



The RESOURCE

Newsletter of the National Sexual Violence Resource Center

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Recollections of a Hurricane

LaFASA Director Recounts Katrina's Devastation

By
Judy Benitez

In the following piece, the Executive Director of the Louisiana Foundation Against Sexual Assault (LaFASA) presents a revealing and moving glimpse into the devastation that touched so many lives in the Gulf Coast region as a result of Hurricane Katrina in August 2005. With journal-type entries, Judy Benitez tells us about the impact this disaster had on her life and her family and friends, and about her deep concerns, as a coalition director, regarding the sexual victimization of residents and evacuees and for the programs in storm-ravaged areas.

Saturday, Aug. 27, Dad's birthday:
My friend and co-worker Misty and her new husband, Doug, planned their wedding reception for tonight at her parents' house in Mandeville, since so many people couldn't get to the wedding earlier in month. I took my kids along, and Martha from the office went too. But our co-worker, Vita, stayed home, expecting her parents to arrive soon, since they were evacuating from their home on the west bank of the Mississippi.

The party was fun, but much of the conversation focused on the coming storm. Most people had the attitude, "We live far enough away from the coast. We stayed through Andrew; we'll stay through this." Remembering how miserable it was after Andrew - five days without electricity and air-conditioning in south Louisiana in August had tempers flaring and putrid meat rotting in the freezer - I found little comfort in that thought. But I did not plan on leaving either.



Boat rests on roof of Louisiana home after Hurricane Katrina, August 2005

It took us almost three hours to make the 45 minute trip home. We avoided the interstate, knowing it would be jammed and slow-moving; the two-lane state highway we took was not much better. Several times the kids and I talked about how glad we were that we don't live in New Orleans.

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Consent and the Court of Public Opinion

By
Anne Munch, JD and Patti Powers, JD

The surge of media attention surrounding high profile sexual assault cases in the last few years has brought the question of what the crime of sexual assault really means to the forefront of our minds and into our conversations. Attitudes and opinions held by the public have fueled a lively

debate on this topic. These ideas and beliefs held by the public reflect what the court of public opinion believes about this crime. Many of the jurors who ultimately decide these cases in a courtroom spend time debating the issue in the court of public opinion first.

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The following article by an Inupiat woman from a very remote region of Alaska offers a rare and important view of Child Sexual Assault (CSA). More than a survivor story, this remarkable piece represents her attempt to understand CSA as a social problem, and her effort to help others. It is especially remarkable because there are virtually no sexual assault services in this region. She approaches the personally painful subject with insight and an obvious need to learn more and to share information; she encourages openness and therapy for others. Throughout, her voice resonates with a simple reality that goes beyond the value of any statistics.

Although Alaska has the highest rate of sexual assault of all states, we have relatively few first-hand accounts of its prevalence or impact; clearly this primary source document is a rare, unique resource.

Child Sexual Abuse in the Bering Straits Region

By
Karlene Sagoonik

I am a survivor of child sexual abuse and much of my life has been plagued with emotional, spiritual, and physical consequences of the abuse, and this is part of my reason for writing on the subject. I live in a small town (population: approx. 240) in the Bering Straits region of Alaska, and I know that there are others that have suffered in many of the same ways that I have. So I decided to write this paper and interview some people of different generations in my area to help me understand how they deal with child sexual assault (CSA).

Unlike most of the people I interviewed for this paper, I have received counseling and have gone through different types of therapy at different intervals in my lifetime. As a result, I am able to talk about my experiences more openly. However, I have problems that may never go away, even though counseling has helped me understand and deal with the issue. In writing this paper, I suffered memories, which made me physically ill, angry, frustrated, very lonely, and my mental and physical self acted as though the assault had just happened, even though it was a long time ago.

In spite of these things, I feel that I need to reach out to people who are weary of keeping their secrets. I need to let them know that this kind of abuse happened to many others and it is okay to go to people who are willing and able to help. It is important for people to recover from CSA and therapy is a very important part of the healing process. I recommend that anyone who is a victim of CSA and who has not received help, get help through some type of counseling.

It is difficult to determine how prevalent child sexual abuse is in the Bering Straits Region because statistics are inadequate and present a different viewpoint than the one you find when talking with actual victims and

others in a community in the Bering Straits. I want to show the reader different viewpoints from statistics; discuss some actual victims of child sexual abuse; and consider what can aid in their restoration.

Reports of how prevalent people think child sexual abuse is in the Bering Straits Region differ. According to a census of the population of the Bering Straits Region, 40% of 9,176 people are between the ages of 0-19 (3,670), and statistics from Kawerak's Child Advocacy Center in Nome say 51 cases of child sexual abuse were reported in the region for the entire year of 2003. That means that approximately one child per 180 (of total population of region) or one in 72 (of youth population in the region) was sexually victimized. But these reported cases are far fewer than the incidents I heard about when I asked people from my region.

