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AN INTERDISCIPLINARY PUBLICATION

Editorial Board



Dr. Johnny B. Decatoria is a Clinical Psychologist, Educator, Psychotherapist, Clinical Social Worker and a Trauma Specialist. He finished his Liberal Arts degree in Psychology at the University of Negros Occidental-Recoletos in Bacolod City and completed his Master of Arts in Clinical Psychology at Far Eastern University-Manila. In 1994, he earned his Ph.D. in Clinical Social Work and Psychology at La Salle University in U.S.A. under the assistance of the United Nations Development Program (UNDP). He

has worked as Consultant for over 10 years with United Nations Agencies, particularly, UNDP/UNICEF and UNHCR. He assisted UNICEF in a number of Caribbean Government Countries as a Clinical Psychologist and Social Services Consultant in providing professional and technical assistance in developing child abuse management programs including CICAL, and training social workers, counselors, health personnel, police and prison officers, corrections officers, particularly in the management of cases such as, victims of violence and trauma in many countries like Saint Lucia, Barbados, Antigua, and Commonwealth of Dominica. At the same time, he had lent his professional expertise with the Penal Reform International based in England and with offices in France and the Caribbean. Dr Decatoria has also worked for the UNHCR in Thailand where he was responsible for implementing psycho-social and mental health services for Vietnamese and Cambodian survivors of violence who were victims of rape and boat piracy attacks. His last two international work assignments are Kosovo and West Africa where he had served as Social Services Technical Adviser and Trainer, providing technical assistance to United Nations and international agencies in developing mental health programs and services to individuals and families who were victims of war. Dr. Decatoria is a Diplomate and Board Certified Expert in Traumatic Stress, awarded by the American Academy of Experts in Traumatic Stress in New York. Eight years ago, he founded the first ever Psychotrauma Clinic in the country, the University of Santo Tomas Graduate School Psychotrauma Clinic in Manila, a community service program of the UST Graduate School, where he served as Consultant and Director. He taught at the UST Graduate School a number of Counseling and psychology courses. At the same time, he served as consultant to a number of government agencies such as, the Department of Social Welfare and Development, Bureau of Corrections, and Department of Justice.



Dr. Emma Porio is Professor and Chair of the Department of Sociology and Anthropology at the Ateneo de Manila University (ADMU). She directed the Global Urban Research Initiative for Southeast Asia (1994-1998), chaired the Technical Panel for Sociology and Anthropology in the Commission on Higher Education (CHED) of the Philippines (1997-2007) and of the Governing Council of the Philippine Social Science Council (2004-2006) and president of the Philippine Sociological Society (1999-2002). Currently, she is a

member of the Executive Committee of the Europe-based, International Sociological Association (ISA), Board of Directors of the Global Development Network (Washington, DC), and international advisor of the panel on climate change of the American Sociological Association. From 1994-1998 she served as regional coordinator for the Global Urban Research Initiative (GURI) in Southeast Asia. Under her leadership (1996-2002), the Department of Sociology of the Ateneo de Manila University became a CHED Center of Excellence. She sits as research advisor to several NGOs or civil society organizations (CSOs) specializing in urban/local governance, housing, children, poverty, and gender such as the Huairou Commission (New York), International Housing Cooperative Board (Washington, D.C.) and the Forum of Researchers for Human Settlements (Rome). She obtained her PhD (Sociology) from the University of Hawaii and the East-West Center (USA) and has been a recipient of several international research fellowships, the most recent being the Ash Institute Fellowship for Local Governance (Harvard University). For the past 15 years, Dr. Porio has done extensive research on children, women, poverty, development, and governance. She has served as consultant to the World Bank, United States Agency for International Development (USAID), Asian Development Bank, Ford Foundation, and UN agencies like the UNICEF, UNDP, UNFPA, ILO, and WHO. She has written several books including *Partnership with the Poor*, *Pathways to Decentralization*, *Children in Drugs in the Philippines*, *Children in Drugs in Southeast Asia*, and *Urban Governance and Poverty Alleviation in Southeast Asia*.

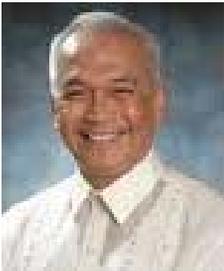


Dr. Lois Engelbrecht has all three degrees in social work. She was born and grew up in India and worked primarily in Asian countries, especially in the Philippines. She has written a variety of materials that are aimed at direct social work and community workers in the area of prevention and treatment of child sexual abuse. Her particular expertise is project development, and has been a part of developing new programs in Malaysia, China, Vietnam, Saudi Arabia, and India. She is a founder of the Center for the Prevention and Treatment of Child Sexual Abuse in Quezon City. Her

work has been translated into Hindi, Tamil, Bahasa Malay, Tagalog, Arabic, Chinese, and Vietnamese.



Reynaldo J. Lesaca Jr., M.D is a privately practicing psychiatrist of 35 years. He recently retired from government after 17 years of service with the National Kidney and Transplant Institute in Quezon City. He is the only transplant psychiatrist in the country with extensive experience in organ donation and transplantation. He also does consultation-liaison work in the hospital. He was founding president of the Center for the Prevention and Treatment of Child Sexual Abuse in 1995 and served as such for ten years. In 2010 he was appointed as Emeritus President of the Center by the Board of Trustees. Dr. Lesaca offered his clinical services to child and adolescent clients who are victims of child sexual abuse. His influence was essential in getting Personal Safety Lessons incorporated in the curricula of public elementary and high schools with the Department of Education. Dr. Lesaca is also a staunch medical activist.



Dr. Jose Andres Sotto returned to the Philippines in January 2003, after more than 25 years abroad, to accept a call to join the Faculty of Asian Theological Seminary (ATS) and to serve as Consultant to the Department of Social Welfare and Development (DSWD). At ATS, he spearheaded the construction of the Counseling Center and served as Head of the Counseling Department. Dr. Sotto developed, and supervised, the Comprehensive Continuing Education for DSWD Psychologists, a three-year-intensive training program that featured a (live-in) four-week-grounding in theory and practice, as well as two years of one-on-one mentoring in the field. As a suicidologist and community activist, Dr. Sotto founded the South Essex Adolescent Crisis Services in Ontario, Canada, in response to the rising incidence of suicide attempts among teens in the area. This intervention program was the first of its kind in Southwestern Ontario, employing advanced case management approaches. He also served as a consultant to the Children's Aid Societies of Ontario and the Detroit Youth Home, Michigan, USA, on cross-cultural issues in child abuse prevention and treatment, juvenile justice, and adoption. Dr. Sotto's direct involvement in these programs led him to broader engagement in advanced case management, suicide prevention, trauma counseling, forensic social work, and psychological debriefing of disaster victims/workers around the world. In 1991, Dr. Sotto was appointed Director of the International Facilitating Committee of the United Nations Conference on Environment and Development (*Earth Summit*) held in Rio de Janeiro, Brazil. After his term, he joined the Immigration and Refugee Board of Canada as a refugee law judge, and continued his work as community-based

pastoral counselor and therapist. Dr. Sotto earned his Ph.D. in Counseling and Special Education (minor in Social Work) from Wayne State University, Detroit, Michigan; his Master of Education from the University of Windsor, Canada; his Bachelor of Education from Wesleyan University-Philippines; and his *Certificate in Youth Ministry* from Princeton Theological Seminary, New Jersey. Dr. Sotto was the recipient of the *Governor General Medal of Honor for Community Development* on the occasion of Canada's 125th Anniversary. He has also been named *Most Outstanding Filipino-Canadian Leader* on seven different occasions. Dr. Sotto's current field of study is on male victims of sexual abuse.

Call for Papers

The research on and experience in child sexual abuse in the Philippines is increasing. In order to fill the gap in disseminating the research, the editorial team will make every effort to seek out that research for publication.

Our first several issues will thank its contributors with P4,500.

Refer to the back of this journal for the guidelines for submission. We seek academic as well as practical articles to increase our understanding of the multidisciplinary context of child sexual abuse. Researchers and practitioners in the field of social work, psychology, psychiatry, medicine, law, and education are all invited to contribute to filling in all pieces of the puzzle for effective services in the prevention and treatment of child sexual abuse.

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Struggle and Journey of Christine towards Self-Disclosure**

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Abstract

A comprehensive review of the effects of child sexual abuse and the process of disclosure were done in order to conceptualize the experiences of Christine, a 17 year old adolescent, who suffered from 10 years of repeated sexual abuse. This case study aims to present Christine's experiences as a foundation in integrating classic and contemporary theories about child sexual abuse and disclosure. Through the discussion of the multiple dynamics conceptual models and various theoretical frameworks of disclosure, a redefined depiction of child sexual abuse is presented. The progressive-consequential model of child sexual abuse, its research and practical implications are discussed.

**A partial list of unpublished Philippine university research related
to child sexual abuse - Part II**

Monaliza V. Calapini-Prasad and Lois J. Engelbrecht page 21

The purpose of the Philippine Journal of Child Sexual Abuse is to encourage Philippine-based research that will facilitate to build a national paradigm for child protection. Most research is western-based and published in western international journals. This journal aims to publish indigenous research in order to develop effective services to our indigenous population. This appears a daunting challenge. Yet local research does exist, albeit mostly unpublished.

The search for university research yielded a healthy list. This article shares a mere handful from some of the Mindanao universities; the former issue listed studies from Luzon and Vasaya universities. The research chosen to share were not for any particular purpose except to show the multidisciplinary nature of the issue.

In order to maintain the integrity of the individual authors, very little editing was done on the text. The purpose of what editing did occur was to report the research in a somewhat similar format. This was a challenge because the research was done at different levels (course work, thesis, dissertation) and from different universities and thus using different formats with different expectations and standards.

COMMENTARY

Commentary on the Bibliography of Research conducted in the Philippines related to Child Sexual Abuse Principle, Process, and Practical Learning: A Reflective Journey on Child Sexual Abuse Research Experience

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by Hamby and Grych**

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AN EDITORIAL NOTE

Welcome to the fifth issue of the Philippine Journal of Child Sexual Abuse. It continues to be a challenge to find authors willing to publish with us. There are several reasons for this. Some of the challenges we can facilitate while others are daunting.

First, the country needs to develop a doctoral program in social work. There are many elements of the cultural and societal norms and values that deeply enrich social work and which could equally enrich other countries. This requires Philippine research. When I look at research done by students, most of the resources are from the West; this needs to change. Rather than adapt from the West we need heuristic work from our own grassroots. For this we need doctoral level research on par with other doctoral level programs in the country that include psychology and sociology.

Second, we need to value our own work for ourselves. Most researchers appear to want to publish their papers in international journals. We need to collect our own research for our own use. This appears to contradict my first point above, that our values and practices need to be shared from which the West can learn. And yes, students in the Philippines could access the international journals with the Philippine research if they could afford the \$25 per article. Nonetheless, we will continue to publish our little journal in the hopes that more students and professionals will gain from it and value it enough to have their own work published here. We will benefit most from our own research.

The journal is doing at least two things to motivate researchers to send us their manuscripts for publication. First, at the end of this publication we have placed the guidelines for submission. We have two distinct parts of the dialogue on critical pluralism of child sexual abuse: research-based academic manuscripts and evidence-based practical manuscripts. For several more years we will thank the authors whose work we publish with P4500.

Two, we wish to further support research outside of universities. To this end the Center for the Prevention and Treatment of Child Sexual Abuse has located a donation for US\$5,000 for research related to child sexual abuse. The funds will go to either one person whose research is approved for that amount, or to several researchers who require fewer funds and add up to the total of \$5,000. Candidates must submit proposals to CPTCSA and their work qualified for publication in the Philippine

Journal of Child Sexual Abuse.

I hope you find value in this issue of the Philippine Journal of Child Sexual Abuse and likewise hope that the authors here will inspire you to share your work.

Lois J. Engelbrecht, PhD
Center for the Prevention and Treatment of Child Sexual Abuse
Quezon City

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Announcing a monetary grant for Philippine multidisciplinary research related to the sexual abuse of children. The award will be administered by the Center for the Prevention and Treatment of Child Sexual Abuse.

