Child Abuse in Community Institutions and Organizations: Improving Public and Professional Understanding

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Preface

On March 23, 2000, Parliament received the first report of the Law Commission of Canada: "Restoring Dignity - Responding to Child Abuse in Canadian Institutions". The report examined a range of possible processes to address the human consequences of child physical and sexual abuse that took place in institutions run or funded by governments. It was the culmination of two years of research and consultation concerning the types of reparations required to redress the harms suffered in the past by children in institutions.

In an effort to promote research initiatives in line with its general recommendations, the Law Commission developed several projects in partnership with various organizations: the economic costs and consequences of child abuse, engaging urban Aboriginal survivors, an educational video and workshop, and improving public and professional understanding.

The project on improving public and professional understanding was developed in recognition that, although the public is aware of the issue of institutional abuse, and professionals, in particular mental health and legal professionals who deal with survivors, there is not a great deal of familiarity with the particular circumstances of survivors, the challenges they face, and their special needs in seeking redress and healing. To help bridge this knowledge gap, the Centre for Children and Families in the Justice System of the London Family Court Clinic examined the long-term impact of institutional child abuse as a means of raising awareness amongst legal and mental health professionals who work with survivors of institutional abuse. The goals of the paper are to define institutional child abuse in a way that recognizes the diverse institutional and organizational settings within which child abuse occurs, contribute to an understanding of child abuse in institutions and organizations, examine the risk factors associated with child abuse in organizations and institutions, and consider prevention and treatment options.

In addition to reviewing the literature on the long-term effects of child abuse, the authors review documented reports of child abuse, refer to their own clinical experience, and discuss results from a panel of survivors of institutional abuse and professionals (e.g., lawyers, mental health professionals, policy makers and researchers).

A primary concern for the authors is the need to expand our definition of institutional child abuse, which has traditionally focused on residential or educational facilities, to consider abuse within other community organizations and social institutions, such as sport and recreational organizations and various community-based service agencies. The authors believe that it is no longer useful to conceptualize institutional abuse solely within the 'total institution' or residential school environment. Instead, they argue the definition of institutional child maltreatment must consider that, in contemporary terms, abuse occurs in various community-based social institutions. As the authors note, "regardless of its physical structure, the potential for maltreatment exists in other types of community institutions and organizations in which adults are put in a position of power and authority over children and youth."

A barrier to understanding child abuse in institutions and organizations is the limited research on issues associated with this form of maltreatment. Therefore, to better understand the impact of institutional and organizational abuse, the authors examine the considerable literature on the consequences of intrafamilial abuse. In general, victims of this form of abuse might experience a range of cognitive and emotional distresses or dysfunctions that impact upon their development and mental health — symptoms that may persist into adulthood. These

consequences of intrafamilial abuse are, in many respects, relevant to all victims of abuse, including victims of institutional and organizational abuse.

At the same time, however, the limited literature on the long-term impacts of institutional child abuse reveal a variety issues and themes particular to this form of maltreatment. From this, the authors identify several common consequences that have been reported by survivors of institutional abuse: loss of trust and fear of intimacy, shame, guilt and humiliation, fear of or disrespect for authority, avoidance of reminders of their abusive experience (e.g., avoid the social institution in which the abuse occurred) and vicarious trauma (e.g., those close to the victim experience vicarious abuse symptoms). In many respects, victims of institutional abuse have to deal with the impact of the abuse as well as the betrayal of the social institution within which the abuse occurred.

The report also examines the unique factors that influence the impact or degree of harm associated with child abuse in community institutions and organizations. Factors such as the significance of the institution to society, the role of the perpetrator within the institution (e.g., teacher, minister), the extent of the child's involvement with the organization, whether the child's involvement with the institution was voluntary or mandatory, and the circumstances following the abuse (e.g., whether or not a full apology for the act was offered by the institution) are among the factors that contribute to the risk of abuse occurring, as well as to the nature and extent of the post-victimization harm. These factors, the authors argue, will vary according to the type of institution or organization in which the maltreatment occurred (e.g., educational facilities, religious and spiritual organizations, sporting, cultural and recreational organizations, and special needs facilities).

Overall, the authors argue for a continued reflection on the long-term effects of institutional child abuse and the unique factors associated with this form of maltreatment. This includes an understanding of the vulnerability of children, the overwhelming power of those charged with the care of children in institutional and organizational settings, and the structure of organizations and institutions where abuse occurs.

To facilitate a better understanding, the authors recommend special education and training materials for mental health practitioners, criminal justice officials, community professionals, institutions, and the general public. Training and education will assist in naming the problem of institutional and organizational child abuse and acknowledging the importance of prevention initiatives and policies that recognize the unique nature of this form of maltreatment. In this respect, the authors hope the report will provide the foundation for informed dialogue amongst mental health professionals, lawyers and other professionals whose clients are adult survivors of institutional and organizational abuse.

The report of the Centre for Children and Families in the Justice System of the London Family Court Clinic acknowledges the Law Commission's recommendation from its report on institutional child abuse that officials responsible for redress processes should have special training or experience with protocols for assisting survivors. It also echoes the Law Commission's belief that, in addition to specific programs designed to meet the needs of survivors, it is crucial to establish programs of public education and to continue to develop and revise protocols and other prevention strategies. At the same time, however, the Law Commission continues to promote its interest in addressing the systemic causes of institutional and organizational child abuse, and encouraging alternative and community initiatives as a significant means of redressing institutional child abuse and ensuring that victims, their families and the community are involved in the response process.

Should you have any comments about this report or any of our other work associated with *Restoring Dignity*, we would be pleased to hear from you, either by regular mail at:

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CHILD ABUSE IN COMMUNITY INSTITUTIONS AND ORGANIZATIONS: IMPROVING PUBLIC AND PROFESSIONAL UNDERSTANDING

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Introduction

In recent years, Canada and many other countries have witnessed numerous well-publicized accounts of child abuse occurring within the context of residential facilities, schools, churches and other community organizations. Reports such as *Restoring Dignity* published by the Law Commission of Canada and *Protecting Our Students: A Review to Identify and Prevent Sexual Misconduct in Schools* published by the Ontario Ministry of the Attorney General give us some sense of magnitude of the problem and highlight the importance of increasing our understanding of the issues relevant to children abused within institutions.

Canada is only one of many countries searching for an understanding of and possible solution to this public concern. For example, *The Forde Inquiry*, a commission of inquiry into the abuse of children in Queensland, published by the State of Queensland, Australia; and *People Like Us: The Report of the Review of the Safeguards for Children Living Away from Home*, published by the government of England reflect the recent world-wide attention drawn to this far-reaching issue. The fundamental goals of these reports are similar: to gain a better understanding of the causes and consequences of child abuse in institutions and organizations in order to reduce the likelihood of future instances of abuse and to address the needs of survivors of past abuse.

Every week the Canadian media features articles on abuse of Aboriginal children in residential schools years ago, or recent incidents of abuse in churches and schools. Although professionals as well as the general public cannot ignore this social issue, there remains a great deal of confusion and misunderstanding about the problem. There are some who are sceptical and would believe that these allegations are motivated by financial rewards for the accusers and their lawyers. Others question whether acts of abuse committed long ago warrant such public recognition. There are still others who have difficulty believing that trusted institutions, such as governments and churches, could have even committed these atrocities in the first place. While this debate continues in the public and professional forums, former victims await justice. Nothing short of full acknowledgement of the harm, accompanied by resources to assist their healing, will ensure this justice.

