The Need for Belonging Goes Awry: Sexual Abuse and Children

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INTRODUCTION

The theme of this Symposium, *The Ties That Bind*, refers to one of our basic human needs—the need for belongingness. Our first connections, both to others and to ourselves, occur within the family setting. With appropriate guidance from loving parents and caretakers, we receive basic training in how to belong. When children do not feel that they belong at home, someone else—perhaps a loving relative or a kind teacher—may step in and provide the appropriate model. When children belong, they not only feel valuable social attachment, they also have a strong psychological affiliation that will affect their relationships with others and their ability to satisfy their basic needs— they feel a personal fit within the world.

While children in their vulnerable school-age years can receive appropriate caring and experience belonging with certain adults, other adults in their environment can engage in hostile behavior that leads to heartbreak. Incest is an extreme example of a behavior that damages the development of belongingness in a child. Social worker E. Sue Blume defines incest as "sexual activity between a child and a parent, sibling, cousin, uncle, aunt, or grandparent."[1] The key issue for the child is not that the abuse involves a blood relative, but rather that it is a violation of the "ongoing bond of trust between a child and a caretaker."[2] Trust underlies belonging in a family; family members cannot fully experience belongingness with people they cannot trust. The need to belong goes awry.

While belongingness takes on different characteristics and different forms in every family, most families have limits on physical displays of affection between adult family members and children. States place their own limits on such activity. In most states, youth under the "age

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1. E. SUE BLUME, SECRET SURVIVORS: UNCOVERING INCEST AND ITS AFTEREFFECTS IN WOMEN 2 (1990).

2. *Id.* (emphasis omitted).

of consent" (which ranges from fifteen to eighteen) cannot consent to sexual activity, and sexual activities with these youth may be considered child abuse:[3] "Legal definitions of what constitutes child sexual abuse usually require that the perpetrator be older than the victim. . . . [I]n some states perpetrators must be at least five years older than their victims for the behavior to be considered child sexual abuse."[4] Of adults who sexually abuse children, about 30% are relatives of the child and 60% are not relatives but know the child as a family friend, babysitter, or neighbor.[5] Only 10% of the perpetrators of child sexual abuse are strangers.[6] Most abusers are male; women are perpetrators in only 14% of cases involving boys and 6% of cases involving girls.[7]

Rapid changes in personality characterize all interactions between people. Children often switch from one personality role to another in an attempt to meet their basic needs and explore their own identity. The need to share belongingness with other people becomes distorted when children are sexually abused. Normal experiences of belonging or attachment carry happy and unhappy memories for most individuals. But for the child who is sexually abused by a family member, basic belonging needs are compromised in confusing and complicated ways. The abused child still has a keen need to belong, but can no longer trust that belonging will have positive consequences. When the perpetrator tells a child that he "loves" her, it becomes difficult for the child to discern what healthy love looks like in a family.

I will use stories to illustrate how unmet belonging needs factor in the mind of a perpetrator, and how a child victim of incest has difficulty meeting her basic needs. Part II describes a belonging story gone awry from the perspective of a stepfather who sexually abuses his stepdaughter. Part III presents a similar story from a child's point of view. Part IV reviews scientific studies of the brain that show that the memories of both victims and perpetrators can collapse under a confusing network of personality roles when basic belonging needs are not met. Part V suggests that our culture plays a role in these problems by promoting the autonomy of the individual over the attachment or belonging needs of people. Part VI concludes by outlin-

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3. NAT'L CTR. FOR VICTIMS OF CRIME, TEEN TOOLS: HELP FOR TEENAGE VICTIMS OF CRIME, *available at* http://www.ncvc.org/tvp/AGP.Net/Components/DocumentViewer/Download .aspxnz?DocumentID=39511 (last visited Apr. 30, 2007).

4. Julia Whealin, Nat'l Ctr. for Posttraumatic Stress Disorder, U.S. Dep't of Veterans Affairs, Child Sexual Abuse, http://www.ncptsd.va.gov/ncmain/ncdocs/fact_shts/fs_child_sexual_abuse. html (last visited Apr. 30, 2007).

5. *Id.*

6. *Id.*

7. *Id.*

ing the importance of more effective interventions for both sexually abused children and sexual perpetrators, and provides a call to action for prevention techniques.