Awardees will be granted up to US\$5,000 to support the research.

Candidates must submit proposals to CPTCSA and their work qualified for publication in the Philippines Journal of Child Sexual Abuse.

For information, contact Dr. Lois J. Engelbrecht
ljengelbrecht@hotmail.com

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**The Progressive-Consequential Model of Child Sexual Abuse: The
Struggle and Journey of Christine towards Self-Disclosure**

Sixtus Dane Ramos

Abstract

A comprehensive review of the effects of child sexual abuse and the process of disclosure were done in order to conceptualize the experiences of Christine, a 17 year old adolescent, who suffered from 10 years of repeated sexual abuse. This case study aims to present Christine's experiences as a foundation in integrating classic and contemporary theories about child sexual abuse and disclosure. Through the discussion of the multiple dynamics conceptual models and various theoretical frameworks of disclosure, a redefined depiction of child sexual abuse is presented. The progressive-consequential model of child sexual abuse, its research and practical implications are discussed.

Introduction

Child sexual abuse composes all sexual deeds involving a child with the purpose of giving sexual gratification to an individual who is responsible for the child (APA, 2013). This issue has been a focus of a wide array of studies given its hostile consequences to the child. Its problematic effects range from short term to long term symptoms and ensuing psychopathology. Many theoretical models have been used to explain the problems surrounding child sexual abuse and its effects on the victims. The following literature review focuses on the multiple dynamics models and various frameworks of the disclosure process that resulted from these models.

The Effects of Child Sexual Abuse

Child sexual abuse is a horrific experience. Numerous symptoms like anxiety, dissociation, hysteria, depression, somatic problems and sexual disturbances are known to be experienced by sexually abused children (Sadock & Sadock, 2007).

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Many empirical studies based on child clinical samples have found both short term and long term effects of sexual abuse. Beitchman and colleagues (1991) in their evaluation of research done on adolescents concluded that on top of sexualized behavior and sexual dissatisfaction, other psychiatric symptoms and problems emerge immediately after the abuse. Depression, suicidal thoughts and behavior, promiscuity, post-traumatic stress disorder and increased risk of revictimization were reported.

A more recent study also revealed similar findings. Child sexual abuse had been associated with various psychiatric and behavioral problems but appear to be experienced differently by girls and boys (Honor, 2010). Girls are prone to internalizing behaviors like depression, anorexia and bulimia. Boys react differently to sexual abuse by externalizing conflicts through aggression, violence, delinquency and substance abuse. Sexualized behavior and other psychiatric disorders were also reported, supporting the findings of earlier studies.

In another review, child sexual abuse was also correlated with severe long term problems (Beitchman, et al., 1992). Adult women who were victims of child sexual abuse reported depressive disorders, suicidal ideations and behavior, anxiety, phobias, revictimization and personality disorders. Sexual disturbances and dysfunctions were also noted. Depression, anxiety and substance abuse problems are found both in women and men based on retrospective reports of participants (Molnar, Buka, & Kessler, 2001). A longitudinal study which followed up victims up to 43 years, similarly suggested that the exposure to child sexual abuse increases the risk of developing a wide range of mental disorders (Cutajar, et al., 2010). These problems include psychosis, anxiety, mood, substance abuse and personality disorders. The substantial reports found in the literature confirm that subsequent psychopathology and other mental problems are highly linked to experiences of child sexual abuse.

Multiple Dynamics Models of Child Sexual Abuse

The numerous studies done on child sexual abuse reckoned associated psychological problems and disorders. Given the implications of sexual abuse, it is only necessary to organize and specify how these effects result to trauma in order to have a better understanding of its impact. This is what exactly Summit (1983) and Finkelhor and Browne (1985) had in mind when they developed multiple dynamics conceptual models that helped explain the effects of child sexual abuse.

The Child Sexual Abuse Accommodation Syndrome

In his seminal article, Roland Summit (1983) described a syndrome that helps a sexually abused child to cope with the abuse, but at the same time puts her at risk to disbelief, blame and rejection from the outside world. Summit explains that in order to protect the self, child vic-

tims would attempt to resolve their internal experiences with reality. This normal coping behavior contradicts the inherent expectations and beliefs of adults, thus leaving the child susceptible to humiliation, allegations of lying and imagining by the very people whom are supposed to protect them. This drives the child to experience abandonment and revictimization while developing a deep sense of self-blame and self-hate. A child who suffered from sexual abuse undergoes a secondary trauma during the process of disclosure. Summit termed this pattern as the child sexual abuse accommodation syndrome (CSAAS).

The CSAAS describes five categories that outline the circumstances leading to the negative effects of child sexual abuse: (a) secrecy, (b) helplessness, (c) entrapment and accommodation, (d) delayed and unconvincing disclosure, and (e) retraction. Summit explained that secrecy and helplessness defines an environment where the child's sexual abuse experience are ignored or unheeded by adults. Because of this experience, a child learns that the abuse is bad and shameful and that she is to blame. Entrapment and accommodation happens when the child adapts to the continuous sexual abuse because of lack of protection and support from responsible adults. In order to survive the situation, the child assimilates a wide range of accommodation mechanisms and pathological behaviors like self-punishment, substance abuse, dependency and reality restructuring. Once these accommodation mechanisms could no longer provide defense to the child, she is forced to disclose to the outside world. A child would endure the process of delayed and unconvincing disclosure and admission of the sexual abuse experience. But since these efforts to reach out to the world are met with doubt and disbelief, the child would renounce her testimony leading to the fifth category of the syndrome. In retraction, the child no longer complains about the abusive environment because it is easier to lie about the truth than have other people accept and heed her cry for help. The CSAAS elucidates the importance of disclosure and people's reactions to the admission for this will determine the emergence of destructive effects of child sexual abuse.

The Traumagenic Dynamics

Finkelhor and Browne (1985) also proposed a systematic framework in understanding the adverse effects of child sexual abuse. In their study, the authors identified four traumagenic dynamics or trauma-causing factors that set apart the effects of child sexual abuse from other vicious experiences. Finkelhor and Browne theorized that these dynamics twist a child's self-concept and worldview.

The first dynamic is traumatic sexualization where the child's sexuality is molded inappropriately resulting from the abuse. This dynamic leads to various sexual dysfunctions and problematic behaviors. Betrayal is the second dynamic which happens through the repeated sexual exploitation and abuse by a trusted individual. Betrayal is also re-experienced

by a child when a non-abusing family member is incapable or reluctant to intervene with the abuse. The child becomes more susceptible to depression, revictimization, or hostile and aggressive behaviors. Powerlessness is the third traumagenic dynamic which happens when the child's efforts to stop the abuse proves to be futile and ineffective. The child develops a poor self-concept and uses maladaptive compensatory behaviors in response to the sense of helplessness. Stigmatization is the fourth dynamic referring to the negative repercussions of the sexual abuse. Shame, guilt, and sense of isolation are experienced by the child in response to the perpetrator's blaming and the unreceptive attitude of others who are aware of the abuse.

Finkelhor and Browne's traumagenic dynamics model seems to expand the importance of disclosure in determining the harmful effects of child sexual abuse. Trauma seems to be influenced by how non-abusive family members or other people outside the family receive the disclosure. If the outside world meets the admission with disbelief, the child is catapulted to the traumagenic dynamics of stigmatization, powerlessness and betrayal.

Though many contemporary studies have been reviewed in order to compare the different models used to explain the effects of child sexual abuse (Freeman & Morris, 2001), the multiple dynamics models were chosen for this particular study. The child abuse accommodation syndrome and traumagenic dynamics are suitable in providing a foundation to explore the process of disclosure of children who suffered from sexual abuse. These theories correspond with each other and agree in the importance of the role of disclosure. This is significant in presenting an integrative framework of the process of disclosure of child sexual abuse.

Conceptualizations of Child Sexual Abuse Disclosure

The multiple dynamics models of child sexual abuse describe disclosure as an important element in determining the aftermath of this horrible experience. Through disclosure, a child will either continue to suffer or receive proper intervention and protection from the abuse. A child's self-disclosure has been defined as an important element to introduce efforts to stop the abuse, manage its direct effects and lessen imminent long term problems (Paine & Hansen, 2002). Most research efforts done regarding the topic focused on the victims' reasons for non-disclosure and the patterns of child sexual abuse disclosure (Collings, Griffiths, & Kumalo, 2005).

Reasons for Non-Disclosure

Children who suffered from sexual abuse often do not tell about their experiences or delay their decision to disclose. Many studies seem to agree with their findings in terms of the different factors that play a part in the disclosure of child sexual abuse.

The age of the victims during the onset of the abuse is seen as an important component of disclosure because of the ramifications that involves the developmental process, though studies vary in their results (Paine & Hansen, 2002). A particular research found that older children are more likely to delay disclosure because of their greater ability to grasp sexual taboos and have a bigger sense of responsibility for their own abuse (Goodman-Brown et al., 2003). A different study by Kogan (2004) suggests that younger children are more vulnerable to non-disclosure or delays in admission of the abuse because of their developmental limitations, vulnerability to the abuser's schemes in hiding the abuse, and lack of adept social support from friends.

The sex of the child is also seen as an important factor in self-disclosure. The low number of male disclosure is attributed to boys' fear of negative consequences like stigmatization and homosexual labelling (Goodman-Brown et al., 2003).

The type of abuse and the relationship of the child to the perpetrator is also an important consideration in the delay of disclosure of sexual abuse (Goodman-Brown et al., 2003; Kogan, 2004; Schaeffer, Leventhal, & Asnes, 2011). Children are seen to be quicker to disclose if the perpetrator is a stranger rather than a family member. This suggests that a closer relationship to the abuser is a big factor in the decision to delay or deny disclosure of the abuse. This can be linked to fear that accompanies the disclosure (Somer & Szwarcberg, 2001; Goodman-Brown et al., 2003; Crisma, et al., 2004; Kogan, 2004; Schaeffer, Leventhal, & Asnes, 2011).

Threats from the perpetrator may lead the abused child to fear family disruption caused by the disclosure. This also includes fear of not being believed, punishment, shame and stigmatization because of the sexual abuse. The fear of the criminal justice system and mistrust of other people also play roles in the delay and non-disclosure. The child may also lead to believe that she is responsible for the abuse because of her inability to stop it from happening. The natural egocentric tendencies of children may also push them to blame themselves for their abuse. The lack of awareness and understanding due to cognitive limitations is also seen as a significant cause of non-disclosure among children (Crisma, et al., 2004).

Other psychosocial factors serve as barriers in the disclosure of child sexual abuse. One study examined the influence of family dynamics and suggested that this is a crucial element in the delay or failure of self-disclosure in sexually abused children (Alaggia & Kirshenbaum, 2005). A rigid patriarchal family where a domineering father and a powerless mother are present increases the likelihood of non-disclosure. Because of the strict gender roles present in the family, the child victim is unable to speak about the abuse because she is "not supposed to". The presence of family violence is also described as another factor. The child learns that many things about the family are not to be talked about like the violence

and abuse that exists at home. A family with closed and indirect patterns of communication does not allow the child to talk about problems. It is another factor that affects the child's inability to disclose about the sexual abuse because she is voiceless at home. The social isolation of the family as a whole and the sense of personal alienation experienced by the child at home also contribute to the problem of non-disclosure. It is suggested that these specific family dynamics, though not unique to cases of child sexual abuse, greatly impacts the decision of the child to disclose about her terrible experience.

Patterns of Child Sexual Abuse Disclosure

It is important to understand the different factors and how they influence the disclosure process of sexually abused children. It would further help the conceptualization of disclosure by organizing the elements into an appropriate structure and framework.