This paper is intended to move the public debate forward by examining what is known about child abuse that occurs within a range of community institutions and organizations. Because of the paucity of research on this emerging issue, our analysis is based on a review of the existing

literature on child abuse, documented reports of survivors, and our own clinical experience in assessing the impact of abuse for both criminal and civil courts. We also consulted with a panel consisting of survivors of institutional abuse and professionals, including lawyers, mental health professionals, policy makers, and researchers. The outcome of this collaborative effort is a conceptual framework that we hope will create the foundation for a more advanced understanding of the unique impact of this form of abuse and the implications for intervention and public policy. Similar to the professional evolution of our understanding of woman abuse, the inception of this work is grounded in the voices of survivors who have increased our understanding by sharing their experiences and knowledge.

Legal and Scientific Developments

Victims of childhood sexual and physical abuse are increasingly seeking remedy through civil litigation. For example, Aboriginal people in Canada make up the largest proportion of plaintiffs who are litigating claims of sexual and physical abuse, and the numbers are growing steadily. It is estimated that between 12-15 per cent of survivors of Indian Residential Schools will file a claim, representing approximately 15,750 individuals. Non-Aboriginal survivors whose perpetrators range from clergy to teachers to residential staff (e.g., youth correctional facilities, former orphanages) are also turning to the civil courts for restitution. Many of these victims desire to hold both the individual perpetrator and the social institution, such as the church or school board, accountable through litigation.

In recent years, there have been several court decisions that have held organizations vicariously liable for sexual abuse perpetrated by an employee. Vicarious liability is considered indirect or no-fault liability, meaning that it is not necessary that the organization be proven to have wilfully ignored or directly inflicted the abuse. The vicarious liability of organizations is associated with whether the employer's enterprise (e.g., providing overnight quasi-parental care to children) materially increases the risk of sexual abuse and thus harm. Similarly, limitation periods in cases involving a breach of fiduciary duty have been successfully challenged. Lastly, there has been a general trend of increasing damage awards in sexual abuse cases. Together, these legal precedents have resulted in survivors of abuse within institutions being able to seek remedy through the civil courts.^{iv}

One of the major barriers to understanding the specific and unique issues associated with abuse in institutions and organizations is the dearth of scientific literature addressing these issues. In our current review of the literature on the long-term consequences of child abuse, 22 empirical studies were examined (see Appendix A for a list of these studies). However, none made specific reference to child abuse in institutions and organizations. In the 15 studies in which different types of abuse were compared, the distinction made was between abuse perpetrated by a family member (i.e., intrafamilial) or a non-family member (i.e., extrafamilial). In the few studies in which the relationship between the victim and the perpetrator was identified (e.g., stranger, acquaintance, or boyfriend) in cases of extrafamilial or non-familial abuse, no consideration was given to how this relationship or association may have affected the victim.

Although the unique effects of abuse in institutions and organizations are not being included as part of the majority of studies on child abuse, there is a growing literature specifically addressing the impact of abuse by members of various institutions. These preliminary studies have surveyed survivors of abuse by priests, teachers, community leaders, and caretakers in residential institutions to form an understanding of the uniqueness of such abuse.^{V, Vi, Viii, Viii}

Research on the impact of child abuse has largely focused on abuse by family members, almost to the exclusion of abuse committed in other trust-based relationships. These other trust-based relationships are most often found in community organizations and institutions. Therefore, the goals of this paper are: (1) to define child abuse in institutions and organizations in such a way as to accommodate the diverse contexts in which this form of abuse may occur; (2) to develop an understanding of the unique aspects of child abuse in institutions and organizations; (3) to formulate key dimensions affecting risk of abuse and psychological harm; and (4) to review the implications of these findings for prevention and treatment.

Defining Child Abuse in Community Institutions and Organizations

Child abuse, whether intra- or extra-familial, generally includes various forms of physical, sexual, and emotional abuse. Physical abuse includes acts such as punching, beating, kicking, biting, burning, shaking, or otherwise physically harming a child. Sexual abuse ranges from sexual touching to exhibitionism, sexual intercourse, and commercial exploitation. Emotional abuse includes acts or omissions that could cause serious behavioural, cognitive, emotional, or mental disorders. Operational definitions of these forms of abuse have been developed on the basis of three National Incidence Studies (NIS) conducted by the U.S. Department of Health and Human Services, and the Canadian Incidence Study of Child Abuse and Neglect. ix,x

Abuse Within Institutions and Organizations: A Historical View

In the past, researchers interested in the maltreatment of children within organizations and institutions generally focused attention on abuse occurring within residential treatment or educational facilities. The purpose of the present effort is to expand the definition of institutional abuse beyond its traditional parameters to include community organizations and other established social institutions that are not necessarily residential in nature.

When child abuse was first brought to public and professional attention it was most commonly thought to occur within the family context, with parents as perpetrators. In the mid 1970s David Gilxiii was the first to suggest that child abuse occurs at three levels: intrafamilial, institutional, and societal. A few years later, Eliana Gilxiv took this one step further, identifying three distinct forms of institutional child abuse. The first is the overt physical, sexual, or emotional abuse committed by those individuals directly responsible for the child's care, most often childcare workers or foster parents. The other two types of abuse – program abuse and system abuse – are unique to out-of-home settings. Program abuse occurs when programs operate below acceptable standards or rely upon harsh or unacceptable methods to control behaviour. In the United States, a number of class action suits have been filed for various forms of program abuse including the rights to receive or refuse treatment, to have access to counsel and courts, to receive and make phone calls, visits, etc.

According to Gil^{xvii}, system abuse is not committed by a single individual or a single agency, but rather occurs when the entire childcare system is stretched beyond its limits. This type of maltreatment is often related to shortcomings of agencies responsible for the care and well being of children. Prolonged treatment, unnecessary removal from the home, misplacement and misdiagnosis due to inadequate assessment resources all may be viewed as forms of system abuse. Similar to other forms of abuse, the impact of system abuse may be devastating. Children who are moved from home to home may have difficulty forming long-term emotional attachments to nurturing adults, the impact of which may reverberate throughout their lives.^{xviii}

Traditional definitions of child abuse in institutions and organizations were also rooted in Goffman's model of the "total institution". This model defined a total institution as one in which almost every aspect of the child's life is controlled by the institution and by the same single authority, with common examples being institutions to care for people with physical or mental disabilities, children without family caregivers, or young offenders.

Persons living in a total institution often experience a sense of depersonalization and disconnection. Depersonalization is brought about by the generic and routine nature of the day-to-day living conditions, and disconnection results from physical and psychological isolation from family, community and culture. The Law Commission of Canada has expressed the view that degradation and powerlessness are other features often inherent in total institutions, and each occurs in both subtle and obvious ways.^{xx}

The total institution model has been useful for conceptualizing the abuse that occurred within certain residential facilities, such as those imposed upon Canadian Aboriginal peoples, in which children were cut off from their families and communities for months at a time and forced to reject their culture. Other examples of total institutions are residential treatment facilities and correctional institutions.

Although total institutions may have been the more common model in the 1950s and 1960s, current institutions less often fit within Goffman's original definition. Goffman's account, moreover, does not consider the broader social context in which institutions exist. Finally, the total institution perspective does not consider the many other types of community organizations and institutions in which child maltreatment may occur, as discussed in sections to follow.

