The Traumatic Impact of Child Sexual Abuse: A Conceptualization[1]

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Abstract: A framework is proposed for a more systematic understanding of the effects of child sexual abuse. Four traumagenic dynamics – traumatic sexualization, betrayal, stigmatization, and powerlessness – are identified as the core of the psychological injury inflicted by abuse. These dynamics can be used to make assessments of victimized children and to anticipate problems to which these children may be vulnerable subsequently. Implications for research are also considered.

Introduction

The literature on child sexual abuse is full of clinical observations about problems that are thought to be associated with a history of abuse, such as sexual dysfunction, depression, and low self-esteem. However, such observations have not yet been organized into a clear model that specifies how and why sexual abuse results in this kind of trauma. This paper is an attempt to provide such a model. Based on a review of the literature on the effects of sexual abuse[6], the paper suggests a conceptualization of the impact of sexual abuse that can be used in both research and treatment.

The model proposed here postulates that the experience of sexual abuse can be analyzed in terms of four trauma-causing factors, or what we will call traumagenic dynamics – traumatic sexualization, betrayal, powerlessness, and stigmatization. These traumagenic dynamics are generalized dynamics, not necessarily unique to sexual abuse; they occur in other kinds of trauma. But the conjunction of these four dynamics in one set of circumstances is what makes the trauma of sexual abuse unique, different from such childhood traumas as the divorce of a child's parents or even being the victim of physical child abuse.

These dynamics alter children's cognitive and emotional orientation to the world, and create trauma by distorting children's self-concept, world view, and affective capacities. For example, the dynamic of stigmatization distorts children's sense of their own value and worth. The dynamic of powerlessness distorts children's sense of their ability to control their lives. Children's attempts to cope with the

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1 This article appeared in *American Journal of Orthopsychiatry, 55*(4), October 1985.

world through these distortions may result in some of the behavioral problems that are commonly noted in victims of child sexual abuse. This paper will describe the model and suggest some of its ramifications and uses. We will first describe each of the four dynamics and then show how each dynamic is associated with some of the commonly observed effects of sexual abuse. We will conclude by illustrating how the model can be used in clinical work and in research.

Four Traumagenic Dynamics

Traumatic sexualization refers to a process in which a child's sexuality (including both sexual feelings and sexual attitudes) is shaped in a developmentally inappropriate and interpersonally dysfunctional fashion as a result of sexual abuse. This can happen in a variety of ways in the course of the abuse. Traumatic sexualization can occur when a child is repeatedly regarded by an offender for sexual behavior that is inappropriate to his or her level of development. It occurs through the exchange of affection, attention, privileges, and gifts for sexual behavior, so that a child learns to use sexual behavior as a strategy for manipulating others to satisfy a variety of developmentally appropriate needs. It occurs when certain parts of a child's anatomy are fetishized and given distorted importance and meaning. It occurs through the misconceptions and confusions about sexual behavior and sexual morality that are transmitted to the child from the offender. And it occurs when very frightening memories and events become associated in the child's mind with sexual activity.

Sexual abuse experiences can vary dramatically in terms of the amount and kind of traumatic sexualization they provoke. Experiences in which the offender makes an effort to evoke the child's sexual response, for example, are probably more sexualizing than those in which an offender simply uses a passive child to masturbate with. Experiences in which the child is enticed to participate are also likely to be more sexualizing than those in which brute force is used. However, even with the use of force, a form of traumatic sexualization may occur as a result of the fear that becomes associated with sex in the wake of such an experience. The degree of a child's understanding may also affect the degree of sexualization. Experiences in which the child, because of early age or developmental level, understands few of the sexual implications of the activities may be less sexualizing than those involving a child with greater awareness. Children who have been traumatically sexualized emerge from their experiences with inappropriate repertoires of sexual behavior, with confusions and misconceptions about their sexual self-concepts, and with unusual emotional associations to sexual activities.

