Securing Our Tents, Protecting Our Future

By Tali Aeder

Defining the Issue

Child sexual abuse presents a confounding paradox: few want to discuss it, but all want immunity from it. One pernicious form of this abuse, incest, receives even less attention despite the wreckage it leaves in its wake. Over the last few years, however, our community has come to acknowledge that the only way to counter this scourge is to hold our collective breath and create forums in which the topic can be discussed with the care and sensitivity that it deserves.

One of the largest misconceptions is that child sexual abuse is the result of a child’s exposure to outsiders, or what has become commonly known as “stranger danger.” Many parents warn their children about the risks of becoming too friendly with strangers. Yet, the data shows that less than 7% of child sexual abuse is perpetrated by strangers. In 93% of cases, the perpetrator is someone the victim knows and trusts, and is often a sibling or close family member committing incest.¹ Incest is defined as “sexual behavior between siblings that

¹ Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, “Sexual assault
is not age appropriate, not transitory, and not motivated by developmentally appropriate curiosity; not limited to intercourse.” Some researchers have pointed out that “siblings,” in this context, may or may not be blood-related, and should include children who have been living together in the same family and have assumed the role of siblings to one another for a period of two or more years.³

The *frum* community’s exposure to this issue is amplified when you consider our family dynamics. In addition, to an often large immediate family structure, uncles and aunts are often in close age-proximity to nieces and nephews, giving way to an extended family pool that share a sibling-like mentality and the all-too-common blurring of boundaries. Thus, sibling-to-sibling violence, which we now know is more prevalent in the general population than child abuse inflicted by parents,⁴ takes on a new dimension and provides an additional exposure, given the additional non-genetic siblings closely associated with the core family unit.

This fact is a harsh one, and something even the most open among us are inclined to ignore, because, as Alice Miller describes, “the more frightening the reality, the harder our minds work to deny it.”⁵ Our community has come to realize, however, that if we do not confront this issue head-on, it will continue to wreak havoc. Perpetration survives on the fumes of shame, fear and secrecy. When the topic of child abuse is doused with empathy, awareness and transparency, it simply cannot survive.

**Effects**

The effects of sexual abuse are more commonly known today. I have watched how awareness of the crippling nature of sexual abuse and its devastating effects if left untreated has evolved over the past two decades. A malignant

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4 Kiselica and Morrill-Richards, *ibid*.

A concoction of fear, anger, humiliation, guilt, arousal, physical pleasure, anticipation, angst, etc. can morph into a quest for numbing to squelch the suffering—be it through addiction, suicidality, depression, or promiscuity. Victims subconsciously choose to either avoid or immerse themselves in the traumatic events (often turning to compulsivity or addiction) in the hope of alleviating some of the fermented pain of the abuse.

Now imagine taking this to the next level. Incest brings the ultimate level of enmeshment with the abuser. As a client once remarked to me, “It’s one thing to be raped. It’s quite another to serve tea to the rapist the next morning, fold their laundry, and eat meals with them.” Imagine spending every Shabbos, Yom Tov, family simcha, etc., where you are faced with being true to yourself or true to your offender and the perceived onus of “keeping the family together.” The expectation that the victims keep themselves together is naive and unrealistic. The confusion, anger, and powerlessness that ensue are volcanic. As another young victim of incest once said to me, “I never understood everyone’s problem with divorce—how lucky an unhappy or abused spouse was that the concept of ‘divorce’ was created in their favor. How I yearned to divorce my brother!” This perception is exacerbated by the shame victims feel and their own perceived responsibility for what happened. As Susan Forward said:

> Just as verbally and physically abused children internalize blame, so do incest victims. However, in incest, the blame is compounded by the shame. The belief that “it’s all my fault” is never more intense than with the incest victim. This belief fosters strong feelings of self-loathing and shame. In addition to having somehow to cope with the actual incest, the victim must now guard against being caught and exposed as a “dirty, disgusting” person.\(^6\)

For the few naysayers who believe that avoidance will cure, it doesn’t. As Brand and Alexander’s work documents, avoidance is a great way to get through trauma—especially while it’s happening—but long-term avoidance makes for a slower resolution and more harm along the way.\(^7\)