In a study that incorporated direct inquiry to child sexual abuse victims, three patterns of reason for disclosure were determined: (a) disclosure as a result of internal stimuli, (b) disclosure due to direct evidence of abuse, and (c) disclosure facilitated by outside influences (Schaeffer, Leventhal, & Asnes, 2011). It is interesting to note how these are parallel to the three types of disclosure discussed in a previous research (Alaggia, 2004). These types were identified as (a) purposeful, (b) accidental, and (c) elicited or prompted. Purposeful disclosure is the intentional admission of sexual abuse through direct verbalization that was prompted by an internal stimulus. These stimuli can range from different emotional symptoms experienced by the child, or the realization of wanting to stop the abuse. Accidental disclosure happens through the fortuitous discovery of the sexual abuse. This could be in the form of detection and presentation of physical evidence suggesting the existence of the abuse. Elicited or prompted disclosure occurs through the influence of external factors like investigative interviews, counseling or psychotherapy.

This conceptualization is helpful to determine the factors that hinder or encourage disclosure of child sexual abuse. But one research (Alaggia, 2004) found that more than half of the disclosure patterns exhibited by child victims cannot be accounted for by these definitions. Thus, an expansion of the conceptualization was done that proposed three additional patterns and an integration of the model. The new framework included (a) behavioral manifestations, (b) disclosure intentionally withheld, and (c) triggered disclosures of delayed memories. Behavioral manifestations consist of conscious and unconscious behavioral attempts to reveal the sexual abuse experience. This includes the adverse effects of the abuse and psychiatric symptoms displayed by the child. Disclosure intentionally withheld encompasses the direct effort of the child to hide or deny the abuse. Triggered disclosures of delayed memories happen when previously repressed memories suddenly emerge from the child's

unconscious through intentional or accidental recovery. These additional conceptualizations are integrated with the initial patterns proposed. From the previous studies, the emergence of this new and integrated framework offers a more extensive appreciation of the intricate process of disclosure.

This fresh conceptualization of disclosure expels the common presumption that abused children are able to disclose about their experience instantaneously. This updated conceptualization (Alaggia, 2004) seems to fit the disclosure process proposed by Sorensen and Snow (1991) in their research. This study suggested a progressive step-by-step course of how a child discloses her sexual abuse experience. It illustrates that children exhibit denial of their abuse in the initial stage. This is followed by a tentative disclosure which serves as a prelude to the active disclosure of the experience. Depending on how the active disclosure is processed and addressed, the child can either recant or reaffirm their testimony. This conceptual presentation discounts the idea that disclosure is a singular, momentous event, but rather a dynamic process with different stages that can be resolved. This resolution is still dependent on the ability to correctly perceive and act upon the disclosure of the child victims.

The disclosure process proposed by Sorensen and Snow (1991) supports the sequential stages presented in the multiple dynamics of child sexual abuse accommodation syndrome (Summit, 1983) and the traumagenic dynamics model (Finkelhor & Browne, 1985). These conceptual frameworks seem to parallel one another and this can be used in order to give an integrative view of the child sexual abuse experience. CSAAS and the traumagenic dynamics discuss the stages explaining the hostile effects of child sexual abuse, insinuating the role of disclosure while Sorensen and Snow's model of disclosure presents the progressive phases that involve the process. Though some studies say that this procedural structure is problematic given infrequencies in cases found in child protection agencies (Bradley & Wood, 1996) and evidence suggesting the fallibility of the stages (London, et al., 2005), a sequential model is a logical way to proceed. A conceptualization of child sexual abuse that portrays step-by-step stages mirrors the struggle of the victims to recover a buried self through the process of disclosure (Graham-Dickerson, 1999).

Building from this literature review, the present case study is used in order to illustrate an integrated framework of child sexual abuse experience and disclosure. Christine's story of struggle and survival will show the importance of the consequences of disclosure and how this will affect the continuous process of telling and recovery.

Method

A case study approach was used in order to explore and understand the dynamics of Christine's child sexual abuse experience and her process of disclosure. A qualitative case study methodology (Myers & Hansen, 2002) was used. Using diagnostic and investigative interview,

retrospective data was collected in order to provide a thorough account of Christine's experience of child sexual abuse and psychiatric conditions. This methodology allowed for a more profound depiction of an actual case of child sexual abuse and its hostile effects to the victim. The interviews were done on two separate occasions during Christine's admission in a hospital. Both Christine and her mother were interviewed in order to give a comprehensive account of her anamnesis and history of present illness. The names were changed in order to protect the identity of the victim and her family.

Case Study

Christine is a 17 year old, single, Christian female. She is the youngest of 6 children. She is a high school graduate and currently lives with her mother and older brother in their church congregation in Manila. She has a history of depression and anorexia nervosa. Christine was admitted by her mother because of her refusal to eat due to fears of gaining more weight. I was assigned to diagnose her current condition as part of my clinical practicum for my master's degree.

Christine's parents are religious missionaries. They would often travel from one place to another. They never had a permanent residence given the nature of their occupation. Ramil, Christine's father, would sometimes be assigned to missions in different countries and would be away from his family. Christine's mother, Ellen, would bring her children together and live with their congregation as they also would often travel to different provinces. Christine's early life continued that way and they never stayed in one place. Given this, she was not able to establish stable friendships.

When Christine was 7 years old, her Aunt Marie took her in to live with them in Bulacan. Christine's mother agreed so that she can already start school. She enrolled in a public elementary school. Christine lived with her aunt and her husband, Rollie. When she was in first grade, Rollie started molesting her. She recalled being fondled by her uncle. She kept silent about the incident because Rollie threatened her that he would hurt her if she told anyone. From then on, Christine always felt depressed and dirty because of the repeated abuse. She believes that she is ugly, fat and her self-esteem suffered because of the incidents. Since she felt fat, her appetite was also affected. She would lessen her intake of food and sometimes fast. The abuse continued for a year until Christine's mother took her back to live with the rest of the family in Bicol. Even after she came back to live with her family, Christine remained silent about the abuse she experienced in the hands of her uncle. The depressed mood and additional symptoms persisted ever since.

When Christine was 8 years old, her 15 year old brother, John, also began sexually abusing her. It started with John showing his genitals to her. It eventually led to John tying up Christine then having forced intercourse with her. This happened inside their home especially when their

parents were away on missionary work. The abuse persisted for many years and Christine did not tell anyone about her experience. John threatened to kill her if she revealed about what happened.

Christine's other brothers, Roger and Markus, also began to molest her. Though the incidents were perpetrated by her own brothers, neither one knew what the other was doing to their sister. John and Roger only stopped when they were married but Markus continued abusing Christine until 2013.

Christine recalled the night she told her sister, Rose, about the abuse. She was already sleeping in her room when she felt hands touching her breasts and genitals. She woke up startled and saw her brother, Markus. She tried to push him away and she went out to the dining room where she cried. Rose was awakened by the sound of her crying. When she asked what was wrong, Christine just continued to cry. Markus also went out to the dining room and told Rose that Christine must be sick that is why she was crying. Rose continued to question her sister until the two of them retreated to their room. Through a text message, Christine told Rose about the abuse. Infuriated, Rose confronted Markus.

When their parents got back from their missionary travel, Rose told them everything that happened. To their shock, the parents got angry and reprimanded their sons for doing the acts. Fearing the shame and scandal their family would face should this be known in their community, they kept silent about the incident. They never filed any charges and never took action for what happened to Christine.

After the revelation, no other incidents of sexual abuse happened. In the ensuing weeks, Christine felt depressed almost every day and she was crying at night. She felt worthless and thought about dying. She also experienced difficulty sleeping. She became socially withdrawn, seldom talked to anyone and reported feeling weak and hopeless. She was also seen talking and mumbling to herself. Christine admitted that she heard a voice of a man and she also saw a girl crying in the corner of her room. She also refused to eat fearing that she would get fat. She experienced the following symptoms for more than two weeks which culminated in her suicide attempt. Christine slashed her wrist and was brought immediately to the hospital where she was first officially diagnosed with major depressive disorder and anorexia nervosa. After being discharged, she continued to feel depressed. Her fear of gaining weight also persisted and she still engaged in excessive exercise, fasting and purging.

Though the sexual abuse stopped, its ramifications persisted. Christine was institutionalized two more times because of her recurring depression and anorexia nervosa. She also admitted that she tried to kill herself at least four times but could not remember the exact dates of the attempts. It was during her latest admission where she disclosed her experience once more through the diagnostic and investigative interviews. With her approval, Christine's story was analyzed for the purpose of pro-

viding a comprehensive conceptual model of child sexual abuse and the disclosure process.

Discussion

Christine's Child Sexual Abuse Experience

Christine had been sexually abused by close family members since the age of 7. She was first molested by her uncle then by her older brothers. Christine suffered a great deal from the horrible outcomes of the abuse. These effects can be better understood in the context of trauma-genic dynamics (Finkelhor & Browne, 1985) that explains the psychological injury brought upon by child sexual abuse.

Christine underwent repeated sexual abuse and revictimization at the hands of her uncle and older brothers. This pattern of susceptibility to the abuse can be seen as the effect of the traumatic sexualization she experienced. Christine may have developed inappropriate and dysfunctional patterns of sexual behavior due to the traumatizing experience. She also possibly harbored feelings of betrayal since her abusers are close family members who were supposed to take care of her. She developed a sense of powerlessness for being trapped in a position where she would continuously experience sexual abuse. The stigma that is associated with sexual abuse made Christine feel isolated and different from other children. Her self-esteem suffered the most as she viewed herself as nothing more than an object of desire of her abusers.

Christine suffered from a seemingly helpless situation for 10 years until the purposeful disclosure to her older sister. Different psychosocial factors can explain Christine's delay in disclosing her sexual abuse. She may have contemplated about telling her experience to others but was faced with substantial fears and concerns. These internal motivational factors (Paine & Hansen, 2002) probably influenced Christine not to disclose. She may have felt responsible for the abuse. In order to protect herself from the anticipated feelings of shame and stigma, she decided to delay the disclosure. It is possible that Christine was afraid to drag her family into her problems, believing that she would only hurt them once she told about her experience. She may also have had ambivalent and confused feelings towards her abusers given that they are her own brothers and uncle. There is also the threat of physical harm and punishment made by the perpetrators of the abuse. The existing family dynamics (Alaggia & Kirshenbaum, 2005) may have also played an important role in Christine's decision to delay disclosure. The family may have adapted a rigid and patriarchal structure given their strict religious beliefs.

Christine may have felt isolated and unable to voice out her concerns. Their family was also known to transfer from one place to another because of the nature of their work as missionaries. This situation probably limited their social interactions to other families in a community given the absence of an established residence.

Christine's continuous experience of sexual abuse and the delay in her disclosure could be attributed to these motivational factors and family dynamics. The fear, confusion, sense of helplessness and unyielding family dynamics produced an uncondusive situation for disclosure. This not only rendered Christine at risk of revictimization, but it also denied her of the proper intervention and protection she desperately needed. She was only able to purposely disclose her situation to her sister after 10 years of abuse.

Christine's Symptoms: A Silent Form of Disclosure

From the start of Christine's sexual abuse, several psychiatric symptoms and behavioral problems already manifested. Such signs and symptoms are typical short-term effects observed in child sexual abuse cases (Beitchman, et al., 1991). Christine exhibited depressive symptoms, recurrent suicidal thoughts and attempts, and symptoms of anorexia nervosa. These internalizing behaviors are common responses of female children who were subjected to years of sexual abuse (Honor, 2010). She also developed poor self-concept and low self-esteem. It is important to note how these psychiatric symptoms already manifested themselves right after the onset of the abuse, even prior to Christine's active disclosure.

In Alaggia's (2004) study, previously undefined dimensions of disclosure were uncovered resulting to an expansion of the common conceptualization of this construct. This included intentionally withheld disclosures and indirect behavioral manifestations. Reviewing Christine's case, her symptoms of pervasive depressive disorder and anorexia nervosa could be categorized under the indirect behavioral manifestations of disclosure. It has been noted that ever since the abuse, Christine already experienced a pattern of recurrent depression and anorexic tendencies. This psychopathology may have been Christine's unconscious way of crying out for help and protection. Given the different motivational factors and external dynamics that hindered her from actively disclosing the abuse, intrapsychic conflicts arose which manifested through her symptoms. In retrospect, Christine's psychiatric disorders may not just be mere negative effects of the abuse. It is possible that it was her silent way of telling the world about the horrible experience she was enduring every day. She may have intentionally withheld disclosure and chose to put up with the abuse in order to ensure her survival. The secrecy, helplessness and accommodation are seen as part of a syndrome that forms the natural coping mechanism of a child given the experience of sexual abuse (Summit, 1983). Despite this active denial (Sorensen & Snow, 1991), Christine already began her disclosure through covert and unobtrusive ways, taking the form of psychiatric disorders.