II.   Unmet Belonging Needs in a Perpetrator

What happens in the childhood experiences of a sexual perpetrator that can lead to abusive relationships? "Dave" has several biological children, as well as a stepdaughter. He married shortly after high school graduation; he divorced and then remarried. His stepdaughter was in elementary school during his second marriage. When she entered puberty, Dave began sexually abusing her. Dave's childhood story provides an example of belonging needs that were not met in a perpetrator's early years. Dave did not understand, or even examine, his lack of belonging until he had court-mandated therapy for abusing his stepdaughter. Consider some of Dave's unmet needs for belonging, both in his immediate family and in his extended family:

- My only memories [of childhood] are of being troubled and unhappy or of trying to distance myself from the family. Dad was gone all the time.
- When I was in preschool, I was always being given enemas all the time.
- There was always friction between my father and my grandfather.
- I was often told by my father, "Don't tell Grandpa." When a relative committed suicide, I was not told about the incident: I found out about it at school.
- Secrets from my parents' in-laws were common. All this led to my need for anonymity as an adult. It is much more comfortable for me to be unknown, because I feel I am not being constantly evaluated, and I run a low risk of rejection if nobody is aware of my existence.
- I kept secrets from my ex-wife concerning a two-year affair which preceded my divorce.
- I have never been proud of my father and have always found myself explaining his quirks to others. As a result, I have never identified with my father as much as I would have liked. I'm sure he felt my disapproval even before I did.
- My sister never got along with my parents either. Once she was hospitalized for a month by my parents, but I never knew why.
- I don't remember ever being close to my sister. We don't talk now.
- I have never been able to keep my weight down in the normal range. I was teased continuously about my weight as a child.
- I like other people, but at a distance I can control.

- Since I never felt love, approval, or acceptance as a child, I immediately "went for" anyone who had a personal interest in me . . . this included my stepdaughter.

Dave had court-mandated group therapy, and I saw him for mandated individual therapy for two years. In addition to relapse prevention, we worked on finding appropriate ways for him to meet his needs for belonging. Many adults fail to focus on the basic needs of a child because they are too busy focusing on meeting their own needs. This inattention becomes even more detrimental to a child, however, when adults cannot meet their own basic needs in acceptable ways. Not only was Dave unaware of how to meet his basic needs in a healthy manner, he was not conscious of the various roles his personality was playing.

A. *Personality Map of a Perpetrator*

People sometimes say that someone has "no personality." But this is never true—everyone has a personality. Perhaps these people mean to say that the other person plays out personality roles in ways that differ from their preferences. What are these personality preferences? How do they form the map that guides a person through the day and through their lives? Personalities can deviate slightly or mightily. All individuals have layers of personality roles, some long known and some hidden for periods of time. For example, a parent may disapprove of a certain behavior that a child exhibits. In response, the parent might storm out of the room, have a tantrum, or scream obscenities at the child. A critical personality role usually holds that certain other personality roles are bad. The parent's critical personality role judges the angry role in a child with disgust. Tantrums are not acceptable behavior *for the child.* Such parents are utterly unaware of their own personality roles.

Family therapist Dick Schwartz proposed one model of understanding the various roles of our personality. Schwartz developed a psychotherapy model, "Internal Family Systems,"[8] around the concept of multidimensional personality parts. These personality parts act internally in sequences that are similar to relationship patterns in a family. The roles of our personality are experienced as thoughts, emotions, or sensations—all of which desire something positive for us. But some roles, like an angry role, may play an extreme role in a personality.

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8. RICHARD C. SCHWARTZ, INTERNAL FAMILY SYSTEMS THERAPY (1995).

Schwartz has identified three categories of personality roles: managers, exiles, and firefighters.[9] Manager roles organize day-to-day functions; they make future plans, control situations throughout the day, and protect a person from hurt or rejection.[10] Dave's personality has many managerial roles. He tries to control his entire day, though he rarely feels like he has control over anything. This loss of personal control relates to his early family experiences, when he could not feel as though he truly belonged in his conflicted family. He did not develop self-definitions of acceptance, belonging, or even self-respect because his family reminded him that he was "not good enough" at nearly every turn. Dave's loss of belongingness in childhood led to hidden personality roles that are off the map of his conscious awareness.

Exile or hidden roles of a personality in Schwartz's model are roles that often derive from childhood.[11] Exile roles are often isolated from the rest of one's personality and are a source of protection from the experience of pain, fear, or suffering. For example, a parent's delayed memories of incest may remain buried in her mind until she becomes a mother. Suddenly, unwelcome images of an earlier, frightening time with her father force themselves upon her consciousness in a troubling dream. She tries to fight off thoughts of this unwanted sexual intrusiveness before recognizing in therapy that she was an innocent child who did nothing wrong. Her father was an alcoholic who took no responsibility for meeting his young daughter's need for appropriate belongingness with a caring dad.

Firefighter roles are present when exile roles are activated.[12] Firefighter roles attempt to quickly extinguish any feelings of pain. A father's daily use of marijuana medicates his anxiety role from a demanding career. A mother becomes addicted to pain medications prescribed for a back problem; she numbs her emotional pain with pills long after her backache improves. A grandfather nurses one beer after another, blurring awareness of his persistent health problems. Firefighter roles attempt to manage inner conflicts like manager roles, but they take more drastic action. Dave's initial comments about his inappropriate sexual behavior with his stepdaughter suggest that he has little awareness that he tried to cover up insecure personality roles. One of his many fluctuating personality roles has him as a caring parent who cooks meals for his children—before he turns to a

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9. *Id.* at 46–52.

