

# **TRAINING MANUAL FOR RABBIS: FAMILY VIOLENCE AND SEXUAL ASSAULT**

This manual was written for the attendants of the course "Developing the Rabbinic Toolkit of Skills to deal with Issues Specifically Related to Domestic Violence and Child Abuse". It was written by Debbie Gross, Director of the Crisis Center for Religious Women, Israel. No parts of the manual may be copied or reproduced without prior written permission from the Crisis Center for Religious Women.

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## **MESSAGE TO THE COURSE PARTICIPANT**

Working with victims of domestic violence and sexual assault is most often quite painful and difficult. This manual was written to give you an outline of some of the issues which were discussed in the training course. All of the necessary information that you will be needing throughout your work with the victims could never possibly be included in one manual. Nonetheless an effort was made to try and include the essential information required. Please do not show this manual to anyone who has not undergone the training course in order to prevent misunderstanding and misinterpretation.

May Hashem give us all the strength and understanding to be of help to those in need. And, most of all, may there come a time when the existence of such a manual will no longer be necessary.

Good luck to you!

Debbie Gross

Crisis Center for Religious Women  
P.o.b. 10207  
Jerusalem, 91101 Israel  
ccrw@netvision.net.il

## CRISIS AND TRAUMA

"Psychic trauma occurs when an individual is exposed to an overwhelming event and is rendered helpless in the face of intolerable danger, anxiety, or instinctual arousal." (Eth & Pynoos)

Crisis – the precipitating event

Trauma – the reaction to the crisis

Crisis – any event which upsets a previously balanced state; a force which disrupts an existing equilibrium. It is irrelevant if the previous state was actually in equilibrium. What matters is that it was perceived as such.

The relationship between crisis and trauma is defined and determined by the individual and her personal method of relating to and understanding the world. Stress and trauma may arise from crisis and traumatic events or from events which are perceived as being stressful or traumatic.

**Crisis is an event which shatters previous assumptions. It is almost as if someone has pulled the floor out from underneath.**

An individual bases her inner theory on three assumptions:

- 1) belief in personal invulnerability
- 2) a perception of the world as meaningful and comprehensible
- 3) a view of the self in a positive light

The illusion of invulnerability protects the individual from stress and feelings of anxiety. The shattering of these basic assumptions produces psychic trauma.

"The experience of victimization shatters the assumption of invulnerability. One is no longer able to say, 'It can't happen to me'." (Figley)

Trauma can disrupt any or all parts of the self. It can affect a personal's capacities, needs and resources. The ability to adapt is determined by an interaction between life experiences and the self.

After a traumatic event, 80% of the people will have a stress level between 1 and 8, which is in the normal range. Ten percent of the people will have a stress level of 9, which with intervention can be returned to the normal range. Ten percent of the people will have a stress level of 10 which is quite difficult to return to the normal range.

Most people can suffer stress, even enormous stress for a limited time; or minimal stress over a long period of time. The combination of enormous stress over an extended period of time can cause a disruption of the equilibrium and produce a traumatic effect.

The method chosen by the individual to deal with the stress and adapt is determined by the severity and nature of the crisis, past experiences, personality style and available options.

**Three reactions to being attacked:**

- 1) Fight
- 2) Flight
- 3) Fright/Freeze

The body excretes cortisone and adrenaline in these reactions. In the reaction of Fright/Freeze the body excretes an overabundance of cortisone and adrenaline which paralyzes the entire system.

**Victim vs Survivor**

Both have experienced a crisis or traumatic event. The victim has become immobilized and discouraged by the event. The survivor has overcome it and moved on.

**Two types of events:**

- 1) life-changing events: death, birth, retirement
- 2) unexpected occurrences: natural disasters, accidents etc.

