When Faith Hurts: Recognizing and Responding to the Sin of Child Abuse

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The Agenda

•The ten things we need to know about child abuse

The ten things we need to do



1. Prevalence and impact of child abuse





Adverse Childhood Experience (ACE) Study (Centers for Disease control)

- Over 17,000 men and women surveyed on 10 types of adverse childhood experiences (sexual abuse, physical abuse, emotional abuse, neglect, witness of domestic violence, etc)
- Now over 25 ACE studies (1998 to present)



Ten Adverse Childhood Experiences

- Emotional abuse (humiliation, threats) (11%)
- Physical abuse (beating, not spanking) (28%)
- Contact sexual abuse (28% women, 16% men)
- Mother treated violently (13%)
- Household member alcoholic or drug user (27%)
- Household member imprisoned (6%)
- Household member chronically depressed, suicidal, mentally ill, psychiatric hospitalization (17%)
- Not raised by both biological parents (23%)
- Neglect—physical (10%)
- Neglect—emotional (15%)



1 or more ACE increases risk of:

- Cancer
- Heart disease
- STDs
- Liver disease
- Smoking
- Alcohol abuse
- Obesity
- Drug dependence
- IV Drug Use
- Early intercourse, pregnancy

- Depression
- Anxiety disorders
- Hallucinations
- Sleep disturbances
- Memory disturbances
- Anger problems
- Domestic violence risk
- Job problems
- Relationship problems



Polyvictimization research

- Exposure to multiple forms of victimization was common.
- Almost 66% of the sample was exposed to more than one type of victimization, 30% experienced five or more types, and 10% experienced 11 or more different forms of victimization in their lifetimes.
- <u>Poly-victims comprise a substantial portion of the children who would</u> <u>be identified by screening for an individual victimization type, such as</u> <u>sexual assault or witnessing parental violence</u>.
- Poly-victimization is more highly related to trauma symptoms than experiencing repeated victimizations of a single type and explains a large part of the associations between individual forms of victimization and symptom levels.

- (Turner, Finkelhor, et al, 2010)



2. Sex offenders are drawn to youth serving organizations

"Any situation that provides ideal conditions for pedophiles will draw them, and it will be very difficult to distinguish them from their nonpedophilic and entirely moral colleagues...boarding schools, overnight camps, male choirs—any setting that puts groups of kids regularly together under the supervision and care of a 'counselor' or other adult for overnight trips will draw pedophiles..." Dr. Anna Salter



3. Sex offenders are manipulative

"Very few of us have ever been suspected of a crime, and fewer still have been interviewed by the police about one. Under such circumstances, detection apprehension would be very high for most of us...But that would change had we practiced lying over serious matters every day, had we lived a double life, had we been questioned by upset parents or by police numerous times in the past. You are never going to run into a child molester who is not a practiced liar, even if he is not a natural one." (From the book *Predators* page 202)



4. Offenders often select the easiest target

- Q. At church, you did not molest all the children. How did you choose?
- A. "First of all you start the grooming process from day one...the children that you're interested in...You find a child you might be attracted to...For me, it might be nobody fat. It had to be a you know, a nice looking child...You maybe look at a kid that doesn't have a father image at home, or a father that cares about them...if you've got a group of 25 kids, you might find 9 that are appealing...then you start looking at their family backgrounds. You find out all you can...which ones are the most accessible...you get it down to one that is the easiest target, and that's the one you do."



5. Offenders may act even if others present

- 54.9% of child molesters offended when another child present (The Tricky Part by Martin Moran)
- 23.9% offended when another adult present Underwood, et al, *Do sexual offenders Molest when Other Persons are Present?* 11(3) Journal of Research and Treatment (1999)
- Note—it may be subtle (under the blankets)
- Why? Increases power over child, the chance of getting caught enhances arousal, etc.