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\(^6\) Susan Forward, *Toxic Parents: Overcoming Their Hurtful Legacy and Reclaiming Your Life.*

Incest typically manifests in one of three ways:

1) When innocent sexual exploration goes awry

2) When a victim of abuse perpetrates against others to recreate their own victimization as a way of coping with their own traumatic experience—trauma reenactment (Terr, 1981)

3) When a perpetrator with his/her own pathology (e.g. antisocial tendencies, personality disorder, etc.) preys upon a close family member

While the third form certainly exists, most victims I encounter in practice fall into one of the first two categories. Despite the very different origins of these two forms of incest, there are some notable similarities in the circumstances in which they arise. Many of these victims come from the following environments (this list is not intended to be all-inclusive but to broadly classify some of the contributing factors that lead to victimization to serve as a platform for discussion):

1) Lacking healthy boundaries

2) Lacking acceptance, safety, and structure—a.k.a. “emotionally barren”

3) Lacking healthy affectionate touch

4) Where poor communication is pervasive and healthy questions about emotions and sexuality are never addressed, are considered taboo or worse

Since our main goal is to protect our children and communities from this kind of trauma, it behooves us to deconstruct each of these contributing factors, in order to help break the cycle of abuse.

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8 Phillips-Green, 2002.
Boundaries

Boundaries are the lines that mark where your rights end and my rights begin, and include both self-respect and respect for others. A number of core ingredients that immunize a family against the potential for incest boil down to these two forms of respect. I believe the way to cultivate this respectful atmosphere is by focusing on empathy, and good conflict resolution skills. Teaching children to ask themselves, “How do my actions impact someone else?” trains them to consider the effects of their actions on others. And if their wants negatively impact someone else, they must be taught to control those impulses. Learning good impulse control and a healthy frustration tolerance forces a child to learn how to negotiate wants and resolve conflict without force, threats, or coercion.

When healthy boundaries are not established, a child is more susceptible to perpetrate and/or be victimized. The perpetrators do not have the skills to control their impulses; and the victims do not know they have the right to say “no.” Empathy and respect are not present to counteract the impulses of the perpetrator, and self-respect and fortitude are not present to bolster the victim’s defenses.

Once trauma has occurred, victims develop their own definition of boundaries in an attempt to cope. It normally manifests in one of two extremes; either they develop rigid and impenetrable boundaries or no boundaries whatsoever. Rigid boundaries make it impossible for anyone to earn their trust, which, often later in life, results in crushing loneliness and no healthy attachment relationships. No boundaries leads to promiscuity, defined as letting anyone have access to them, their trust, and their bodies. In both situations, the victim lacks the skills to determine whom they can trust—for either they were never taught, or they were taught to trust people who betrayed and took advantage of them. Understanding that trust is a process, something earned and something that could be lost, is a fragile, ongoing discussion that demands a lot of parental involvement.

Those of us who dissected an egg in grade school may remember that a unique feature of an egg is its semi-permeable membrane. The shell is made

of thousands of pores which allow air and moisture to pass through while the cuticle of the shell keeps dust and bacteria out. This membrane essentially “chooses” to only allow in those things that will benefit the egg, and makes sure to keep out that which may hinder the egg’s growth. Our goal is to help our children learn what they can let in, and what they can or should leave out.

Furthermore, children are biologically wired to believe that their immediate world is trustworthy.\textsuperscript{12} This is a survival trick their minds play on them. Due to a child’s dependent and vulnerable status, his mind does not allow him to understand the scope of dysfunction that surrounds him. Were children capable of determining that their environment was not safe, and that there was nothing they could do about it, the combination of reality awareness and sheer helplessness would destroy them. Thus, as a survival mechanism, their minds engage in a host of coping skills. They deny abuse is happening by temporarily disassociating from reality, or rationalize the perpetrator’s behavior as normal (“all brothers and sisters behave this way”; “he was just showing that he loves me”; “we were just playing doctor”; etc.).