10. *Id.* at 48–50.

11. *Id.* at 47–48.

12. *Id.* at 50–52.

sexual predator role and schemes how he can find time alone with his stepdaughter.

In addition to the fluctuating personality roles, Schwartz describes each person as having a "self" as the seat of consciousness with an ability to provide a leadership role within one's personality.[13] He views a person experiencing such "self-leadership" as having "a pervasive sense of physiological and mental calm."[14] Body and mind are on a peaceful plane when a person can step back from the "do this, do that" commands of the personality roles. Such a peaceful sense of self-leadership makes it possible for a person to be in the present and aware not just of themselves but of others around them. In the words of psychologist Daniel Stern, "Present moments are unbelievably rich. Much happens, even though they last only a short time. . . . The feeling of presentness seems . . . to require a sense of self."[15] In the initial stage of psychotherapy, Dave does not exhibit a sufficient level of self-definition to allow him any sense of peacefulness. Instead, he maps his entire personality along the lines of his conflicted childhood memories.

Dave's personality map obscures rather than describes him, offering a visual depiction of the anonymity he has felt for much of his life. His stark representation attempts to manage and control everything about him in a neat diagram. He first draws a large circle and labels it "me" at the top. Dave suggests how much attention he has always longed for, but never thought he received when he was young. Next, he draws a series of circles inside the main circle, but none of the circles touch one another; he does not make belonging connections among circles. He even ranks his perfectly drawn spheres, although this was not part of the therapy exercise. His numbering system for the circles further shows the linear sketch of detachment in his personality.

Dave places "kids" in the central circle of his personality (number one), indicating his real love for them as well as his belief that his sexual relations with his stepdaughter are "number one" in importance to him. As he attempts to meet his unmet belonging needs by abusing his stepdaughter's trust, he simultaneously abuses his wife's trust by lying to her about his stepdaughter. Dave's thinking relates to the lies and secrets he experienced in childhood. He always wished

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13. *Id.* at 57–58.

14. RICHARD C. SCHWARTZ, INTRODUCTION TO THE INTERNAL FAMILY SYSTEMS MODEL 48 (2001).

15. DANIEL N. STERN, THE PRESENT MOMENT IN PSYCHOTHERAPY AND EVERYDAY LIFE 14–24 (2004).

for more closeness in his family, and initially he believed that he could create more closeness with his children. Dave marks his second circle as "wife," while the third stands for "work." A trio of smaller circles follows and is close to the top of his map: the fourth is labeled "recreation," the fifth is "study," and the sixth is "relationships." Finally, Dave makes five small circles of equal size near the bottom of his map. He includes in his personality the material goods (house, cars, decorating) that he believes will make up for past loss. Many sex offenders hide the feelings of low self-worth, anger, and depression that result from experiences of loss. These exiled aspects of their personality result in their hidden value of "me first."[16] Dave's health and future are the final circles.

III. UNMET BELONGING NEEDS IN A SEXUALLY ABUSED CHILD

Eight-year-old "Angela" comes in for child therapy after suffering sexual abuse. Angela's mother reports that her daughter is "different" and "not herself"; she has been "showing aggressive, angry behaviors" over the past year. Angela is "mean" to her younger sister; there have been some anxiety attacks. Research suggests that childhood anxiety disorders peak sharply in the aftermath of childhood sexual abuse.[17] Often, the abused child suffers from a variety of symptoms that have been labeled posttraumatic stress disorder (PTSD). Some of the common PTSD symptoms include flashbacks of the initial trauma, withdrawal from other people, numb feelings, outbursts of anger, panic attacks, sleep difficulties, guilt feelings, difficulty with concentration, and memory problems.[18]

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16. LAREN BAYS & ROBERT FREEMAN-LONGO, WHY DID I DO IT AGAIN? UNDERSTANDING MY CYCLE OF PROBLEM BEHAVIORS: A GUIDED WORKBOOK FOR CLIENTS IN TREATMENT 32–33 (1989).

17. Mark Chaffin et al., *Temporal Concordance of Anxiety Disorders and Child Sexual Abuse: Implications for Direct Versus Artifactual Effects of Sexual Abuse*, 34 J. CLINICAL CHILD & ADOLESCENT PSYCHOL. 210 (2005).