Despite Christine's silent and unconscious efforts to tell the world of her struggles, these coping mechanisms seem to be not enough to gain

proper intervention and protection from the sexual abuse. The atrocious acts committed upon Christine continued for ten years regardless of her latent cries for help. Eventually, these defenses were not be able to support Christine, hence her direct verbal attempt to disclose to her sister. Upon reviewing the data from Christine's history, the present case study was able to illustrate a comprehensive explanation of her experiences based on the multiple dynamics framework and disclosure process models. Based on this analysis, a graphical representation of the integrative conceptualization is presented in Figure 1.

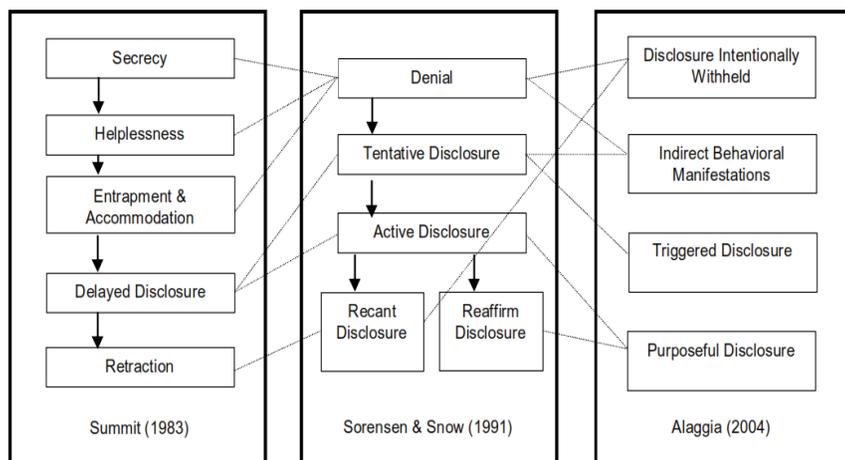


Figure 1: Integrated conceptualization of child sexual abuse experience and disclosure process based on different studies

Christine's experience seems to follow the child sexual abuse accommodation syndrome (Summit, 1983) and Sorensen and Snow's (1991) dynamic process of disclosure. The different types of disclosure patterns (Alaggia, 2004) were also present in Christine's experience. The graphical representation was able to demonstrate the relationships and corresponding patterns among the process of child sexual abuse. It is interesting to note how the phases of the CSAAS are parallel to the steps of the dynamic process of disclosure. Each phase also has an equivalent type of disclosure pattern as suggested in the conceptualization. Christine's syndrome and her disclosure followed this integrated model of child sexual abuse experience. From this framework, the question of what happens after an active disclosure surfaces.

In Sorensen and Snow's (1991) model, there are two proposed consequences: (a) recant or (b) reaffirm the child's admission of the abuse. From this point of view, the initially developed frameworks become problematic. The following models do not discuss clearly what happens

after an active disclosure prior to the recantation or reaffirmation of the disclosure. Based on the literature review, the role of reaction towards the disclosure is an indispensable element which will determine the ultimate outcome of the process (Staller & Nelson-Gardell, 2005). The reaction itself can be considered an important phase of the process for it determines the next action of the child after her disclosure.

The Progressive-Consequential Model of Child Sexual Abuse

According to the retrospective data gathered from the interviews, Christine conferred that after her disclosure, her parents took no definite action for her sexual abuse. Her mother and father just reprimanded her older brothers. Christine suffered from depressive episodes and had suicidal attempts after the disclosure. Her symptoms suddenly worsened prompting the need for hospitalization. From Christine's testimony, we can infer that she received negative reactions and feedback from her disclosure. Though Christine said that the sexual abuse stopped after telling, it is not clear if she received the proper support, intervention, and protection from her abusers. Christine still lived under the same roof with her

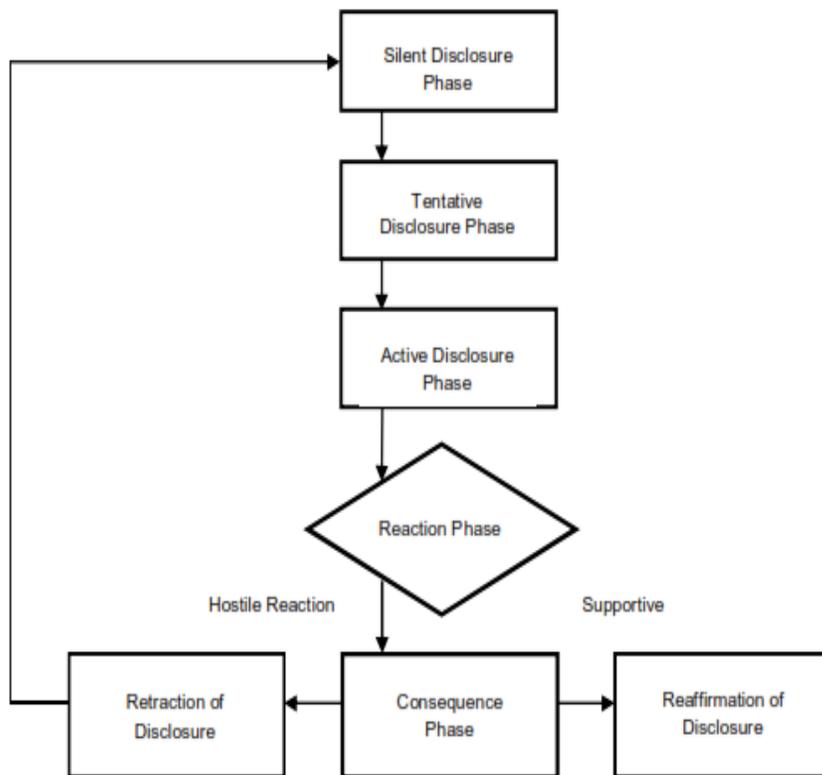


Figure 2. The progressive-consequential model of child sexual abuse.

brothers. It is possible that her parents viewed the sexual abuse incident as a normal mistake. One study suggests that a family's response to the existence of abuse at home is influenced by the level of family ties, the role of secrecy and their view of outside systems (Bass, et al., 2006). Though stunned with the revelation of sexual abuse of their youngest child, the family resorted to minimal actions. They opted to preserve the level of cohesion they have and kept the abuse a secret. During the interview, Christine's mother even commented that the subject of abuse should not be raised for it "refreshes" the pain of her daughter. It seems that Christine's parents are preoccupied with the stigma that comes with the sexual abuse and how the outside systems will perceive their family as a whole.

All of the factors discussed may have prompted the parents to react negatively towards Christine's disclosure. It is highly probable that the worsening of Christine's psychiatric symptoms is not only a direct consequence of the reaction she received, but a regressive step back to the accommodating phases of the disclosure process. Christine may have unconsciously resorted to the ambiguous pattern of disclosure in the form of symptoms (depressive episodes) and indirect behavioral manifestations (suicidal and anorexic behavior).

Analyzing these dimensions of the case study, a new conceptualization of the child sexual abuse experience and disclosure is proposed. By building on initial models, specifically the dynamic process of disclosure (Sorensen & Snow, 1991), and the insinuations from Christine's experience, a new framework is presented. This updated model proposes a similar progressive course but stresses the importance of people's reactions to telling as either positive or hostile.

The consequences of the reactions are also emphasized. These consequences are viewed as either steps of reaffirmation of the disclosure or as tragic regressions and withdrawal of the child's admission of abuse. Figure 2 provides a graphical illustration of this new and integrative process of disclosure.

The progressive-consequential model expands on the dynamic disclosure process (Sorensen & Snow, 1991) and integrates previous frameworks of child sexual abuse (Summit, 1983; Finkelhor & Browne, 1984; Alaggia, 2004). This is done while reworking these initial frameworks and providing alternative conceptualizations to the process of disclosure. This new model consists of five procedural stages that represent the struggle of a child victim to disclose her sexual abuse experience.

The silent disclosure phase is the first stage of the process. It is similar to the denial stage of Sorensen and Snow's (1991) model and the early stages of Summit's (1983) child sexual abuse accommodation syndrome. In this phase, the child adapts and accommodates a safe and unconscious pattern of divulging her experience. She may intentionally withhold disclosure and deny the reality of her abuse (Alaggia, 2004) in order to protect herself and ensure her survival (Summit, 1983). The known

immediate effects of child sexual abuse like psychiatric symptoms may also be used by the child as a medium in expressing her trauma. These mechanisms can be seen as indirect behavioral manifestations of disclosure (Alaggia, 2004).

Now, as these instruments fail to manage the internal conflict the child experiences, she may unconsciously take on other patterns of disclosure. This dissolution leads to the next stage which is the tentative disclosure phase. This phase is directly adapted from the dynamic process of disclosure (Sorensen & Snow, 1991) which reflects delayed disclosure of Summit's (1983) syndrome. The child uses cautious patterns of disclosing while testing the reactions of her confidants. It may be through behavioral manifestations, indirect verbal hints, or triggered disclosures due to recovered memories (Alaggia, 2004). There are two ways in which this phase can be resolved. First, if the child receives a supportive response from her hints and indirect ways of communicating her issues, she may proceed to the next phase. Second, if her careful hints and subtle manifestations are not recognized, the level of stress she experiences would force her to disclose directly to other people. Either way, the tentative disclosure phase would eventually lead to the child's active disclosure (Sorensen & Snow, 1991). In this phase, the sexually abused child would openly and purposely express her issues and tell about her horrible experience. From this stage, the reaction phase which constitutes the perception and feedback of external systems who witnessed the disclosure, will determine the consequence phase of the process. Depending on whether the child will receive a hostile or supportive reaction, will she retract her disclosure (Summit, 1983) or reaffirm her story (Sorensen & Snow, 1991).

To summarize, the progressive-consequential model of child sexual abuse follows the idea that disclosure is not a singular occurrence but rather a dynamic process (Sorensen & Snow, 1991). Similar to the child abuse accommodation syndrome (Summit, 1983), this new model presents active resolution-seeking mechanisms that is adapted by the child as represented in its five stages. This model states that the process of disclosure takes on both covert and explicit patterns (Alaggia, 2004) and it begins immediately after the onset of the abuse. This new framework differs from the initial models in the way it defines the effects of sexual abuse (Finkelhor & Browne, 1984). The various psychological and functioning problems that compose the effects of sexual abuse are seen as the child's unconscious way of revealing her terrible experiences. Each stage follows the dissolution of the current mechanisms and the adaptation of more suitable defenses in the next stage. The process becomes critical during the active disclosure phase. The feedback and reaction towards the active admission of the child is seen as detrimental for the consequences that follow. These consequences can either help the child gain proper intervention and protection from the abuse, or force the child to regress to the primitive stage of silent disclosure once more. The progressive-conse-

quential model reflects the child's continuous process of telling and resolution-seeking from the sexual abuse (Staller & Nelson-Gardell, 2005) with the ultimate goal of rediscovering a buried self (Graham-Dickerson, 1999).

Conclusion and Implications

This study presented the experiences and struggles of Christine, a 17 year-old adolescent who fell victim to child sexual abuse for 10 years. She exhibited symptoms of pervasive depressive disorder and anorexia nervosa. The accounts of her life were discussed in this paper in order to help formulate a comprehensive framework representing an integrative view of child sexual abuse. The study used a qualitative case study methodology in order to gather inclusive data. The case of Christine was analyzed by reviewing the numerous studies done about the adverse effects of child sexual abuse and the process of self-disclosure. Her psychopathology and disturbances were also explained as part of her struggle to tell the world about her horrific experiences from the hands of her abusers. The multiple dynamics models and conceptualization of the disclosure process reviewed in the literature laid the ground for a new and expanded framework of presenting the child sexual abuse experience. The progressive-consequential model follows a procedural pattern where each stage is resolved by adapting a more suitable mechanism of defense in the form of various patterns of disclosure. It states that disclosure is a continuous process that helps the child to recover her sense of self from the pain of her experiences.