It is crucial for parents to recognize that children bestow upon them the gift of their trust, without the parent ever having earned it. In order to earn that trust, parents must teach them what trust really means and how to evaluate who is trustworthy. Children must be taught that they are not objects, but precious souls. When parents model autonomy and respect, children become accustomed to witnessing those virtues, and the manipulation of an abuser, which by default causes objectification of the victim, will seem foreign and not enticing. Attachment theory dictates that the parent-child bond is as basic a need as food and shelter. Moreover, the model of the parent-child relationship serves as the barometer that future relationships are checked against. If the child is accustomed to rigid, punitive, distant norms, then the child is accustomed to the objectification abuse brings. The grooming process will often feel soothing—feeling like a reprieve from the chaotic penalizing norms they are used to; and the objectification of the abuse itself will be painfully familiar. As the above-cited Alice Miller famously noted, “Children who are respected learn respect. Children who are cared for learn to care for those weaker than themselves. Children who are loved for what they are, cannot learn intolerance.

In an environment such as this, they will develop their own ideals, which can be nothing other than humane, since they grew out of the experience of love.”

**The Home Environment**

The home environment needs to be one that exudes acceptance and safety because acceptance and safety are a precursor to learning. As chinuch is of paramount significance, we must ensure that a healthy environment is created to foster that chinuch. If children are fighting for their survival, be it emotional or physical, their brains are occupied in fight-or-flight mode and not learn-and-absorb mode.

To illustrate the distinction, consider the following examples. A child is caught in the woods at night. He hears rustling in the bushes and sees the silhouette of a bear approaching. This triggers an alert in his brain that he is in danger, and instantly preoccupies his mind with one decision: either fight the bear or flee. At that moment, his brain has only one focus: to survive the imminent attack of the bear. If one were to approach that child during this episode and point out that his shirt was not tucked in or that his face was dirty, the child would simply not absorb that information. In the moment, the brain cannot process anything unrelated to the fight or flight decision. Once the child is safe, however, these conversations can be had. Similarly, when a child is starving, they are fixated on finding their next meal, not listening to advice on how to improve their table manners. The same is true of emotional needs and safety. When a child is preoccupied with looking for acceptance, love, and safety, they are incapable of being taught. They are busy trying to survive emotionally and find a provider for their needs.

If acceptance is the beginning of the chinuch process, we must define it. But let us first give a generic definition of chinuch so that we understand the ultimate goal of acceptance. Chinuch is teaching children the difference between right and wrong, and healthy and unhealthy behavior. To do so, children must understand the “I” (my wants and needs), then the “you” (what the system around me needs of me (be it family, Halacha, etc.), and then learn how to synthesize the two. The manner in which this happens is through a process of curiosity, question asking, trial and error, and often, poor choices, mistakes, and opportunities for growth (which some may refer to as failure). Here, parents are faced with a choice of how to interact with their children.
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The easy route in dealing with this frustrating process is to label their curious or unruly behavior in a variety of ways: my child is _______ (fill in the blank: nosy, clumsy, mischievous, bad, difficult, etc). An alternative, but equally damaging, response is to dismiss their questions or ignore their behavior. These non-accepting responses leave the child feeling helpless and misunderstood, and often become a self-fulfilling prophecy where the child accepts the label as definitive of their persona. 13

Acceptance is taking the child—strengths and weaknesses combined—and accepting him for who he is. An accepting parent views the challenges of this process as opportunities to better understand his child. Intellectual discussions and emotional interactions with children help both parent and child gain a more clear understanding of what the child needs, and how to keep the needs of the system around them in perspective. For this exploratory process to take place, the child needs to be reassured that no question or feeling is “bad” or “wrong.” If the child is even covertly told that an act, desire, question, or feeling will disqualify them from the right to be loved by their parents, they will simply repress it. As Alice Miller famously said, “A child can experience her feelings only when there is somebody there who accepts her fully, understands her, and supports her. If that person is missing, if the child must risk losing the mother’s love of her substitute in order to feel, then she will repress emotions.” If we want to earn the trust of our children, and have them confide in us, we need to plant seeds of unconditional support and acceptance. This does not mean we unconditionally accept their actions or behaviors. Equally important, we need to teach them where their actions are wrong, and how to rectify them. However our acceptance of them as people can never be jeopardized. Making the distinction between our unconditional love for who they are and