**Three stages to Crisis:**

- 1) Impact: the individual feels helpless and a sense of chaotic disruption. She seeks reassurance and direction in order to reestablish equilibrium
- 2) Recoil: a long-term struggle to face the personal violation and overcome the vulnerability, guilt, and anger
- 3) Reorganization: the individual assimilates the painful experience and achieves a new psychological balance

**Common Reactions to Crisis and Trauma:**

- 1) a sense of loss of reality
- 2) sleep disturbances
- 3) eating and digestive disturbances
- 4) pains, rashes, sores
- 5) fears, phobias
- 6) depression
- 7) concentration, judgment and attention problems
- 8) obsessing on the problem
- 9) anger
- 10) shame
- 11) embarrassment
- 12) behavioral changes
- 13) dreams, recurring thoughts, flashbacks
- 14) the feeling of going crazy
- 15) fear of death,
- 16) feelings of helplessness and lack of control
- 17) crying and shaking
- 18) nausea, vomiting
- 19) loss of emotion, feelings of detachment and estrangement
- 20) psychosomatic disorders

## **CRISIS INTERVENTION TECHNIQUES**

### **Two types of coping techniques:**

- 1) Problem focused: the caller wants to change the painful or stressful situation. She wants to find a constructive solution in order to relieve the stress.
- 2) Emotion focused: The caller wants to regulate and reduce the emotional stress. She wants to calm down, manage her thoughts and feelings and body reactions.

Effective crisis intervention techniques uses a combination of both of these techniques. It is crucial for effective crisis intervention to determine which of these coping techniques is most beneficial for the caller who is in crisis.

Coping is a reaction to a stress which either resolves, reduces or replaces the affect state which is deemed stressful.

**Three things to check for in crisis intervention:**

- 1) Family – Does the caller have family?
- 2) Work – Does the caller work, study etc?
- 3) Hobbies – What does the caller do in her spare time?

Often crisis can affect these three areas as well. On the other hand, these three areas can be used to help the caller deal with her crisis.

**Check for clinical depression:**

- 1) eating habits
- 2) sleeping habits
- 3) daily functioning

**RULES TO REMEMBER:**

- 1) Help return the control to the caller.
- 2) Find solutions WITH the caller.
- 3) Let the caller choose what she wants to do.
- 4) Check that the caller is safe now.
- 5) Work with the caller's feelings.
- 6) Aim to give the caller whatever she is looking for to feel better.
- 7) Don't be afraid of the silences.
- 8) Don't feel discouraged if you cannot solve the caller's problem.
- 9) Don't feel you must solve the caller's problem.
- 10) Check for signs of clinical depression
- 11) Help the caller find a support system.
- 12) Use the BABY STEPS technique.
- 13) Divide the problem or event into small parts.
- 14) Refer to necessary professionals.
- 15) Be honest.
- 16) Do not try to force the caller to give you more information than is required.
- 17) Admit when you do not know and say that you will try to find out.
- 18) Believe the caller's story and express such.
- 19) Take every call seriously.

- 20) Never decide for the caller, but with her.
- 21) Do not tell your own stories.
- 22) Reconfirm to the caller that she is normal and not going crazy.
- 23) Do not give out your home phone number to the caller.
- 24) Do not get more involved than you should, can or want to.
- 25) Never speak to a person in crisis without their wish or knowledge.
- 26) Call another volunteer afterwards to work out your own feelings.

## DOMESTIC VIOLENCE

"A battered woman is a woman, 18 years of age or over, who is or has been in an intimate relationship with a man who repeatedly subjects or subjected her to forceful physical and/or psychological abuse."

### Three types of abuse:

- 1) physical abuse
- 2) emotional abuse
- 3) intimacy abuse

Abuse can include any of the following:

- 1) physical attack with or without injury
- 2) excessive possessiveness and/or jealousy
- 3) extreme verbal harassment
- 4) expressing verbal comments of a derogatory nature with negative value judgments
- 5) Nonverbal and/or verbal threats of future punishment and/or deprivation
- 6) Restriction of activity through physical or psychological means
- 7) Economic restrictions
- 8) Body assault

The violence does not come from the interaction between the husband and wife, nor from a provocation caused by the wife's behavior or personality, but rather from the batterer's learned behavioral responses.

Every case of physical abuse has elements of emotional abuse as well.  
Every case of intimacy abuse has elements of emotional abuse as well.

**PHYSICAL ABUSE:**

Physical abuse may include hitting, kicking, scratches, choking, pushing, throwing objects at the spouse, burns, shooting etc. Usually the physical abuse will be described by the injured spouse afterwards as an "accident". Often the physical abuse will increase in severity and frequency over time.

**EMOTIONAL ABUSE:**

Emotional abuse encompasses a wide range of behaviors. Her life is restricted by her spouse in various forms. He embarrasses her, demeans her, humiliates her, harasses her etc. He isolates her from her family and friends and the community. She is often afraid to continue any connections she has with others for fear that they will see the abuse. Often he overworks her and does not give her necessary funds to buy things for the house or the children. He threatens her. He often incites the children against her as well. He threatens to kill her and she knows that he is capable of such.