18. BARBARA BEAN & SHARI BENNETT, THE ME NOBODY KNOWS: A GUIDE FOR TEEN SURVIVORS 14 (1993). Bean and Bennett describe the two kinds of PSTD:

> *Acute PTSD* happens immediately after the trauma. Victims have reactions of fear, guilt, or anger. They can get the shakes or have nightmares or other problems they did not have before. With traumatic events like accidents or violent crimes, the person is able to understand that his or her reaction comes from the recent experience. Trauma such as incest may be partly or fully blocked from memory, but the reactions of disgust and self-hate still occur. The victims feel bad about themselves and don't know why.
>
> The second type of PTSD, *Chronic delayed-onset PTSD*, happens years after the traumatic experience. The survivor experiences fears, intense mood swings, guilt, and flashbacks but may not always remember or connect these to the old experience. Chronic PTSD occurs when the person had to bury feelings about the trauma while it

Angela has a number of these symptoms. She lashes out in frequent bursts of anger that frighten her mother, who does not know how to handle them. Problems in school are mounting, but Angela insists nothing is wrong. Then, a year after the abuse, Angela confides in her parents, who take her to a physician and file a police report. A number of recovery stages, thankfully, can help the abused individual put the abusive episodes in some kind of perspective. These stages include "deciding to heal, remembering the abuse, believing it happened, knowing it wasn't your fault, getting in touch with anger and grief, talking about the abuse, and finally moving on."[19]

In therapy, Angela relates details of the incident of sexual abuse that took place in her living room. Her parents are out; her aunt is upstairs with her sister. Angela's monotone voice halts slightly when she recalls how her favorite uncle "looked weird [and] had a weird look on his face" when he molested her. While she does not understand what this nonverbal communication means, she does recognize that something is wrong. When asked what was happening in her mind at the time, Angela looks puzzled. She thinks about this for a while and finally says, "I don't know." Often there may be few feelings expressed when an abused youth tells about inappropriate sex, but their reactions come out at unexpected times. Abuse not only violates the child's physical boundaries, it plays havoc with their thinking and their emotions.[20] The surprising revelation in so many child abuse cases is that one of the parents has suffered from a prior child sexual assault: Angela and her mother share the same shame.

A. *Personality Map of a Sexually Abused Child*

Angela loves using markers, so drawing a map of her personality delights her. Directions for personality mapping are geared to a child's developmental level, so some of the words can be changed to fit a young child's vocabulary:[21]

> Your self is like a secret pal, an invisible friend, always there for you; you know you are being your self when you feel calm and when you feel a place of deep peace inside of you; you find that you can

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was going on and never had the chance to talk about it and get help. PTSD can be hidden and emerge only when therapy has begun . . . .

   Both kinds of PTSD respond to treatment . . . .
Id. at 15.

   19. LAURA DAVIS, THE COURAGE TO HEAL WORKBOOK: FOR WOMEN AND MEN SURVIVORS OF CHILD SEXUAL ABUSE 3 (1990).

   20. BLUME, *supra* note 1, at 46–47.

   21. Janis Clark Johnston, *Parts Map: Making IFS Come Alive for Children of All Ages*, SELF TO SELF (Internal Family Sys. Ass'n), Summer-Fall 1998, at 1, 2.

> be curious and think about many things; you can draw your self in whatever way you want; whatever comes to you is O.K.; there are no right or wrong ways to draw your self.

Angela draws a red and blue cloud with a multicolored rainbow streaming out of the right side of the cloud. She smiles like one of the old masters as she paints her canvas, knowing she got it right.

I tell Angela, "Now draw one part of you, maybe one of the parts we already talked about." Angela draws two huge, black-lined eyes with large red pupils and eyelashes standing on end. She draws her sister and her angry role, and explains that her eyes are on fire: "She gets me crazy . . . she doesn't let me alone when I'm doing something . . . she's on my nerves! I want to *do* something to her . . . choke her." After talking about several times when her anger surfaced with her sister, Angela draws another important role that pops onto the computer screen of her mind as my directions prompt continued browsing. I tell Angela to continue:

> Draw a second part. You can put it anywhere on your paper. You can make it as big or small as it seems right now. You can use any colors you want . . . you do not feel anger all of the time . . . at another time you might be feeling something different.

Angela draws another cloud, this time choosing gray and placing the cloud under the angry fire eyes. Beneath the cloud are three rows of blue raindrops, which look like overweight teardrops. This rain cloud represents Angela's sad role: "[W]hen something's going to happen bad—my dog got out and he almost got hit by a car . . . when I'm alone . . . when my grandfather died—I still remember him . . . the last time he carried me was when I was crying and he calmed me down . . . ." Children can grieve deeply about the loss of belonging in their lives. They need opportunities to tell their stories about feeling sad, confused, and alone.