6. Most child abuse cases are never reported

- Only 40% of maltreatment cases and 35% of the most serious cases <u>known</u> to mandated reporters are reported (Finkelhor 1990)
- 65% of social workers, 53% of physicians and 58% of physicians assistants do not report all cases of suspected abuse (Delaronde, et al, 2000)



Most child abuse cases not reported

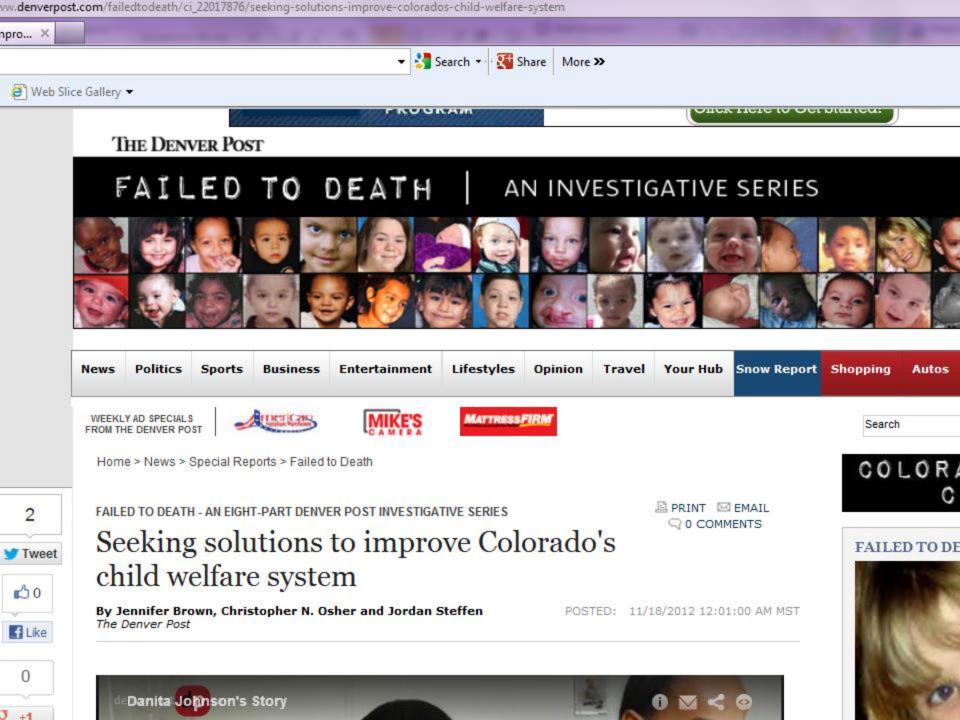
- Study of 57 tribes (21 states): 62% of <u>known</u> child abuse cases were not reported to federal government (Fox 2003)
- Study of 197 teachers: only 26% would report familial sexual abuse & only 11% sexual abuse at hands of a fellow teacher (Kenny 2001)



7. Even when reported, most cases not investigated

- Only 50% of the nation's *identified* abused children received child protection investigation and only 30% of the children suffering "serious harm" received child protection investigation (NIS-4 2010)
- NIS-4 researchers labeled "serious harm" as child abuse or neglect cases in which "an act or omission result in demonstrable harm."





8. Children seldom lie about abuse

- All human beings can and do lie
- Children as young as two have been observed to engage in deception
- Children as young as 3-4 can tell lies
- By age 4, most children can consider the listener's mental state but most lies are "easy lies." (Vrij, 2002)



Do children lie about CSA?

- It's difficult for young children because lying requires "knowledge of the subject matter." Accordingly, if a child lacks knowledge of human sexuality, it will be difficult to construct a believable lie.
- The easiest lie is "no, it didn't happen." The most difficult lie is a detailed report of an event. (Tate, Warren & Hess 1992)



Studies on lying about CSA

- 1997 NCANDS report: 320,447 reports of CSA, only 1,803 "intentionally false"
- Other studies: 1% (Jones & McGraw 1987); 2.5% (Oates, Jones, Denson, et al 2000); 4.7-7.6% (Everson & Boat 1989)
- Numerous studies documenting that CSA victims lie to protect perpetrators (even strangers if there is threats): 57% of children with STDs made no disclosure when interviewed (Lawson & Chafin 1992)



A few more thoughts on lying

- Adolescents are more capable of lying successfully about CSA but to do so suggests the child is pathological and implies a lack of conscience (Dr. Catherine Dixon, PhD)
- Children view lying more harshly and seriously than adults (Peterson, et al 1983)
- Adults lie more frequently and successfully and numerous studies document lying among perpetrators.



9. Faith based YSO's may be particularly attractive to sex offenders "If children can be silenced and the average person is easy to fool, many offenders report that religious people are even easier to fool than most people."