Betrayal refers to the dynamic by which children discover that someone on whom they were vitally dependent has caused them harm. This may occur in a variety of ways in a molestation experience. For example, in the course of abuse or its

aftermath, children may come to the realization that a trusted person has manipulated them through lies or misrepresentations about moral standards. They may also come to realize that someone whom they loved or whose affection was important to them treated them with callous disregard. Children can experience betrayal not only at the hands of offenders, but also on the part of family members who were not abusing them. A family member whom they trusted but who was unable or unwilling to protect or believe them – or who has a changed attitude toward them after disclosure of the abuse – may also contribute to the dynamics of betrayal.

Sexual abuse experiences that are perpetrated by family members or other trusted persons obviously involve more potential for betrayal than those involving strangers. However, the degree of betrayal may also be affected by how taken in the child feels by the offender, whomever the offender. A child who was suspicious of a father's activities from the beginning may feel less betrayed than one who initially experienced the contact as nurturing and loving and then is suddenly shocked to realize what is really happening. Obviously, the degree of betrayal is also related to a family's response to disclosure. Children who are disbelieved, blamed, or ostracized undoubtedly experience a greater sense of betrayal than those who are supported.

Powerlessness – or what might also be called disempowerment, the dynamic of rendering the victim powerless – refers to the process in which the child's will, desires, and sense of efficacy are continually contravened. Many aspects of the sexual abuse experience contribute to this dynamic. We theorize that a basic kind of powerlessness occurs in sexual abuse when a child's territory and body space are repeatedly invaded against the child's will. This is exacerbated by whatever coercion and manipulation the offender may impose as part of the abuse process. Powerlessness is then reinforced when children see their attempts to halt the abuse frustrated. It is increased when children feel fear, are unable to make adults understand or believe what is happening, or realize how conditions of dependency have trapped them in the situation.

An authoritarian abuser who continually commands the child's participation by threatening serious harm will probably instill more of a sense of powerlessness. But force and threat are not necessary; any kind of situation in which a child feels trapped, if only by the realization of the consequences of disclosure, can create a sense of powerlessness. Obviously, a situation in which a child tells and is not believed will also create a greater degree of powerlessness. However, when children are able to bring the abuse to an end effectively, or at least exert some control over its occurrence, they may feel less disempowered.

Stigmatization, the final dynamic, refers to the negative connotations (e.g., badness, shame, and guilt) that are communicated to the child around the experiences and that then become incorporated into the child's self-image. These negative meanings are communicated in many ways. They can come

directly from the abuser, who may blame the victim for the activity, demean the victim, or furtively convey a sense of shame about the behavior. Pressure for secrecy from the offender can also convey powerful messages of shame and guilt. But stigmatization is also reinforced by attitudes that the victim infers or hears from other persons in the family or community. Stigmatization may thus grow out of the child's prior knowledge or sense that the activity is considered deviant and taboo, and it is certainly reinforced if, after disclosure, people react with shock or hysteria, or blame the child for what has transpired. Children may be additionally stigmatized by people in their environment who now impute other negative characteristics to the victim (e.g., loose morals or "spoiled goods") as a result of the molestation.

Stigmatization occurs in various degrees in different abusive situations. Some children are treated as bad and blameworthy by offenders and some are not. Some children, in the wake of a sexual abuse experience, are told clearly that they are not at fault, whereas others are heavily shamed. Some children may be too young to have much awareness of social attitudes and thus experience little stigmatization, whereas others have to deal with powerful religious and cultural taboos in addition to the usual stigma. Keeping the secret of having been a victim of sexual abuse may increase the sense of stigma, since it reinforces the sense of being different. By contrast, those who find out that such experiences occur to many other children may have some of their stigma assuaged.
These four traumagenic dynamics, then, account in our view for the main sources of trauma in child sexual abuse. They are not in any way pure or narrowly defined. Each dynamic can be seen, rather, as a clustering of injurious influences with a common theme. They are best thought of as broad categories useful for organizing and categorizing our understanding of the effect of sexual abuse.

