Children exposed to sexually and violent abuse
Assessment of abuse and experiences

An explorative evaluation of a Pilot-program offered to abused children and non-violent caretakers

Mastering - Well-being - Building of safe and supporting frames

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Background: The Stine Sofie Center (SSC)
Questions asked: Is there a need for a National competence center in Norway?
  - Enquête study
  - Rates of child abuse in Norway
  - What kind of content should a competence center build upon?
Our project: The Pilot-program: Theoretical background
Explorative evaluation study with assessment inquiries
Design and Methods
Some Results
  - Assessment
  - Evaluation
Conclusions
Our study’s Background: The Stine Sophie Center

The Stine Sofie Center (SSC) was established about 20 years ago in the aftermath of murders and rapes of two little girls. SSC’s main policy have a.o. activities been:

• To protect children from violence and abuse by informing and educate authorities, organizations and professionals working with children about child abuse and child homicide.

• To inform— in a safely manner - children in school and kindergarten about unacceptable behavior with respect to sexuality and violence, and to motivate them to tell caring people if they have experienced unacceptable and illegal behavior.

• To change legal structures in a way that families who have lost their children in homicide, get information about the “their” perpetrator that protect them from more insecurity and fright (e.g. when perpetrator leave prison, /move back to victim’s surroundings).

• Develop and offer seminars that activate resilience processes and well-being.

And point that we were engaged to evaluate:

• To work out and offer courses to children and their caring persons exposed to violence and sexual abuse, that contribute to recovery, a safer and better everyday situation, well-being and mastering everyday activities.
Studies from several countries have documented multiple adverse effects of the traumas sexual and violent abuse may generate (referred in Bjørnebekk & Mørch 2017).

The experiences from SSC got through their work were in line with the international studies. This made them question if there was a need for a broader center, - a national competence center – both for children exposed to sexual and violent abuses and their non-violent caretakers.

SSC started to analyze if it really was a need of developing a knowledge based National Competence Center and, if it was, what kind of content should a national competence center offer their targeting groups.
SSC’s analyze: Step 1

Searching for similar competence centers

- No national Norwegian competence center was or had been accessible for sexual and violent abused children and their non abusing family members

- Search on Internet did not reveal any other corresponding centers internationally
SSC’ analyze – Step 2

Is it a need for a permanent National Competence Center targeting sexual and violent abused children and their non violent family and caretakers?

An enquête study was carried out among
- Children exposed to abuse
- Abused children’s non-violent caretakers
- Adults exposed to abuse in their childhood
- Professional workers dealing with abused children

The study indicated

1. «Yes», there is a need for a National Competence Center
2. The Stine Sofie Center had enough experience, knowledge and understanding of the phenomenon to build and to house a National Competence Center (Grøgård 2013)
What can available statistics on abuse tell about the need for a National Competence Center?


Statistics based on police data:
- During a ten years period (2003 – 2012): Each year about 1000 individuals (0-19 years old) recorded abuse to the police
  - Each year about 170 were under the age of 10
  - Each year about 445 victims of criminal sexual behavior were between 11-16 years
- More serious cases have increased during the last years

Judge questioning at Statens Barnehus:
- About 6000 questionings about abuse in 2016: 36% about sexual lawbreaking, 58% about violence, 7% other (e.g. sex mutilation). The results indicate that it is about 8 times as many cases as in 2003

Self report statistics
- About 5% of women report exposure of rape before 18 years of age
- About 5% report being victims of serious violence
- 1.5% of boys report sexual criminal experience before 13 years.
- About 5% report serious violence in childhood
The rate of children exposed to sexual and violent abuse is relatively low in Norway, even according to self report studies.