Current Definitions and Assumptions

Because few definitions of child abuse in institutions and organizations have gone beyond maltreatment occurring within total institutions and residential care facilities, two steps need to be taken. First, the definition of "institution" needs to be expanded and operationalized to include various types of community organizations and institutions. Second, the parameters (e.g., perpetrator characteristics, institution characteristics, and consequences) associated with the type of abuse occurring in this redefined context need to be delineated and examined. It is likely that parameters associated with a revised operational definition will share some commonalties with intrafamilial abuse and with residential institutional abuse. However, some of these parameters will be quite unique and specific to the institution in which the abuse occurred. Illuminating these will result in improved treatment interventions, a more accurate recognition of the impact, and have policy and programming implications.

Defining institutions as systems or organizations that are an important part of a particular culture or society, not necessarily existing within the confines of a physical structure, accommodates the changes that many social institutions have undergone in recent years. Residential institutions and total institutions have been replaced by increased emphasis on community-based programming and services. Within those residential institutions that have remained, there is much more interaction with the broader community.^{xxiii} Moreover, this definition allows for the inclusion of community institutions such as sports and recreation programs, churches, and non-residential schools.

The transfer of care from residential facilities into the community does not alter the reality that children and youth remain at risk of maltreatment, i.e., changing the context of the care does not

necessarily change the dynamics of power, control and dependency that are often associated with abuse. Regardless of its physical structure, the potential for maltreatment exists in other types of community institutions and organizations in which adults are put in a position of power and authority over children and youth.

A Framework for Understanding the Impact of Child Abuse in Various Settings

Many of the consequences of institutional or organizational abuse are similar to those experienced by victims and survivors of abuse by family members. However, advocates and survivors of abuse in institutions and organizations have noted that there are additional and unique symptoms, which are sometimes related to the specific institution or organization in which the abuse occurred.

Theoretical explanations for understanding the immediate and enduring effects of child abuse on children's development take into account developmental processes and how they might interact with the particular pattern and trauma of maltreatment. Trauma theory and developmental psychopathology each consider how exposure to traumatic events or the use of inappropriate childrearing methods can affect children's development diversely and progressively over time. These explanations, furthermore, place children's experiences in a broader context that includes their perception of the emotional climate of their families or caregivers, their previous experiences with conflict and abuse, their interpretations of violence and maltreatment, and their available coping abilities and resources to countermand stress and inadequate caregiving. The implication of this view is that children who have been abused experience more than isolated incidents of violence; rather, they live in a world that breaches their trust and intrudes on their normal developmental progress in numerous ways. It is these deviations in socialization practices that may be primarily responsible for disrupting the child's normal developmental progress, resulting in visible signs of emotional and behavioural problems.

An understanding of how the effects of abuse in institutions and organizations are similar to child abuse by family members is an important starting point in developing a conceptual framework. The scarcity of literature specifically addressing the etiology and consequences of abuse in institutions and organizations requires a beginning point of commonalities, as well as factors unique to this type of abuse.

Effects of Intrafamilial Abuse

Over the past 25 years, researchers and clinicians have described the varied and severe ways in which children's development and future mental health can be impaired by child abuse. Child abuse often results in cognitive and emotional distress or dysfunction. Children who have been abused may experience depression, anxiety, low self-esteem, xxv, xxvi, xxvii, xxviii, xxviii, xxviii, xxiix, and somatic problems. They also may exhibit self-destructive xxxi or suicidal behaviour. Children who are physically abused also are at risk for developing poor impulse control their emotions, difficulties understanding others' perspectives, lack of empathy xxxiiv, and are more willing to use physical punishment. Adult survivors of childhood abuse display similar symptoms of depression and anxiety. XXXVV, XXXVIII, XXXXVIIII The emotional distress experienced by adult survivors of childhood abuse can lead to a number of self-harming behaviours, including substance abuse, XXXIII bingeing and purging, and self-injurious behaviour. Adult survivors of sexual abuse often are plagued by feelings of guilt, Aliii self-blame, Aliiii helplessness, anger, and

may perceive life as dangerous or hopeless. Xliv Adult survivors of childhood physical abuse are also at an increased risk for developing psychosis and paranoid ideation. Xlv

Childhood abuse increases the risk of developing a number of behaviour and interpersonal problems. Children who have been physically or sexually abused are more likely to have difficulties with aggression truanting, running away from home, bulimia, bulimi

Children who have been sexually abused are more likely than their non-abused peers to display a number of problematic sexual behaviours including phobic reactions, sexual inhibitions, sexual hyperarousal, impaired sexual impulse control, ix sexual preoccupation, promiscuity, sexual aggression, inappropriate sexual behaviour, and excessive masturbation. Adult survivors may display an avoidance of intimate and sexual relationships, ix fear of sex, ix less interest in sex, ix less pleasure from sex, ix sexual phobias, ix sexual preoccupation, ix over-sexualized relationships, ix sexual aggression, ix and are more likely to become involved in abusive sexual or romantic relationships and experience revictimization. Ix Children who have been physically abused are at risk for developing a number cognitive or intellectual deficits, ix language deficits, ix perceptual motor deficits, and academic difficulties.

Although all of these problems have been associated with childhood abuse, no single symptom or pattern of symptoms is present in all victims of childhood abuse. In fact, in their review of the effects of childhood sexual abuse, Kendall-Tackett, Williamson and Finkelhor^{lxxiii} concluded that 20 per cent to 50 per cent of children were asymptomatic at initial assessment, and only 10 per cent to 25 per cent became symptomatically worse during the two years following the victimization. Why some victims seem devastated by the abuse while others show no obvious signs of harm has sparked considerable debate, and a general recognition that the harmful effects of abuse depend on other positive and negative events in the child's life. Ixxiv

Factors Influencing the Effects of Intrafamilial Child Abuse

Certain aspects of abusive experiences and the environment in which they occur may attenuate or accentuate adjustment difficulties over the life course. Factors that have received the most empirical support in terms of affecting the degree of harm or the pace of recovery from intrafamilial child abuse include: (1) Characteristics of the abusive experiences (e.g., earlier age of onset and the severity and chronic nature of child abuse are associated with more negative outcomes locally local

adolescent's psychological make-up. Importantly, many of these same factors emerge in clinical studies of the impact of abuse in institutions and organizations, although with some degree of alteration, as described below.

Effects of Child Abuse in Institutions and Organizations: Familiar and Unique Themes

Our original interest in this area was sparked by carefully listening to the themes presented by survivors of institutional abuse. They described familiar themes such as loss of trust, shame and humiliation, fear or disrespect of authority, attempts to avoid any reminders of the abuse, and vicarious trauma stemming from disruption to their family and personal relationships. Whereas such recognized hallmarks of abuse were typically present for victims abused within an institution, the manifestation of these common consequences of sexual victimization were markedly altered. Beyond these familiar themes, survivors also described unique trauma-related symptoms specifically associated with the institution where the abuse had occurred. These themes usually related to the fundamental purpose of the institution, with its particular role being highlighted as an integral aspect to the legacy of the abuse. For example, individuals abused by teachers often expressed fear or disinterest in learning, sending their own children to school, or entering any academic setting. In effect, survivors are not only confronted with coping with the devastating impact of the abuse, but with betrayal by the valued social institution and loss or impairment of its role in their lives as well. The following paragraphs illustrate these major themes and how they differ for victims of abuse in institutions and organizations.