Anna Salter



How sex offenders view us

- "I consider religious people easy to fool...They have a trust that comes from being (religious)...They tend to be better folks all around. And they seem to want to believe in the good that exists in all people...I think they want to believe in people. And because of that, you can easily convince, with or without convincing words."
- The case of the choir director



A youth director with over 100 victims (p. 199 Salter)

"(T)here was a great amount of pride. Well, I pulled this one off again. You're a good one...There were times when little old ladies would pat me on the back and say, 'You're one of the best young men that I have ever known.' I would think back and think 'If you really knew me, you wouldn't think that.'"



10. The impact of sexual abuse on spirituality

- What is "spirituality"?
- "Relating to religion or religious belief; relating to, or affecting the human spirit or soul as opposed to material or physical things." Source: The Oxford American Dictionary (2001) p. 1644



How do adult survivors define spirituality?

- 59% of adult survivors defined spirituality as being connected or in a relationship with God/Higher power
- 22% defined spirituality as being in touch with one's true self or "feeling health in their soul" Source: Joanette Robertson, unpublished study



The impact of abuse on spirituality

- Subjects of most studies, victims or perpetrators have Judeo-Christian background
- A study of 527 child abuse victims (physical, sexual or emotional) found these victims had a "significant" spiritual injury
- The injuries included feelings of guilt, anger, grief, despair, doubt, fear of death and belief God is unfair.
- However, the victims reported praying more frequently & having a "spiritual experience."

--Lawson, et al, Child Abuse & Neglect (1998)



When the perpetrator is clergy, the impact on spirituality is greater

- Clergy use "religious cover" to justify abuse (i.e. their "good works" overshadow the abuse; God gave this child to me)
- Clergy often communicate this cover to the victims
- When this happens, church/Synagogue attendance of these survivors decreases, less likely to trust God, and their relationship with God "ceases to grow." McLaughlin, Devastated Spirituality: The Impact of Clergy Sexual Abuse on the Survivor's Relationship with God (1994).



How often do offenders use religious cover in sexually abusing children?

- 93% of sex offenders describe themselves as "religious" (Abel study of 3,952 male offenders)
- In a survey of 2,864 church leaders, 20% knew of a sex offender attending/member of their church (Christianity Today 2010)
- Hard core offenders maintaining significant involvement with religious institutions "had more sexual offense convictions, more victims, and younger victims." Eshuys & Smallbone, *Religious Affiliations Among Adult Sexual Offenders (2006)*
- Why?
- Gullible religious people, easy access to children, open acceptance of the offender



Examples of clergy invoking God to justify the sexual abuse of children

- "Mr. Geier, now 59, said that between the ages of 14 and 15, starting around 1965, Father Murphy molested him four times in a closet at the school. <u>The</u> priest, a hearing man fluent in sign language, said that God wanted him to teach the boy about sex but that he had to keep it quiet because it was under the sacrament of confession. Mr. Geier said he felt sick." Laurie Goodseitn, New York Times, March 26, 2010
- The case of the "bedtime prayers"
- The case of the girl who "got it over with"
- "Pedophiles need to become more positive and make the claim that pedophilia is an acceptable expression of God's will for love and unity among human beings." Ralph Underwager, ordained Missouri Synod Lutheran minister, Journal of Paedophilia (1993)



Ten things YSO's need to do





1. Help children cope spiritually

- Researchers have found a victim's "spiritual coping behavior" may play a positive or negative role in the ability to cope with the abuse
- Victims of severe abuse and very young victims are more likely to remain "stuck" in their spiritual development (i.e. remain angry with God)
- Nonetheless many victims reporting "greater resolution" of childhood abuse were able to "actively turn to their spirituality to cope...rather than attempt to cope on their OWN." Gall, Spirituality and Coping with Life Stress Among Adult Survivors of Childhood Sexual Abuse, 30 Child Abuse & Neglect 829 (2006)



Spiritual questions

- "Am I still a virgin in God's eyes?"
- "If my religious community is against me, does this mean God is against me?"
- The bottom line dilemma: "You can make sense of sexual abuse and no God, or God and no sexual abuse. But how do you tolerate the two realities together?"

-Diane Langberg, PhD



Military chaplains

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Hospital chaplains



Pastoral Care

- About Us
- > Spiritual Needs
- Pastoral Care Staff
- Clinical Pastoral Education
- Pastoral Stories

Gundersen Lutheran Pastoral Care and Clinical Pastoral Education (CPE) are an important part of Gundersen Lutheran's history of caring for mind, body, and spirit. Our staff has a deep respect and commitment to serve people of all faith traditions.

