

INTRODUCTION

- Impacts of child sexual abuse (SA) are well-known¹⁻⁵; little exploration of factors related to negative impacts
- Research results of victim distress, based on victim-perpetrator relationship (V-PR) (i.e., intrafamilial/IF; extrafamilial/EF) are mixed:
 - IF are more distressed than EF victims⁵⁻⁷
 - EF victims have more distressed than IF⁸
 - no difference in distress between IF & EF victims⁹
- Inconsistencies may related to IF V-PR category:
 - no empirical investigation of distress among victims of caregivers, siblings, and other family members
- Female perpetrators (FP) are underrepresented in the SA literature, despite being 15-20% of all perpetrators¹¹
- FP studies focus on their characteristics versus male perpetrators (MP), rather than victim outcomes
- Minimal evidence (qualitative in nature) suggests:
 - similarities in harm from SA by FP and MP¹²
 - laypeople, police officers, social workers, & mental health professionals believe FP SA is less harmful¹³
 - biases may affect abuse disclosure, case substantiation, and legal outcomes for victims of FPs

PURPOSE

- Explore whether internalizing symptoms differ based on perpetrators' gender and relationship to the victim
- Explore internalizing symptoms reported by the victim and their guardians

METHODOLOGY

- Procedure:** Secondary data collected for pre-treatment client assessment; community-based specialized assessment and treatment agency
- Measures:** Raw scale scores assessing symptoms
 - Anxiety, Depression, Aggression, & Delinquency
 - Guardian report: Child Behavior Checklist (CBCL, $n=150$)
 - Child/adolescent report: Youth Self Report (YSR, $n = 98$)
- Participants:**
 - Guardians (84% parents; 16% other)
 - Child/adolescent: 163 victims of SA, ages 5-18 ($M = 12$); 31% male, 67% female, 2% other
 - Perpetrator Characteristics
 - Relationship: Sibling (48%), Parent (21%), Other family member (15%), Extrafamilial (17%)
 - Gender: Male (153; 94%) only; Female only (10; 6%)

RESULTS

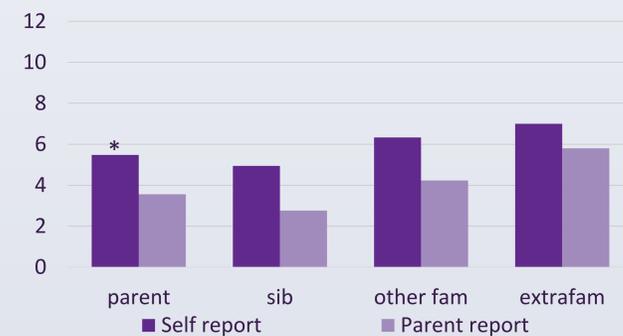
1) Do symptoms differ based on V-P relationship?

Analyses: MANCOVA (victim age covariate): mean group differences in symptomology (post-hoc t-tests)

Client (victim) report

No differences in anxiety or depression symptoms based on the V-P relationship ($p = 0.92$; partial $\eta^2 = .02$)

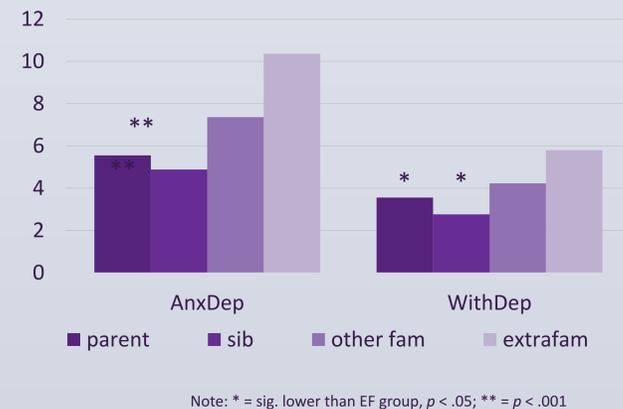
Figure 1. Victim self-reported anxiety and depression symptoms by victim-perpetrator relationship



Guardian Report

Significant differences in the functioning based on V-P relationship ($p = 0.02$, partial $\eta^2 = .10$)

Figure 2. Guardian report symptoms by perpetrator relationship



- Figure 2 shows significantly higher Anxiety & Depression scores for victims of EF perpetrators compared to victims of parents or victims of siblings.
- There were no differences among the IF categories