Three more personality roles are added on the backside of Angela's paper. Two blue clouds with a large yellow-orange sun, two flowers, and a tree indicate a happy role, often occurring for her when she plays sports. When asked if Angela's happy role ever shows up in school, she screeches loudly, "No!" Not surprisingly, the next role she draws features an underground, compartmentalized, and disavowed role drawn beneath the bright flowers, tree, and grass. It depicts a purple and pink ghost named "Scary": "[L]ike when I get a bad grade . . . today I got an F in reading. I forgot to study." Later, when asked what feelings she has about her abuse, Angela draws yet another subterranean level of the personality stage, below Scary, to create another boundary between personality roles. She next draws two figures, a male and a female. They are far away from each other at

opposite ends of the page. The male receives a stage name of "Weird," and the female supporting role is named "So Weird." The female's hands are large and club-like; both figures are purple, one of the colors used for her earlier drawing of the Scary role. In a wee voice, barely audible, Angela hesitantly points to the female and whispers, "This is me." Angela's personality map provides directions for our therapy sessions.

In the beginning of therapy, Angela most identifies with her So Weird role, the role that trauma plays after sexual abuse. After reviewing the maps Angela drew, her attitude towards her siblings and school seems understandable. Her critical belonging and ability needs can be viewed within a context of Angela's confusion, fear, and grief. Angela misses the innocence of her childhood, and she also misses a much loved and trusted grandparent.

Her worried parents want to know what they can do at home. I loaned them a child's storybook on sexual abuse[22] and encouraged them to talk openly with Angela about issues of loss, creating a dialogue on the formerly forbidden topic. I coach her parents on how to honor her grandfather's memory. They learn to empower Angela to say "no" when she senses trouble. More importantly, I tell her parents to reinforce, again and again, the idea that Angela does not bear the responsibility for the mistakes of the abuser. No matter what happened on the day of the abuse, her core *self* remains intact.

IV. The Brain Behind the Sexual Abuse Scene

How does a child's brain handle abuse? Neuroscientist Debra Niehoff studied brain imaging results of abuse victims and suggested that one reason some have difficulty coping with abuse is because the memory of it "has literally been seared into their brains."[23] While the memory of abuse stays with a child, the details may be difficult to retrieve. Psychologist Jefferson Singer outlines how different parts of the brain are involved in memory retrieval:

> [A]s people were sorting through their different possible memories, the left frontal areas of the brain, the areas associated with the most abstract kinds of thought, showed the most activity. Once participants settled on the memory, an area more toward the middle of the brain, the anterior temporal lobe, started to show more action. This area is associated with emotional responses and sequences of motor

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22. *See, e.g.*, Susan Hoke, My Body Is Mine, My Feelings Are Mine: A Storybook About Body Safety for Young Children with an Adult Guide Book (1995).

23. Debra Niehoff, The Biology of Violence: How Understanding the Brain, Behavior, and Environment Can Break the Vicious Circle of Aggression 112 (1999).

> activity. Finally, as participants focused on the memory and reex-
> perienced its events, the right hemisphere of the brain and portions
> toward the back of the brain—the posterior temporal and occipital
> areas—displayed activity. These areas are linked to both visual im-
> agery and emotion.[24]

Singer's report of a memory's trip through the brain suggests the pos-
sibility for widespread effects from a person's searing memories.

Child psychiatrist Dan Siegel has shown that even isolated instances
of abuse can alter synaptic processes in the brain.[25] Angela suffered
from one episode of sexual abuse, but like many abused children, she
started having difficulty with ordinary daily tasks. Luckily, she was
able to tell her loving parents about the incident and has made rapid
progress in psychotherapy. Unfortunately, other children tell no one.
Even when it appears as if they banish details of the sexual encounter
from conscious awareness, the seared traumatic memories of sexual
abuse linger: "The outcome for a victim who dissociates . . . is an
impairment in autobiographical memory for at least certain aspects of
the trauma . . . . Individuals who dissociate during and after a trau-
matic experience have been found to be the most vulnerable to devel-
oping posttraumatic stress disorder."[26]

At the time of abuse, there is a release of large amounts of stress
hormones. Psychiatrist Alice Miller describes how the increased re-
lease of stress hormones in a child's brain can limit neuron growth and
even kill cells: "[S]tudies of mistreated children have revealed that
the areas of the brain responsible for the 'management' of the emo-
tions are 20 to 30 percent smaller than in normal persons."[27] Siegel
and his colleague list several devastating effects found in brain imag-
ing studies of abused children: "smaller overall brain size, decreased
growth of the corpus callosum, which connects the right and left sides
of the brain, and impaired growth of . . . an inhibitory neurotransmit-
ter . . . that normally serve to calm the excitable emotional limbic
structures."[28]

Sexually abused children are challenged both physiologically and
psychologically.[29] The physiological damage from sexual abuse ranges

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24. JEFFERSON A. SINGER, MEMORIES THAT MATTER: HOW TO USE SELF-DEFINING MEMO-
RIES TO UNDERSTAND AND CHANGE YOUR LIFE 12 (2005).