Each hospital unit has a chaplain assigned to visit you and there is an on-call



Fire department chaplains

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Welcome to the new FFC Site

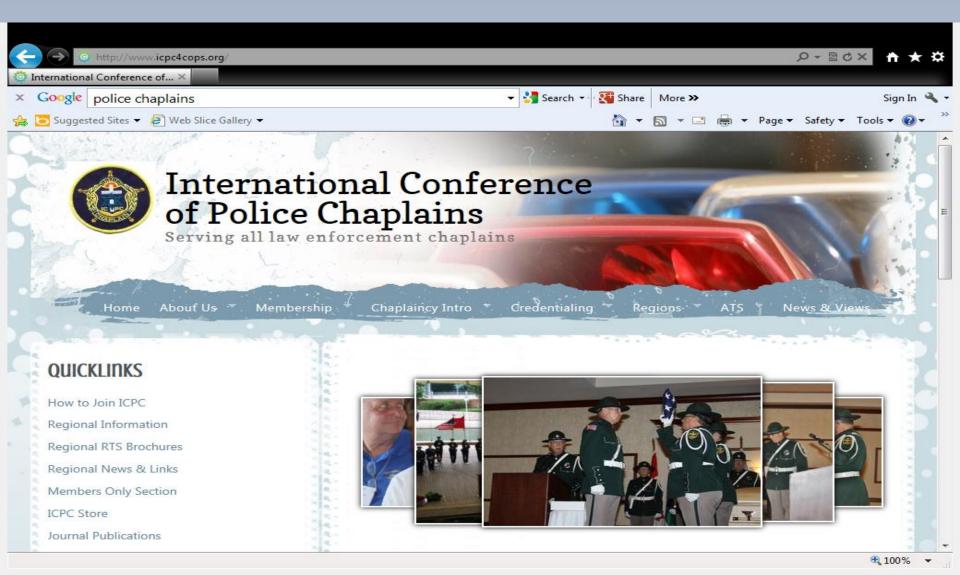
We are an international fellowship of Fire-Rescue Chaplains. From here you can learn about us, check out the news of the FFC, explore membership, and investigate our training. Members can sign in to access the <u>FFC directory</u>, participate in a blog, view articles, update your profile, and renew your membership. We encourage contact to our officers and regional directors.

Mission Statement

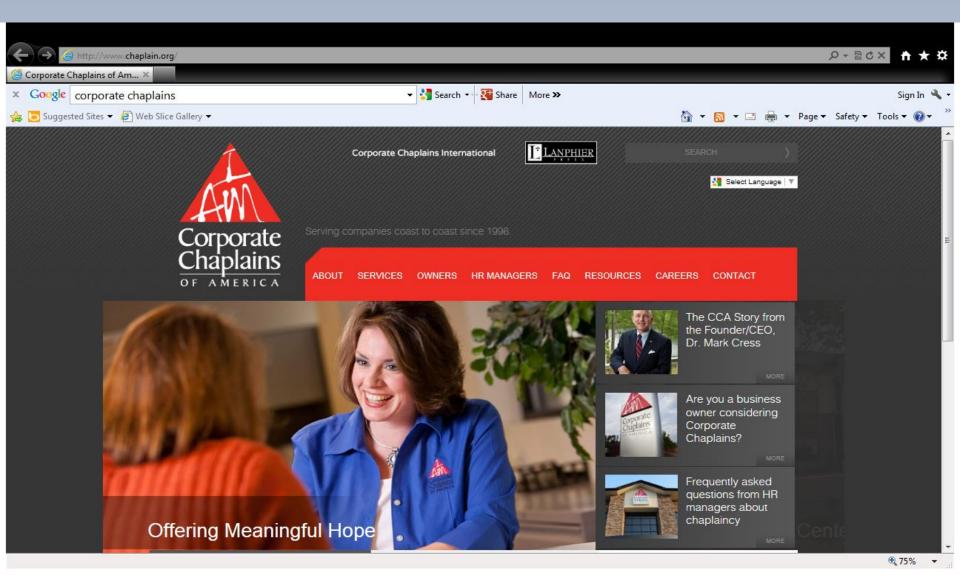
The mission of the Federation of Fire Chaplains is to bring together

EFC Chaplain Training/Leesville, LA 22 Mar 2013 • St Michael's Catholic Church FFC Training/Kamloops BC 04 Apr 2013 • Kamloops Fire/Rescue Training Centre FFC Training/Moncton, New Brunswick 12 Apr 2013 (EDT) • Moncton FD FFC Chaplain Training/Ft. Worth, Texas 19 Apr 2013 • Riley Conference Center, Southwestern Baptist Theological Seminary, Ft. Worth, TX

Law enforcement chaplains



Corporate chaplains



How about...

