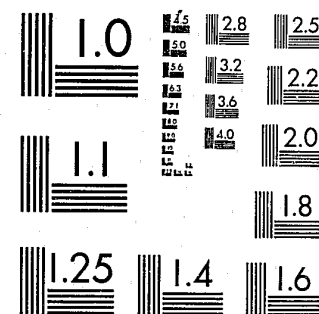


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ABSTRACT

This study of childhood sexual victimization in a sample of 796 college students finds that victimized students have lower current levels of sexual self-esteem. Victimized boys also appear to be more likely to be currently engaged in homosexual activity.

Key words: incest, sexual abuse, victimization, homosexuality.

* * * * *

LONG TERM EFFECTS OF CHILDHOOD SEXUAL VICTIMIZATION IN A NON-CLINICAL SAMPLE*(1)

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The debate over the effects of childhood sexual victimization spans almost a century. It was a question of some lengthy consideration for Freud, and has been taken up again in several of the landmark studies of sexuality since then (Hamilton, 1929; Kinsey et al, 1953; Terman, 1938).

If the debate has heated up in recent years, it is because the issue neatly embodies much of the contemporary public policy dilemma concerning sexuality and childhood. On the one hand, there is a body of opinion that sees childhood as a relatively treacherous time in the development of sexuality. During this period, according to this viewpoint, children need protection from the common sexual traumas that our civilization inflicts on them, one of the commonest of these being sexual victimization at the hands of adults.

This viewpoint has been reinforced by the women's movement in recent years, which has sought to highlight the high frequency of sexual victimization. Feminists have been instrumental in drawing attention to the unrecognized suffering of victims of both rape and child sexual abuse, traumas that have often been exacerbated by the social stigmas attached to such victims and the social taboos around discussing such experiences. Their conclusion is clearly that the extent of victimization and the trauma produced by such victimization have in the past been insufficiently recognized (Armstrong, 1978; Butler, 1978; Herman and Hirschman, 1977).

On the other hand, another point of view has urged the public and professionals to give up alarmist concerns about child sexual development (Farson, 1974; Menninger, 1942; Pomeroy, 1968). If children are treated as so fragile, then they will be restrained from the kind of uninhibited exploration of sexuality that these writers feel is the best foundation for healthy adult sexuality. This viewpoint has tended to minimize the dangers of sexual victimization.

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ACQUISITIONS

Both points of view have their favorite evidence. Clinical studies have drawn attention to large numbers of women in crisis, in whose history childhood sexual victimization plays an important part. The problem has been implicated as a factor in prostitution (James and Meyerding, 1977), drug abuse (Benward and Densen-Gerber, 1975), sexual dysfunction (McGuire and Wagner, 1978) and adolescent run aways (Weber, 1977).

On the other hand, studies with large scale populations, outside of clinical contexts, have never clearly established the high risk character of childhood sexual victimization (Gagnon, 1965; Landis, 1956). And some clinical studies, too, starting with childhood victims at the time of the event, have claimed that the great majority of victimized children show few long-term consequences (Bender and Grugett, 1952; Burton, 1968). Thus participants in the debate have had a variety of evidence from which to draw ammunition, none of it, however, very sound. (For more comprehensive reviews of the literature see Constantine (in press) and Tsai et al. (1979).)

METHOD

The data for this paper came from a survey of 796 college undergraduates about their childhood sexual experiences. A more detailed description of the study is available in Finkelhor (1979a). The survey was conducted at six New England colleges and universities in the fall and winter of 1977-1978. The schools were selected for their diversity and included a prestigious private college, three large state universities and two non-residential community colleges.

Questionnaires were distributed to whole classes of students to be filled out during class time. The courses represented were primarily lower and upper level social science and human sexuality courses. The participation rate was quite high: 92% of the students in attendance in the classes were surveyed.

No claims can be made that this sample is representative of any larger population. It is nonetheless quite diverse in its social class and ethnic make-up. It is somewhat more middle-class than the New England population as a whole. It has a particularly large group of students (61%) who grew up in non-metropolitan areas. There are also very few blacks (under 1%) in the sample. But unlike many college student populations, there is also a sizable subgroup of people (17%) over the age of 24.