Loss of Trust/Fear of Intimacy

Loss of trust and fear of intimacy are commonly reported problems faced by abuse survivors, which have a profound effect on their interpersonal relationships. Many victims highlight the pain of betrayal and the undermining of their ability to judge who is and is not trustworthy. For victims abused within an institution, betrayal often extends beyond the interpersonal realm to include the social institution to which their abuser belonged. Victims' trust is further eroded when they are disbelieved or the situation is poorly dealt with by the original institution or other institutions, such as the judicial system. Over time, survivors describe a more global loss of trust that extends to other institutions sanctioned by society, which they attribute to the continued lack of preventative and remedial measures.

Shame, Guilt, and Humiliation

Similar to victims of abuse by a family member, survivors of abuse in non-familial settings report feeling that they were somehow responsible for the abuse. They feel that they did something to bring it about at the time, which offenders may encourage in hopes that self-blame will prevent disclosure. They also experience guilt for having not done more to stop the abuse. Individuals who were unaware at the time that they were being abused may also experience feelings of shame and humiliation once they realize what happened, particularly if they were "willing" participants. Survivors also feel conflicted if they derived any pleasure or special attention from the abuse, which increase their feelings of shame, guilt and self-blame.

In addition, children abused in non-familial settings misattribute such acts to their personal faults or weaknesses, thereby increasing their feelings of shame and humiliation. In other cases they may receive special attention and benefits from the abuser, leading to an inaccurate self-image and further humiliation. Moreover, children who attempt to discuss the events with others (either

to disclose or to question its appropriateness) may find themselves at odds with their family or important community institutions, which may seek to protect the accused in an effort to protect the role of the setting. One survivor describes this process as "losing acceptance from society in general. You are very much an outcast."

Fear/Disrespect for Authority

Fear or disrespect for authority may result directly from the abuse or more indirectly from subsequent events, such as disclosure, reporting, and court proceedings. Whereas children are taught to respect and obey adults in positions of authority, perpetrators often abuse their authority to coerce and manipulate them through threat or reward of course grades, positions on a team, and similar control. As a result, children may fear individuals in positions of authority or may lose respect for them as a result of their abuse of power. In addition to direct harm, the disclosure process and subsequent events may cause some victims to form a negative perception of authority figures (i.e., feeling re-traumatized by the investigation and legal process), especially when little effort is made to provide needed help for their own recovery. Again, these obstacles are similar to those faced by children abused by family members, but are often distinguishable in terms of their manifestation.

Avoidance

Survivors spend considerable effort trying to avoid any reminders of their abusive experience, because any reminder may trigger painful flashbacks and frightening, intrusive thoughts. For example, individuals who were abused in a church setting described avoiding anything related to church and religion, in the process losing their faith in God to protect their well being. Similarly, victims of abuse by teachers described being unable to attend school, or being afraid to send their children to school due to reminders and fears.

Vicarious Trauma

Harm that occurs as a result of abuse within institutions and organizations is not restricted to the victim's trauma alone. Other children in the institution are often aware of the abuse, even if they themselves are not abused, and may exist in a state of perpetual fear of becoming the next victim. Children who witness ongoing abuse of others are harmed by such exposure, and may experience problems of equal severity to those of the victims themselves. IXXXIII

As well, families of victims and survivors of institutional abuse often suffer various consequences, which they may fail to acknowledge. Parents may feel a mixture of guilt, shame, and humiliation regarding their actions or inactions, perhaps blaming themselves for failing to recognize the abuse. Moreover, post-abuse events following disclosure or discovery cause a great deal of tension in the family as each family member tries to cope not only with the child's difficulties but also with their own reactions. In some circumstances current (e.g., parents and siblings) or future family members (e.g., spouses and offspring) may be the direct recipients of abusive behaviour by the prior victim as a result of having been abused in childhood. Even in the absence of such behaviour, adult survivors are often eyed with fear and recrimination because of others' beliefs that they may turn to abusing others, a life sentence that many survivors feel imprisons them and further blocks attempts at closeness and trust. Finally, current and future family members may suffer vicarious symptoms connected to the abuse itself, such as their own loss of faith, distrust of organizations, or feelings of betrayal, quilt, or anger.

As a summary, the following table outlines many of the issues, feelings and difficulties identified by survivors of abuse in institutions and organizations. Although the table does not reflect all of the possible harmful outcomes, it provides a summary of the scope and magnitude of their trauma.

Commonly Reported Symptoms and Emotional Reactions to Abuse

- Alcohol Abuse
- Behavioural Problems
- Confusion about Sexuality
- Criminal Behaviour
- Degradation
- Drug Abuse (marijuana, LSD)
- Employment Difficulties
- Feeling Empty Inside
- Guilt
- Homelessness
- Inability to Trust
- Interpersonal Relationship Problems

- Intimacy Problems
- Lack of Self-identity
- Memories/Flashbacks
- Poor Self-esteem
- Robbed of Innocence
- School Dropout
- Self-Blame
- Self-Doubt
- Sexual Problems
- Shame
- Stigmatization Homosexuality Label
- Trouble with Parents, Boy/Girlfriends, Wife/Husband

Factors Influencing the Effects of Child Abuse in Institutions and Organizations

We now turn to a consideration of the shared and unique factors influencing the impact of child abuse in community institutions and organizations. Our conceptual framework has identified several important factors that may play a critical role in the degree of harm caused by abuse in other settings. This framework does not account for all factors that may affect vulnerability to abuse and risk of psychological harm; however, we outline below those issues most specifically associated with institutions and organizations based on existing research and survivor accounts obtained through clinical experience. The five most critical factors include:

Significance of the Institution to Society. Certain institutions and organizations are highly valued. These institutions often serve important functions (e.g., education, religion, and social services) that help the community to thrive. When an institution or organization is important to a community, the community often holds both the institution and its members in high esteem. Children may be particularly vulnerable to abuse by individuals within these institutions whom they put in positions of trust and authority. When a child is abused, disclosure may be difficult because of the strong community support for the institution.

Role of the Perpetrator within the Institution. The role that a perpetrator plays within an institution is an important factor to take into account when considering both a child's vulnerability to abuse and the consequences that may result from that abuse. Adults and children tend to trust certain individuals based on their position within a well-respected institution (e.g., teacher, minister, and Scout leader). Unfortunately, such implicit trust leaves children vulnerable to abuse, as parents are less likely to scrutinize the activities of such well-respected individuals, and children are less likely to question their authority. A child is also likely to be more vulnerable to abuse by an individual who has influence and control over his or her life. When a child feels that an adult has a great deal of power in his or her life, that child may feel unable to prevent, stop, or disclose abuse by that individual for fear of retaliation.

Extent of Child Involvement with the Institution or Organization. Children who are highly involved with an institution or organization may be at an increased risk for abuse. If a child spends a great deal of time with a potential perpetrator, there may be more opportunities for grooming and more opportunities for the perpetrator to be alone with the child.

Degree of Voluntary or Mandatory Involvement With the Institution or Organization. When the child's association with the institution is mandatory (actual or perceived) he or she may feel trapped and unable to escape an abusive situation. The child also may be less likely to disclose abuse for fear of having to return to the institution and face the perpetrator. Also, children who are voluntarily involved in sports, clubs, or similar activities may tolerate an abusive situation so that they do not have to stop participating in an activity that they enjoy, or so that they may obtain a goal they are working towards (e.g., being accepted into a special academy or sports league).

