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Research Article

Lifetime prevalence and incidence of sexual victimization of adolescents in institutional care

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ABSTRACT

The frequency of sexual victimization in high-risk populations like adolescents in institutional care has hardly been studied. In this study, we report lifetime prevalence and incidence from a nationwide German sample including 322 adolescents (mean age 16.69 years, 43% female) from 20 residential care facilities and 12 boarding schools. Lifetime prevalence for severe sexual victimization (in and outside of institution) was 46.7% for girls and 8.0% for boys. Moreover, 5% of all adolescents experienced severe sexual victimization for the first time after they were admitted to the current institution (mean duration of stay in the current institution 3.08 years). Offenders were mostly adolescents of the same age whereas staff members played a minor role as perpetrators. We conclude that the high rate of sexual victimization among adolescents in institutional care should be considered during decision-making processes concerning out-of-home placement and during a stay in residential care.

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Children and adolescents in institutional care show high prevalence of sexual victimization. However, so far there are no studies from Germany reporting on the prevalence. Aim of this study is to assess for the first time prevalence and incidence of sexual victimization of adolescents in institutional care in Germany.

Numerous international studies have reported on the risk of sexual victimization during childhood and adolescence. At least two Metaanlyses suggest that during childhood and adolescence, on average 18% to 19.2% of the girls and 7.4% to 7.6% of the boys become victims of abuse (Pereda, Guilera, Forns, & Gómez-Benito, 2009; Stoltenborgh, van Ijzendoorn, Euser, & Bakermans-Kranenburg, 2011). A German study on the prevalence of sexual abuse in children younger than 16 by a person at least 5 years older, which included 11,428 people between the ages of 15 and 40 (51.9% female), found a prevalence of sexual violence with physical contact of 1.5% for men and 7.4% for women. In the study, 2.0% of the affected men and 3.7% of the affected women indicated that the abuse occurred in a residential institution (Stadler, Bieneck, & Pfeiffer, 2012). However, children brought up in an institution were underrepresented in this study. In another nationwide German sample, 12.6% of the participants reported having experienced sexual violence of some kind as a child or adolescent, while 1.9% indicated having experienced severe sexual assault (Häuser, Schmutzer, Brähler, & Glaesmer, 2011). In a survey of 9th graders in Switzerland 14.6% of the adolescents reported sexual victimization with physical contact in their life (UBS Optimus Foundation, 2012).

Only few studies have examined the prevalence of sexual victimization among children and adolescents living in residential care (Timmerman & Schreuder, 2014). Based on a small study with a clinical pediatric sample in England, Hobbs and

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colleagues (Hobbs, Hobbs, & Wynne, 1999) reported a six times higher risk for sexual abuse of children in residential care in and outside the residential care facility compared to the general population. In a Norwegian study that surveyed mental health issues in adolescents in youth welfare institutions (N=335, 12-23 years old), 40.8% of the girls and 6.5% of the boys reported severe sexual assault in their lives prior to the admission at the residential care facility (Greger, Myhre, Lydersen, & Jozefiak, 2015). In a Dutch study, the frequency of sexual abuse was investigated by asking staff and adolescents in youth welfare institutions and foster families. The staff estimated the 12 month prevalence of sexual abuse with physical contact at 0.31%, while the adolescents (N = 329) indicated around 18.8%. For sexual violence with penetration, the 12 month prevalence estimated by the adolescents was 8.6%. Adolescents in residential care facilities were affected more frequently than those in foster care. Offenders in the residential care facilities were predominantly (in 57% of the cases) adolescents who lived also in the institutions, though sexual assaults by staff members (13% of the cases) and adolescents (27% of the cases) and adults (33% of the cases) outside the facility were reported as well (Euser, Alink, Tharner, van IJzendoorn, & Bakermans-Kranenburg, 2013). One of this first studies in the United States dealing with sexual victimization in institutions assessed official cases of abuse in child and youth care institutions. The authors described an average of 39 reports of abuse for every 1000 children and concluded that only 20%-25% of cases were reported to authorities (Rindfleisch & Rabb, 1984). A study of sexual victimization in the last 12 month of adolescents in juvenile correctional facilities described an estimated prevalence of 12.1% of non-consensual sexual acts and contacts. Sexual aggressive acts by staff members (10.3%) were reported more often than sexual aggressive acts by other adolescents (2.6%). However, girls reported more often sexual aggressive acts by another youth (9.1%) than by facility staff (4.7%) while males reported more frequent sexual assaults by facility staff (10.8%) than by another youth (2.0%) (U.S. Department of Justice, 2010). An older study from the USA that investigated reported cases of neglect and abuse of children and adolescents in group homes and foster families showed that in addition to the staff, other residents were responsible for sexual assaults. Furthermore, it showed that the assaults were predominately heterosexual (59%), this also includes girls assaulting boys, and that severe assaults were frequent (Rosenthal, Motz, Edmonson, & Groze,

