Understanding child sex offenders: implications for the protection of children

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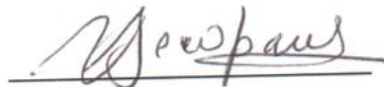**Publications:**

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Abstract

UNDERSTANDING CHILD SEX OFFENDERS: IMPLICATIONS FOR THE PROTECTION OF CHILDREN

Although largely underreported, the incidence of child sexual abuse (CSA) is increasing in South Africa within a context of engendered violence, inequalities, wider structural, cultural challenges, and the secrecy and myths, which surrounds this endemic social problem.

There are two polarities of relevance to child protection in this thesis: the one involves understanding the mind-set and modus operandi of the sex offenders who sexually abuse children and the second involves understanding the entrapment and vulnerability of the victim. Understanding of these polarities has been synthesized to discern their implications for the prevention of child sexual abuse.

The current study, which was conducted over three phases, was guided by a qualitative paradigm and set within a framework of critical social work theory. Critical theory focuses on the impact of socio-structural factors and dominant societal discourses on individual and family functioning, the relationship between structure and agency, the need to transcend the micro-macro divide in dealing with major psychosocial issues and the power of praxis. The first phase of the research entailed analysing the characteristics and the life experiences of twelve child sex offenders. In phase two, the testimonies of the child sex offenders were assimilated in the production of a DVD, on the mind-set and strategies adopted in sexually abusing children. In phase three the DVD was screened and various service providers and parents of sexually abused children, reflected on and assessed the lessons associated with understanding the offenders methods in selecting, grooming children, ensuring compliance, non-disclosure, desensitization, maintaining them as victims and avoiding detection. The findings indicate that understanding of the mindset and strategies of the offender has implications for child protection, within a context of altered structural factors, systems and institutions. Further implications and practical recommendations for prevention are provided.

Key Words----Child sex abuse, sexual offending, prevention, offender strategies, victim grooming, modus operandi, critical theory.

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DECLARATION - PLAGIARISM

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Signed

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Acknowledgments

Dedication

To the children of this world who have suffered turmoil and trauma due to the impact of sexual abuse

Acknowledgement of financial aid

Ethical considerations

Ethical clearance for the research was obtained from the Ethics Committee of the Faculty of Community and Development Disciplines at the University of KwaZulu-Natal.

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24 June 2012

Ms Linda K Naidoo (200278813)
School of Social Work

Dear Ms Naidoo
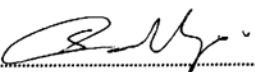
Protocol reference number: HSS/0310/012D
Project title: Understanding Child Sex Offenders: Implications for the Protection of Children in South Africa

In response to your application dated 08 May 2012, the Humanities & Social Sciences Research Ethics Committee has considered the abovementioned application and the protocol has been granted FULL APPROVAL.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment /modification prior to its implementation. In case you have further queries, please quote the above reference number. Please note: Research data should be securely stored in the school/department for a period of 5 years.

I take this opportunity of wishing you everything of the best with your study.

Yours faithfully

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Inspiring Greatness

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Chapter One: Introduction and background

Introduction

Sexual violence against children in South Africa, has increased and according to a report by BBC news, "a female born in South Africa has a greater chance of being raped in her lifetime than learning how to read" (Dempster, 2002).

These are concerning statistics and reflects the state of well-being of children in South Africa. The aim of the research was to gain a holistic and comprehensive understanding of child sex offenders and their strategies, with the hope that this would provide an opportunity to protect and reduce children's vulnerability.

This chapter states the research problem, presents the purpose of the research and its significance, the theoretical framework for the research, questions that would be responded to in the study, the delimitations, definitions of important concepts, organisation of the research design and concludes with an outline of the structure of the chapters.

Background

South Africa has an approximate population of 49.9 million people, of which 40% are children and 37% youth (STATSA, 2011). Unemployment is one the major challenges with one in four working-age South Africans being unemployed. Other major development challenges are poverty, HIV/AIDS, inequality, poor levels of education. "Ultra-skewed asset-ownership, an inheritance bequeathed by the apartheid past, is still a fundamental driver of income inequality" (United Nations, 2012). Overall, income poverty affects predominantly blacks, with poverty impacting on about half of the population and two-thirds of children. Violence against women and children is associated with social, cultural and economic factors, a legacy of inheritance from the apartheid era. Substance abuse also represents an important risk factor for violence in South Africa with 53% of fatal and up to 73% of non-fatal interpersonal violence injuries testing positive for alcohol in urban areas (USAID, 2009).

South Africa appears to have one of the highest incidents of sexual abuse against children and has often been labelled as the "rape capital of the world" (Jewkes, Vetten, Jina, Christofides, Sigsworth, & Loots, 2012, p.11). The efficacy of current prevention strategies, is hence, dubious. It appears that much needs to be understood about the phenomenon in order to inform and develop children on effective prevention and protection strategies for children.

As the former Provincial director of Childline KwaZulu-Natal, I was in a position to have insight to the most severe forms and prevalence of abuse, neglect and exploitation against children. Childline offered the following services: a provincial crisis helpline which received an average of 300 000 calls per year; had various satellite offices which delivered therapeutic and court preparation services to sexually abused children and their families; therapeutic services to child and adult sex offenders who perpetrated offences against children; education, awareness, prevention and outreach services to children and communities; counselling to adult survivors of childhood sexual abuse; advocacy and training on child abuse. The researcher contributed to a period of 13 years in service delivery: as a therapist to children and adults who sexually abused children; an expert witness in the prosecution of cases of child sexual abuse; an accredited trainer; presenter of several papers at local, national and international conferences on child sex offenders and child victims. Hence, I am in a strategic and meaningful position to gain entry into the life-worlds of offenders to understand the trauma imposed on child victims, and contribute to the development of holistic strategies on child sexual abuse.