Abuse and Post-Abuse Events. Circumstances surrounding the abuse and what happens after the abuse can have a profound impact on the victim's well being. The use of the institution's power structure, rules, or belief system to gain a child's trust or maintain silence often leaves the survivor feeling disillusioned and betrayed by the institution or organization. The victim may not be believed or the institution may support the perpetrator's denial. Even if abuse is acknowledged, a proper apology and consequences may not be forthcoming (e.g., the perpetrator may be transferred to a new position), leaving some victims with feelings of self-blame, injustice, or confusion.

A Closer Look at Specific Community Institutions and Organizations

Within our communities, there are many types of institutions and organizations that have become part of our everyday lives. Prominent among these are educational and vocational institutions, religious and spiritual institutions, sporting, cultural, and recreational organizations, and special needs facilities. Our five critical dimensions are discussed below in relation to the dynamics of abuse in the above-noted groups of community institutions and organizations. We approached this task by combining the literature on familial and institutional abuse with knowledge derived from popular media reports, public lawsuits, and clinical involvement with survivors of such experiences. We consider the significance of these institutions and organizations by examining their mission and purpose, the influence and power of offenders in each setting, the extent of child involvement, and the numerous abuse and post-abuse events that affect children's disclosure and recovery.

Educational and Vocational Institutions

Parents, governments, and society almost universally accept the importance of education in the normal development of children and adolescents. Children begin school at the tender age of four or five and in most jurisdictions must continue to attend until they are at least sixteen.

The mission of educational and vocational institutions is to enable individuals to acquire knowledge and interpersonal skills to prepare them for lifelong learning so that they may realize their potential and contribute positively to their community. The importance of having an education is becoming ever more salient, and therefore the negative effects of not being able to obtain an education are even more serious. Advances in technology have created a plethora of jobs that require extensive training, and the minimum level of education required to do many pre-existing jobs has been rising steadily. This may partially explain the increase in the number

of individuals receiving their high school diploma. In 1966, only 30 per cent of 18 year-olds completed high school, by 1996 this figure had risen to 77.2 per cent. || laxxiv

If one were to examine educational and vocational institutions in terms of potential risk for institutional abuse and subsequent psychological harm, a number of features stand out. Perhaps most striking is the non-voluntary nature of school and the large amount of time children spend in school. Between the ages of five and sixteen, children spend the majority of their time at school, which poses a risk for some forms of maltreatment in this setting. The fact that children may be at the same school with the same teacher(s) or other school personnel for many years creates the potential for ongoing abuse.

The high esteem in which most educational institutions and those that work within these institutions are held can also be risk factors. As alluded to above, most cultures consider school a normal part of a child's development. Every day, parents send their children off to school and essentially transfer their parental authority to teachers, principals, and other school personnel. We trust these individuals with our children's lives, and most often that trust is well deserved. Our children also come to trust and admire their teachers, and other adults they come into contact with at school. Without this trust, our schools could not function properly. Children need to feel as though they are in a safe and caring environment in order to express their full potential. Teachers and administrators need the authority to make decisions and care for the children when their parents are not present.

In addition, teachers are powerful figures in children's lives. Many children consider their teachers to be mentors and role models, particularly when the relationship extends outside of the classroom (e.g., coaching, tutoring). Teachers have a great deal of control over whether a child's classroom experiences are positive or negative. Teachers also have control over the child's marks. When a teacher abuses a child, the child may be reluctant to disclose for a number of reasons. Knowing that teachers are generally well respected, children may fear that they will not be believed. They also may fear that if they tell of the abuse they will lose their teacher's favour, their marks may suffer, or their teacher will make school life difficult for them.

Many educational districts also face difficulties responding to allegations of abuse by a teacher, due in part to well-meaning safeguards that protect teachers from complaints lodged by students and parents. To by-pass such obstacles and minimize accountability, some school boards silently transferred teachers who were alleged to abuse students from school to school, resulting in further allegations. This practice further traumatizes victims by creating self-doubt and minimizing their experiences. Recently, increased awareness of incidents in which school boards failed to respond appropriately to repeat offenders has led to changes in policy and practice. Nonetheless, the professional and scientific literature on abuse by teachers is disproportionately focused on false allegations rather than the prevention and treatment of actual incidents of abuse.

When abuse does occur in an educational or vocational setting, the effects can be devastating. Children are left with feelings of shame, worthlessness, confusion, and guilt. Children may also experience Post-Traumatic Stress Disorder or similar symptoms, including avoidance of school and fear associated with educators; loss of trust in or fear of adults, especially educators; loss of interest in school; denial of or refusal to discuss the traumatic event; nightmares; and excessive crying. As parents, survivors may be re-traumatized when they send their children to school, fearing that they, too, will be victimized.

As a consequence of these institutions' failure to act in cases of child abuse, the importance of an education and associated interest in learning and achievement may be compromised. Survivors are left feeling disillusioned with the system, either as a result of the abuse itself or how the abuse was handled (or mishandled), and as a result they avoid any reminders of school and school-related activities. These feelings may continue into adulthood and prevent victims and survivors from obtaining the same level of education or employment they might have otherwise obtained.

Religious and Spiritual Organizations and Institutions

For thousands of years, religion has been a driving force in human culture. Religious beliefs have laid the foundation for traditions, laws, and even guided the development of entire civilizations. Many religious and spiritual organizations are powerful institutions based on complex belief systems and age-old doctrine; others are more loosely formed and are passed from generation to generation through folklore and tradition.

Religious and spiritual organizations and institutions serve an important function for many individuals, communities and cultures. They provide moral, ethical and spiritual guidance for both adults and children. Religious teachings provide individuals with a context for their creation, as well as an explanation for what will happen to their soul after they die. Perhaps most significant, religions are generally organized around the worship of a divine power, or God, who is believed to be all-powerful and all forgiving.

Within these organizations, religious leaders (e.g., priests, ministers, and rabbis) and other representatives of the institution wield a great deal of power. These leaders are often thought of as representatives of God, and are treated with a great deal of respect and authority. From a very young age, parents teach their children by both direct instruction and modelling to respect and obey their religious leaders. Other individuals, such as Sunday school teachers, youth leaders, and choirmasters, are also considered trustworthy by virtue of their strong affiliation with the religious organization. Parents take pride in their children's involvement in religious activities and generally encourage participation, considering these activities the safest and most wholesome activities for their children to be partaking in.

The prominence of religious and spiritual organizations and institutions in modern societies varies greatly. In some parts of the world, religion and culture are almost synonymous. In other regions, there is much more diversity. The degree to which a child is involved with religious institutions may depend on a number of factors, including their family or ethnic background, as well as the neighbourhood, community or geographic region in which they live. If a child's family is quite devout, that child may have daily contact with the religious organization. He or she may attend a religious school, go to daily or weekly religious ceremonies, or participate in special activities within the organization (e.g., youth group, reading at mass). If a child's family is less involved with the religious organization, his or her contact may be limited to a weekly celebration in which the child is accompanied by his or her parents.

The influence and power of religious and spiritual organizations as well as the absolute trust that is often imparted to individuals within these organizations can have devastating consequences for children abused by religious leaders and other individuals affiliated with the organization. The perpetrator of the abuse may use his or her position within the church or the organization to obtain compliance from the child. Perpetrators may coerce victims by telling them that what they are doing is "the will of God" or that God will punish them if they do not do what they are told.