Through Christine's courage and strength, she was able to disclose her experience and help directly in this expanded formulation. The study of disclosure is imperative for this process initiates the intervention of the abuse, providing protection and managing the immediate and long term effects of the experience (Paine & Hansen, 2002). This new conceptualization of child sexual abuse will be helpful in a number of ways in order to adhere to these goals.

First, this expanded and comprehensive model increases the understanding of the process and repercussions of child sexual abuse. Though many studies are available in the literature, a deeper analysis of existing patterns is helpful in integrating these findings. Second, the result of this study can spur further research about the theoretical conceptualization about child sexual abuse. New variables and constructs can be tested in empirical studies. Third, the new dimensions uncovered in this study can help in formulating better assessment and therapeutic interventions for the child victims. The proposed model shows how important it is to be sensitive in recognizing all forms of disclosure for clinicians, social workers, psychiatrists, and even law enforcers. Lastly, with this new conceptualization, the early detection of cases of child sexual abuse can be improved. Better and more child-centered investigative procedures can also be developed. This effort is a step forward in safeguarding our children from this horrible and debasing experience.

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**A partial list of unpublished Philippine university research related
to child sexual abuse - Part II**

Monaliza V. Calapini-Prasad and Lois J. Engelbrecht

Introduction

The purpose of the Philippine Journal of Child Sexual Abuse is to encourage Philippine-based research that will facilitate to build a national paradigm on child protection. Most research is western-based and published in western international journals. This journal aims to publish indigenous research in order to develop effective services to our indigenous population. This appears a daunting challenge. Yet local research does exist, albeit mostly unpublished.

The search for university research yielded a healthy list. This article shares a mere handful from some of the Mindanao universities; the former issue listed studies from Luzon and Visaya universities. The research chosen to share were not for any particular purpose except to show the multidisciplinary nature of the issue.

In order to maintain the integrity of the individual authors, very little editing was done on the text. The purpose of what editing did occur was to report the research in a somewhat similar format. This was a challenge because the research was done at different levels (course work, thesis, dissertation) and from different universities and thus using different formats with different expectations and standards.

In order to build a quality paradigm from which to build our services, we have two purposes for this bibliography. One is to, as stated, encourage and build Philippine research. The second is to encourage universities to come together to set reporting standards and a means for all unpublished materials to be accessed online.

At present, the CPTCSA library has collected hard copies of a vast amount of research from universities around the country, from schools of social work, nursing, psychology, education and others. This article shares but an important handful.

for the full list, visit the CPTCSA library

Aguero, E.E. (2002) Predisposing Factors and Psychosocial State of Sexually Abused Girls Undergoing Rehabilitation. Graduate Studies Xavier University, Cagayan de Oro.

The purpose of this study was to come up with a profile of sexually abused girls in Cagayan de Oro, explore the predisposing factors that rendered them vulnerable for sexual abuse and to evaluate their present psychosocial state.

Specifically, this study looked into the family situation and condition of the sexually abused girls at the time of the abuse considering their family set-up, mother-daughter relationship, father-daughter relationship, mother-father relationship, parents' occupation, livelihood and educational attainment, living conditions, and the girls' work, education and relationship to peers.

It also sought to assess the present situation and condition of the sexually abused girls at the rehabilitation center of KDF and at their foster homes regarding their relation to caretakers and peers, care and services rendered to the girls by KDF, their living conditions, education and work.

Finally, this study sought to establish the present psychosocial state of the sexually abused girls under the aspects of basic trust, autonomy, initiative, industry, identity and defense mechanisms.

1. Profile of the respondents. They come from poor families; most of the respondents were sexually abused many times for a length of time ranging from one to six years by members of their own family and were able to disclose their ordeal when they were at the early stage of their adolescence; the majority of the respondents were not raised by both their parents.

2. Predisposing factors. At the time of the abuse half of the girls had their parents still alive while the other half had either lost their father or their mother. Most of the girls felt closer to their mothers than to their fathers, yet rarely used to talk with their mothers and seldom or never with their fathers whom they did not trust. Most of the girls' parents never shared happy or sad moments together, and used to quarrel to the point of physical aggression on the part of the fathers. The majority of the girls' fathers worked as farmers and one-third of them did not work. Most of the girls' mothers did some work to support their families. The majority of the girls' fathers were

at home most of the time while the majority of the girls' mothers were out most of the time. Most of the girls considered that their parents' income was not enough to support their needs and they rated their family as poor. The majority of the girls' fathers did not go to school and only three of them graduated from the elementary school and one from high school, while most of the girls' mothers are elementary graduates and one-third are high school graduates. Three out of the five uneducated fathers raped their daughters. Most of the girls lived in one- or two-room houses where they did not feel safe nor did they find privacy. Most of the parents and girls did not have their own bedroom. One-third of the girls had no motivation to study and most of them considered they did not have good grades in school. Half of the girls experienced being a working student. Most of the girls did not trust their friends at least in certain matters and they used to spend most of the time in their homes.

3. Present situation and condition of the respondents under the Care of KDF. Most of the girls feel close to the caretakers as they take good care of them and would spend time talking with them about matters concerning the respondents. Most of the girls claim they have close friends but do not trust them in all matters. All the respondents feel that their needs are being catered by KDF and find the counselling sessions, spiritual guidance and educational support rendered by KDF helpful. The majority feel KDF also helped them by providing for them a foster family. Most of them are willing to study and have good grades in most of the subjects.

4. Psychosocial state of the sexually abused girls. Generally they are trustworthy and trust other persons connected to KDF on whom they depend. They tend not to trust their peers. They are not autonomous as they depend on other persons they consider significant. They have a sense of initiative though some need to be directed and told what to do. They show signs of low self-esteem, negative self-concept and are prone to feel guilty. They feel competent in some areas where they have experienced success but also feel that their situation as rape victims makes them different and inferior in relation to their peers and therefore are prone to feelings of rejection. Most of them neither know nor accept themselves and have some difficulties in their relation to the opposite sex. They resort to denial, suppression and

Based on the findings of the study, the following conclusions and implications are drawn: The sexual abuse occurred while the girls were living in unsatisfactory conditions, whose family structure includes an absentee parent, particularly the mother, problematic father-mother relationship and the parents' indifference to the girls' disclosure of the abuse itself; the mothers of these girls tend to be emotionally weak and codependent under the influence of dominant husbands, or emotionally distant and unavailable wives to their husbands; fathers tend to be unconcerned, violent, uneducated, untrustworthy, selfish and irresponsible; another characteristic of the abusive situation of these girls is the vigilant surveillance of the perpetrator, who controls the victim and imposes his will on her (and sometimes also on her mother) not allowing her to interact with others, alienating her from social contact; poverty and one-or two-room houses where neither parents nor girls have their own bedrooms are other general conditions that rendered the girls prone to be abused within their own families; finally, jobless fathers take advantage of the absence of the girls' mothers to abuse their daughters.

At present the girls feel secure under the care of KDF in an environment they consider safe and trusting where counseling sessions, spiritual guidance, educational support and placement in foster homes is beneficial to them. The present psychosocial state of the sexually abused girls may lead them to remain dependent on persons who are significant to them, thus hindering them from attaining autonomy and self-reliance. Their low self-esteem and negative self-concept can make them vulnerable to bad influences, who might introduce them to substance abuse and even to sexual promiscuity. They could be easily manipulated and are prone to be emotionally and psychologically abused. They may just keep quiet when they are forced to work or nagged by authority figures. Their inadequacy in relation to their peers and particularly to the opposite sex may lead them to be aloof, withdrawn and vulnerable to depression. Their fear of the opposite sex may render them incapable of relating to boys, curbing them of a kind of relationship that is crucial in their psychosocial development. Denial and lack of self-knowledge and self-acceptance makes these girls unpredictable regarding their reactions and decisions. They

may attempt desperate moves to end their suffering when in touch with their wounds and pains. Running away, cutting classes, quitting their studies and even suicide might be possible options for them.

By reinforcing them in their capabilities and skills and guiding them towards self-determination these girls could be empowered to growth and psychosocial development. They can be lead to appreciate their own goodness and sacredness through psycho-spiritual counseling, liturgical celebrations, recollections and other religious activities.

Bajas, D.M. (1998). Psychosocial responses on blitz rape and confidence rape among sexually abused victims. Graduate Nursing Studies, Licea de Cagayan University.

The study sought to answer the following questions: 1.) What is the profile of the sexually abused victims in terms of age, educational attainment, monthly family income, place of origin, and type of rape. 2.) What are the psychosocial responses of the sexually abused victims considering age, educational attainment, monthly family income, place of origin and type of rape. 3.) Is there a significant difference in the psychosocial responses among sexually abused victims considering age, educational attainment, monthly family income, place of origin and type of rape.

This is a descriptive study designed to describe the psychosocial responses on blitz and confidence rape among sexually abused victims. This study was conducted at the Department of Social Welfare and Development Region 10 Home for Girls.

The questionnaire, patterned after the instrument of Meissner's (1980) Psychosocial Problems Inventory: Uncovering Your Patients Psychosocial Problems, is the main tool utilized in gathering data. Simple Percentage, weighted mean and t-test were utilized to interpret the data.

1. The respondents of the study were 30 sexually abused female children. More than half belong to the older age bracket (15-18 years old). Most of the sample group have a monthly income of P3,500.00 and below. Most have reached elementary education. 70% come from the rural area.

2. The most common psychosocial responses of the sexually abused children were shame and guilt. Hostility among 15-18 years old children were manifested. They do not experience feelings of fear, anxiety and depression since coming to the shelter.

3. There was no significant difference in symptoms based on the variables stated.

On the basis of the findings, the researcher recommends strong prevention programs, especially to train nurses in their unique educator's role, and increase advocacy about the existing services such as this one that appears to decrease stress and other psychosocial issues.

Borres, M.L., Llanos, J.E., and Tirados, R.A. (2007). Incestuous abuse and its impact on personality and adjustment of the abused. Department of Psychology and Guidance, Xavier University – Ateneo de Cagayan.

The study focused on the effect of incestuous abuse to personality and adjustment of the abused. To determine whether the abuse incident gave an impact to the lives of the abused, three types of tests were conducted. Three female respondents were subjected to answer these researcher-made questionnaires on self-concept, self-worth and relationship with authority figures from the Basic Personality Inventory and 16PF® Fifth Edition. The results of these standardized tests and researcher-made questionnaires were verified by an interview with them. For further verification of the behavior of the abused, there was another interview with their significant others.

Results of the tests indicated that the abuse had an impact on the personality and adjustment of the abused in terms of how they see themselves, how they perceive their worth and how they relate to other people and to the authority figure. The abuse shaped some aspects of their lives which shaped who they are right now.

Daisyrie, M.J. and Morales C.L. (2006). Health hazards encountered by sexually abused children in Davao City. College of Education, University of Mindanao, Davao City.

Sexual abuse of children happens to all racial, religious, age and ethnic groups, and at all socio-economic levels. In the Philippines child sexual abuse remains a controver-

sial issue given our lack of research and experience due to its highly sensitive nature and cultural aspect by which it is viewed. The most problems have been attributed to lack of awareness on the rights of children or because of fear, shame, and apathy from the source (Intra Family and Household Violence in the Philippines). The country has committed among others to prepare a national plan of action for children for the year 2000 and beyond and set appropriate policy measures and comprehensive program responses as highlighted in the convention on the Rights of the Child

In Davao City, similar evidence on the alarming increase of sexual abuse committed on children confronts a social reality that calls for a solution. The number of cases is vender stated because family members are reluctant to report, so this constitutes only part of a bigger picture.