In a study of battered women, most women agreed that the emotional abuse was more difficult to bear than the physical abuse.

**INTIMACY ABUSE:**

Intimacy abuse can exist in a marriage as well. It can include body attack, rape and forcing a woman to do acts that are inappropriate or not allowed according to Jewish law.

## **PROFILE OF A BATTERER:**

- 1) Dr. Jekyll and Mr. Hyde: charming and seductive as well as mean and hostile
- 2) Externalizes problems
- 3) Jealous
- 4) Aggressive
- 5) Minimizes, denies, lies
- 6) Self-depreciating,
- 7) Depressions
- 8) Suicidal gestures
- 9) Inability to behave intimately with others on a consistent basis
- 10)Controlling
- 11)Resolves problems physically
- 12)Can't empathize with others
- 13)Makes unrealistic demands
- 14)Compulsive
- 15)Use of alcohol or drugs
- 16)Lack of interpersonal and coping skills
- 17)Manipulative
- 18)Exhibits contempt for women
- 19)Defies limits
- 20)Past history of violence
- 21)Low tolerance of stress
- 22)Highly possessive

## THE CYCLE OF ABUSE

- 1) The tension rises
- 2) The actual abuse
- 3) Honeymoon

Most women who leave will do so in stage #1. In stage #2 they just have to wait and then stage #3 will begin with remorse and attempts to make it up. Stage #1 is often the most terrifying since the tension is mounting and she knows that the battering will come and that it cannot be prevented.

Most abuse occurs on weekends, Shabbat and holidays.

### WHY DOES SHE STAY:

- 1) she is confused, in shock that her husband, the man she loves, the father of her children could hurt her.
- 2) Divorce seems like failure.
- 3) There are positive aspects to the relationship
- 4) She wants a father for her children
- 5) She is afraid of losing custody of her children.
- 6) She wants more children.
- 7) Economic factors
- 8) Isolation and lack of a support network
- 9) Her family tells her to stay.
- 10) She reaches out to someone and is not helped.
- 11) She believes that she loves him.
- 12) He has destroyed her self-esteem and self-confidence.
- 13) She is afraid for her life.
- 14) She is afraid that he will abduct the children.
- 15) She feels that she must have deserved it.
- 16) She feels that this is a punishment from G-d.

It is not a simple matter of just walking out the door. There are children to consider, money to worry about, alternative housing to arrange and personal safety to worry about. She must consider when and whether to leave, plan for her kids, uproot them from their schools, worry about money and finances, housing, security, and deal with an intense sense of shame.

Five years later most battered women will still find it shocking that they were battered, that the man that they loved and married, had abused them. They wonder if they didn't overreact or exaggerate it all to themselves.

### **SHELTERS FOR BATTERED WOMEN**

- 1) To protect women and children from immediate abuse
- 2) To make a statement in society that domestic violence is not tolerated
- 3) To sensitize the woman to understand that it was not her fault and that she is entitled to a life without fear and pain
- 4) To help the battered woman believe that no one has the right to abuse her
- 5) To offer the battered woman and her children emotional support and the feeling that she is no longer helpless or alone.

Often the battered woman is fearful of intervention by outside sources. She has learned to live with the violence. She is afraid of disrupting the present situation, for fear that it could lead to further violence or abuse.

80% of battered women who seek refuge in a shelter will return to their husbands. Some will leave again at a later time and this time perhaps not go back. Many return for economic reasons. Many return believing that the spouse will actually change. Many return for the sake of their children.

## HOW TO HELP A BATTERED WOMAN:

- 1) Convince her to go to therapy – preferably without her husband knowing.
- 2) The purpose of the therapy is to empower her and to help her develop an inner sense of strength and self-esteem.
- 3) Help her plan a course of action if the violence escalates.
- 4) Convince her to hide a sum of money in case she needs to escape.
- 5) Explain to her about police protection and shelters.
- 6) Reinforce the fact that no one has the right to abuse her.
- 7) Reinforce the fact that he has the problem and that he is the abusive one.
- 8) Help her take small steps to empower herself.
- 9) Help her find some form of support network.
- 10) Convince her to keep a journal of the abuse.
- 11) Convince her to visit a lawyer to know her rights.
- 12) Help her to recognize signs that the violence is escalating.
- 13) Help her to understand that she is no longer alone.
- 14) Help her try to get someone to convince her husband to begin therapy.
- 15) Find out if she is in immediate danger now. Does she need medical help?
- 16) Reinforce her strengths and her capabilities.
- 17) Explain to her the importance for her and her children that she begin therapy and give her the names of therapists who are experienced in domestic violence.