Often explicit threats are not even necessary, as the child has been raised to never question the authority of his or her religious leader. xc

Once the abuse has occurred, the decision to disclose can be very difficult for a child. The perpetrator may have used the child's religious beliefs to frighten him or her into silence (e.g., "you will go to hell if you tell anyone"). The child may also be aware that his or her acts were in some way sinful or against their religious beliefs, with or without threats from the perpetrator. For example, a number of Christian religions consider premarital sex and homosexual acts to be sinful. A child may not disclose abuse because he or she fears religious condemnation for participating in these forbidden, sinful acts, even when they were not consensual. xci

Children who disclose abuse within religious and spiritual organizations and institutions may face a number of obstacles. When children make allegations of abuse against religious leaders and other well-respected individuals associated with these organizations, they may not be believed. The perpetrators tend to be well liked and personable, and their followers will often believe them, rather than the victim, in the face of such accusations. When multiple victims come forward, they are sometimes accused of colluding against the perpetrator or the institution. The victims and their families are often rejected by their religious community or totally excommunicated. This leaves them feeling alienated, humiliated and stigmatized. The loss of community support during such a stressful time may make it difficult for the family to cope and to help their child deal with the trauma associated with both the abuse and the disclosure presuming family members believe and support the victim).

The institution's response to allegations of abuse by individuals within their organization can also add to the trauma experienced by victims and survivors. Priests, ministers and other religious leaders are often transferred to other communities to continue their ministry. Often victims are not given any type of apology, formal or informal. This may increase their feelings of self-blame and injustice and prevent them from obtaining closure.

Abuse by a trusted religious figure may destroy a child's belief that the world is a safe place. Having been raised to believe that God is good, and belief in God provides protection from evil, children have difficulty reconciling how a trusted religious figure could commit such evil deeds. What once made sense no longer makes sense. What was once safe is no longer safe. This disruption of safety may cause the world to seem chaotic or unstructured. Children may try to compensate for this by reorganizing their world. This might include blaming themselves for the abuse, engaging in self-destructive or age-inappropriate behaviours to survive the abuse, or in some cases acting out their anger and rage by abusing others. **Ciii

When a religious leader or a member of the clergy or religious order perpetrates child abuse, it is often found that the victim or survivor's belief in or perception of God, spiritual practices, attendance at religious services, and trust in religious representatives is severely negatively affected. **Civ** Victims*, particularly children, have difficulty separating the offending clergy from the religious organization or God. In some religions, religious leaders are called "father" and are a representative of God. To be violated by a priest, for example, is to be violated by God, Christ, and the church. Victims or survivors may feel that God failed to protect them, and may fear further abuse if they return to the church. This sense of betrayal can cause a crisis of faith that may destroy a victim's comfort with and belief in important religious rituals, symbols or icons or even worse, a complete abandonment of their faith.

Sporting, Cultural, and Recreational Organizations

An area that is often overlooked when considering child abuse in institutions and organizations is abuse that occurs in sporting, recreational and cultural organizations. The reason for this may be that these organizations are rarely thought of as "institutions" despite the fact that they have existed for a long time and are an important part of many cultures. Included in this category are a wide range of teams, clubs, groups, and organizations, serving a wide range of children. They may be community-based, such as a neighbourhood hockey league, or they may be part of a larger institution, for example a school volleyball team or a church choir. These clubs or groups may themselves form a large organization, or they may be local and independent.

This category also takes into account activities and organizations that are increasingly becoming a part of children's lives that for various reasons previously have not been considered under the rubric of institutional abuse. Technology has created a new means of accessing vulnerable children, through devices such as the Internet.*CV Predators who once had to stalk playgrounds, schoolyards and neighbourhoods and try to entice their victims under the watchful eye of their parents now can sit at their computer and visit children's chat rooms and cyberclubs. They can befriend children, or even pretend to be a child, while the victim's parents are in the very same room. Although the child may never find out that their online friend is really a pedophile, if their "cyber-club" ever did decide to meet, the results could be disastrous. Other activities that are not traditionally thought of as institutions, but which harbour the potential for child abuse include the fashion industry, modelling, and the visual arts, among others.

The mission and purpose of these organizations and institutions vary greatly. However, all seem to be focused on extracurricular, recreational or leisure activities that develop children's knowledge, abilities, social skills and/or life skills through being part of a team, club or group. Even when an organization has a well-established mission, it may serve a different function in different children's lives. For a less fortunate child, the support offered by an organization's leader or the opportunities available through the local youth club may help compensate for a troubled life. For a more privileged child the same experiences may be more leisurely or recreational in nature. Similarly, for most children and youths, playing on sports teams is an enjoyable past time or extracurricular activity. However, some children aspire to participate in college or professional athletics, and sporting organizations can take on an even more powerful role in their lives.

The extent of a child's involvement with an organization as well as the influence and power of the adults within the organization both must be considered when evaluating the vulnerability of a child within that organization. Some children's participation in the activities associated with an organization may be minimal. They may only attend weekly meetings, games or practices. Other children may be highly involved with an organization. A child aspiring to be a professional swimmer may be involved in a number of swimming-related activities: school swim team, community swimming league, and swimming lessons. He or she may also be involved in activities geared at raising funds to travel to various tournaments and swim meets. Although ostensibly the child's participation in these activities may be voluntary, there may be pressure from both internal and external sources (i.e., parents and coaches) to be successful.

The coaches and leaders of sporting, cultural and recreational organizations are often in a position of trust and authority. When organizations are part of a larger institution (e.g., a school or a religious organization) their leaders are often considered trustworthy by virtue of their affiliation with the institution. Principal care and responsibility for children is sometimes handed over to coaches, chaperones and leaders for extended periods of time, particularly when the

activity takes place away from home, as is the case in many tournaments or travelling leagues. Children's vulnerability may be further increased by their desire for special attention or rewards (e.g., scholarships, special privileges) or their fear of punishment or exclusion should they disobey.

When abuse does occur, the very qualities that make these types of organizations so valuable to a child's development can be one of the major obstacles to disclosure. In many cases, the coach or leader who perpetrated the abuse is well liked by the victim's fellow group members or team-mates. This is particularly true if the group or team has been successful. Children may fear that if they disclose the abuse they will not be believed or they will lose the respect and friendship of their peers. They may also fear that if they report the abuse they will jeopardize their dreams, either because they feel they need the special treatment or training they have been receiving, or because they fear the consequences of disclosure. This may cause children to remain silent and tolerate the abuse much longer than they would in other situations, in a sense accommodating the abuse. **xcvi**

When a child does decide to report abuse that occurred in these types of organizations, the outcome may not be favourable. Victims may find themselves ostracized by fellow team-mates or group members, thus losing their sense of team identity at an already difficult time. If the perpetrator was an important figure in the community or if the organization was significant to the community, the victim may be shocked by the rallying of support for the perpetrator. The victim may be labelled a whistle blower or a liar and as a result be further victimized. Even when the victim is acknowledged, the organizational response may be one of minimization, with the perpetrator simply being transferred or given a mere "slap on the wrist."

Sporting, cultural and recreational organizations are meant to be enjoyable activities. Besides school, they are one of the major means by which children can broaden their horizons and develop a sense of self-esteem. When abuse occurs within these organizations, a child's confidence, self-esteem and ability to trust is eroded. The trauma of the abuse may lead to a decline in the child's performance (both within and outside of the organization), which subsequently may interfere with his or her ability to achieve his or her future goals. The child may also experience a loss of interest in and pleasure from activities that were once very important in his or her life. Even children who were not abused but who witnessed the abuse may be adversely affected. They may be frightened into compliance or they may come to resent the special attention that the victim receives.