Yet, several hundreds of children are suffering from abuse each year.
Conclusions step 1, 2 and 3

Results from the enquête-study and the statistics referred indicate that

• There is a need for a center offering courses that may contribute to recovery and healthy lives for several hundreds Norwegian children each year

• No corresponding competence Center was found either in Norway or internationally. This underscore a need to build and develop a National Competence Center

As a result a more systematic work started to develop a National Competence Center at the Stine Sofie Center
Step 4
Developing a knowledge-based content to the core courses offering at a National Competence Center

1. Developing the center’s visions and goals
2. Engaging experts on trauma, resilience, and treatment of abuse, to present the scientific base to build upon for the course program content
3. Some main points on exciting activities suited to activate and develop joy, well-being, mastering, resilience as well to reduce stress and building of safe and supporting frames in the families, was presented
4. A curriculum was developed around these points and presented as a six days course program
5. Since no corresponding center was found, the center was recommended to evaluate the program developed
6. The first course program offered to the children and their caretakers was tested out as an exploring Pilot to be evaluated before the total course program was offered on broad basis to the target groups
7. Bjørnebekk and Mørch was engaged to evaluate the Pilot
The Pilot program

Theoretical Background (in Bjørnebekk & Mørch 2017)

- Effects of trauma triggered off by sexual and violent abuse that influence long-lasting stress on the brain’s emotional and executive centers
- Effects on emotional regulation and how the child are depending on others, specially from their care takers, for help to emotional regulation
- Resilience activation and it’s meaning to traumatic children’s well-being and mastering
- Mastering and well-being in itself are strong factors that may activate resilience and recovery (Borge 2010, Afifi & MacMillan 2011)
Main content
(inspired by the research reports on trauma, recovery and resilience ordered by SSC)

- Challenging and joyful activities for children, for the adults and for both groups together
- Filmmaking project for children, with «the opening night» and festivities on the last day
- Lectures, followed by conversations on trauma and its possible effects, resilience, mindfulness, yoga, art therapy etc. for the adults
- Possibility to talk with experts during the course
- Swimming, canoe, tours into the nature for both children and adults
- Social events for all participants
- Some elements from the evidence based program «The Incredible years»
Design and method

Design: Exploratory Process evaluation design with three test points:

1. At the Pilot’s starting point (T1)
2. At the end of the first phase of the Pilot (T2)
3. Three months later, at the starting point of a follow-up course (T3).
4. Some observation was also done during the course.

Tests and interviews

1. Who-5 well-being index (T1, T2, T3): children and adults,
2. Bandura’s Self-efficacy tests on mastering expectation (T1), experienced mastering (T2) and real mastering (T3): children
3. Semi-structured interviews at T1, T2 and T3: adults
Sample

- 30 individuals from 9 families (8 ethnic Norwegians, 1 from The Middle East)
- 16 of them children. 14 exposed to sexual an/or violent abuse (5-13 yrs (average 10 yrs) - 10 girls, 4 boys)
- 9 of the adults were the children’s biological mothers (aged 32-50yrs average 40yrs), 2 stepfathers, 2 adult siblings, 2 young siblings, 1 grandmother

- The subjects got information about the Pilot study at Statens Barnehus (a house where abused children are interviewed by police investigators, have talks with psychologists, get counseling etc), the SSC’s FB-group or through media articles. They send an application to SSC for participation
- Ordinary consent and ethical standard have been followed
Some main results
Assessment: Abusers and the abuses

• 9 abusers were reported, 6 of them biological fathers, 2 uncles, 1 foster-son in the child’s near family.
• The abusers age: One was 15yrs, another 16, the rest were adults. All were mail. One young girl was excluded as abuser because she was ordered by her father to sexually abuse a younger sibling.
• The children had experienced a range of different abuses: Some only sexual abuse, some violence and psychological abuse, some harsh punishment, some witnessing of violence towards mother or siblings.
• Often reports on combinations of several forms of abuse. In some families both mother and children were exposed to violence and/or sexual abuse from father.
• Reports on Three mothers, a stepfather and a grandmother who also had been exposed to childhood sexual violence. Several mothers reported a childhood with drug-abusing parents. This indicate a generational effects in some of the families.
Assessment: The Abuse

- Most of the mothers did not know when the abuse started, but discovered it gradually when they become worried about a changing in the child’s behavior: gradually they became aggressive, developed depression and anxiety. They underachieved at school, became unwilling to visit specific places, withdraw from friends and leisure time activities
- Except one, all of the cases had been to court. Most cases were sentenced, but appealed by the offender. This made their situation extremely stressing, both to mother/stepfather and child. Adverse effects escalated. Some report that the child developed suicide-thoughts and had to get treatment
- For some their report to the police and the child care authorities, activated big conflicts in their broader family. They was accused to put shame and disrespect on the family. This split the family in fractions and generated emotional difficult and troubled situations in the core family
The Pilot

• T1: Most adults report they did not have big expectations before entering the Pilot. They only hoped their children would get some joyful days. They needed so much to relax. They looked, however, forward to meet and talk to others with corresponding experience.