13 “Eighty two percent of the traumatized children seen in the National Child Traumatic Stress Network do not meet diagnostic criteria for PTSD. Because they often are shut down, suspicious, or aggressive they now receive pseudoscientific diagnoses such as ‘oppositional defiant disorder,’ meaning, ‘This kid hates my guts and won’t do anything I tell him to do,’ or ‘disruptive mood dysregulation disorder,’ meaning, he has temper tantrums. Having as many problems as they do, these kids accumulate numerous diagnoses over time. Before they reach their twenties, many patients have been given four, five, six, or more of these impressive but meaningless labels. If they receive treatment at all, they get whatever is being promulgated as the method of management du jour: medications, behavioral modification, or exposure therapy. These rarely work and often cause more damage.”—Bessel A. van der Kolk, The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma.
not necessarily *what they do* is central to the development of a healthy home environment.

Acceptance should be coupled with an equal emphasis on safety. To state what may be deemed obvious, parental oversight of children is critical and the home environment should have structure (not to be misunderstood as tyrannical or dictatorial in nature). Parents of large families are especially vulnerable to structural lapses as they tend to be spread thin, overworked, and strained for time. Busy home life can quickly become chaotic. Instead of parents running the home, the home begins to run itself. Kids get lost between the cracks, rules get broken, boundaries get blurred. This is a fertile environment for sexual abuse and more specifically, incest. For abuse to take place, a perpetrator needs uninterrupted time without parental supervision, and relies on a parent who is either emotionally distant or physically preoccupied. Anecdotally, many victims have told me that the majority of the abuse they encountered happened on Shabbos afternoon. When their parents found out years later, many have admitted, “I was so exhausted, I didn't care what they were doing. If it was quiet, I was happy.”

**Affection**

Affectionate touch, connection, attachment, love, empathy, are all as basic to a child’s development as food and shelter. No parent would make an argument that a child could exist for a few days without food; similarly, a child can not last without affectionate touch, support, and connection. Though it may seem counterintuitive, being dependent actually makes us more independent.

The touch needs to be mutually enjoyable and consistent. Somehow, it has become accepted that so long as a child is physically dependent, touch is permissive—because it is “needed.” Once a child is developmentally more independent (can feed and toilet themselves) touch seems to take a dive. In an effort to understand this better, I have asked many parents why touch decreases as their children get older. Many have explained that their own associations with touch are that it is juvenile and their children do not need it. Some have even ventured to convince me that it will, “make my son have bad hirhurim.”

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The facts are clear, however, that children unequivocally need healthy touch. Children also have a strong survival instinct. If they do not get their needs met, they will cry until they are met. When crying does not work, they will look elsewhere. A child who is not getting touch is at a higher risk of accepting it in abusive or less desirable ways. An all too common answer I hear when victims recount how “it happened” is the following painful admission: “I was so desperate for a hug, I was willing to do whatever it took… bad touch was better than no touch.”

Healthy Communication

Sexuality is arguably the most powerful force Hashem gave us—the power to create life through the venue of emotional intimacy and physical closeness. When misused, as in the instance of incest, this power is as destructive as its constructive counterpart; it has the capacity to destroy life. Sexuality is pure when used within the confines and parameters that the Torah has set forth. Shaming, offensive, or degrading talk about sexuality is improper. The silence around sexual education is deafening. So many children have been robbed of the opportunity to understand sexuality through the education of their parents. The covert message of secrecy, taboo, and “get your information anywhere but here” syndrome plagues our children, the same children who are the next generation of mothers and fathers. So many healthy, appropriate questions children ask that are indicative of healthy development and exploration are deemed wrong, and children are shamed before they even have a chance to get to know themselves. When a child grows up in a home where hours if not weeks of their lives are spent discussing the nuances of Halacha and politics, but when issues of sexuality arise, parents tense up and reprimand the child for their inquisitive nature, the child learns quickly that the topic is taboo. This of course does not quench the child’s thirst for knowledge; it merely encourages the child to get the answers to his questions elsewhere. If, when it comes to sexuality, the culture at home is one of secrecy, then when incest occurs, in secret, it often just follows the tempo of the home.