25. DANIEL J. SIEGEL, THE DEVELOPING MIND: HOW RELATIONSHIPS AND THE BRAIN IN-
TERACT TO SHAPE WHO WE ARE 47 (1999).

26. *Id.* at 51.

27. ALICE MILLER, PATHS OF LIFE: SEVEN SCENARIOS 167 (1998).

28. DANIEL J. SIEGEL & MARY HARTZELL, PARENTING FROM THE INSIDE OUT: HOW A
DEEPER SELF-UNDERSTANDING CAN HELP YOU RAISE CHILDREN WHO THRIVE 117–18 (2003).

29. PETER A. LEVINE WITH ANN FREDERICK, WAKING THE TIGER: HEALING TRAUMA: THE
INNATE CAPACITY TO TRANSFORM OVERWHELMING EXPERIENCES 168 (1997).

from nightmares to a compromised neuroimmune system, which can result in an increased risk for physical illnesses in adulthood. Psychologically, sexual abuse frustrates the basic need for belongingness and interferes with the brain's processing of events: "[It] impairs the victim's ability to cortically consolidate the experience. . . . Nightmares, occurring during the dream stage of sleep . . . may reveal futile attempts of the brain to resolve and consolidate such blocked memory configurations."[30] This dream material has significant ramifications for emotional recovery, because "[m]emory may be 'reorganized' during dreaming via the simultaneous retrieval (right side) of information that is then encoded into new consolidated forms (left side) via the dream process."[31]

Normal memory processing is a complex phenomenon. Research shows that a person's memory of emotions does not exist outside of reconstructing and reliving past events.[32] Such reconstructions are ongoing creations and are crucial to the ways in which we view and define ourselves. One of the many challenges for abused children is their inability to understand cause and effect or abstract thinking before the age of ten. Psychologist Dan McAdams makes this point using preschool children as an example: "[They] collect the central images that someday will animate their personal myths. . . . Four-year-olds make sense of their experience in terms of the emotionally charged symbols . . . of home and school, mommy and daddy, God and the devil, Snow White and the Wicked Witch of the West."[33] But what happens to their personal myths when the "devil" and "witch" figures are members of their own family?

Brain imaging shows that abused children have "a significant asymmetry in hemispheric activity, with unresolved traumatic memories being associated with an excessively right-dominant activation pattern."[34] These brain differences led Siegel to hypothesize that the inability of child abuse victims to have normal "bilateral cooperation" of the left and right hemispheres may be at the core of their posttraumatic stress.[35] This delay in brain cooperation between hemispheres has been referred to as "delayed recall." Siegel suggests that years can pass "before a contextual change in an individual's life occurs and

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30. SIEGEL, *supra* note 25, at 52.

31. *Id.* at 53.

32. Daniel Kahneman et al., *A Survey Method for Characterizing Daily Life Experience: The Day Reconstruction Method*, 306 SCIENCE 1776 (2004).

33. DAN P. MCADAMS, THE STORIES WE LIVE BY: PERSONAL MYTHS AND THE MAKING OF THE SELF 35–36 (1993).

34. SIEGEL, *supra* note 25, at 54.

35. *Id.*

the recollection of a traumatic event can become available to conscious recollection."[36] These delays create difficulties for the legal enforcement of child abuse laws, as well as for therapy.

One of the ways we can intervene therapeutically with confused children who have been sexually abused is to explain to them that their brain is trying to make sense of what happened and that this can take a little time. As psychologist Marcia Stern points out, talking about the brain with family members reframes a child's situation without any blame. Her version of "brain-talk" simplifies the memory retrieval process outlined by Singer:

> [W]hen we get upset, worried, or angry, a special place in our brains "wakes up" . . . . This place is deep inside the brain and helps us if we need to fight to protect ourselves. When the "feeling brain" wakes up, it can capture the "thinking brain." . . . [S]o it can't use good thinking.[37]

Angela and her parents were very relieved to know that her symptoms were not unusual.

Many sexually abused children need reminders to know that they did nothing wrong and that confusion after abuse is one sign that their brains are trying to cope with what happened. Parents and teachers benefit from the brain-talk as well. Studies suggest that reactions to a child's sexual abuse by parents and caretakers can have a major impact on the child's overall mental health. A child who receives blame or lacks support is at a greater risk for ongoing problems.[38]

V. THE CULTURE BEHIND THE SEXUAL ABUSE SCENE

As perpetrators of sexual abuse continue to surface in our culture, we need to ask some hard questions. Has our culture taught us to value autonomy over positive attachment and belongingness? Why do we have so many adults who have so little regard for the needs of children? Psychologist Dana Crowley Jack suggests that the dominant ideologies of the United States are individualism and capitalism. She argues that capitalism fosters independent individuals who make decisions in their own self-interest:

> The intermeshing of ideas from political theory, philosophy, and cultural legends—of the lone cowboy, the hero, the warrior—has

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36. *Id.* at 55.