• T2: All reported that the course became very different than imagined. They were excited and enthusiastic about the course:
  o «Much better than expected!»,
  o «Fantastic break in a tough everyday life»,
  o «A so needed heart- and soul-nutrition».
  o «The dialogues and relations with the others and the professionals have given so much motivations and new perspectives on the caring of my children...»
  o «Knowing I am not alone, will do my everyday-life much better...»
The Pilot

• T3: Everyone, both mothers, and other participating near family members, and the children, appreciated the Pilot and «every activity», - except the art therapy:
  o «it was really unpleasant to be a target of a negative psychological analyze of the drawing I made»

• They report that they appreciate the social relations they developed very much. «It was much laughter, no disagreement, boring time or dealing up in groups»

• They report that they had got friends they would continue to be in touch with (e.g. through social media)

• Joyful scenes with a lot of laughter was observed when the children met each other, as well as the adults met again, at the follow-up course
WHO Well-being index T1, T2, T3 - children

We see a sharp upward curve from T1 to T2
Continuing to T3.
They and their mothers confirmed
That the Pilot had effect
Their well-being and
feelings of safety

WHO-5 trivselsindeks barn
The mothers started at a lower level than their children. They had however also a steep upgoing curve during the Pilot, in contrast to their children, they had a steep fall in well-being when back home. They report that the waiting for a new court process contributed to a very emotional, and unsafe negative situation.
Experienced mastering increased during T1 and T2. When at home, real mastering was at a lower level than what was experienced mastering during pilot-week. In the interviews, however, their mothers reported better achievement at school, and participation in leisure time activities with friends.
Evaluations at T3: Mothers

- They report that the lectures on effects of trauma following the abuse, on how to talk with their children about the abuses, and their conversations with professionals, had made them better supporters and safer persons in their children’s everyday-life:
  - «If I had had the same knowledge some years ago, our situation would have been much better»

- Except for a few, they report that mindfulness and Yoga had reduced stress and that they become more relaxed. Some trained almost every day. And so do one of the children, too.
- Everyone reported that their children better managed their school-days, were more active with friends and leisure time activities, seemed more relaxed and happy, and less depressed.
- Some report that their child did not had flashbacks any longer, that nightmares had disappeared and that they dare to go to school by their own.
- All reported that meeting with other children and care takers with similar experiences was both inspiring and developing and made them safer - feeling of not being alone
- Some of the same reports were supported by the children on their comments on the self efficacy test at T3
Conclusions

• The assessment evaluations show serious traumatic effects both on children and mothers (and on stepfathers). Some reported releasing of big and hurting conflicts in some of the families.

• Course-effects was surprisingly positive on children’s well-being, their everyday functioning, and their self efficacy. This may indicate that resilience have been activated and that the children had captured a better, happy and more active everyday life, although their report on real mastering was somewhat at a lower level than experienced mastering at the Pilot.

• The caregivers reported that they had developed better and safer frames around their children and become a more supporting person, although they themselves suffered from unclarified situation concerning the sentencing of the abuser.

• Content should also focus on conflicts generated in the broader family, on how to handle it, on how to get accept for reporting to the police, and on how to calm the emotions down to a normal emotional situation, not blaming the victim.

• The sample is too small to generate. It may also have generated some positive effects because it was a Pilot. It gives however indications on elements for further developing and on some elements to change.
After the Pilot
Establishing of “The Stine Sofie Center - The National competence center for children exposed to sexual and violence abuse, and their non-abusing caregivers”

• The last step in developing a National Competence Center was the carrying out of the pilot and the evaluating of it. After the evaluation:
• The center was established in 2016 to offer courses aimed at
  o Activating the children’s mastering, well-being and resilience through taking part in challenging and joyful activity together with children with corresponding experience and their siblings
  o Organize experiences and offer scientific knowledge information that contribute to caregiver’s building of safe frames and to their understanding of how to support their children
Thank you!

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