Special Needs Services and Facilities (correctional, mental health, health, social services, foster care, and residential schools)

In every community there are organizations that address special needs of children and youth. The types of services offered by these organizations are quite diverse and depend on the needs of the children being helped. Some try to compensate for disadvantages, lack of opportunity, family problems, or missing elements in a child's life (e.g., providing role models and support for children with a variety of special needs). State and provincial child protective and social service organizations provide assistance for children in need of care and protection. Other special needs organizations address specific problems or disabilities. Mental health services assist children with emotional, psychological, psychiatric, or behavioural problems. Correctional services provide programs for children who have become involved with the legal system. There are also organizations and institutions, often residential, which help children with physical and developmental disabilities.

Considering the dynamics of child abuse within special needs organization presents a unique challenge because of the wide range of services offered by each of these institutions. Many of these organizations provide everything from emergency care, crisis intervention, or short-term care, all the way up to long-term residential placements. Each of these types or levels of care is associated with unique risk factors for abuse. For example, the risk factors for a child receiving outpatient treatment at a mental health clinic will be very different from a child who is in a group home for children with behaviour problems. Similarly, a youth who is in a secure custody detention centre may be much more vulnerable to abuse than a youth who is on probation, although both are involved with correctional services.

Children's involvement with special needs organizations frequently is non-voluntary and sometimes even their parents have little control over their well being. Children often come to the attention of social services because of some type of family breakdown. Parental rights may be temporarily or even permanently terminated. The child then becomes the responsibility of social services. Although it may be in the best interest of the child to be removed from his or her family, in the event that abuse occurs within the social services organization, without the support of his or her family the child may not know where to turn.

In other cases, the very reason that children come to the attention of special needs organizations (i.e., their "special needs") may make them more vulnerable to abuse, make it more difficult for them to report abuse that has occurred, or damage their credibility when they do disclose abuse. For example, research has shown that children who are deaf or hard of hearing are at an increased risk of sexual abuse, even more so than children with other disabilities, likely as a result of their difficulty understanding or verbalizing episodes of abuse. Other disadvantages which bring children to the attention of special needs organizations, such as family problems or past abuse, may make children more vulnerable to abuse, and may also make it difficult for them to report abuse. Children with behaviour problems or mental health problems may be reluctant to disclose abuse for fear that they will not be believed. Staff within correctional facilities or mental health facilities may feel that children within these settings are "safer" targets because if they do disclose they are less likely to be believed because of their past behaviour. The very behaviour problems that led to their institutional care may end up undermining their credibility when they disclose abuse.

As we have seen in the other non-familial institutions and organizations discussed previously. adults often have considerable control over children by virtue of their position within special needs organizations. Many of them are professionals or paraprofessionals, such as doctors, psychologists, social workers, childcare workers and counsellors, who are trusted by parents, children, and the community in general. When abuse does occur within a special needs organization, victims face similar obstacles to disclosure, such as fear that they will not be taken seriously or believed, particularly for those with a history of mental health or behaviour problems.xcix If they report the abuse but are not believed, they may face repercussions from both the perpetrator and other staff within the institution. Children may also choose not to disclose the abuse for fear that the consequences of disclosing will be worse than enduring the abuse. For example, a child who has been placed in multiple foster homes may fear that if he or she discloses abuse, the next placement will be a group home or residential facility. As was the case with other types of non-familial abuse, the effects of abuse occurring in special needs facilities can be institution specific, such as a sense of isolation and general mistrust of "helping" institutions and organizations. This problem compounds the difficulty in accessing therapy and support, as all counsellors may be seen as untrustworthy and potentially abusive.

Implications for Science and Practice

Survivors of child abuse in institutions and organizations have clearly identified an important social problem that has long been ignored, denied, or minimized. Their courage has forced society to face painful realities about trusted community leaders, established organizations, and cherished institutions. Despite the tendency to deny the existence and extent of child abuse in institutions and organizations, it is not surprising that society has been slow to acknowledge such acts of abuse. Until a proper understanding is achieved, most community members would seek to disavow or minimize the events because the institution in question has been sanctioned by them to serve an important and desired function. Moreover, some forms of abuse are readily disguised within the function of the institution itself, thus confusing abuse with its proper role, such as discipline, childcare, and socialization. On the other hand, the overwhelming evidence of such widespread abuses and harm to the lives of many speaks to the need for greater public understanding and action.

Although most institutional representatives and volunteers are dedicated to the well being and safety of children and youth, a small minority creates havoc in the development of children by exploiting their trust and innocence through abusive care taking relationships. Without the disclosures of survivors, this pervasive problem could not be clearly named or understood. By naming a problem we refer to society's ability to discuss an issue openly without the survivor being blamed for breaking the comfortable silence. For example, it is not unusual for survivors of abuse by teachers or priests to be shunned or disbelieved because of the discomfort in examining the role of the perpetrator as well as the re-victimizing response of the institution. The discussion often turns to false allegations of abuse or the financial plight of institutions, rather than the long-term impact on the victim.

Much of the general public's current understanding of child abuse that occurs in institutions and organizations is derived from high profile media reports of investigations, arrests, and court outcomes. An unfortunate consequence is that the public often is presented with a biased or incomplete picture of the circumstances surrounding institutional abuse. For example, media accounts of large monetary settlements for victims or groups of victims of institutional and organizational child abuse are commonly reported. However, to someone with little understanding of the long-term effects of such abuse, these sums of money may seem only to foster a "victim mentality" in which one's life is put on hold in hopes of obtaining financial gain. Offending institutions, which declare that such settlements are causing them undue financial hardship that threatens their important role, or future existence, in the community, worsens this prejudice. The result can be a backlash toward survivors, who may be seen as being responsible for the troubles experienced by the institutions, rather than the institutions or perpetrators being held accountable.

A deeper understanding of this issue must include consideration of the vulnerability of children (e.g., due to age, family status, or special needs) and the overwhelming power of authority figures within these settings. In the words of a survivor consulted for this paper, "when very right people do very wrong things, it's hard for a child to know the difference." This understanding has implications for developing safeguards within community settings that recognize this vulnerability and power imbalance in the hands of adults. These safeguards may include better training and awareness programs for adults as well as youth, policy and protocol development for dealing with disclosures and collaborating with police and child protection services, and more

responsive community agencies and justice professionals that promote safety, accountability, and healing from abuse.

To increase understanding of the problem of institutional abuse, it is also necessary to appreciate the experiences, both past and present, of survivors of abuse in institutions and organizations. For example, although survivors may seek monetary compensation for their victimization, for most it is low on their agenda. Rather, the majority of survivors who take civil action or file for compensation do so for therapeutic, rather than monetary, reasons. They want to be heard and to have their experience acknowledged as hurtful and wrong. Survivors also take civil action in an attempt to obtain the justice they feel they have been denied. In fact, survivors rarely seek civil remedies or compensation solely for monetary reasons.^c

Mental Health and Forensic Assessments

This paper has postulated a number of dimensions that need to be considered in understanding the nature of the abuse that occurs within institutions and the unique impact of this abuse. With respect to mental health, the assessment and treatment of survivors will require an understanding and analysis of the dimensions of abuse. Often mental health professionals are asked to assess survivors for criminal and civil court hearings. In the context of criminal hearings, a judge and/or jury may need to understand delayed disclosures and continuing contact with the abuser in some instances. This evidence may be essential to educate the court. At the sentencing stage, a thorough assessment may help the court understand the long-term impact of the abuse on all areas of functioning, such as mental health, employment, relationships, education, health, and family functioning.