**RELIGIOUS CONSIDERATION IN DOMESTIC VIOLENCE**

- 1) It is very important to suggest birth control. It is known that the violence often escalates during pregnancy.
- 2) It is often necessary to get the rabbi's permission for the birth control.
- 3) She often is afraid to go to mikveh and afraid not to go.
- 4) The male is usually the more community active member.
- 5) She is afraid that he will leave her an aguna – whereby she could not get married again nor have children.
- 6) She is afraid that the community and synagogue will support him.
- 7) Often he is the one with the connections to the rabbis and community leaders.
- 8) He will often threaten to besmirch her name in the community.
- 9) Most of the violence occurs on Shabbat and holidays.

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# **RAPE AND INTIMACY ABUSE**

Rape and intimacy abuse are acts of violence, subjugation and control using intimacy. The act is not based on body desire but on the desire to subjugate and degrade. The woman often fears for her life, even when there is no weapon involved in the abuse.

Rape: any penetration into an opening in the body

Attempted rape: almost penetration but not totally

Body assault and harassment – fondling, touching, kissing against her will

Statistics:

- 1) 71% of the cases are premeditated
- 2) 43% of the cases are group rape
- 3) Victims are of every age, with no relation to looks, dress, behavior
- 4) 70% of the victims knew the rapist at least by sight
- 5) 56% of the cases took place in the woman's house

**Myths and Stereotypes:**

- 1) Nice girls don't get raped
- 2) Women lie about rape
- 3) Women precipitate rape
- 4) Immodest dress increases the chance of rape
- 5) Rapists are psychopaths or abnormal citizens
- 6) Rape occurs because the man cannot control himself
- 7) Rape occurs in dark alleyways

**Men who rape:**

Most of the rapists are "normal" men in society with jobs, families etc. There is no relationship between pathology, marriage, number of children etc. Men rape to express anger against women and to subjugate them.

**PHYSICAL AND PSYCHOLOGICAL REACTIONS TO INTIMACY ABUSE:**

- 1) shame
- 2) degradation
- 3) humiliation
- 4) intimacy problems
- 5) anger
- 6) helplessness
- 7) lack of control
- 8) guilt
- 9) fear of death
- 10) fears and phobias
- 11) memory and concentration problems
- 12) over excitability
- 13) crying, shaking
- 14) daydreams, nightmares, flashbacks
- 15) shock, disbelief, dismay
- 16) anxiety
- 17) pains in the body
- 18) sore throat, difficulty swallowing
- 19) trouble walking
- 20) headaches
- 21) eating disturbances
- 22) sleeping disturbances
- 23) mouth infections
- 24) bleeding
- 25) nausea, vomiting

It may take anywhere from five months to ten years to overcome the trauma of intimacy abuse. Even a small case of intimacy abuse can be traumatic.

**QUESTIONS THAT THE VICTIM MUST DEAL WITH:**

- 1) Should I tell my parents/spouse?
- 2) Should I go to the police?
- 3) Should I press legal charges?
- 4) Will I be able to identify him if I see him again?
- 5) Will others find out?
- 6) Will others blame me?
- 7) Pregnancy
- 8) Aids, venereal disease
- 9) Will my marital life be affected?
- 10) Will my spouse/parent be sympathetic or reject me?
- 11) Will I be able to deal with men at work, in public again?
- 12) Will I be able to be myself again?
- 13) Will I ever overcome this?