To be of real help to those children, the researcher must have a better and deeper understanding of their situation from their own point of view, their psychological needs and realities. How do they see their situation? What predominant behavior do they have about themselves, their family, peers and their world? How can they best be helped through health hazard intervention? (Carandang & Gonzales, 1996). These concerns paved the way for the researchers to investigate the possible resulting behaviors of sexually abused children with a focus on the health hazards of this population.

Specifically, the study sought to answer the following questions: 1.) What is the extent of the health hazards to sexually abused children? and 2.) What is the significance of the differences in the health hazards of sexually abused children when analyzed by precinct?

The following were the findings of the study: The mean value of the health hazards of sexually abused children in terms of Mental hazards is 3.65, or extensive; Psychological hazard is 3.57, or extensive; Physical hazards is 3.62, or extensive; and Emotional hazards is 3.39, or moderately extensive. The over-all mean is 84.18, which is described as extensive.

Based on the findings, the following conclusions are drawn: 1.) The extent of health hazards to sexually abused children in terms of mental, psychological, emotional and physical is extensive. 2.) There is a significant difference in health hazards of sexually abused children in terms of mental, psychological, emotional and physical

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hazards when analyzed by precinct.

In view of these findings and conclusions, the following recommendations are offered: 1.) Educational awareness about the level of health hazards to sexually abused children should be disseminated through radio, television, or through other means like the Child Interview Studio, Women and Children Concern Section and through the help of Sta. Ana Precinct, Mintal Precinct, Toril Precinct and San Pedro Precinct. 2.) Parents or care takers should not allow their children to be left alone in the hands of their relatives or friends who might sexually abuse the children.

Fabe-Jegonia, J. (2009). Short-course psychotherapeutic intervention program for jailed alleged child rapists. Dissertation for Doctor of Philosophy in Clinical Psychology, Graduate School Ateneo de Davao University, Davao City.

This three-phased study addresses the need to develop psychotherapeutic interventions for incarcerated alleged perpetrators of child sexual abuse.

In Phase 1, 51 male inmates at the Cagayan de Oro City Jail underwent initial evaluations of their demographic characteristics. Personality profiles were determined using the Basic Personality Inventory. From this group, 13 respondents with the highest BPI deviation scores underwent further evaluation using the Thematic Apperception Test (TAT), Human Figure Drawing Test (HFDT) and personal interviews to determine their world views in Phase 2. These were then combined with earlier BPI scores to come up with baseline data on world views and personality profiles which formed the basis for the design, development, implementation and evaluation of a short course psychotherapeutic intervention in Phase 3. The intervention had 8 stages, covered 9 sessions and incorporated elements from Classical Adlerian Therapy, Reality Therapy, Cognitive Behavioral Therapy and Rational Emotive Therapy.

Results indicate that the clients' world views tended to have themes related to family, religion, aggression, persecutory ideations, unrealistic thoughts and the constant struggle for survival. The main psychological issues identified were persecutory ideas, denial and unrealism, disorganized thoughts and depression.

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Post-intervention qualitative evaluations and case analyses indicate that the clients were able to form more adaptive reinterpretations of their pre-intervention worldviews and were able to develop realistic life goals after the therapy. To further validate the applicability of the designed intervention, the use of other tests and replication of the study on other subgroups of jailed clients as well as the general population was recommended.

Morala, S. (2012). Level of anxiety of sexually abused children in Butuan City before and after group therapy: a comparative study. Social Work Graduate School, University of Mindanao, Davao City.

The primary purpose of the study was to determine the level of anxiety of sexually abused children in Butuan City before and after group therapy. The researcher used the descriptive survey method. 30 sexually abused children in Butuan City under the care of the Department of Social Welfare and Development were the respondents of the study.

The study sought answers to the following questions: 1.) What is the level of anxiety of sexually abused children in Butuan City before group therapy in terms of somatic components, emotional components, cognitive components, and behavioral components? 2.) What is the level of anxiety of sexually abused children in Butuan City after group therapy? 3.) Is there a significant difference on the level of anxiety of sexually abused children in Butuan City when compared before and after group therapy? 4.) Based on the findings, what new knowledge can be derived?

Mean and T-test were used in treating the data. The findings of the study are disclosed as follows: 1.) The level of anxiety of sexually abused children in Butuan City before group therapy was moderate. 2.) The level of anxiety of sexually abused children in Butuan city after group therapy was low. 3.) There was a significant difference on the level of anxiety of sexually abused children in Butuan City before and after group therapy. 4.) Knowledge gained is that parents should support their children in group therapy and non-abusing parents should be involved in therapy.

Ponciano, J.T. and Montera, E.H. (2011). Rate of children rescued by Bantay Bata 163 for the years 2008-2010. College of Criminal Justice Education University of Mindanao, Davao City.

Child abuse is like a virus; it attacks the host organism and alters it physically. It self-replicates. Infection creates a downward spiral through generations, each victim more likely to infect more and more victims. Children who survive abuse to adulthood in turn are more likely to abuse their own children who, if they survive, grow up more likely to abuse their own children (Wade, 1997).

According to Gauthier et al, (1996), in the United States, victims of childhood abuse suffer from different types of physical health problems later in life. Some reportedly suffer from some type of chronic head, abdominal, pelvic, or muscular pain with no identifiable reason. The majority of childhood abuse victims appear to not know or believe that their abuse is, or can be, the cause of different health problems in their adult life; for the great majority their abuse was not directly associated with those problems, indicating that sufferers were most likely diagnosed with other possible causes for their health problems, instead of their childhood abuse.

In the Philippines, Bantay Bata operates the Children's Crisis Center providing temporary shelter to rescued children before their cases are resolved legally. Children are provided with therapy and educational opportunities before they are reunited with their families or referred to proper child caring agencies (Aquino, 2009).

In Davao City, the 24-hour hotline 1-6-3 is directly connected to the main office in Metro Manila manned by licensed social workers who respond to calls on abused children and alert immediately standby personnel in Bantay Bata 163 Davao City located at McArthur Highway, Matina. Once a report has been made on a certain case, the social workers coordinate with the Barangay to confirm abuse and, along with the police, conduct a rescue. Bantay Bata 163 is deputized by the government to take custody of the child in such cases. On requests for medical assistance, a number of government hospitals refer indigent child-patients to Bantay Bata. Contacts with the needy children are also made through home visits and community outreach (Bantilo, 2009). With alarming increase of abused children in the society today, it was appropriate and rel-

evant to determine the rate of abused children reported to Bantay Bata 163 and were rescued covering the period of 2008-2010.

Specifically, it sought to answer what is the frequency count and percentage of children rescued by Bantay Bata 163 for the year 2008-2010 in terms of:

1. Case. The rate of children rescued by Bantay Bata 163 for the year 2008-2010 by case has a total frequency of 26, which is equivalent to the overall percentage of 100 percent. The frequency of the children who were sexually abused was 10, which was equivalent to 38.46 percent; the frequency of children who were physically abused was 3, which was equivalent to 11.54 percent; the frequency of children who were neglected was 5, which was equivalent to 19.23 percent; the frequency of a child rescued from being domestic helper was 1, which was equivalent to 3.85 percent; the frequency of the child who suffered an act of lasciviousness was 1, which was equivalent to 3.85; the frequency of the child who have been trafficked was 1, which was equivalent to 3.85; the frequency of children fondled was 2, which was equivalent to 7.69 percent; the frequency of abandoned child was 1, which was equivalent to 3.85 percent; the frequency kidnapped child was 1, which was equivalent to 3.85 percent; and, the frequency of the case corporal punishment with a child as victim was 1, which was equivalent to 3.85 percent.

2. Year. The rate of children rescued by Bantay Bata 163 by year with the total frequency of 26, which was equivalent to 100 percent. For the year 2008, there were 3 children rescued by Bantay Bata 163, which was equivalent to 11.54 percent; for the year 2009, there were 11 children rescued by Bantay Bata 163, which was equivalent to 42.31 percent; and, for the year 2010, there were 12 children rescued by Bantay Bata 163, which was equivalent to 46.15 percent.

3. Age. The rate of children rescued by Bantay Bata 163 for the year 2008-2010 by age has a total frequency of 26, which was equivalent to 100 percent. The frequency of rescued children within the age bracket of 1 to 6 years was 11, which was equivalent to 42.31 percent; the frequency of rescued children within the age bracket of 7 to 13 years was 2, which was equivalent to 7.69 percent; and, the frequency of rescued children within the age bracket of 14 to 17 years old was 13, which was equivalent

50 percent. Data manifested that the age bracket with the highest number of rescued children was 14 to 17 years followed by 1 to 6 years while the lowest was the age bracket 7 to 13 years.

4. Gender. The rate of children rescued by Bantay Bata 163 for the year 2008-2010 by gender with the total frequency of 26, which was equivalent to 100 percent. The frequency of male rescued children was 17, which was equivalent to 65.38 percent while the frequency of female rescued children was 9, which was equivalent to 34.62 percent.

5. Endorsement after rescue. The rate of children rescued by Bantay Bata 163 for the year 2008-2010 by endorsement after rescue with the total frequency of 26, which was equivalent to 100 percent. The frequency of rescued children endorsed to Bantay Bata Home was 13, which was equivalent to 50 percent; the frequency of rescued child transferred to relative was 1, which was equivalent to 3.85 percent; the frequency of rescued children endorsed to Beauty For Ashes was 2, which was equivalent to 7.69 percent; the frequency of rescued children endorsed to their mothers was 3, which was equivalent to 11.54 percent; the frequency of a child endorsed to Living Stone Children's Home was 1, which was equivalent to 3.85 percent; the frequency of rescued children endorsed to Group Home for Girls-DSWD was 2, which was equivalent to 7.69 percent; the frequency of rescued children endorsed to their parents was 3, which was equivalent to 11.54 percent; and, the frequency of rescued child endorsed to Palm Haven Children's Home was 1, which was equivalent to 3.85 percent.

Based on the findings and conclusions of the study, the following recommendations are given:

1. The local government of Davao City should extend assistance to the non-government organizations who are doing the government's job for them through the provision of manpower, training and financial support.

2. The residents of Davao City should extend their support to Bantay Bata 163 in their endeavour by reporting any incidents of child abuse in their neighborhood.

3. The Criminology students should focus their study specifically to review RA 9262 and RA 9344 as future law enforcers.

Ramos, K.K., Nacua, L.M. and Lim, C.A. (2007). Exploring the Psychological Experience of the Sexually Abuse Girls in Nehemiah Foundation Center, Balulang Cagayan de Oro City.

The research study focused on exploring the psychological experiences of the sexually abused girls at the Nehemiah Foundation. The psychological experiences are the self-esteem and the well-being of the sexually abused female children that were measured using the researcher-made questionnaires. The Rosenberg Self-esteem scale and the General well-being scale were supported with the information gathered from the interview.

The self-esteem and the well-being of the respondents are not that totally low or damaged. The respondents are mature enough to handle their cases. The respondents traumatic experiences do not hinder the respondents from coping up/moving on. And these were supported by the data gathered and from the in-depth interview.

Sobremisana, R.P., Montengro, M.B. and Alimboyong, R.V, and (2013). Child molestation and its effects to psychosocial development: A case study. Graduate College of Arts and Sciences, University of Mindanao, Davao City.

Child sexual abuse has become one of the most high profile crimes for past decades. Since then, a lot of research has been made to determine its detrimental effects on the victims. The purpose of this study is to dig deeper in the issue of child sexual abuse and its effects on the psychosocial development of the victim. The researchers used a qualitative phenomenological method by way of Case Study and used purposive sampling in selecting the participant. With this, an in-depth interview was conducted to gather the necessary data.