Sexual activities were defined by a list of activities provided to the respondent. This list included an invitation to do something sexual, showing sex organs, fondling in a sexual way, touching sex organs, attempted or

simulated intercourse, and intercourse. Respondents were encouraged, however, to write in any other kind of experience they considered sexual beside the choices available.

Sexual victimization was defined as experiences of children under 12 with partners at least 5 years older, and young adolescents 13-16 with partners at least 10 years older. Nineteen per cent of the women and nine per cent of the men had experiences that fit these criteria.

The experiences reported in this survey confirmed what we have been finding out about sexual victimization from clinical sources. Most of the offenders (75%) were men known to the children. In the case of girls, about half were family members, including uncles, grandfathers, older brothers and fathers. Genital touching and fondling were the main sexual activities; intercourse was not extremely common. In a majority of cases children did not tell anyone about them at the time they occurred.

OUTCOME MEASURES

Three outcome measures were available to the study.

- 1) Sexual self-esteem. This is an index composed of six items intended to capture attitudes toward current sexual identity and activity. The items were:
 - a. I find I spend too much time thinking about sex.
 - b. I often find myself in awkward sexual situations.
 - c. I really like my body.
 - d. If I'm sexually interested in someone, I usually take the initiative to do something about it.
 - e. After sexual experiences, I often feel dissatisfied.
 - f. Someone my age should be having more sex than I am.

Agreement or disagreement was indicated on a 4-point Likert-scale. The directions of items c and d were reversed for scoring.* (3)

- 2) Forced sex. Respondents were asked to list any sexual experience since childhood that took place as a result of force.

- 3) Current homosexual activity. Respondents were asked if they had engaged in any homosexual sex in the previous year.

VICTIMS HAVE LOWER SEXUAL SELF-ESTEEM

Sexual self-esteem is the most comprehensive outcome measure in the study, since it captures a broad evaluation of a person's current level of sexual satisfaction and sexual adjustment.

So the most important finding of the study pertains to it: students who had been sexually victimized as children, both women and men, had lower levels of sexual self-esteem than other people in the sample (Table 1).

Table 1. Sexual Self-Esteem of Abuse Victims and Non-Victims.

Sexual Self-Esteem Score	Victim	Non-Victim	Significance*
Boys	40.9 (17)	52.4 (253)	.05
Girls	45.7 (104)	51.6 (432)	.01

* ANOVA

Victimized women were six points lower and men eleven points lower than non-victims, both results statistically significant. The victimized women were especially likely to report that they often got into awkward sexual situations. The victimized men revealed especially high feelings of dissatisfaction after current sexual experiences.

It is possible that the relationship may be a spurious one. Suppose all lower-class respondents have lower self-esteems, and lower-class respondents are also more likely to have been sexually victimized, as has been indicated in previous research (Finkelhor, 1979b). In that case there might be a statistical relationship between being victimized and a low score, but no causal one.

To test such possibilities, we ran a regression analysis including all the background factors measured in our study that might possibly be related to both sexual self-esteem and sexual victimization. These included class, ethnic background, family size, family values, parents' attitude, education, etc. The only variables significantly related in the regression equation to sexual self-esteem appear in Tables 2 and 3.

Note that sexual victimization made a contribution to explaining sexual self-esteem, independent of family income, emotional deprivation or family sexual practices. This held in the case of both boys and girls. (Many other variables were tested in the regression equation. The only ones listed in Tables 2 and 3 were the ones whose relationship was significant.)

Table 2. Regression of Background Factors on Sexual Self-Esteem

Factor	Beta
Peer sibling sex experience	+.17 *
Family income under \$10,000	-.12 *
Sexually punitive mother	-.11 *
Not close to father	-.10 *
Inadequate father	-.10 *
Unwanted post-pubertal intercourse experience	-.09 *
<u>Child sexual victimization experience</u>	-.09 *

$$R^2 = .10$$

* Significantly different from 0 at .05 level.