**WHAT TO PUSH FOR WITH THE VICTIM:**

- 1) A gynecological/medical examination
- 2) Medical tests for pregnancy, venereal disease, Aids
- 3) The morning after pill

**HOW TO HELP THE VICTIM OF INTIMACY ABUSE:**

- 1) Check that she is in a safe place now.
- 2) Check if she needs medical help.
- 3) Push her to have a gyn/medical examination
- 4) Push her to take medical tests for pregnancy, and venereal disease and Aids
- 5) If the rape occurred within 72 hours, push her to take Postinor 2, the morning after pill
- 6) Encourage her to express feelings and anxieties
- 7) Encourage her to share her memories
- 8) Accept her reactions as normal
- 9) Don't ask "why" questions
- 10) Encourage practical steps
- 11) Don't pressure her to tell people that she doesn't want to tell
- 12) Help her organize the little daily things in her life
- 13) Convince her not to be alone at the beginning
- 14) Evaluate whether or not she needs professional therapy
- 15) Inquire whether she is married to a Cohen
- 16) Understand her specific sensitivity as a religious woman who has been sexually abused
- 17) Help her with her feelings towards G-d after having been sexually abused
- 18) Help her to rebuild her inner strength and faith

**A woman who is abused intimately, or assaulted intimately, or harassed intimately will often be traumatized for an extended period of time, and yet be too humiliated to share this pain with anyone.**

## **CHILD ABUSE AND MALTREATMENT:**

Throughout history, society has tended to either condone or ignore the maltreatment and abuse of its children. Despite modern legislation directed at protecting children from both physical and intimate exploitation, the rate of enforcement is low and individuals and society continue to ignore the problem and refrain from putting a stop to the horrors of child abuse. The child, in essence, is left alone to deal with his/her daily torment and trauma.

"A child maltreatment situation is one where, through purposive acts or marked inattention to the child's basic needs, behavior of a parent, substitute or other adult caretaker caused foreseeable and avoidable injury or impairment to a child or materially contributed to unreasonable prolongation or worsening of an existing injury or impairment." (National Center on Child Abuse and Neglect).

### **FOUR TYPES OF CHILD ABUSE:**

- 1) physical abuse
- 2) neglect
- 3) emotional abuse
- 4) intimate abuse

Emotional abuse is not necessarily accompanied by physical abuse, but physical abuse is always accompanied by emotional maltreatment as well. Intimate abuse also involves emotional maltreatment.

### **PHYSICAL ABUSE:**

When a parent or caretaker inflicts non-accidental injury to a child, this is considered physical abuse. Physical abuse encompasses a wide range of brutality. Children are kicked, shot, stabbed, burned, scalded, strangled, chained, frozen, shaken and thrown against walls, tied to furniture, thrown down stairs, and out of windows. Children are dropped, tortured, locked in closets, assaulted with a variety of weapons, including guns, clubs and

knives. Symptoms include bruises, welts, burns, fractures and cuts on the soles, palms, head, back, buttocks, as well as internal injuries.

**INDICATORS OF PHYSICAL ABUSE AND NOT AN ACCIDENT:**

- 1) There is a long, unexplained delay between the infliction of the injury and seeking treatment for the child.
- 2) The parent's explanation is inconsistent with the observed injuries
- 3) There are no witnesses to the trauma.
- 4) The parents are nervous, hostile and easily irritated by the questions posed.
- 5) The parents hint at other problems in the family.

**NEGLECT:**

It is the parent's responsibility to assure that a child has his/her basic needs attended to, such as: food, clothing, shelter, schooling, medical attention etc.

It is often difficult to determine when there is a situation of child neglect and when it is a case of poverty or cultural norms. Too often society will attribute the neglect to culture or poverty when, in essence, there are solutions that could have been found.

**EMOTIONAL ABUSE:**

Emotional maltreatment occurs when the adult attempts to shape the child's behavior through the use of severe disparagement, humiliation, rejection, guilt, fear, punishment and shame. These children are often subjected to bizarre and inconsistent punishments. The parent often rejects the child, consistently humiliates, demeans and discourages the child, and forbids the child many of the normal childhood activities or behaviors. Often the parent lacks a basic understanding of child development and parenting behavior.

**ABUSIVE PARENTS COME FROM ALL SECTORS OF SOCIETY.**

## CHILD INTIMATE ABUSE

- 1) Child intimate abuse
- 2) Child intimate exploitation
- 3) Incest

### What is child intimate abuse:

Child intimate abuse is an intimate act imposed on a child who lacks emotional, maturational and cognitive development. The key word is imposed.

Even if the child consents to the act, if the abuser is at least five years older, more sophisticated, or in an authority relationship with the child, this is still considered intimate abuse.