The participant basically thought that the molestation was just a normal thing. Later on, she realized that something was wrong about what is happening due to her exposure to adult stuff and resulted to having mixed emotions. She felt guilty and ashamed for liking it (molestation) at first and letting it happen. She is always lonely and feeling alone because she didn't have anyone to tell as it may cause chaos in the family. She also felt hatred for the

perpetrators but mostly for herself because she didn't do anything to make it stop. Her self-esteem was very low. She became uninterested in a lot of things and it affected even her studies. Then she started spending more time alone. She felt that it was safer. She also hated being at home so she goes out a lot. Sometimes she spends time with her friends because she would rather be with them than stay at home. She made friends but she was thinking that the only reason why they liked her or considered her as friend was because they didn't know her secret. She thought that they would condemn her when they find out. She was afraid of having an intimate relationship because she afraid of being left behind when her partner finds out about her secret; but she did have a boyfriend and thought it was okay because it was a long distance relationship. She now has a girlfriend who knows about the molestation. She said that her girlfriend is helping her to be better. Despite what happened to her, she didn't think that other people will do it, too. She believes that all people are different and thinks that just because some people did it to her doesn't mean others will also do it.

In her social functioning the part that was most affected was her initiative to make friends and her way of treating her friends. She doesn't want to be attached to other people because of her fear that when they would find out they will condemn her. Her friends think that she's mean when telling the truth because she doesn't say it in a nice way. She doesn't like sugar coating when it comes to telling the truth because the perpetrators did it to her and she didn't like it. So she tells the truth when she thought that it was really needed.

Based on the statement of the participant on the major effects attributed to the molestation, the researchers therefore concluded that the participant fears rejection from other people. Because of her shame and hatred for herself, she was thinking that others will not like her. She would prefer to be alone and keep herself not too attached to other people because she is scared that if they would find out, they will condemn her.

This study has several implication for practice. Child molestation certainly causes a lot of effects on the victim. It becomes a huge burden to them especially when they have no one to confide in about their predicament. Its detrimental effects is viciously affecting the victims cognitive, affective and psychomotor aspects and basically in

their psychosocial dynamics.

It is important that victims should be aware about their situation so they would have better understanding about what they are going through. The effects are maybe apparent but the nature of why such behavior attributed to molestation is being manifested can be subjected to neglect due to anonymity to both the victim and the family about the molestation. Hence, it is very significant that the victims have support systems to help them cope up with the inflicting consequences that they are undertaking.

Future research is needed. The researchers recommend to have further studies on coping mechanisms of victims of molestation who have suffered its effects and use these findings to help other victims cope up as well.

Another recommendation is to have a longitudinal study on the effects social functioning of victims from childhood to old age. To determine the gradual effects that the victim experiences on every psychosocial stage.

Future researchers should also consider making a study on the family members' techniques of helping the victim cope up after the disclosure, and also to find effective ways of making the family aware about the signs and symptoms of the victims suffering from the effects of the victimization to prevent any detrimental effects.

Finally, the researchers highly recommend to have further studies on the effects of molestation and coping mechanisms of the victims and their support system here in our country. Most of the researches done and published are only from the western countries. These maybe because of the reason that Filipinos are not as open-minded as the Westerners, they are trying to preserve the values of being conservative which impede the controversial issues from surfacing in the awareness of the society. Disclosing about sex is really very difficult for the victims and could really affect them. Through these, we can help more victims from our country understand their predicament.

Suarez, G., Arcenas, C., Lumpas, A. and Rabe, M. (2005). Social behavior and learning performance of sexually abused children College of Education, University of Mindanao, Matina, Davao City.

The study aims to determine the relationship of the social behavior and the learning performance of sexually abused children. The respondents were the sexually abused children of several institutions of Davao City. There were 25 respondents and they are all female: 12 for ages 6-9 and 13 for ages 10-13. The universal sampling was used in selecting the respondents of this study. This means that all sexually-abused children of said institutions were utilized as respondents of this study. The statistical tools used in the interpretation of the result were the mean score, t-test and Cramer's v to determine the significance of the relationship between the two variables.

Based on the data collected, the following conclusions were made:

1. The level of social behavior of sexually abused children in terms of relation to peers, caretakers, and visitors is high.

2. The level of learning performance of sexually-abused children in Mathematics, Science, English, and Filipino is low, while in Makabayan it is high. The level of learning performance in general is low.

3. There is no significant difference in social behavior of sexually abused children in terms of relation to peers, relation to caretakers, and relation to visitors when analyzed by age.

4. There is no significant difference in the learning performance in Mathematics, Science, English, Filipino, and Makabayan of sexually abused children when analyzed by age.

5. There is a very high relationship between social behavior in terms of relation to peers, relation to caretakers, and relation to visitors and the learning performance of sexually-abused children.

In view of the mentioned findings and conclusions, the following are recommended:

1. Since the level of social behavior of sexually-abused children is high, the institutions should enhance the social development of these children. Caretakers should design programs for personality development of these children. Development of the children should be holistic. This will develop them as a whole person.

2. The learning performance of the sexually abused children is low; therefore caretakers and teachers should join hands in guiding the children academically. They should be motivated to watch educational programs on television. Teachers should use technological teaching devices for easy comprehension of lessons. The teachers also help to improve the academic performance of the student by using effective strategies and techniques, and adapting new instructional materials. The acting parents also should encourage their children to study their lessons and to render time and effort to teaching them to increase their academic performance.

3. Based on the statistical findings, there is no significant difference in the social behavior of sexually abused children when analyzed by age. With these findings, the caretakers and the teachers may have the same social training for all sexually-abused children regardless of age.

4. Since the learning performance of the children ages 6-9 and 10-13 is the same learning activities, can be applied to both age groups without any difference. Both age groups can receive same academic inputs, trainings, practices and drills in their subjects.

5. Makabayan subject attained the highest performance among the five learning areas. With this, the use of Filipino language in teaching the said subject should be maintained. The four disciplines such as Physical Education, Music, Values Education, and Social Studies should be taught in Filipino language. Since the correlation between the social behavior in terms of relation to peers, relation to caretakers, relation to visitors and the learning performance in Mathematics, Science, English, Filipino, and Makabayan is very high, the caretakers of the institution should provide more social development activities and trainings to enhance and reinforce the social aspect of sexually abused children. More exposure to different people should be provided. Seminars on self-awareness, self-esteem and awareness through others should be programmed to enhance high social behavior. With these, it is believed that the learning performance will be also very high, since the findings reveals that the higher level of social behavior, the higher is the learning performance.

COMMENTARY

Commentary on the Bibliography of Research conducted in the Philippines related to Child Sexual Abuse Principle, Process, and Practical Learning: A Reflective Journey on Child Sexual Abuse Research Experience

By: Monaliza V. Calapini-Prasad

The Underlying Principle

The journey commenced with the question of, “What research or other studies have been conducted among the Philippine population that relates in any way to child sexual abuse?”

The Center for the Prevention and Treatment of Child Sexual Abuse (CPTCSA) envisions creating a safe world where children are free from sexual abuse and exploitation. The organization recognizes as well the importance of having a concrete and extensive Philippine-based understanding of child sexual abuse in order to develop appropriate programs, projects, strategies, services and activities for our children and their families in building a safe world for children.

In the field of child sexual abuse, most services in the Philippines are based on Western research and studies. This is due not only to the large number of research studies from the West, but also because most research conducted in the Philippines is not easy to access. Much research does exist but in the form of non-published university thesis or dissertations.

The primary objective of the study apart from collecting the data itself was also to draw tangible and substantial resources that can be helpful to design programs, projects, services and activities for sexually abused children as well as their families. Also, to provide a well-defined purpose and a cost-effective way to gain a broad understanding that could help various stakeholders to remain focused on the legitimate rights and needs of children, particularly the sexually abused.

In the study, secondary data gathering was used as a method and the data collection conducted in several universities around the country. The field of study included social work, sociology, psychology, education, medicine and psychiatry, and communication arts. The coverage period of studies done was from the year 2000 onwards.

Below is the list of the Universities visited for the duration of the study:

National Capital Region

1. University of the Philippines – Diliman
2. University of the Philippines – Manila

3. Ateneo De Manila University
4. De La Salle University
5. Centro Escolar Universities
6. Asian Social Institute
7. Philippine Women's University

Luzon

1. Adventist University of the Philippines
2. De La Salle University – Dasmariñas
3. University of Cordilleras – Benguet
4. Benguet State University
5. Saint Louis University

Visayas

1. Silliman University
2. Negros Oriental State University
3. Central Philippine University
4. West Visayas State University
5. University of Iloilo
6. University of San Augustine
7. University of Southern Philippines Foundation
8. University of San Carlos
9. University of Cebu
10. Cebu Doctor's College

Mindanao

1. Western Mindanao State University
2. Xavier University – Cagayan De Oro
3. Liceo De Cagayan University
4. Ateneo De Davao University
5. University of Mindanao

The Unreserved Process

As a Researcher, the general experience was that it was a success. Why? Because of three factors that came into play. These factors established perfect ground to facilitate the smooth accomplishment of the project.

1. Overwhelming accommodation of the university personnel, particularly the librarians. Each university has their own guidelines and procedures to cater information needs of their stakeholders. Their visiting user's regulations are observed and each university is different from others. Though it was unintentional to arrive out of the permitting time and schedule, ALL the universities I visited allowed me to continue the procedure in data gathering in their respective libraries.

2. Acquired inclusive support from library chief and student assistants. In the majority of the universities, photocopy or picture-taking of unpublished theses and dissertations are not allowed. The only choice of the users is to write the studies by hand. The Chief of one of the libraries

I visited in Mindanao allowed me to scan the documents using their own scanner. Their student assistants were also very helpful. They helped me to scan all the research and studies I got from their library. One of the students even initiated to email all the documents that were scanned since printing services is not available for outside research and visitors.

3. Sharing same aspiration to help Filipino children to achieve safer world and better life. Most of the university staff expressed their desire to contribute to help protect Filipino children, especially those who are sexually abused. In simple gestures such as, offering their assistance to help search for titles of studies and research, referring to other institutions that might be helpful to fulfil the data needed, showing materials that may facilitate the ease to gather data and words uttered from their mouth the yearn for copies of reports or any output of the study to improve provision of service for researchers dealing with the same topic, were clearly articulated.

All factors were all due to the kindness and understanding of the university staff particularly, the librarians. They considered the fact that I travelled from a far place (Manila) and that I was very pregnant.

The Practical Learning

I thought of many things worthwhile to consider during the data gathering experience.

1. Focus on the subject. There was a lot of available materials related to abuse in general but only certain appropriate material related to the specific subject were gathered.

2. Creativity in data gathering techniques. Nowadays, universities are stricter in dealing with outside researchers or visitors. Some will provide inadequate information or resources. It was therefore necessary for me to be more creative and to explore more options such as, using electronic database and catalogs, electronic books and journals, informal interview with library staff, etc.

3. Dealing with people with humility. Based on experience especially in provinces, dealing with people with humility makes them at ease. They will offer their help more and they will provide good suggestions and ideas as well.

4. Treasure resources. Use resources wisely. Get only what is needed.

BOOK REVIEW

The relevance of the co-occurrence framework in the Philippine context. A review of Hamby and Grych (2013) *The Web of Violence: Exploring the Connections among Different Forms of Interpersonal Violence and Abuse*

The authors, S. Hamby and J. Grych, put forward that most practitioners have compartmentalized the different forms of violence such as child abuse, bullying, intimate partner violence, and elder abuse. In compartmentalizing, case assessments and the interventions that are developed become too focused on the form of abuse experienced by the victim-survivor. Hamby and Grych pose the “co-occurrence framework” where different forms of interpersonal violence should be seen as “connected across contexts, over the lifespan from birth through adulthood, and in the lives of victims, perpetrators, and those involved in violence as both victim and perpetrator.” By looking at the connections and the “interplay over time among cognitive, emotional, and biological factors, family processes, peer interactions, and the unique connections between victimization and perpetration can shed light on the common and unique risk factors for violence” (Hamby & Grych, 2013). Identifying the risk factors leads to identifying protective factors that contribute to the development of prevention strategies.

