry, water the yard, provide childcare, etc.).
- Do watch for safety concerns. If the caregiver is unable to function or meet daily responsibilities and you have concerns that s/he might be dealing with depression or feelings of self harm, call Clackamas County Behavioral Health for assistance at 503-655-8401.
- If the caregiver is isolated, take an active role in helping expand his/her support system and get connected with skilled support.

## **Suggestions:**

- Don't bring up your own past abuse history and expect your friend or relative to support you when they are dealing with their own grief.
- Don't assume you know all about child sexual abuse or that you understand how your friend or relative feels (if you have never educated yourself or been in a similar situation).
- Don't say or imply that the caregiver is to blame for the abuse that happened to their child. In many cases, s/he will already be blaming themselves.
- Don't take it personally if the caregiver withdraws, is angry, is sad, or doesn't want to do the activities that you have shared in the past. Grief takes time.
- Don't try to smooth things over, minimize what happened, or ignore the situation.

Child sexual abuse is a painful situation, but with the right supports, children and families can heal. Caregivers need to call on and depend on their support persons in order to stay centered and focused on helping their child at this difficult time. Your friend or relative is fortunate to have people like you come forward to bolster them and see them through to healing.