Table 3. Regression of Background Factors and Experiences on Sexual Self-esteem of Boys.

Factor	Beta
Proportion of total affection received from father	+.23 *
Sex comfort between generations	-.22 *
Sexual comfort with mother	-.22 *
<u>Child sexual victimization experience</u>	-.17 *

$$R^2 = .18$$

*Significantly different from 0 at .05 level.

The results of this regression certainly reinforce the likelihood that the reduction in self-esteem shown among victims of childhood sexual abuse is a result of the experience itself and its aftermath.

FORCED SEX

It has been suggested that sexually victimized girls may also be more vulnerable to rape in adulthood (Herman and Hirschman, 1977). Those who make this observation believe that such women, victimized once, tend to find themselves in similar victim situations with other men because their responses have been conditioned by their early childhood relationship.

The current study has only weak evidence in support of this assertion. Women who were sexually victimized before the age of 13 were more likely to be the victims of another forced sex experience*(4) after the age of 13 (32% of the child victims compared to 22% of the rest of the sample). The difference is statistically weak ($p = .07$), however, as indicated by the results of the t-test comparing the two proportions, and should be taken with some caution.

Moreover, unlike the case with self-esteem, the results do not stand up when other variables are entered as controls. For example, any relationship between childhood victimization and later victimization disappears when controlled for sexually punitive mothers. Having a mother who frequently punished sexual curiosity, masturbation and so forth, makes a woman vulnerable to both early and later sexual victimization. It cannot be said, on the basis of this study at least, that the early victimization experience plays a part in causing the later one.

HOMOSEXUAL ACTIVITY

Part of the traditional mythology about child molestation, supported by some clinical observations (Brunold, 1964; Finch, 1967), is that it can lead to homosexuality. In fact, in the recently reported San Francisco study of homosexuality, it was found that gay men do report about twice as many childhood sexual experiences with adults as do straight men (Bell and Weinberg, n.d.). Parents who find out that their little boys have been victimized frequently become very anxious over this possibility.

Most of the victimization of boys occurs at the hands of older men, although such men rarely identify themselves as homosexuals (Burgess and Holstrom, 1979). In fact, the vast majority of these men are not interested in sex with adult males at all. They have lengthy heterosexual histories and are often married (Gebhard et al, 1965). Nonetheless, such experiences are not differentiated in the

public mind from adult homosexual activities, and it is imagined that an exposure to sex with a man as a child may lead to a repetition of such experience later on.

Some clinical research has concluded that childhood sexual victimization can result in homosexuality among women, too (Finch, 1967; Gundlach, 1977). The explanation suggested is that a woman who has a traumatic childhood sexual encounter with a man will conclude that men are undesirable sexual partners and opt to conduct her relationships with other women.

The data from our study indicate that there may be a connection between childhood victimization and adult homosexual activity in the case of boys. Boys victimized by older men were over four times more likely to be currently engaged in homosexual activity than were non-victims (Table 4). Close to half the respondents who had had a childhood sexual experience with an older man were currently involved in homosexual sex.*(5)

Table 4. Current Homosexual Activity for Boys Who Engaged in Different Kinds of Childhood Homosexual Experiences.

Kind of Childhood Homosexual Experience	% Engaged in Homosexual Activity in Last Year	N
None	11	(174)
With peer	20	(30)
With much older partner	45	(11)
ANOVA: $F = 5.47$ $p < .01$		

It is important to note that this relationship does not hold for respondents who had had peer homosexual experiences as children. Those who had peer homosexual experiences were

somewhat more likely to be currently engaged in homosexual sex, but the difference was not statistically significant. It was only for those with sexual experiences with much older partners that there appeared to be some carry-over effect into adulthood.

The results of the regression analysis (Table 5) reinforce this conclusion. No other variable in the study could "explain" or eliminate the relationship between sexual victimization and current homosexual activity. In fact, controlling for other variables, sexual victimization appeared to be the most powerful predictive variable in the regression equation. Peer homosexual experience had no significant contribution.