Information breeds clarity, and clarity breeds confidence. Were parents to have more information, perhaps they could approach the topic with more confidence. Their children’s questions would not be as threatening, and their answers would not be as dishonest, vague, or shaming—often, whetting the child’s insatiable appetite for more unfiltered information. In the world we live in today, the internet brings a toxic fusion of accessibility, anonymity, and affordability. A child who grows up in an environment as previously described, where all is taboo, is likely to look to the internet for the answers to his questions. While the internet may have countless positive uses, I think we would all agree that given the choice between YouTube educating our children about healthy intimacy and sexuality, or us parents doing the educating, we would prefer to be the teachers.

A mother came to meet me recently who was more horrified that her sons and daughters were struggling with compulsive pornography use than the fact that there was sibling-to-sibling incest in her home. I explained that the pornography use was merely the symptom, an attempt to self-medicate the pain of the trauma, and the underlying infection that needed our focus was the incest-generated trauma. She argued, “We need to deal with the here and now—there is no use going backwards.” In an effort to understand more about what was going on at home, I asked her gently, “Who educated your children about the guidelines of healthy touch?” Her eyes doubled in size as she exclaimed, “That’s not my job!” I retorted, “Then whose job is it?” “Not mine and not anyone’s until they are ready. It’s the job of the chosson and kallah teachers prior to their wedding.” As unrealistic and comical as this may seem, how many parents shrug their shoulders and expect the unexpected from their children? Should every developmental question be put on hold until a child has gone through puberty, decided on a marriage partner, and is sitting comfortably with a chosson/kallah teacher weeks prior to their wedding, all the while resisting every source of (mis)information, be it from friends or the internet, available to them along the way?

One of the things I see often, which hurts me on a personal level, is how Torah can be misused to cloak or disguise our own pathology. A mother who does not know how to talk to her child about healthy body image can say that the discussion “is not tz’nius.” A father who shames his son for asking a question about his developing body may tell him to wash his mouth out with pepper for speaking “divrei pritzus” or “nibul peh.” Perhaps before we use this
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terminology, we should ask ourselves whether it is we, the parents, who are uncomfortable answering these questions. If so, before we deem the question “not tz’nius, pritzuz, or nibul peh,” let us understand why these questions make us so uncomfortable. Perhaps some parents have unresolved issues when it comes to their own sexuality (maybe due to their own upbringing). If we want to communicate with our children as a step towards preventing the dangers of sexual abuse, we need to have worked through our own views, questions, seeming contradictions, and misnomers well enough that we are resolved with the topic and capable of approaching it confidently with our children. Addressing sexual abuse preventively as parents, and as a community, really calls on each of us as individuals to have a working—even amicable—relationship with our own understanding of sexuality in theory and in practice—a relationship that works in harmony with Halacha, Hashkofa and our idealized selves.

Yiddishkeit is unique because it is not a sensationalist religion of withholding and restriction. We adhere to a religion of moderation, balance, and learning how to bridge the ephemeral gap between our mortal selves and our lofty idealized souls. Luckily for us, we have guidelines and parameters that show us exactly what we can and cannot do; every area of human existence is covered in Halacha. It is therefore no surprise that the concepts of intimacy and sexuality are discussed in Halacha—when, where, with whom, etc. Thus, if the Shulchan Aruch does not distinguish between these and all other areas of Halacha, why do we?

While I am trying not to generalize, I think the root of the confusion for so many young men and women is the fact that they are told a tale of “don’ts.” Don’t touch, don’t look, and don’t even ask. Then the beauty of marriage descends and with it an ominous cloud. In a matter of weeks, literally, they are supposed to morph from a body-shaming prude to a confident and knowledgeable intimate partner. This seems unreasonable at best; more accurately, we are setting them up for failure. Perhaps if the message they were getting was, “Intimacy is beautiful, but there is a time and place for it; and Halacha provides the guidelines,” instead of, “This is bad, dirty, wrong, (and therefore YOU are bad, dirty, and wrong),” the idea of using their body, the power of touch, and the beauty of intimate connection in the context of marriage would not be such a contradiction. Additionally, perhaps the misuse of touch, and the craving for it outside a sanctioned context, would be more easily dissuaded when the discussion is more thorough and nuanced than “DON’T!”
Time and time again, young men and women have told me that what was more painful than the years of abuse was the moment they told their parents and their parents did not believe them. From hearing “Don’t be so dramatic” to “He’s a boy, that’s what boys do” to “If you would have locked your door, it wouldn’t have happened; you weren’t careful about your tznius; this is what happens…,” the survivors unanimously agree that the pain of being shrugged off by their parents was more damaging than the abuse itself.