- Chaplains for Children?
- Chaplains for Child Protection Professionals?
 - A detective's question about fairness
 - -The child or children that got away
 - -"I said the wrong thing"
 - Drip, drip, drip



2. Educate our leaders

Ohio study: only 22% of 143 pastors, priests, rabbis required by denomination to receive child abuse training. Study also documented under-reporting of abuse no matter how clear the evidence The training must not be a one time event



Educate children and parents

- Personal safety classes (more important than fire safety & it's not sex education)
- Make sure kids know the difference between sinning and being the victim of sin (13 year old girl)
- Offer classes for parents (parenting, Internet safety, abduction, teaching kids personal safety—boys and girls)
- The day I called the local church camp



3. Train workers about suspicious behaviors—but cautiously

- Behaviors are not diagnostic
- Most behaviors consistent with abuse are consistent with other causes
- Some behaviors, though, strongly suggest abuse



Have thorough knowledge of normal sexual behaviors

- Birth to 3 may touch genitals, though "rhythmic manipulation with hand" doesn't occur until at least 3
- May show genitals, interested in bathroom functions, use dirty language for bathroom functions, might insert something in body cavities but will stop if pain, may play house or doctor but play will mimic only what they've seen

- Toni Cavanaugh Johnson, Sexualized Children



Abnormal Sexual Behavior (CSBI, Wm. Friedrich, Mayo Clinic)

- Placing child's mouth on sex part
- asking to engage in sex acts
- masturbating with object
- inserting objects in vagina/anus
- imitating intercourse
- making sexual sounds
- french kissing



undressing other people
 asking to watch sexually
 explicit television

imitating sexual behavior
 with dolls



4. Don't be manipulated

- "I consider (religious) people easy to fool...They have a trust that comes from being (religious)...They tend to be better folks all around. And they seem to want to believe in the good that exists in all people...I think they want to believe in people. And because of that, you can easily convince, with or without convincing words."
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A youth director with over 100 victims (p. 199 Salter)

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5. Respond to clergy abusers the same way as non-clergy offenders

- Share characteristics of other offenders
- More skilled/better educated
- Careful selection of victims
- More likely to use force
- Treatment the same
 - Langevin, et al, A Study of Clerics Who Commit Sexual Offenses, 24 Child Abuse & Neglect 535 (2000)



6. Have policies for protecting children

- Screening/selection of employees & volunteers
- Guidelines on
 interactions
- Monitoring behavior
- Ensuring safe environments
- Responding to inappropriate behavior
- Training of employees, caregivers, youth

Preventing Child Sexual Abuse Within Youth-serving Organizations:

Getting Started on Policies and Procedures



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention



Deterring predators

- Criminal background checks (but note that most predators have never been caught—Abel study, etc)
- Google search and search newspapers where counselors/employees may have worked
- Ask for references and call them



Three simple rules in hiring

- Have a written child protection policy & make every applicant read it
- Have an application that not only includes a background check but explores child abuse issues
- Conduct an oral screening



Camps/Synagogues/Schools: Lessons from the Boys Scouts

- Two deep leadership—at least two adults on "all trips and outings"
- No one on one contact (if there is some reason for a private discussion with a child, do it in the view of others)
- Respect for privacy—no counselor should watch a child change clothes or shower nor should a child see a counselor naked



Lessons from the Boys Scouts

- Separate sleeping accommodations for counselors and children
- Limit or prohibit events at workers homes
- Appropriate attire (no skinny dipping, etc)
- Windows and open doors
- Sexual comments, jokes, and behaviors around children strictly prohibited
- Prohibiting corporal punishment
- Limiting cameras, imaging, digital devices
- Bullying prohibited