Table 5. Regression of Background Factors on Current Homosexual Activity for Boys.

Factor	Beta
Age of puberty	-.14 *
Proportion of sex education obtained through books and magazines	-.16 *
Father's education	-.15 *
<u>Homosexual experience with much older person</u>	+.16 *
Peer homosexual experience in childhood	+.09 N.S.
$R^2 = .14$	

* Significantly different from 0 at .05 level.

Why might a childhood sexual experience with an older man be associated with later homosexual activity?

Current literature on adult homosexual behavior suggests that in many cases it has roots in early childhood or maybe even in a genetic inheritance. Many men who currently identify themselves as homosexuals report being aware of that sexual interest from an early age. Related to these findings, it may be that men whose homosexual interest reached far back into childhood may have made themselves vulnerable or accessible to older men. They may have developed an infatuation for an older man which the latter capitalized on. They may have had an intense sexual curiosity directed toward men which made them vulnerable or open to sexual suggestions by the latter.

The problem with this reasoning is that it does not explain well why peer homosexual experiences are not also predictive of later homosexual behavior. Shouldn't a childhood interest in homosexuality lead to experiences with peers as well as with older partners?

Another explanation involves stigma. Childhood victimization experiences may be stigmatizing for the children they occur to. It may be common for a boy who has been involved in an experience with an older man to label himself as a homosexual 1) because he has had a homosexual experience and 2) because he was found to be sexually attractive by a man. Once labeled by himself as such, he may begin to behave consistently with the role and gravitate toward homosexual activity.

Several factors could explain why the labeling impact of an experience with an adult would be greater than with a peer. 1) The adult is sexually mature and represents some social authority in the eyes of the child. Thus a homosexual experience with an adult may confer a more irrefutable "homosexual" label on the child, and the child may receive a stronger confirmation of his homosexual attractiveness. 2) The experience with the adult is likely to be more emotionally upsetting and may therefore become the basis of an unresolved preoccupation.

Although this explanation has some plausibility, we wish to urge great caution in adopting either of them. For one thing, the number of victimized men in this sample was small, and although the results are quite significant statistically, changes in the reports of only a few respondents could alter our findings. Secondly, it must be emphasized that our data show a "correlation" between sexual victimization and later homosexuality, but this is by no means the same as saying that the former causes the latter. Many unknown relationships might account for the correlation in the absence of any causation.

Thirdly and most broadly, much theorizing has taken place about the "causes" of homosexuality that has done harm to homosexuals and their public image. 1) A great many assumptions have been made about something called

homosexuality or some people called homosexuals, when in fact we are only beginning to understand enough about homosexual activity to make such definitions. 2) It has been assumed that social science could explain "homosexual" behavior, when no theory yet exists explaining heterosexual behavior. In such a vacuum, explanations of "homosexuality" only stigmatize it as a deviant developmental pattern which it may not be.

DISCUSSION

That some children have long term reactions to childhood sexual victimization has never really been in dispute. Clinical experience is rich in this regard. The contribution of the current research is to show, however, that as a group those who have been victimized have demonstrable long term deficits compared to those who have never been victimized. Unfortunately, it is not possible to say on the basis of this study just what these deficits are. Our main variable of interest, "sexual self-esteem", is a limited, somewhat vague construct and does not touch on many areas of possible adult adjustment. But the impression of impairment is inescapable, and this research is one of the first to marshal statistical evidence that the culprit is something to do with experience itself, not some common background factor.

Some observers have concluded that the true trauma of sexual victimization results not so much from the experience itself as from the alarmed reaction that such victimization elicits from a child's family, friends and the community. The study was also not well equipped to answer this question by distinguishing among the various possible long-term traumatizing aspects of the experience. Supporting this claim, there is some weak evidence from the study that those who told their parents about the experience may have fared worse. But, true or not, the more general issue is that it should not necessarily be assumed that a victimized child is destined for difficulty. It may be that by providing a calm and supportive reaction to such a child, the risks of long term effects can be completely dissipated.