Two types: one time vs continuous or long term

Two types: gentle or violent

### THREE FORMS:

#### 1) No physical contact:

- a) the abuser exposes himself
- b) the abuser watches the child undress
- c) the abuser touches himself in front of the child
- d) the abuser has intimate relations in front of the child
- e) pornography

#### 2) Physical contact:

- a) the abuser kisses the child intimately
- b) the abuser fondles the child
- c) the abuser forces the child to fondle him

#### 3) Intrusion:

- a) penetration into an opening of the body
- b) oral-genital contact

**FEELINGS OF THE INTIMATELY ABUSED CHILD:**

All forms of intimate abuse can cause severe stress to the child and trauma.

- 1) Shame
- 2) Degradement
- 3) Anger
- 4) Helplessness
- 5) Chaos
- 6) Guilt
- 7) Fear
- 8) Intimate stimulation
- 9) Loss of control

**LONG-TERM EFFECT ON THE CHILD:**

- 1) inability to trust others
- 2) depression
- 3) poor self-concept
- 4) feelings of being unworthy of love or respect
- 5) hostility
- 6) self-destructiveness
- 7) suicidal feelings
- 8) migraine headaches
- 9) poor social skills
- 10) use of seductiveness to initiate relationships
- 11) inability to get along with parents or siblings
- 12) promiscuity or prostitution
- 13) intimate abuse of other children
- 14) dislike of touch

**STATISTICS:**

- 1) 97% of the perpetrators are men
- 2) boys and girls are intimately abused
- 3) 60% or more of the abusers are known and/or trusted by the child



**INTIMATE EXPLOITATION OF CHILDREN:**

- 1) Children are used by adults for pornography
- 2) Children required to work in prostitution
- 3) Child sex rings

Often these children are paid with affection, money, trips, cigarettes, drugs, liquor, and special privileges. Data reveals that these children who are exploited, even if they agree to the exploitation for the rewards involved, have the same traumatic symptoms as do children who are intimately abused.

**INCEST:**

Incest is an intimate relationship between people who are prohibited to marry and between step-children. Perpetrators are often unable to empathize with the victims. They cannot seem to grasp that they are causing pain or damage to the child. Usually incest involves children between the ages of 4-12, highest risk between the ages of 4-9. The victim feels helpless to overcome the perpetrator's subtle coercion. She sees no alternative but to comply.

The message that the child victim of incest receives is: the person who loves you – hurts you.

When the incest victim discovers that she can stop the incest, she feels guilty for having not done so before. The victim feels frightened by the enormous unwanted power that she realizes that she has. By revealing the incest she can destroy the entire family.

Often society will blame the mother. Usually the mother does not know of the incest and will do her utmost to save her child. Blaming the mother is easier than acknowledging that incest occurs across all societal segments.

**How the incest victim copes:**

- 1) denial
- 2) spacing out
- 3) dissociation
- 4) amnesia
- 5) multiple personality
- 6) sense of unreality
- 7) outer body experiences
- 8) blanks in memory
- 9) fatigue
- 10)hallucination
- 11)hyper-vigilance
- 12)acting out
- 13)drugs
- 14)reflects anger onto someone else

**INTERVENTION WITH INCEST FAMILIES:**

- 1) Support the mother
- 2) Therapy for the mother and the child
- 3) Rebuild the mother/child bond
- 4) A relapse prevention plan
- 5) Therapy for the abuser

**SYMPTOMS OF CHILD INTIMATE ABUSE:**

- 1) rash or sores on organs, mouth, anus
- 2) urinary infections
- 3) unusual discharge
- 4) unusually dirty underwear
- 5) chronic sore throat
- 6) pregnancy or venereal disease
- 7) head or stomach complaints
- 8) fear of going to sleep, undressing, washing, closed doors
- 9) fear of staying alone with certain persons
- 10) trouble with sitting or walking
- 11) school problems that are new
- 12) new eating problems
- 13) change in social behavior
- 14) sudden age-inappropriate sexual behavior
- 15) extreme masturbation or promiscuity
- 16) drug usage
- 17) running away from home
- 18) attacking younger children sexually
- 19) sudden weight gain or loss
- 20) poor personal hygiene
- 21) delayed speech, stuttering
- 22) becoming frantic when changing diapers or washing genitals
- 23) unusual fear of a certain area in the house
- 24) "unusual" drawings
- 25) sudden need for cleanliness, frequent bathing
- 26) wearing layers of clothing
- 27) phobias
- 28) putting objects in rectum or vagina
- 29) attention disorders and hyperactivity
- 30) extreme psychosomatic symptoms or disorders