In a survey from Germany not only residential care facilities, but also boarding schools were examined (Deutsches Jugendinstitut, 2011). In this study, around 39% of the 300 surveyed residential care facilities reported suspected cases of sexual violence with physical contact between children and adolescents in the previous three years, 10% reported suspected cases of someone working at the institution, 49% were assaults outside the institution. For the first time, approximately 100 boarding schools were also included in this investigation. Here, 28% of the institutions reported similar suspected cases between children and adolescents, 3% of suspected cases by someone working at the institutions, and 34% outside the institution.

Residential care facilities in Germany are institutions, where according to the German Social Code (SGB VIII) children and adolescents permanently or temporarily live, when they cannot stay with their parents due to e.g. abuse and/or neglect in the families, behavioral problems, or poor parenting skills. Institutional settings (residential care) are still the preferred model for child and youth welfare in Germany. In 2013, 69,203 children and adolescents were living in residential care, compared to 67,812 children and youth living in full-time foster care families (Statistisches Bundesamt, 2016).

Boarding schools in Germany represent a heterogeneous group of institutions. There is no official data about how many children and adolescents live in boarding schools in Germany. The two biggest umbrella organizations (Verband Katholischer Internate und Tagesinternate, V.K.I.T; Verband Deutscher Privatschulverbände e.V., VDP) represent about 290 boarding schools (personal communication). Some boarding schools focus on special skills of the students like sport or music education, other boarding schools provide school classes and offer housing for students with behavioral problems or learning disabilities as well as for upper class children and adolescents. Many children and adolescents in boarding schools are even placed there according to the German Social Code (SGB VIII) as a substitute for a residential care facility.

Children and adolescents who grow up in institutional care are considered especially vulnerable to sexual violence. One possible reason for this is that especially adolescents in residential care facilities have previously experienced trauma such as sexual violence or neglect that lead to admission to the institution, which increases the risk for revictimization (Finkelhor, Ormrod, & Turner, 2007; Humphrey & White, 2000). On the other hand, it has also been suggested that the structural conditions within the care settings may play a facilitatory role. The high number of children and adolescents with mental health issues or sexually aggressive behavior (Baker, Schneiderman, & Parker, 2001; Schmid, Goldbeck, Nuetzel, & Fegert, 2008), unreflected power structures between staff, children and adolescents, a lack of sexual-pedagogical concepts as well as a lack of concepts for dealing with closeness and distance between children, adolescents, and caregivers may lead to an increased risk for sexual victimization (Bundschuh, 2010; Timmerman & Schreuder, 2014). Moreover, perpetrators may seek working places in institutions to gain access to potential victims (Turner et al., 2014). In order to develop protective measures in institutions, however, it is crucial to know not only the prevalence of sexual victimization, but also circumstances of the offenses in order to assess risk factors. For example, peer victimization has long been neglected as a cause of sexual victimization (Timmerman & Schreuder, 2014).

For this reason, it is even more surprising that to date very few studies exist that have systematically investigated the prevalence and circumstances surrounding violent sexual experiences of juveniles in institutional care. Moreover, some institutions like boarding schools have not been taken into account so far though they share contextual risk factors with e.g. residential care facilities. However, studying sexual victimization in an institutional context is associated with a many difficulties. First, the facility must be willing to participate. Fear about unwelcome results like a high prevalence or burden for children and adolescents and facility staff may lead to unwillingness to participate. Second, the type of the assessment of the

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