Traumagenic Dynamics in the Impact of Sexual Abuse

With the four traumagenic dynamics as an organizing framework, it is useful to reconsider the literature on the effects of sexual abuse. Although a great many behavioral and emotional problems have been related to a history of sexual abuse[6], unfortunately the sum total of literature adds up to little more than a list of possible outcomes. This is conceptually frustrating and does not encourage deeper understanding of the phenomenon.

The notion of traumagenic dynamics, however, offers a way both to organize and theorize about many of the observed outcomes. Most of the outcomes, it will be noted, can be conveniently categorized according to one or two of these dynamics. It would seem as though certain traumagenic dynamics are more readily associated with certain effects. Obviously, there is no simple one-to-one correspondence. Some effects seem logically associated with several dynamics.

But there are clear general affinities. In this section, we will briefly describe the effects that seem to be associated with the four dynamics.*

Traumatic Sexualization

There are many observed effects of sexual abuse that seem readily connected to the dynamic of traumatic sexualization. Among young child victims, clinicians have often noted sexual preoccupations and repetitive sexual behavior such as masturbation or compulsive sex play. Some children display knowledge and interests that are inappropriate to their age, such as wanting to engage school-age playmates in sexual intercourse or oral-genital contact.[1-3, 12, 21, 22] Some children who have been victimized, especially adolescent boys, but sometimes even younger children, become sexually aggressive and victimize their peers or younger children. Clinicians have remarked about promiscuous and compulsive sexual behavior that sometimes characterizes victims when they become adolescents or young adults, although this has not been confirmed empirically.[5, 19, 32]

The sexual problems of adult victims of sexual abuse have been among the most researched and best established effects. Clinicians have reported that victimized clients often have an aversion to sex, flashbacks to the molestation experience, difficulty with arousal and orgasm, and vaginismus, as well as negative attitudes toward their sexuality and their bodies.[8, 12, 29, 34, 38] The frequently demonstrated higher risk of sexual abuse victims to later sexually assault may also be related to traumatic sexualization,[11, 13, 17, 30] and some victims apparently find themselves inappropriately sexualizing their children in ways that lead to sexual or physical abuse.[14, 18, 21, 30, 34] All these observations seem connected to the traumagenic dynamic of sexualization.

Such problems and behavior, as well as victims' self-reports, suggest the various psychological effects produced by traumatic sexualization. At its most basic level, sexual abuse heightens awareness of sexual issues, which may be particularly true among young children who might not otherwise be concerned with sexual matters at their stage of development. Part of the preoccupation is associated simply with the sexual stimulation of the abuse and the conditioning of behavior that may go along with it, but it is also very much a function of the questions and conflicts provoked by the abuse about the self and interpersonal relations. Confusion often arises especially about sexual identity. Victimized boys, for example, may wonder whether they are homosexuals. Victimized girls wonder whether their sexual desirability has been impaired, and whether later sexual partners will be able to "tell."

* Tabular presentation of these traumagenic dynamics, roughly broken down into psychological impact and behavioral manifestations, is available from the authors.

Traumatic sexualization is also associated with confusion about sexual norms and standards. Sexually victimized children typically have misconceptions about sex and sexual relations as a result of things offenders may have said and done. One common confusion concerns the role of sex in affectionate relationships. If child victims have traded sex for affection from the abuser over a period of time, this may become their view of the normal way to give and obtain affection.[17, 20, 24] Some of the apparent sexualization in the behavior of victimized children may stem from this confusion.

Another impact that traumatic sexualization may have is in the negative connotations that come to be associated with sex. Sexual contact associated in a child's memory with revulsion, fear, anger, a sense of powerlessness, or other negative emotions can contaminate later sexual experiences. These feelings may become generalized as an aversion to all sex and intimacy, and very probably also account for the sexual dysfunctions reported by victims.

