

betrayal may result in an inability to form long-term trusting relationships. The victim may lose her ability to trust her own perceptions of potentially dangerous situations, which may prevent her from protecting herself from future exploitation. Finally, she may come to expect abuse and exploitation from all intimate relationships.

Many victims of childhood sexual abuse bury the pain and memory of their experiences. Intense feelings may surface unexpectedly, causing the victim to feel helpless and out of control. Sensitively handled therapy to deal with the effects of molestation can help the victim sort out her feelings and understanding where they are coming from. In addition to individual therapy, the Counseling Center tries to get the female AMAC's into therapy groups as soon as

possible. Although initially fearful of disclosure to a group, women who attend them report immense relief at being able to talk with others who have been molested.

After years of isolation and secrecy, they no longer feel so alone.

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Adults Molested As Children

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Her eyes dart nervously around the room, scanning the titles of a row of books about women on the shelf. Her voice is hesitant as she clasps her hand tightly for support and begins to list the symptoms that brought her to the counseling appointment. She seems preoccupied as she describes her poor body image, the persistent history of difficult relations with “guys”... This is her third try with a therapist and she is feeling increasingly hopeless about ever being able to talk openly about the source of her problems.

Three sessions later, she reveals that she was molested by an uncle when she was 11 years old. This has been festering for years and she hasn't been able to express it openly before to anyone.

Until recently, many psychotherapists tended to discount these startling incest reports as mere childhood fantasies. Victims

are reluctant to recall and talk about their experiences because they have been blamed as children for the sexual abuse, or they were not believed when they reported these incidents to a parent or professional. A growing body of care research now indicates sexual molestation of children by close family members and friends is a widespread problem. Fortunately, recent legislation mandates mental health professional to be educated in recognizing the signs of childhood sexual abuse. Special training is provided for working with victims of child molestation.

Sexual molestation encompasses fondling, kissing or touching, oral-genital contact, or intercourse. The average age at incidence is between 8 and 12. Victims may be infants or adolescents. Although males typically are less likely to admit they have been molested, there are indications that 1/5 of child sexual abuse victims are male. Incidents range from single episodes to reoccurring sexual contact that takes place intermittently over a period of years

and sometimes on a daily basis.

In her latest book, [The Secret Trauma](#), Diana Russell reports the results of her research of 930 randomly selected females in her study had been sexually abused by a relative before the age of eighteen. Of these victims 5% had been sexually abused by their fathers and 12% by a relative other than their father. The relationship between the molester and the victim affects the victim's reaction to the molestation. If the perpetrator is a trusted relative or close friend of the family, the degree of trauma from the physical intrusion may be intensified by the violation of the trusted relationship. Further, molesters often use lies and tricks, eliminating the need to use force on the victim. As a result, the victim feels rage and shame at having been manipulated and taken in by a perpetrator.

The victim also frequently feels betrayed by her mother for not protecting her from the molester. The