The finding about the contribution of childhood sexual victimization to later homosexual activity in boys is reported here with some trepidation. It is possible that such evidence may contribute to the very hysterical reactions on the part of parents and community that are conducive to exacerbating trauma. It is also possible that such results could fuel the phobia about homosexuality that plagues many parents and professionals.

It needs to be made clear that even if sex abuse does contribute to later homosexuality, this process would explain only a small fraction of adult homosexuality. In the recent Bell and Weinberg study (n.d.), only 5% of gay

men reported childhood sexual experiences with adults. Such a small figure means that childhood sexual victimization can have little to do with the etiology of the vast majority of homosexual behavior.

Moreover, even in cases where victimization might be causally related to homosexuality, it could not necessarily be argued that the homosexuality was a traumatic outcome of the victimization. In some cases the victimization may affect sexual orientation and also be traumatizing, in other cases it may not. Independent measures of other kinds of functioning need to be made in order to judge harm. All the effects of an unpleasant experience (for example, death of a parent) cannot be presumed to be negative.

In practical terms, what would be suggested by this connection, if borne out elsewhere, is not that parents or professionals try to thwart a child who shows an interest in homosexual sex. Rather, they should make sure that the child is not under any misconceptions that he "must be a homosexual" as a result of his experience.

ADULT ETHNOCENTRISM

To some extent, however, the whole debate over the effects of child sexual victimization is misplaced. In the study of this childhood experience, as in the study of many others, researchers and ideologues persistently focus on the question of long term effects. Did the experience result in psychopathology, in marital instability, in sexual dysfunction, in homosexuality, etc. On this score, the issue of sexual victimization has been treated no differently from the issue of the effects on children of divorce, school failure, racial integration and so forth. The bottom line is always how does this event affect adult adjustment, adult feelings, adult capacities and adult attitudes.

This preoccupation is a kind of ethnocentrism on the part of adults. The impact of an event on childhood itself is treated as less important. It is only "childhood", a stage which, after all, everyone outgrows.

Note, however, that this attitude is not taken toward traumatic events in adulthood. Does the seriousness of rape rise or fall on whether it has a disruptive effect on old age? No. In fact, rape is treated as a serious life event whether or not it causes long term effects. Research demonstrating that the negative effects of rape attenuate after a year or two (Burgess and Holstrom, 1979; Kilpatrick, Veronen and Resnick, 1979; Feldman-Summers, Gordon and Meagher, 1979) is greeted with relief by everybody, rape activists included. Few people would try to conclude from such research that rape is really a less traumatic experience than was previously thought.

Comparable research on the subject of child sexual abuse, however, would stir a storm of controversy. It would immediately be cited as evidence that the anxiety over childhood sexual victims had been exaggerated. In short, different standards are used to evaluate the seriousness of life events occurring to children.

Rape is traumatic because adults consider it so. Adults can speak eloquently about their experience and communicate its pain. Child sexual abuse should be similarly viewed, especially because children cannot speak for themselves. It is a noxious event of childhood, serious for its immediate unpleasantness, if nothing else, not necessarily for its long-term effects.

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FOOTNOTES

3. The index was intended to be applicable equally to the self-esteem of men and women. But it had to be standardized to the norms of each sex. For example, although the confidence to act assertively about sexual interest is a sign of self-esteem, women score lower on this question, not because they have lower self-esteem, but because norms on this behavior differ for men and women. Thus, to create the scale, each question was normalized by sex, then summed, then the whole scale was normalized by sex and transformed to a percentage scale (Straus, 1979). Thus the mean for men and women was each 50 and the standard deviation for each was 20. The scale reliability, tested by Cronbach's alpha, was .48 for men and .54 for women, not a high reliability but high enough for use in an exploratory study (Nunnally, 1967).
4. Forced sex is something more general than rape. It includes all women who indicated they had had a sexual experience that involved an element of force or threat.
5. We would like to emphasize that the measure used here is whether the respondent engaged in any homosexual activity in the previous year. Such respondents would not necessarily be considered by themselves or others as homosexually oriented.

END