Stigmatization

Other effects of sexual abuse seem naturally grouped in relation to the dynamic of stigmatization. Child victims often feel isolated, and may gravitate to various stigmatized levels of society. Thus they may get involved in drug or alcohol abuse, in criminal activity, or in prostitution.[3, 4, 17] The effects of stigmatization may also reach extremes in forms of self-destructive behavior and suicide attempts.[4, 11, 17, 21, 34, 35]

The psychological impact of these problems has a number of related components. Many sexual abuse victims experience considerable guilt and shame as a result of their abuse.[2, 10, 11] The guilt and shame seem logically associated with the dynamic of stigmatization, since they are a response to being shamed and encountering negative reactions from others regarding the abuse. Low self-esteem is another part of the pattern, as the victim concludes from the negative attitudes toward abuse victims that they are "spoiled merchandise."[3, 9, 18, 21, 34, 38] Stigmatization also results in a sense of being different based on the (incorrect) belief that no one else has had such an experience and that others would reject a person who had.

Betrayal

A number of the effects noted in victims seem reasonably to be connected with the experience of betrayal that they have suffered, in the form of grief reactions and depression over the loss of a trusted figure.[1, 3, 7, 20, 21] Sexual abuse victims suffer from grave disenchantment and disillusionment. In combination with this there may be an intense need to regain trust and security, manifested in the extreme dependency and clinging seen in especially young victims.[20, 23] This same need in adults may show up in impaired judgment about the trustworthiness of other people[4, 9, 21, 34, 36, 38] or in a desperate search for a

redeeming relationship.[34, 35] As mentioned before, several studies of female incest victims have remarked on the vulnerability of these women to relationships in which they are physically, psychologically, and sexually abused.[4, 11, 13, 17, 25, 30] Some victims even fail to recognize when their partners become sexually abusive toward their children. This seems plausibly related to both an overdependency and impaired judgment.

An opposite reaction to betrayal – characterized by hostility and anger – has also been observed among sexually abused girls.[4, 9, 26] Distrust may manifest itself in isolation and an aversion to intimate relationships. Sometimes this distrust is directed especially at men and is a barrier to successful heterosexual relationships or marriages. Studies have noted marital problems among sexual abuse victims that also may represent the surfacing of mistrust and suspicion.

The anger stemming from betrayal is part of what may lie behind the aggressive and hostile posture of some sexual abuse victims, particularly adolescents.[1, 8, 10, 21, 27, 39] Such anger may be a primitive way of trying to protect the self against future betrayals. Antisocial behavior and delinquency sometimes associated with a history of victimization are also an expression of this anger and may represent a desire for retaliation. Thus, betrayal seems a common dynamic behind a number of the observed reactions to sexual abuse.

Powerlessness

There is also a configuration of effects of sexual abuse that seem plausibly related to the dynamic of powerlessness. One reaction to powerlessness is obviously fear and anxiety, which reflect the inability to control noxious events. Many of the initial responses to sexual abuse among children are connected to fear and anxiety. Nightmares, phobias, hypervigilance, clinging behavior, and somatic complaints related to anxiety have been repeatedly documented among sexually abused children.[1, 2, 7, 8, 10, 14, 15, 21, 22, 26, 33, 35, 39] These fears and anxieties may extend into adulthood as well.

A second major effect of powerlessness is to impair a person's sense of efficacy and coping skills. Having been a victim on repeated occasions may make it difficult to act without the expectation of being re-victimized. This sense of impotence may be associated with the despair, depression, and even suicidal behavior often noted among adolescent and adult victims. It may also be reflected in learning problems, running away, and employment difficulties, which researchers have noted in victims who feel unable to cope with their environments.[1, 2, 7, 17, 22, 24, 26] Finally, it seems readily related to the high risk of subsequent victimization (noted in previous sections) from which sexual abuse victims appear to suffer: these victims may feel powerless to thwart others who are trying to manipulate them or do them harm.