It will be important for clinicians treating a survivor of institutional abuse to recognize that there are some fundamental differences between the experiences of survivors of non-institutional abuse versus institutional abuse. There may be unique effects of abuse in institutions and organizations that need to be fully addressed to assess the impact that the abuse has had on the survivor, and to ensure that the survivor receives the maximum benefit from treatment. One impact of abuse may be distrust of professionals, which can further hinder a survivor's chance of entering and remaining in treatment. As well, prolonged criminal and civil proceedings resulting from disclosure can compound these problems and further interfere with their ability to seek help. These legal proceedings may trigger flashbacks and other trauma-related symptoms that further undermine current adjustment and family functioning.

An increased awareness of the impact of abuse in institutions and organizations will also ultimately affect how legal remedies are administered. For example, a better understanding of the broad impact of various forms of institutional abuse will help lawyers argue cases, and assist juries and judges in making more informed decisions in both criminal and civil trials. Similar to other victims of abuse or violence, survivors of abuse in this report indicated that they need more help than what is typically available, that the treatment they did receive was of insufficient length to fully address the consequences of the abuse, and the quality of care they received was not what they had anticipated. It is hoped that a greater understanding by both professionals and laypersons of the consequences of abuse in institutions and organizations will lead to legal remedies and compensation packages that are more suited to the actual needs of victims and survivors.

The legal system seeks to define tangible symptoms stemming from child abuse that can be measured in financial terms. In fact, economists and others have recently sought to measure

the costs of abuse to individuals and society as a whole, such as lost income due to dropping out of or failing school, poor employment prospects, and alcohol dependency. However, it is more difficult to put a dollar value on losing faith in God and leaving the supportive environment of a church community after child abuse by a minister, as one example. Traditional formulas to determine damages, as well as pain and suffering, need to be revised to capture the profound impact of abuse by institutions and community organizations.

Education and Training

A further conclusion from speaking with survivors is that there is a need for broad-based education and training on the effects of abuse in institutions and organizations. Education and training needs to be directed at institutions themselves (e.g., staff, volunteers, board members), as well as community professionals that provide services to survivors. Many survivors spoke of their entire families being shunned by religious communities due to the victim's disclosure. The majority of victims describe the legacy of their abuse being compounded by lack of intervention and prevention programs, despite their efforts to break the silence. Survivors need to see an open and genuine effort by the institution that goes beyond superficial reactions to disclosures as if they are isolated incidents.

A starting point for education would be to have institutional leaders clearly name the problem within their settings, and verbalize a commitment to redress past abuse. For example, a priest, in his Sunday homily, could discuss this painful issue and acknowledge the long-term impact on victims and their family members. Special seminars and support groups within the congregation to provide an opportunity to heal could follow this address.

Education and training also needs to be directed to front-line professionals who come in contact with survivors of institutional abuse. Many survivors require long-term assistance that goes beyond the resources or capacity of the health and mental health systems. At a time of increasing cutbacks and restraint, survivors report being unable to access meaningful interventions beyond crisis responses and medication. Many survivors describe being revictimized by insensitive and/or untrained service professionals, who tell them simply to "get on with your life" or "put this behind you" without appreciation of the profound impact of the abuse. They experience little relief from their symptoms, and may have their difficulties compounded by misdiagnoses and improper interventions. Therefore, education and training needs to include expanded assessment and intervention strategies that more fully capture the unique nature of the abuse and the long-term consequences. Furthermore, training needs to be inter-disciplinary to ensure the collaboration necessary amongst the justice, health, mental health, social service, and education sectors.

Policy and Prevention Initiatives

Survivors' trauma can be mitigated knowing that initiatives in early recognition and prevention will stem from their experiences. Many of the survivors we have spoken with are profoundly distressed on learning that their abuser has moved on to other schools or churches and continued to inflict harm on other children, even after they had disclosed their abuse. The only plausible conclusion that one can draw is that institutions lack the policies, protocols, and prevention strategies necessary to ensure the safety of children. A recent review of sexual abuse by school staff in Ontario confirms that the most common response to historical abuse was to move the perpetrator to another setting rather than assuring safety of other students. In

fact, the literature in this field refers to the term "passing the trash" as a way of recognizing the inadequate response of institutions.

Steps need to be taken to prevent future instances of abuse from occurring in community institutions and organizations. The conspiracy of silence within institutions, communities and society in general must be broken. Most modern institutions have begun to take steps to prevent future occurrences of abuse by their representatives. Some examples are improved screening and supervision of staff, putting policies in place to deal with transgressions, and community awareness programs. However, much still needs to be done before our children will be safe within these organizations and institutions.

The policies that are put into place to deal with abuse in institutions and organizations must reflect an awareness of the unique nature of institutional abuse. Society is increasingly becoming aware of the deleterious effects of intrafamilial child abuse, and as a result many institutions have programs in place that are designed to prevent and detect abuse. Some of these same institutions also treat victims and survivors of abuse in either an official (e.g., mental health facilities, Family and Children's Services) or unofficial capacity, by providing support and guidance to victims (e.g., children from chaotic families often look to other adults in their life for the love and stability they lack at home).

Dealing with institutional abuse becomes problematic because it often involves individuals in positions of trust, power and authority – the very individuals we rely on to protect our children from harm, and the same individuals who run the institution. The power structure within institutions may make it difficult for both children and other adults in the institution to report abuse. When the abuse is reported, administrators are forced to balance the competing interests of the child, the alleged perpetrator, and the institution. All too often, the rights and well being of the child are eclipsed by the broad ramifications of the allegations on the institution. Even as society comes to recognize the seriousness and long-term consequences of abuse, most people are more comfortable viewing perpetrators as strangers rather than trusted adults. This disproportionate attention to strangers does not reflect the reality that the majority of perpetrators of physical and sexual abuse outside of the family are persons with significant roles in community institutions and organizations providing services for children and their families.

Summary and Conclusions

This paper has been written in the hopes of expanding public and professional education on the profound impact of abuse by perpetrators representing community organizations and institutions. The most significant abuse in Canadian history was documented in residential schools as recently as the 1970s. This abuse was devastating because of the total control of the institutions representing our government and various churches and the many spheres of violations, including spiritual and cultural. We hope to expand our understanding of these issues by examining a range of community organizations and institutions that have violated the rights and well being of children and adolescents. Although the bricks and mortar of the institutions have been removed, the fabric of the institutions and the dangers of sexual perpetrators continue. Some of the Aboriginal members of our focus group spoke of the ongoing abuse by teachers in day school long after the residential programs were dismantled.

We have developed a broader framework beyond the traditional childhood abuse literature to understand the impact of child abuse in community institutions and organizations. This framework examines critical dimensions of abuse in institutions and organizations such as the

significance of the institution to society, the role of the perpetrator within the institution, the extent of child involvement with the institution, the degree of voluntary/mandatory participation in the institution, and abuse and post-abuse events. When this framework is applied to individual institutions and community organizations one can hypothesize the specific impact of each organization according to its expressed purpose and goals.

We hope that this paper will enhance the dialogue amongst legal mental health professionals who provide a variety of services for survivors of abuse from therapy to civil and criminal remedies for abuse. The framework we outline can assist in a better understanding of the unique impact of institutions and community organizations based on the experiences of survivors. Future research can test some of our hypotheses on the critical variables that may predict different life outcomes for survivors based not only on the abuse itself but also on the societal and institutional response to the abuse.

Appendix A

Studies of the Long-term Effects of Abuse

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