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Child Sexual Abuse in the Bering Straits Region

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Two researchers, Burgess and Holmstrom, tell us what signs to look for in a victim of sexual abuse and what should be done to aid the healing process.* They say that the healing process depends on how sexual abuse is approached and defined in our immediate environments and communities. So I looked to my environment and communities here in the Bearing Straits Region.

As I interviewed people from my area and I found that attitudes towards CSA have changed over time. ** It seemed that people in different age groups hold different ideas about CSA. To show how these attitudes have changed, I interviewed people from different generations. I talked with some people who were at least thirty or over in a small town and a neighboring village in the Bering Straits Region. Nearly all the women and one in three of the men I interviewed had been sexually abused before they reached adolescence.

A man, in his thirties, said to me, "My cousin and I were little kids and we started playing this game of 'let me see your thing, and I'll show you mine.'" He said it turned into having sex with each other. He said he was too little to know how to do it, but his cousin no older than him knew how and he felt it was CSA. He also said that all his buddies were sexually abused and that one of them committed suicide.

A woman I have known my entire life has told me more than once that she was sexually abused by her brothers, cousins, and an uncle. She has not gotten any kind of help. Instead she just keeps doing drugs and drinking. To this day, I don't think her parents know about the abuse.

I also know of another older woman from the same family who used to babysit people's kids. She was sexually abused by one of her brothers. Years later, she beat him up when they were both in a drunken stupor, and there are stories that she sexually abused some young men when they were adolescent boys. People who are abused sometimes wind up being abusers themselves. I know that she has never gotten any kind of help either. She just keeps drinking and doing drugs.

As I talked with more and more people, I became more and more aware that the statistics of sexual abuse of children do not reflect all the occurrences. According to three different people in their forties they either knew of someone who was sexually abused who did not report it or receive any kind of

help, or they were victims of sexual abuse themselves. One woman from a neighboring town said she knows her cousin was sexually abused as a child, and she has grown into a bitter, miserable person who seems to have no sort of relief in sight from the experience. This woman said, "[CSA] affects people all their life and talking with a friend or a professional would help."

Someone in her forties told me some time ago that she was sexually abused over and over during her adolescent years, but she never tried to get any kind of help. Instead, she has taken to drinking alcohol for years. Another woman in her forties was also abused when she was a child and now she abuses crack cocaine, alcohol and other drugs. Someone once said she traded one of her daughters for sex so she could get a piece of crack cocaine. Her daughters are doing drugs, drinking, and each one has had at least one baby before she turned 18. It was her sister who told me that she had confided in her. Some of these instances were hearsay or confidential conversations, but they do indicate how many people there have had some sort of damaging sexual experience before they reached adulthood.

As I interviewed the older generations, the subject of CSA was either unknown or they had been forbidden to speak of it back when they were young. I asked a man in his fifties if sexual abuse was a problem when he was a kid. He said he did not know if there were problems with sexual abuse, but that he did not start hearing about sexual abuse until he was in his twenties. A woman in the same age group said either there was no problem or that it was never talked about. When I asked her to clarify herself, she said there could have been a problem in the community, but she did not know because it was never talked about.

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The silence on the subject of CSA may be a result of cultural admonition on the older generations not to discuss sexual abuse.

When talking with a sixty year old woman, she said she was molested when she was 12 years old and tried to tell her aunt, but her aunt told her, "Don't talk like that." After that, she said it was years before she told anyone, because she got the idea that people did not talk about stuff like that.

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Child Sexual Abuse in the Bering Straits Region

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Some time ago, I spoke with a woman who is now in her seventies, and the closest she came to admitting that she was a victim of sexual abuse was that she said to me, she knew how I felt. According to her, people used to get drunk a long time ago and things happened that they could not talk about. It would appear that a lot of things people could not talk about were associated to abuse.

Reported or not, child sexual abuse is a problem that needs to be addressed and dealt with in a positive way. One of the first steps in a community is just to get more information about CSA and to treat it as a severe injury, with symptoms and consequences, and methods of treatment, and not as a subject for shame.

Burgess and Holmstrom point out some signs to look for in child sexual abuse victims, and they describe two phases: the acute (immediate) phase and the reorganizational phase. *

Acute Phase

"The acute phase [can] last from a few days to several weeks. [It's when a] victim's life has been ... disrupted, and going through disorientation and shock".* Victims go through physical and emotional symptoms common to someone who has experienced a terrible tragedy. Physical reactions may include muscle soreness and bruises, feeling tired and problems with sleeping, eating too much or not enough, and feeling jumpy. As a CSA victim, I have gone through most of the physical reactions and many of the emotional reactions as well.