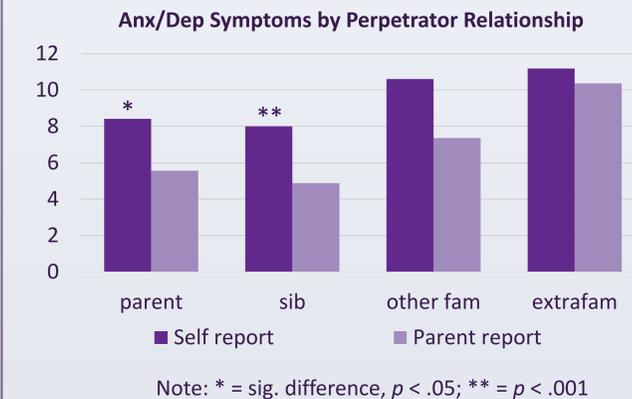
Results: Symptoms & V-P relationship continued

Client (victim) vs. Guardian Reports

Analyses: One sample t-tests comparing differences between victims' and guardians' mean scores

Differences found between symptoms reported by children & guardians when V-P was a parent or sibling.

Figure 3. Comparison of victim & guardian reports



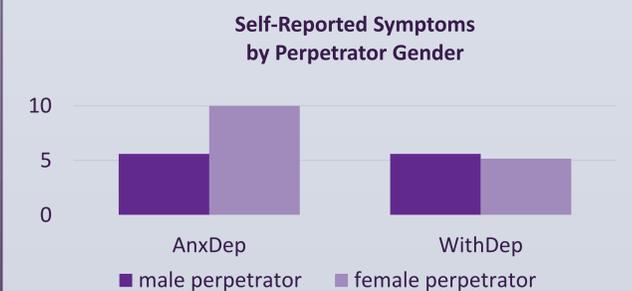
- Youths reported higher Anxiety & Depression than their guardians when the perpetrator was a parent ($p=.05$) or sibling ($p = .01$)
- Youth reported higher Anxiety & Depression when they were the victim of a parent ($p = .04$)

2) Do internalizing symptoms differ based on the gender of the perpetrator?

Since few FPs ($n = 10$), 9 victims of MPs were matched based on victim' age and V-P

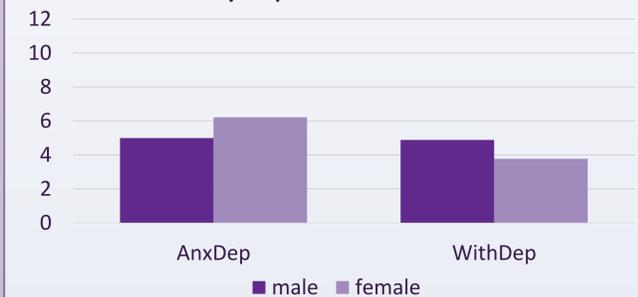
Youth and guardian symptom reports are compared below

Figure 4. Comparison of victim & guardian reported symptoms



- No significant perpetrators' gender differences in self- ($p = 0.40$, partial $\eta^2 = .60$) or guardian- ($p = .28$, partial $\eta^2 = .32$) reported internalizing symptoms
- The *notable effect sizes* suggest a gender effect; therefore, further investigation with a larger sample is warranted

Parent-Reported Symptoms by Perpetrator Gender



CONCLUSIONS

- Regardless of who in the family abused or if abuse was extrafamilial, youth reported similar levels of internalizing
 - Guardians reported higher child anxiety and depression if extrafamilial perpetrators, compared to victims of family members who typically reside within the home (e.g., parent, sibling)
 - Discrepancy between self- and parent- reported internalizing symptoms
 - youths reported higher Anxiety & Depression than their parents when victimized by a parent or sibling,
 - Higher Anxiety & Depression than their parents when victimized by a parent
 - Parents may underreport victim's internalizing symptoms when perpetrated by a family member living in the house,
 - perhaps to alleviate feelings of guilt
 - due to the complications of being the partner or parent of the perpetrator
 - coping with custody/access issues
 - Youths may hide internalizing symptoms from their parent when the abuse occurs within the household,
 - potentially due to trust or fearing consequences for the familial perpetrator
 - Finding highlights the importance of collecting both self- and parent-reported measures in cases of IF SA
 - Exploratory results supported qualitative findings that victims of FPs report equal levels of distress to victims of MPs
 - SA by females or males causes similar negative
 - counters biases that SA by males is more impactful
 - Data collection continues
 - Validate findings and investigate victim gender
- Note: The project dataset did include externalizing symptoms (rule breaking and aggression); results available upon request.