One of the many difficulties that disclosure poses is what Cyr et al. (2002) calls “the loyalty bind.” When abuse is disclosed within the family unit, the parents have to “choose” between their two children. Often parents resort to blaming either the victim or the offender. Blaming is one of the most detrimental outgrowths of abuse with its impact bleeding into the fabric of the victims developing sense of self. Once self-blame is interwoven into who children believe they are, the possibility of receiving help and healing is delayed and extricating the blame from their self-concept becomes exponentially harder with time.

One of the biggest contributors to the victims’ silence is the children believing they will get into trouble. The power of the manipulation of the perpetrator often outweighs the power of authority of the children’s nuclear family. If the perpetrator threatens the child’s safety, the child believes it—because at that point they have believed everything the perpetrator has said, “This is good for you”; “I am preparing you for marriage”; “This is a Mitzvah”; “You’re helping my Shalom Bayis”; “I am checking to make sure your body is healthy”; etc.

Many perpetrators do not have to use any threats because they have carefully groomed the child in such a way that the child truly believes the abuse is in their best interest.

Another big contributor to the victims’ silence is the tremendous confusion. The most dangerous perpetrators are the ones who are able to lead a successful compartmentalized double life. They convince the victim to believe that it is


the victim who is the “crazy one.” I had a young woman tell me recently, “How could this man, a chashuv, ehrlich talmid chacham who finished shas before he was 20, who gives a shiyur, who is finishing another sefer….how could HE be the guilty one?” The added variables and confusion around the hypocrisy, “It can’t be that this person could do those things…,” often stunts their confidence and they become unable to take themselves seriously enough to come forward.

Another potential contributor to the victims’ silence is pleasure. While sexual abuse is an intricate web of mind games, control, and manipulation, physical pleasure does often ensue. When the relationship doesn’t “feel right” but the body does, it confuses the victim. The perpetrator often uses this against them—“You wanted it/you enjoyed it.” The body’s natural reaction to pleasing physical sensation is physical arousal. Victims often incorrectly believe that they were responsible for the abuse because there was physical pleasure. Making that distinction between physical reaction and responsibility and blame is key.

Another trend I have seen that prevents the victim from getting help is that when the disclosure does happen, the abuse is minimized. I have seen many parents, or the offending sibling, reason that the abuse was nothing more than “normal, childhood, sexual exploration.” While it is true, that developmentally, it is common for children to explore their own sexuality, there are some distinct red flags to distinguish between the two:

**Mood:** Secrecy, anger, fear and shame are some red flags that distinguish sexual play from sexual abuse. When two children are using the medium of play to explore their emerging sexual selves, it is normally a playful process. Curiosity overtakes them, and they use imaginative play to explore each other’s bodies. Children will commonly “play doctor” or “negotiate” (“I will show you me if you show me you…”) or games of the like where their questions can start to be answered but no harm is done. Also, while it may be done in private, it is not done with secrecy—an important distinction. The child is unaware that they are doing something inappropriate, and often will continue “playing doctor” even if someone else walks in the room. Additionally, if one of the children say “no!” or “stop!” the play will stop; it does not escalate to force. Sexual abuse is more calculated, and laden with shame—it is secretive. If someone were to walk in, the offender would likely feel shameful. Measures are taken to make sure the abuse is happening while parents are sleeping, or away, in a room that is not a high traffic area. Often while the abuse is not done with explicit force
(force reaps terrible results for the offender; manipulative grooming is far more successful), there is an implicit fear often reinforced by threats that the offender induces in the victim that keeps them obedient. That fear, coupled with the child’s lack of understanding about their own ability to say “no,” makes for a perfect storm. Countless victims, in recalling the early incidents of abuse tell me, “Saying ‘no’ wasn’t an option—I was made to believe it was something I wanted, I liked, and I was scared to think otherwise…”