Emotional reactions in this phase can be of two different kinds, expressed and controlled. The expressed reactions are visible and include laughing or crying, making jokes or becoming stiff or shaking. The controlled reactions are invisible to others. The victim appears not to feel anything but is actually depressed, angry, feeling shameful, or having thoughts of revenge. I remember feeling disgust, shame, or guilt while appearing calm. Other victims have mentioned masking feelings too: two of the women I spoke with, the one who was abused by her brothers and uncle, and the forty something woman who

said she was abused repeatedly as an adolescent mentioned that they felt this way. Victims may also alternate between expressed and controlled responses, and these responses may surprise or catch the victim off guard. Emotions may go from one extreme to another.

Reorganizational Phase

In the reorganizational phase, the victim comes to terms with the sexual abuse experience. This phase can last from "a couple of months to years." * How long this phase lasts depends on how old the person is, their character, and the

kind of help the person receives. During this phase, the victim makes adjustments in his or her life, moves to a new location or changes their phone number, makes new friends, changes schools or jobs, fears being alone, or fears things associated with the place

or circumstances of the sexual assault. After that, victims reorganize and prioritize their lives, making choices, which Burgess and Holmstrom say is healthy. According to them, "sexual assault is the ultimate loss of personal control." Knowing that a CSA problem exists and what victim suffers from are two steps toward acquiring help for the CSA victim.

Knowing how the healing process for victims of CSA begins is also helpful towards restoration. I interviewed a child sexual abuse counselor and she said, "There are different kinds of therapy." They include, play therapy, art therapy, narrative therapy and group therapy.

The Bering Straits region does not lend itself to group therapy because a few of the Village Based Counselors (VBC) (*these are counselors usually associated with clinics*

in a given village) have not had enough training yet to get one started. In the Nome area, no clinicians are available to get one started because they are travelling around the region and area and are short-staffed. One thing I brought up with the

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counselor was the fact that, in our village, the VBC tried to get different groups started, but the circle of trust was broken. The circle of trust is the most important part of group therapy, and they are afraid to have it happen to them. There is just way too much gossip in the village.

Another kind of therapy involves the parents and a moderator in the counseling of the CSA victim. The kind of therapy used depends on how long the abuse has been going on and what is best suited to the child's needs. Therapy can take anywhere from six weeks to six months, but the child can carry the trauma throughout their lives. What a clinician does through therapy is to teach the victims coping skills to help them deal with suicidal thoughts and depression because self-esteem is always an issue. I am so glad to have been taught to think positively through therapy, reading, and talking to people who used to be negative thinkers. All of these things make a big difference.

The clinician from Norton Sound Health Corporation says there are workbooks that specifically target sexual abuse. These workbooks include topics on anger management, coping skills, self-esteem, anxiety issues, and identifying feelings. They teach CSA victims to get in touch with their feelings and they discuss how their bodies respond to CSA. Victims have a tendency to dissociate themselves from their bodies to what is happening around them. When the sexual abuse has happened frequently, this dissociation is a common reaction.

Therapy for dreams and nightmares treat a victim's tendency to hold secrets and not communicate with people, and there is also therapy for kids who have to go to court that helps them prepare to face the perpetrator of the CSA. A child may or may not get the help she or he needs and sometimes, whether a child gets help or not depends on how child sexual abuse is viewed by the community.

My interviews suggested to me that how the community sees CSA depends on the viewpoint of different generations in the community. For example, someone in their thirties might be more willing to talk about sexual issues or CSA than an elderly person. People in their forties were told not to talk about such things. The lack of communication about CSA seems to have lead to destructive circle after destructive circle.

According to the thirty-something people, CSA was something that happened to them and they were able to tell someone about it, but they could never see themselves asking

for therapy because there is so much shame and fear of being judged and gossiped about. They talked about the abuse, but it was mostly buddies telling secrets to buddies.

According to the people in their forties, CSA was something they absolutely could not mention when they were young. If they said they were sexually abused or molested, they were blamed by family and community members. It was their fault. For them, CSA was something they told someone about many years later. They never got any help at all, and the wounds of the sexual abuse and all the problems associated with it have just festered. These are the people who have spent much of their lives abusing drugs or alcohol because they were not allowed to talk about the pain they suffered.

People in their fifties either had no idea CSA occurred, or it was forbidden to ever mention child sexual abuse. The same goes for the people in their sixties and seventies.

Many of these people are unable to get help because of the shame, blame, guilt, and misconceptions that surround getting help for a problem that is so much more widespread than people are willing to admit.

It is very hard to admit to someone that you have been sexually abused, but it is the best thing a person can do for one's self. Anyone who has been victimized by CSA should get help through some type of counseling because it is important for the healing process. Norman Vincent Peale once said, "The secret of life isn't what happens to you but what you do with what happens to you."



Notes:

* Ann Wobert Burgess D.N.SC. and Lynda Lytle Holmstrom, PhD. "Rape Trauma Syndrome" *American Journal of Psychiatry* 131:9, September 1974.

** Confidential interviews of various residents in the Bearing Straits region conducted by Karlene Sagoonick, March and April 2004.