37. Marcia Stern, *Brain-Talk: Helping Kids with Brain-Based Problems Not Feel Like Aliens*, PSYCHOTHERAPY NETWORKER, Sept.–Oct. 2004, at 56, 56.

38. Mark Chaffin et al., *School Age Children's Coping with Sexual Abuse: Abuse Stresses and Symptoms Associated with Four Coping Strategies*, 21 CHILD ABUSE & NEGLECT 227 (1997); Ann N. Elliot & Connie N. Carnes, *Reactions of Nonoffending Parents to the Sexual Abuse of Their Child: A Review of the Literature*, 6 CHILD MALTREATMENT 314 (2001).

supported the psychological theory of the separate self to make it look "right."

. . . .

These ideas add up to an individual for whom relationships are primarily functional, who should not "need" relationships, but merely have them.[39]

Sociologist Robert Putnam observes how many Americans feel disconnected today: "Our national myths often exaggerate the role of individual heroes and understate the importance of collective effort."[40]

This rugged, individualistic stance can take people down roads that bypass the needs of children. When an adult's focus rests upon his or her own needs, desires, and self-interest, little attention remains for the healthy belonging needs of a child. When those adults are parents, the disregard of this fundamental need is staggering. Putnam finds similarities between "parallel play—two kids in a sandbox, each playing with a toy but not really interacting with each other"—and the new millennium's population at large: "In healthy development children outgrow parallel play. But the public spectacles of television leave us at that arrested stage of development . . . . Television . . . is represented mostly by programs that are empirically linked to civic disengagement."[41] Putnam argues that contemporary culture is characterized by weaker attachment bonds between people; he cites how many more channels of television we now have, and how everyone seems glued to a different one.[42]

People need a marriage between autonomy and attachment—a way to belong both to themselves and to others. In the past, psychology overemphasized the need for autonomy, calling for individuals to differentiate themselves from family members. As psychiatrist Jean Baker Miller points out, much of the American theory of psychological development stems from the notion that people need to separate themselves from others at nearly every developmental stage.[43] For example, after the first stage of psychiatrist Erik Erikson's eight stages of human development (trust versus mistrust), every other stage until the young adulthood stage (intimacy versus isolation) relies upon in-

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39. DANA CROWLEY JACK, SILENCING THE SELF: WOMEN AND DEPRESSION 8 (1991).

40. ROBERT D. PUTNAM, BOWLING ALONE: THE COLLAPSE AND REVIVAL OF AMERICAN COMMUNITY 24 (2000).

41. *Id.* at 244 (internal quotation marks omitted).

42. *Id.* at 245.

43. Jean Baker Miller, *The Development of Women's Sense of Self, in* JUDITH V. JORDAN ET AL., WOMEN'S GROWTH IN CONNECTION: WRITINGS FROM THE STONE CENTER 11, 12 (1991).

creased separation.[44] Freudian thought emphasizes the same indepen-
dence themes; psychoanalyst Peter Blos interprets adolescent
independence as relying on conflict to separate oneself from others
and become an adult.[45]

An alternate viewpoint advanced by psychologist Alexandra
Kaplan and psychiatrist Rona Klein casts conflict as only one of the
many important aspects along a girl's journey of connection with sig-
nificant others. Conflict does not have to separate people; sometimes
people move closer together in facing their differences.[46] Both ado-
lescents and adults want autonomy, but they also crave belongingness
and need to be recognized and valued by others. Perpetrators of sex-
ual abuse misconstrue their sense of autonomy and fail to achieve
their sense of belonging in a healthy framework. But an imbalance of
autonomy and belongingness is showing up in other relations as well.
One of the issues in failed marriages is that spouses take each other
for granted, move toward more autonomy, and no longer spend the
time or energy needed for belongingness. Since so many adults do not
remain coupled in intimate relationships, perhaps we need a new out-
look on our culture's attachment-autonomy scale.