Keep an eye out at camp

- At the camp, does a counselor single out a child for gifts, particularly expensive gifts, or other favors? (Bakken's buddy)
- Is that child from a family where parents are divorced or where parents are not involved?
- Do they make unusual statements such as commenting on a boy or girl's development? (Bakken would slam on car breaks and call the behavior a "ball busting" episode)
- Do they find a way to "accidentally" see the child undressing or going to the bathroom? (Bakken's bathroom rules)
- Trust your gut (Bakken's instructions to sleep in underwear with sleeping bags undone, Bakken's "bedwetting" excuse, faith-based school pornography case)



Other ways to help

- Does your Synagogue offices have windows?
- Become member of MDT/Citizen Review Panels
- Be a support person
- Periodically deliver a sermon about child abuse
- HALOS
- Model seminaries
- Does your Synagogue library have materials on child abuse? If not, obtain materials.



7. Recognize the Signs of physical abuse



Most children are hit (Gershoff 2008)

- 85% of children physically punished prior to high school
- 51% of all children have been hit with instruments
- Approximately 2/3rds of parents report hitting children below the age of two



Let's remember how little these kids are





Location of injuries

- Children are forward moving and frontal explorers, most accidental injuries are to "frontal" locations (forehead, nose, chin, palms, elbows, shins)
- Injuries to buttocks, genitalia, abdomen, back, lateral areas of body more likely to indicate abuse
- Does child's description make sense? (the coffee table account)



Suspicious injuries

- Always bruised—particularly in unlikely areas
- "Control" injuries (hair, arms, etc)
- "Patterned" injuries (hand slap—2 or 3 lines)



8. Recognize children exposed to domestic violence





Types of Exposure

- Hearing a violent event
 - Children's reports of witnessing violence significantly higher than parent's reports (Richters and Martinez, 1993)
- Direct involvement
 - Eyewitness
 - Intervention
 - Used as part of violent event (i.e., shield)
- Experiencing aftermath of violent event



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Understand effects of IPV on children through drawings

An eight-year-old was asked to draw a picture of his father. He wrote in Spanish:

"This is how I see my father because he often gets angry and drunk and his eyes turn red."

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asi veo a mi papaí Porque es muy enojon y se pone borracho y sele ponen los ojos rojos

Effects of Exposure to IPV

(Summers, 2006)

	Infants	Preschool Age	School Age	Adolescents
Behavioral	 Fussy Decreased responsiveness Trouble sleeping Trouble eating 	 Aggression Behavior problems Regressive behavior Yelling, irritability Trouble sleeping 	 Aggression Conduct problems Disobedience Regressive behavior 	 Dating violence Delinquency Running away Truancy Early sexual activity
Social		Trouble interacting with peersStranger anxiety	•Few and low quality peer relations	 Dating violence (victim or perpetrator) Increased risk for teen pregnancy



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Effects of Exposure to IPV (Summers, 2006)

Adolescents Infants **Preschool Age School Age** •Fear/anxiety, Somatic complaints Attachment Substance abuse needs not met sadness, worry •Fear & anxiety, •Depression ⁵sychologica depression, low self-PTSD Suicidal ideation Emotional/ esteem, shame •Negative affect •PTSD PTSD •Feeling unsafe •Feeling rage, shame Limited emotional Separation anxiety •Unresponsiveness response Inability to Self-blame •Self-blame •Short attention span Cognitive understand Pro-violent attitude •Distracted, inattentive Defensive Pro-violent attitude



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9. Develop policies for...

- Responding to a lawsuit
- When an offender confesses
- When an offender seeks to attend services or join a congregation



When a victim sues

- 1. Offer an "unequivocal apology" (BSA)
- 2. Symbolic gestures (i.e. a memorial or rock garden)
- 3. Changes in policies (two deep leadership, proper screening, immediate reporting to the authorities—no exceptions)
- 4. Archive the past (victims want the assurance there will never be a revisionist history)
- 5. The practical (Synagogue should pay for mental health and medical services) Kelly Clark, *Institutional Child Sexual Abuse—Not Just a Catholic Thing*, William Mitchell Law Review (2009) (on jump drive)