Attempts to compensate for the experience of powerlessness may account for a third cluster of effects. In reaction to powerlessness, some sexual abuse victims may have unusual and dysfunctional needs to control or dominate. This would seem particularly to be the case for male victims, for whom issues of power and control are made very salient by male sex role socialization.[16, 28] Some aggressive and delinquent behavior would seem to stem from this desire to be tough, powerful, and fearsome, if even in desperate ways, to compensate for the pain of powerlessness. When victims become bullies and offenders, reenacting their own abuse, it may be in large measure to regain the sense of power and domination that these victims attribute to their own abuser. All these effects seem related to the traumatic dynamic of powerlessness that is integral to the sexual abuse experience.

The preceding should give a sense of how the four traumagenic dynamics are connected to the common patterns of reactions seen among victims. It should be clear, however, that the reactions are overdetermined. Some effects seem plausibly connected to two or even three traumagenic dynamics; for example, depression can be seen as growing out of stigmatization, betrayal, or powerlessness. There is no one-to-one correspondence between dynamics and effects. It may be that stigma-related depression has different manifestations and therefore calls for a different therapeutic approach than depression related to powerlessness. Such hypotheses suggested by the model are worthy of further clinical and empirical investigation.

Clinical Assessment Using the Model of Traumagenic Dynamics

Of the many possible uses for the conceptual model described here, an obvious one is in making clinical assessments of the possible effects of abuse. Up to the present, clinicians have evaluated abuse experiences on the basis of unsystematic and untested assumptions about what causes trauma. There have been some attempts to classify abuse experiences to aid in assessment, but these classifications have various shortcomings.

One common classification scheme looks at the characteristics of the offender: for example, whether the abuse was at the hands of a "regressed" or "fixated" abuser.[16] However, this conceptualization provides little insight into the nature of the trauma experienced by the child. More often, experiences have been classified according to simple dichotomies which reflect collective clinical judgment about what kinds of abuse are "more traumatic." Thus, abuse is commonly distinguished by whether it occurred inside or outside the family, on the belief that abuse inside the family has more serious effects on the child. Abuse is also commonly categorized according to whether or not penetration occurred and whether force was used.

This approach to assessing the potential for trauma has real limitations. Beyond the fact that its assumptions are largely untested, the approach results in an

overly simplistic classification of experiences as either more or less serious. Nothing about the character of the effect is inferred, and nothing about how the trauma is likely to manifest itself is suggested.

The model of traumagenic dynamics proposed here allows for a more complex assessment of the potential for trauma. With the assistance of these concepts, the clinician can evaluate an abuse experience on four separate dimensions. The question is not whether it was more or less serious, but rather what specific injurious dynamics were present. The characteristics of the experience itself can be examined for their contribution to each of the traumagenic processes. On the basis of the configuration of traumagenic dynamics most present in an experience, the clinician can anticipate what would be the most likely types of effects.

Thus, a clinician might proceed through the model dynamic by dynamic, asking first: How traumatically sexualizing was this experience? Facts about the experience, such as whether intercourse occurred, how long it went on, and the degree to which the child participated, all might contribute to an assessment of the degree of sexualization. Next a clinician would ask: How stigmatizing was the experience? Factors such as how long it went on, the age of the child, the number of people who knew about it, and the degree to which others blamed the child subsequent to the disclosure would all add to the assessment of this dynamic. Similarly, with regard to betrayal, facts about the relationship between the victim and the offender, the way in which the offender involved the victim, and the attempts – successful and unsuccessful – of the victim to get assistance and support from other family members would all be taken into account. Finally, the facts about the presence of force, the degree to which coercion was brought to bear, the duration of the abuse, and the circumstances under which the abuse was terminated would be particularly relevant to a determination of the degree to which powerlessness was a major dynamic.

Once an assessment is made about the experience according to the four traumagenic dynamics, a clinician should be able to draw inferences about some of the predominant concerns of the victim and about some of the subsequent difficulties to be expected. An assessment based on the traumagenic dynamics would also be useful for formulating intervention strategies. If, for example, assessment suggested greatest trauma in the area of stigmatization, interventions might be aimed specifically at reducing this sense of stigma. Such interventions might include involvement with a survivors group, where the victim could get support from other victims, or other activities to repair the sense of a stigmatized and devalued self.