**WHY DOESN'T THE CHILD TELL SOMEONE OF THE ABUSE:**

- 1) Children are taught at a very young age not to tell secrets. This is stressed by the abuser.
- 2) Later on the child is afraid that she will be asked why she didn't tell of the incident right away.
- 3) The abuser threatens to hurt the child.
- 4) The abuser threatens to hurt a loved one of the child.
- 5) Bribes and presents are offered which add to the child's feelings of guilt.
- 6) The child is afraid that no one will believe her.
- 7) Helplessness
- 8) There is no one to turn to.
- 9) Often the child has no words to describe the abuse.
- 10)The child is confused by the incident.
- 11)The child is embarrassed by the incident.
- 12)Loshon hora
- 13)If the child loves the abuser she does not want anything bad to happen to him.
- 14)The child lacks prior information that these things could happen.
- 15)Children are taught not to say "no" to an adult.
- 16)Children are dependent upon adults and caretakers.

**What affects the healing process:**

- 1) Age of onset
- 2) Relation to perpetrator
- 3) How violent and coercive was the abuse
- 4) If the child tried to tell someone and was not believed or helped
- 5) How the child figured out it was abuse and wrong
- 6) How the perpetrator insured secrecy
- 7) History of other traumas
- 8) Support network available
- 9) If the child was believed

**PEDOPHILIA:**

Pedophilia is an addiction. A man who intimately abuses a child can go on to intimately abuse hundreds of children. He is not to be trusted that he will stop himself from further abusing children. There is a cycle to his abusive behavior. Unless he learns to understand this cycle and commits to strict adherence to preset rules, he will continue to abuse children.

**Effective treatment for a pedophile:**

- 1) therapy by a therapist with experience working with pedophiles
- 2) an authority figure
- 3) a relapse prevention program

**PREVENTING CHILD INTIMATE ABUSE:**

- 1) Even a young child can learn the difference between nurturing and inappropriate touching
- 2) Teaching a child to say "no"
- 3) Teaching the difference between a good and a bad secret
- 4) Teaching a child to tell of uncomfortable experiences
- 5) Teaching a child to tell until someone believes her
- 6) Teaching a child that she has a right to decide who touches her
- 7) Teaching a child not to talk to adults, go to their homes, take gifts, go in their cars, etc, without their parent's permission
- 8) Teaching a child not to open the house door when she is alone at home
- 9) Teaching a child not to comply if she does not understand a request
- 10) Create an open talking atmosphere at home.
- 11) "secret time"
- 12) Teaching a child that not everyone is "good".
- 13) Teach a child to say no, run home, and tell.

**WHAT TO DO IF A CHILD WAS INTIMATELY ABUSED:**

- 1) Listen to what the child has to say
- 2) Listen to what the child wants to talk about.
- 3) Accept her feelings.
- 4) Say – I am sorry that this happened to you, but it is good that you told me.
- 5) Assure the child that you believe her.
- 6) Assure the child that it was not her fault and that she did the best she could to prevent it.
- 7) Help her find an ally who can be trusted.
- 8) Make sure she does not need medical attention
- 9) Make sure that she is safe from future abuse
- 10) Discuss with her options for preventing future abuse
- 11) Discuss with her the option of future therapy
- 12) Help her think of defensive techniques for the future
- 13) Help her think of ways not to stay alone with the abuser
- 14) Practice with her how to say "no" assertively
- 15) Don't promise secrecy
- 16) Brainstorm – problem-solve
- 17) Prepare the child for receiving help
- 18) Report, if necessary, to authorities
- 19) Speak about your feelings with another volunteer

**THE CRISIS CENTER FOR RELIGIOUS WOMEN HAS DEVELOPED A WORKSHOP PROGRAM FOR TODDLERS AND SCHOOL AGE CHILDREN TO PREVENT CHILD INTIMATE ABUSE. YOUR SCHOOL STAFF CAN UNDERGO TRAINING BY THE CENTER TO LEARN HOW TO FACILITATE THESE WORKSHOPS WITHIN YOUR SCHOOL.**