When a perpetrator confesses to sexual abuse

- Inform him that sexual abuse contributes to significant health risks and that he should fully disclose his conduct to a medical care provider to ensure the child's physical well-being (Centers for Disease Control, ACE studies)
- Inform him that sexual abuse has a significant impact on a child's mental health and therefore the victim should be referred to an appropriate mental health provider (CDC, ACE studies)
- Inform him that SA results in significant spiritual damage and, in consultation with a mental health professional, and Rabbi, we will need to address this issue. Diane Langberg, *Counseling Survivors of Sexual Abuse* (2003)
- Inform him, he has committed a serious crime and that he should turn himself in to the police and be assessed by and follow the recommendations of a sex offender treatment provider (report it in any event)
- If he refuses any of the above, his "repentance" should be questioned and the Synagogue should exercise appropriate discipline



Assessing a perpetrator's repentance

- Have you informed your spouse? If your spouse wants you to move out, are you willing to do so? If your child victim(s) want you to move out, are you willing to do so?
- Have you informed your child's medical provider? Have you referred your child to a therapist?
- Do you hold yourself fully responsible—or do you believe your child in some way contributed to the abuse?
- Have you turned yourself into the police? Will you be confessing and pleading guilty or will you make the government "prove it"? Will you allow your attorney to grill your victim at trial?
- Are you willing to enroll in a sex offender treatment program?

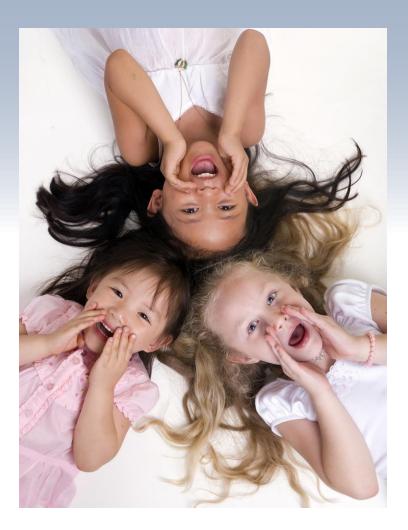


9. Develop policies for sex offenders seeking to join a Synagogue or attend services

- 1. <u>Compliance with the law.</u> Speak to the offender's probation officer and/or the local prosecutor.
- 2. <u>Consultation with the sex offender's treatment provider.</u> This will determine potential dangers and help the Synagogue in meeting the offender's needs.
- 3. <u>Review court and investigative records.</u> What charges were dismissed? What did the offender confess to?
- 4. <u>Determine level of supervision necessary.</u> Low risk may require a shadow, high risk separate services.
- 5. <u>Sex offender should not be allowed to attend services with victim.</u> This is true even if low risk.
- 6. <u>If SO goes to different congregation—let them know of risks.</u>
- 7. <u>Be sensitive to the fears of parents and the emotions of all survivors.</u>
- 8. <u>Have a public congregational meeting (when appropriate).</u>



10. Build resilience





What is resilience?

- Resilience has been used to describe behavior, intellect, emotional well-being, social functioning or all of the above (Houshyar, 2005)
- Between a third to half of all individuals who have experienced sexual abuse do not (or at least no longer) exhibit adult psychiatric or psychological problems and can therefore be referred to as 'resilient' (Fergusson & Mullen, 1999; McGloin & Widom, 2001)



What makes a child resilient?

- Perceived social support and social reactions to abuse can influence mental health outcomes and recovery from trauma (Futa et al, 2003; Krause, Kaltman, Goodman, & Dutton, 2008; Ullman, Filipas, Townsend, & Starzynski, 2007)
- Accordingly, if a YSO is supportive of a child making an outcry, this may build resiliency



Healthy relationships & emotional support

- The ability to find supportive relationships outside of the family helps overcome the aftermath of abuse (Lauterbach et al., 2007)
- The availability of emotional support at the time of the abuse will strengthen the ability of an individual to draw support from others in adulthood, thereby engendering resilient functioning (Collishaw et al., 2007)
- If YSO's respond compassionately to an abused child, and provide one or more healthy relationships with adults or peers, this builds resiliency



Strong family dynamics

- A study with hundreds of university students who had experienced childhood abuse found that family characteristics (family conflict or cohesion) affected resilience in adult life far more than the length or type of abuse people had suffered (McClure, Chavez, Agars, Peacock, & Matosian, 2007)
- To the extent Synagogues build stronger family dynamics, we are also building resiliency



Laughter and imagination

- Outgoing personality, good sense of humor, strong intellect, an active imagination decrease risk factors (Pickering, Farmer, & McGuffin, 2004).
- To the extent YSO's make a child's personality stronger or encourage his or her imagination and intellect, even humor, we are building resiliency.