Psychologists Dan McAdams and Jennifer Pals put it succinctly:
"Behavior is a product of the interaction between persons and envi-
ronments. One of the great challenges in personality and social psy-
chology has always been to find nontrivial ways to examine this
complex interaction."[47] The psychology of personality has not always
addressed wider cultural influences on personal development.[48] In
the current information age, both adults and children are increasingly
"hooked up" electronically to different equipment in different rooms

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44. Erik H. Erikson, Childhood and Society 247–74 (2d ed. 1963). Erikson's eight ages
of human development are the following: (1) basic trust vs. basic mistrust; (2) autonomy vs.
shame and doubt; (3) initiative vs. guilt; (4) industry vs. inferiority; (5) identity vs. role confusion;
(6) intimacy vs. isolation; (7) generativity vs. stagnation; and (8) ego integrity vs. despair. *Id.*

45. Peter Blos, *Modifications in the Traditional Psychoanalytic Theory of Female Adolescent
Development, in* VIII Adolescent Psychiatry: Developmental and Clinical Studies 8,
21 (Sherman C. Feinstein et al. eds., 1980) ("[P]ersonality growth and psychological differentia-
tion come about only through the elaboration of conflict and its transformation into adult per-
sonality structures . . . .").

46. Alexandra G. Kaplan & Rona Klein, *The Relational Self in Late Adolescent Women, in*
Judith V. Jordan et al., Women's Growth in Connection, *supra* note 43, at 122, 125
("[W]e see conflict as one way of elaborating the continuity of connection to significant
others. . . . [W]e see conflict as one mode of intense and abiding engagement, not as the leading
edge of separation and disconnection.").

47. Dan P. McAdams & Jennifer L. Pals, *A New Big Five: Fundamental Principles for an
Integrative Science of Personality*, 61 Am. Psychologist 204, 211 (2006).

48. Richard A. Shweder & Maria A. Sullivan, *Cultural Psychology: Who Needs It?*, 44 Ann.
Rev. Psychol. 497 (1993).

of the home. What are the cultural ramifications of this autonomous existence? How can families share the need for belongingness when they spend so much time with anonymous information sources? The effects of the Information Age on family interaction and personality development must be examined.

VI. CONCLUSION

Psychotherapists can help abused children rediscover that their self exists outside abuse. Siegel and his colleague point out that while we can help people recover from abuse through appropriate relating, we do not know at this time "whether brain damage is repaired or whether alternative circuits are developed in the healing process."[49] While neurology, psychiatry, and psychology find answers to these questions, we need to expand intervention efforts to help all children who are sexually abused. While this Article focuses attention on one basic need—attachment or belonging in one's family—there are many issues to address in the treatment of sexually abused children.

Similarly, we need to expand therapy programs to help sexual abuse perpetrators. They too need to rediscover that they have a self-definition that addresses not just their needs, but the needs of others. Most people struggle with unmet needs from childhood. But adulthood requires us to put our past into some meaningful perspective, learn lessons from our familial or cultural struggles, and make a concerted effort to raise the next generation to the best of our ability. Perpetrators of sexual abuse may have more than their share of unmet needs and may have been mistreated within our culture, but this sad fact does not give them the right to take what they think they need from a child.

There are unanswered questions regarding the personalities of perpetrators. Since more sexual perpetrators are male, we might question whether men are more at risk for being unable to address their needs to have positive and healthy attachments with other people. Our culture may focus too heavily on the benefits of autonomy for men and not enough on their needs for belongingness. If this is true, what kinds of efforts can enhance male belongingness in our culture? A second line of questions addresses the personality makeup of perpetrators. Perpetrators never seem to remember exactly what they did to a child. Do some of them disassociate and exile these memories from conscious awareness? Do some of them lie to cover up embarrassing or incriminating facts after the abuse? Whatever the roles be-

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49. *See* SIEGEL & HARTZELL, *supra* note 28, at 118.

hind their memory lapses, we need to teach perpetrators about their personality roles and how they possess conflicting personality roles that want them to perform different actions. This requires us to acknowledge our own feelings about the topic of sexual abuse, so that we are able to talk with others about it. Some advocate that we bring the topic of sexual abuse into all research on child clients: "[C]linical research on virtually all disorders would benefit the participant population if consideration of abuse were included in the study."[50]

It is, of course, not enough to enhance our intervention techniques with sexual perpetrators. We need to focus on prevention techniques as well. We need to teach families how to care for children in healthy ways. All family members have to meet certain basic needs, but adults cannot use their greater autonomy to meet their own needs at the expense of others. When do we take the time in our curriculum to teach people about their personalities? Where in our crowded schools do we address the basic needs of children and caretaking issues? One of our most basic needs—the need for belongingness—is too often taken for granted. Yet all individuals want to belong, both in their families and in their communities. All belonging relationships have ties that bind our brains in powerful ways and affect how we treat the next generations.

> *What we have is because someone stood up before us. What our Seventh Generation will have will be a consequence of our actions today.*
> —Anishinaabe Native American Winona LaDuke

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50. Kathryn A. Becker-Blease & Jennifer J. Freyd, *Research Participants Telling the Truth About Their Lives: The Ethics of Asking and Not Asking About Abuse*, 61 AM. PSYCHOLOGIST 218, 225 (2006).