**Age appropriate:** Normal sexual play is age appropriate. Sexual abuse is not. In one of the most extreme cases I dealt with, I had a mother tell me that her son was “just being a boy”—her son was ten when he started having intercourse with his nine-year-old sister. By the time he was 18, all six of his younger brothers were doing the same. The understanding of the mechanics and play, as well as his expectations and knowledge in asking her what to do at such a young age, are clear indications that he was burdened by sexually explicit material that was not age appropriate.

**Repeat activity:** Another red flag is that once the parents educate the children about healthy boundaries and what healthy play looks like (“we keep our private parts private etc…”), if the children continue the play despite the repeated warnings, parents should look further into the situation.

**Power/Age differential:** The old axiom of “pick on someone your own age” rings true here. A distinction is made between same-age play vs. older sibling taking advantage of younger sibling. Older siblings have an automatic status of authority in a family hierarchy. Especially in large families, older siblings often have parent-like responsibilities and the younger sibling may respond to their requests as to that of a parent, with more subservience and less sibling rivalry.

One of the most important points to remember is that if questionable behavior is discovered, parents should be aware that meeting the behavior with extreme reactions (yelling, criticism, anger, etc.) will almost always exacerbate the behavior.

On a more practical level, when a child comes to disclose abuse to a parent, the three “Don'ts” I tell parents to keep in mind at the time of the disclosure are:

Do not interrogate—do not overwhelm the child with a barrage of questions. Often these come partly from a desire to know the information, and partly from the parent’s anxiety and fear. There is a better way to get the
information, in a calmer, less overwhelming manner. Interrogating the child will likely cause them to shut down.

Do not be confrontational or skeptical—confrontation is a communication “ender.” When children disclose abuse, we are looking to engage with them to be able to support them, not shut them out. Assigning blame was likely a tactic that the perpetrator used to get the victim to comply. When a parent is confrontational with the child, it often insinuates that the parent is accusing the child of wrongdoing. Parental skepticism will reignite any confusion or self-doubt the child had about the abuse which may have prevented them from coming forward initially. Reassure the child that they are not in trouble and you believe them.

Do not problem-solve—empathy and calm physical touch are the only two ingredients that are really needed at the time of disclosure. The child does not need to be fixed; he needs to be heard. Reassure them you are there to help them and keep them safe and the issue will get dealt with (and afterwards consult with professionals, if need be).

**Treatment**

Siblings share a unique genetic blueprint, heritage, and home environment; the nature of the sibling relationship is unique and so is the impact of the sibling-to-sibling abuse. The disclosure of the abuse is far more complicated because the abuser and the victim share a family unit. Often family work is needed where parents, children who are victims, and children who are offenders each need their own course of treatment.

**Final Thoughts**

Repeat offending behavior almost always happens at the hands of someone the victim knows and trusts. Ongoing discussions about healthy boundaries, the child’s right to be the master of their own body, and education about healthy versus unhealthy touch are crucial. We must teach our children that these ideas have no exceptions: They apply to strangers and family-members alike.

When sexual abuse grows in the coddled lap of a family relationship, a confusing and lethal stew of trust and mistrust, boundary setting and boundary
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breaking, assertiveness and submissiveness, neglecting one's safety and advocating for one's needs, emerges—bubbling furiously throughout the life of the victim. Blurred lines between safety and danger are interwoven into the very fabric of the child's inner world; and everyone becomes either safe (trusting too easily) or dangerous (can't trust anyone).

The parents’ role is to educate their child in all areas, and no distinction should be made between basic social skills and common courtesy, safety protocols, and healthy intimacy. Healthy intimacy is as fundamental to our faith as everything else on the list. If we, as parents, abdicate our role, and neglect to teach our children how to navigate the world of intimacy effectively, it becomes an alluring, secret, and dangerous underworld, where our children may not learn how to correctly build their proverbial tents, or worse, build tents without any walls whatsoever.