Traumagenesis Before and After Abuse

Although the sexual abuse itself is assumed to be the main traumatic agent in victims, it is important to emphasize that any assessment approach to

understanding trauma must take into account the child's experiences both prior to and subsequent to the abuse. Abuse will have different effects on children depending on their prior adjustment and on how others respond to it. The conceptual framework being proposed here is easily adapted to this need.

The four traumagenic dynamics do not apply solely to the abuse event. They are ongoing processes that have a history prior to and a future subsequent to the abuse. They can be assessed in each phase. In the pre-abuse phase, the traumagenic dynamics need to be understood particularly in relation to a child's family life and personality characteristics prior to the abuse. For example, a child who was a previous victim of physical or emotional abuse may have already been suffering from a disempowering dynamic before the abuse occurred. However, an eldest child with important responsibilities, living in a fairly healthy family environment, may have acquired a well developed sense of personal efficacy and powerfulness. In such a context, the disempowering aspects of a sexual abuse experience may have only a minor or transient effect. If the child had experienced an unstable family configuration, in which the loyalty of significant others was in doubt, then the dynamic of betrayal may have already been strongly potentiated. However, the betrayal dynamic from the sexual abuse experience might be substantially less for a child who had a sense of trust firmly established.

The operation of the traumagenic dynamics can also be assessed in the events subsequent to the sexual abuse. Two main categories of subsequent events have particular importance: (1) the family reaction to disclosure, if and when it occurs, and (2) the social and institutional response to the disclosure. For example, much of the stigmatization accompanying abuse may occur after the experience itself, as a child encounters family and societal reactions. A child who was relatively unstigmatized by the molestation itself may undergo serious stigmatization if later rejected by friends or blamed by family and if having been abused remains a focus for a long time. The dynamic of powerlessness is also greatly affected by a child's experiences subsequent to sexual abuse. If, for instance, a great many authorities become involved in the experience and the child is forced to testify, forced to leave home, forced to tell the story on repeated occasions, and subjected to a great deal of unwanted attention, this can also greatly increase the child's sense of powerlessness. But, if the child has a sense of having been able to end the abuse and obtain support and protection, this may greatly mitigate any sense of powerlessness that resulted from the experience itself. Thus, in assessing the experience, the contributions of the pre- and post-abuse situation must be included in relation to the four traumagenic dynamics.

Implications for Research

The four traumagenic dynamics described in this paper have implications for both research and intervention. Perhaps most importantly, they can be used as a conceptual guide in the development of assessment instruments. Up until now,

research on child sexual abuse has been conducted using either broad psychological inventories like the MMPI[37] or the California Psychological Inventory[31] or else ad hoc, investigator-invented measures. The broad inventories have subscales like neuroticism or self-acceptance that can assess a variety of pathological conditions, but these are not necessarily the pathologies related most closely to sexual abuse. The ad hoc measures, by contrast, are more sensitive to the specific pathology that may result from sexual abuse, but they are not based on any theory, and often suffer from lack of methodological rigor.

The model of traumagenic dynamics can be the basis for developing instruments specifically designed to assess the impact of sexual abuse. Sections of the instruments would be geared to tap each of the four dynamics. Two separate instruments might be developed, one for direct administration to the children and another for completion by parents or professionals. Forms of the instruments might be tailored for different age groups. Such instruments are badly needed to further research on sexual abuse.

Conclusion

This paper has tried to suggest a framework for a more systematic understanding of the effects of sexual abuse. It has introduced four traumagenic dynamics, which are seen as the four links between the experience of sexual abuse and the sequelae that have been widely noted. Developing a conceptualization of these links may serve as a step in the direction of advancing our understanding of sexual abuse and mitigating the effects of these experiences on its victims.

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