The co-occurrence framework is very relevant in the Philippine context. Violence and abuse are often characterized as “multi-problem” cases by practitioners. This is similar with the co-occurrence framework where practitioners assess the experiences of the individual in the various contexts that they interact with, their experiences throughout the developmental stages, biological factors, beliefs that are formed, and the various relationships they are involved in defining problems and the elements that contribute to increasing or decreasing risk and protective factors.

Current social work practice in the Philippines uses tools such as the genogram or an ecomap to identify connections and interplay of relationships. Applying the co-occurrence framework with the genograms and ecomaps enhances analysis of the case because it adds the element of identifying patterns and the link between victimization and perpetration, the causes of re-victimization or re-perpetration, pre-disposition, and identifying contexts that may cause or provoke violence. The co-occurrence framework ensures that interventions are holistic and helps the case manager identify more resources to mobilize.

However, the proper application of current tools for assessment in case management is challenging for social work practitioners in Local Social Welfare and Development Offices (LSWDOs), especially in the Philippine provinces. Social workers of LSWDOs are expected to lead the office, manage cases, supervise day care services, comply with implementing national programs, and respond to crisis and emergencies. More often in municipalities, LSWDOs only have one social worker. Case management is not a priority because social workers often do not have time to properly assess a case, conduct home visits, and do psychosocial support or counseling. For example, the standard intervention for cases of violence and abuse is the provision of food assistance and livelihood training services and referral to institutions if needed. LSWDO social workers would focus on the immediate presenting problem and provide direct services as solutions. Home visits and the development and implementation of treatment plans are rarely done because of the other tasks assigned to them.

Another challenge or even a possible contradiction in the Philippine context is that even if most cases of abuse are multi-faceted and complicated, most interventions are based on particular policies for specific kinds of abuse and violence. For example, in cases where an LSWDO has one social worker who takes on administrative and management tasks, interventions for cases of violence against women and their children (VAWC) would focus on ensuring the safety of the woman and her children, and that the woman would have a means of livelihood to provide for her children. If counseling is provided, it focuses on helping the victim-survivor cope with her negative experiences and move on. Training on handling such cases also can become too focused on the law – RA 9262 or the Anti-Violence Against Women and Their Children Act – in which definitions of the different kinds of abuse such as physical, sexual, and psychological abuses are defined separately with no mention of their interconnections. The law also highlights the provision of various kinds of protection orders to the victims-survivors. In doing so, protection orders become a standard intervention to VAWC cases sometimes without adequate psychosocial support. Most of the interventions also focus on the mother and little on the children. Although the law provides counseling and treatment for the offenders, this is not a common practice.

There is seldom intervention for perpetrators because of lack of capacity and resources. This is why RA 9344 (Juvenile Justice Law) has so many challenges and gaps in the implementation. Children in conflict with the law (CICL) are primarily considered perpetrators and at the same time, they are children in need of help and support and whose rights have to be upheld. Social workers in the field are often at a loss on how to assess cases and develop treatment plans for CICL.

Most social workers in LSWDOs acknowledge the need to update their capacities in identifying and assessing problems and overall case management. Trainings, coaching, and mentoring sessions have been

conducted by the Department of Social Welfare and Development with partner NGOs and international agencies to address this need especially after the series of emergencies – disasters and armed conflict - in various areas of the country since 2013. However, if the issue of work-overload among social workers in LSWDOs is not addressed, case management remains a low priority.

There are elements in the co-occurrence framework that is already being applied in current practice but the framework needs to be adapted to the Philippine context. For example, in Haiyan affected Regions VI and VIII, strategies for the prevention of early pregnancy have elements of the co-occurrence framework. The strategies also address the prevention of other child protection issues and gender-based violence including the promotion of positive behaviors and beliefs and develop help-seeking behavior. Lessons learned from these and similar strategies could be used to localize the framework.

Anchoring the co-occurrence framework on Sikolohiyang Pilipino (SP) will enrich the assessment of context (environmental conditions, social integration, behavior of others, and relationships) and the individual (cognitive, affective, self-regulation, biological processes and personality). For example, what would be the impact of *pakikisama* (smooth interpersonal relationship), *bahala na* (I leave everything to God or fate), crab mentality, *utang na loob* (sense of indebtedness), and *hiya* (bashfulness or absence of confidence) (Paredes-Canilao & Babaran-Diaz, 2013) in assessing various forms of interpersonal violence using the co-occurrence framework? The development of appropriate methodologies for case management may be the result of such research. Moreover, with Sikolohiyang Pilipino, *pakikipagkapwa* will come into play. Roughly translated *kapwa* is 'that person with whom I share all things.' The concept of *kapwa* covers levels of intersubjective interaction using the 'right words that will truly reflect the sentiments, values, and aspirations of the Filipino people' (Paredes-Canilao & Babaran-Diaz, 2013).

Notwithstanding the challenges in case management in the Philippines, the co-occurrence framework would be an appropriate addition to the tools that case managers use. However, further discussion, discourse, and research is needed to enhance and localize the framework with the experiences of the Filipino practitioners and SP.

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Psychosocial Support and Children's Rights Resource Center
Program Officer

Resources

Hamby, S., & Grych, J. (2013). *The Web of Violence: Exploring the Connections among Different Forms of Interpersonal Violence and Abuse*. New York: Springer.

Paredes-Canilao, N., & Babaran-Diaz, M. (2013). *Sikolohiyang Pilipino: 50 Years of Critical-Emancipatory Social Science in the Philippines*. *Critical Psychology in Changing World*, 765-783.

GUIDELINES FOR SUBMISSION

The Philippines Journal of Child Sexual Abuse provides a multidisciplinary forum on all aspects of child sexual abuse. The Journal will have the two distinct parts of the dialogue on critical pluralism of child sexual abuse in the Philippines: research-based academic manuscripts and evidence-based practical manuscripts. The purpose of the journal is to enhance our understanding of child sexual abuse in the Philippines.

Types of contributions:

1. **Original, theoretical and empirical contributions:** type written in English, double-spaced, margins of at least one inch on all sides; number manuscript pages consecutively throughout the paper; clear of all errors; maximum 8,000 words (excluding references) in 12 Arial font; professional format of your university (such as APA6, <http://www2.yk.psu.edu/learncenter/apa-july-09.pdf>); accompanied by a statement that it has not been published or sent with hopes to be published elsewhere; permission has been obtained to reproduce copyrighted materials from other sources. All accepted manuscripts and parts within (such as artwork) become the property of the publisher. Submit a cover page with the manuscript, indicating only the article title, and summarized in an abstract of not more than 100 words; avoid abbreviations, diagrams, and reference to the text in the abstract.

2. **Articles on clinical or community practice:** such as case studies, process and program descriptions, outcome studies, original clinical practice ideas for debate and argument; typewritten in English or Tagalog, double-spaced, margins of at least one inch on all sides, numbered manuscript pages consecutively throughout the paper; clear of all errors; maximum 4,000 words (excluding references) in 12 Arial font. The article must have a clear purpose, be evidence-based and practical, state the framework, and conclusion for learning; accompanied by a statement that it has not been published or sent with hopes to be published elsewhere; permission has been obtained to reproduce copyrighted materials from other sources. All accepted manuscripts and parts within (such as artwork) become the property of the publisher. Submit a cover page with the manuscript, indicating only the article title, and summarized in an abstract of not more than 100 words; avoid abbreviations, diagrams, and reference to the text in the abstract.

3. **Brief communication:** shorter articles, commentaries.

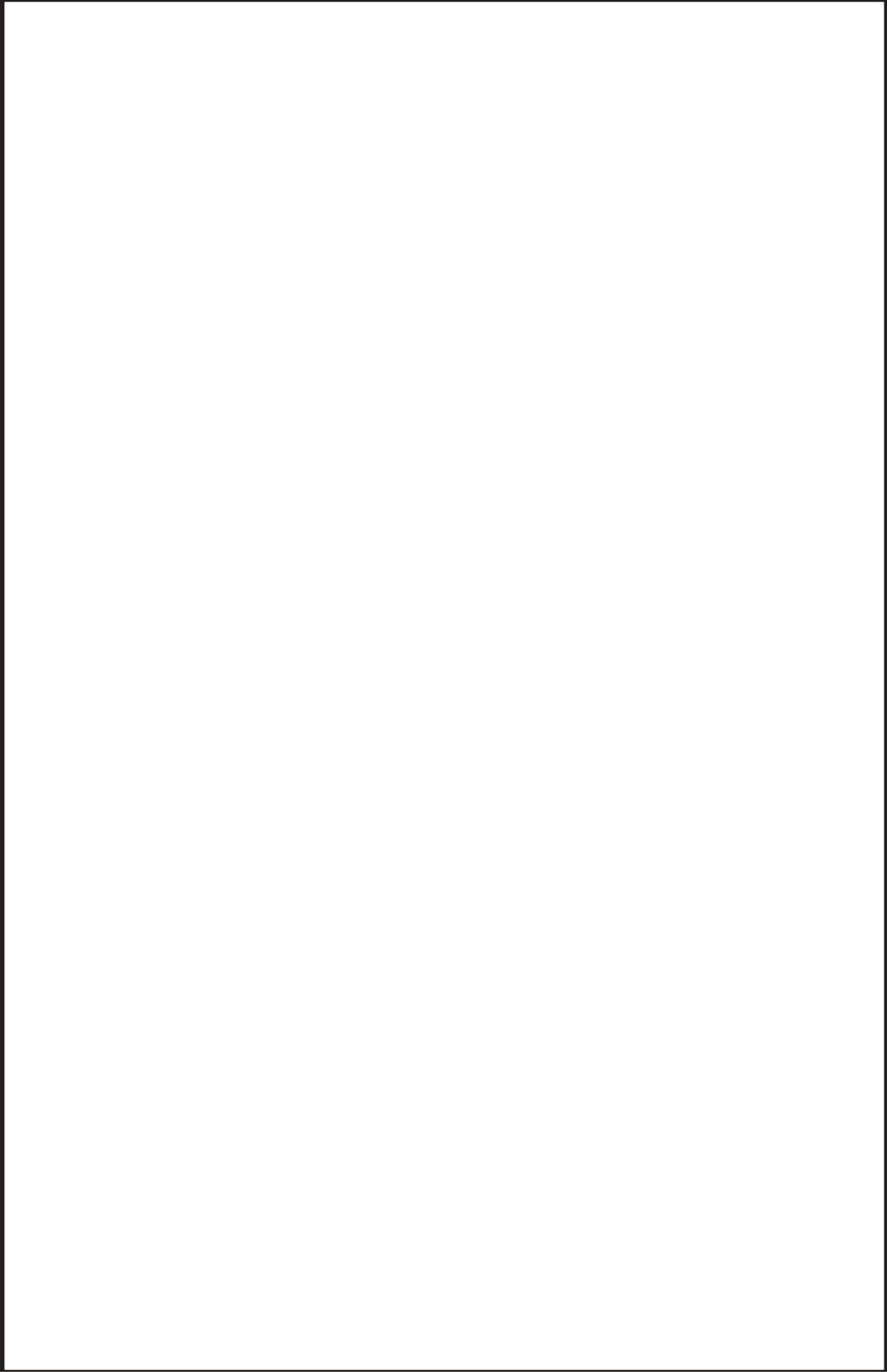
4. **Invited reviews**: the editors will commission reviews on specific topics, including book reviews.
5. **Letters to the editor**: letters and responses pertaining to articles published in the Philippines Journal of Child Sexual Abuse or on issues relevant to the field and to the point, should be prepared in the same style as other manuscripts.
6. **Announcements/Notices**: events of national or international multidisciplinary interests are subject to editorial approval and must be submitted at least 6 months before they are to appear.

Review process - All articles will go through a peer-review process by the editors or reviewers chosen by the editorial board using the following criteria:

1. significance of the contribution
2. appropriateness of the literature review
3. clarity of research problem/framework, methodological rigor, quality of analysis and adherence to APA format (academic manuscripts)
4. quality of the possible discussion and interpretation of the results
5. quality of the overall writing

Authors will be given feedback and manuscripts with potential to publish will be returned for reworking or retyping to conform to requirements.

The author will receive a copy of the journal that includes the article.



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