Self esteem

- Research suggests that high self-esteem, external attributions of blame, and individuals' coping strategies all predict more positive outcomes (see Collishaw et al., 2007).
- To the extent YSOs build self esteem and coping strategies, and reinforce that children are not to be blamed for abuse, we are building resiliency



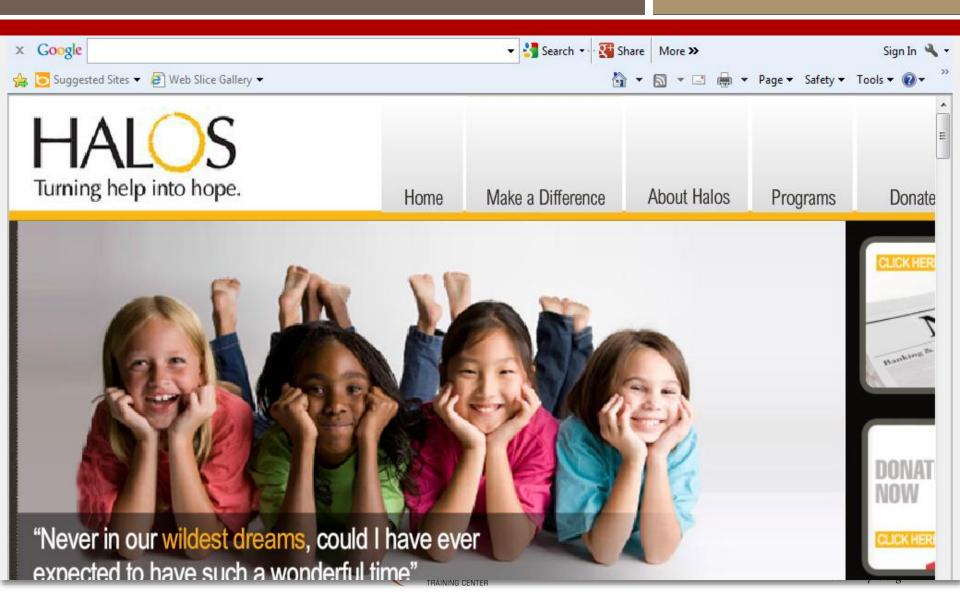
Religion and well-being

- Even when controlling for age, race, ethnicity, region, socioeconomic status, marital and child bearing status, "very religious" people scored higher than "moderately religious" or "non-religious" on Gallup's "well-being index"
- This index measures life evaluation, physical health, emotional health, healthy behaviors, and work environment.
- Why?
 - Religions promote healthy behavior
 - Belief in God provides unique comfort in times of sorrow
 - Religion provides "super-charged" friends (Newport 2012)
- Helps cope with trauma



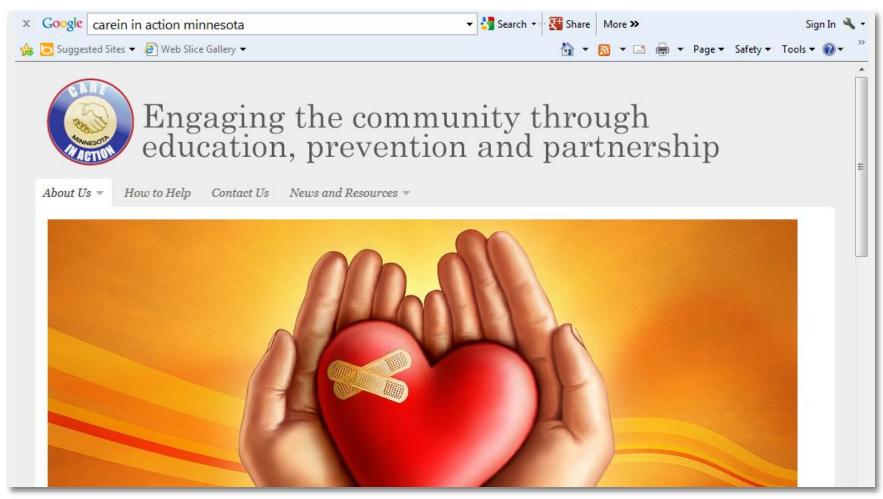
Additional Resources

Adopt a Social Worker



Care in Action

Adopt a Social Worker





"Till the night be passed"



"Silence in the face of evil is itself evil. Not to act is to act." – Dietrich Bonhoeffer