During the course of providing services to child sex offenders they indicated an interest in contributing to a research of this nature, in order to motivate other offenders to seek help and rehabilitation, inform parents on the protection of their children from sexual abuse by shedding light on offending strategies.

Since its beginning in 1986, Childline had talked to thousands of children on a range of problems. Child sexual abuse statistics had always been high and to date remains unabated. The counsellors had heard children talk about: the most appalling forms of abuse; their hurt and betrayal by those who should have cared for them but abused them, and made to feel responsible for the actions of the abuser and guilt for their part in the incidents of abuse. Every day the counsellors heard the fear and

confusion of children, who had been manipulated and deceived by abusers, but were unwilling to disclose their abuse for fear of not being believed, but held responsible for the disruption to their homes, imprisonment of the person that they love, face ridicule of their peers, or worse still, being removed from their families to alternate care.

When you hear this daily, helpless, hurt cry of little voices, and witness the ongoing, inadequate rate of conviction, you realise that it is time for more to be done, to protect children in this country. Child sexual abuse is a serious and widespread problem in this country, yet most of the offences go unreported, as confirmed by the South African police (Dempster, 2002). The effects of sexual abuse are too destructive to be ignored.

When South Africa became a democracy in 1994, there were already 18,801 cases of rape per year. In the year 2000, a report presented by the Child Protection Unit of the South African Police Services noted 21 000 cases of rape and attempted rape of children (Richter, 2005). By 2001 there were 24 892 cases, and of these 5 859 (37.4%) children were under 12 years of age and the rest (62.6%) were 12 to 17 years of age (van Niekerk, 2004, cited in Burton 2005). From April 2002 to March 2003, there were 52 425 rapes reported in South Africa, of which a significant number were of children under the age of 18 years (van Zyl & Sinclair, 2006). According to South African Police Service statistics (SAPS, 2003-2004), child abuse is on the increase in South Africa. The South African Police Services (SAPS) had suggested that one rape occurs every 35 seconds (Mail and Guardian, 17 August 2005).

Crime statistics in the country remained high for sexual offences, as indicated in annual reports released by the South African Police. With regard to the 20 141 cases of sexual offences recorded during 2008/2009, 60.5% were committed against children below the age of 15 years. It is even more disturbing to note that 29, 4% of these sexual offences involved children aged 0 – 10 years. For the period 2010/2011, with regard to the social contact crimes committed, 51.9% were sexual offences, and sexual offences against children increased by 2.6%. Statistics from the South African Police Service show there were more than 54,000 reported crimes against children between 1 April 2012 and 31 March 2011.

South Africa has one of the highest rates of child sexual abuse in the world (Collings and Wiles, 2004; Dempster, 2002) with this rate increasing for all reported cases (Collings & Wiles, 2004; Jewkes et al, 2002). However, crimes against children are grossly underreported and the real figure is believed to be much higher.

Prevention remains elusive if the incidence of sexual assault in South Africa is not decreasing. Legislation in itself has not been adequate to address the problem and yet South Africa has been enriched by massive legislative changes. Hence there are complex factors that elude us. Is it possible to re-dress our prevention strategies? Do we have adequate information on child sexual abuse to understand the phenomenon? What leads an offender to sexually abuse a child that he is entrusted to protect and care for? The implications for the child and the offender are clearly destructive, yet this atrocious act is still committed.

Numerous studies indicate that for all types of child sexual abuse, strangers, consist only a minority of perpetrators, hence 'stranger danger' is a myth, and most abuse takes place within the family and by people known to the child (Finkelhor, 1994; Lalor and McElvaney, 2010). Worldwide at least one fifth of all girls and about 10 per cent of all boys are sexually abused by family members and persons close to families (Finkelhor, 1994). A study conducted by Lalor and McElvaney (2010) depicted the rates of abuse committed by strangers: they reported that one per cent of offenders consist of strangers in New Zealand; two per cent in the United Kingdom; 10 per cent in Swaziland; 16 per cent in Israel; 20 per cent are strangers and recent acquaintances in South Africa, and 36 per cent are strangers in Ethiopia. They indicate high rates of abusers are known to the child victim for instance, 86 per cent were reflected to be family members in New Zealand, 76 per cent of the abusers were family members or known to the child in Ireland, 78 per cent were boyfriends, neighbours, or a male relative in Swaziland and, in South Africa, persons known to the child were educators (33 per cent), relatives, family, or boyfriends (10 per cent) (Lalor and McElvaney, 2010). A third of the sexual abuse against children are said to be committed by a family member in South Africa (Shields, 2010).

Statement of the problem

The levels of violence especially child sexual abuse in South Africa are exceptionally high and children are more likely to be victims of abuse than adults.

In South Africa the number of rapes of infants since 2001 has been a concern, and furthermore 40 per cent of all victims who reported rape were children, yet this is only the tip of iceberg as children are impeded by many factors that prevent disclosure (Jewkes, Abraham, Mathews, 2009). The Institute for Security Studies pointed out statistics indicating that sexual violence nationally had increased since 2012 by 1.5%. Jewkes (1999) indicated that it was a challenge using statistics released by the South African Police Service as many incidents of rape are not reported and it is estimated that if all rapes were reported, the figures could be as high as 500 000 for the country per annum. The Medical Research Council indicated a reporting rate of all rapes to be at around one in nine rapes, which has been generally accepted as credible by both government and civil society (Jewkes, 1999). It was indicated that matters were under-reported, partly because communities have no confidence in a system that does not adequately attend to victims but allows rapists to go unpunished, and this culture of impunity results in the occurrence of rape incidents increasing (Jewkes, 1999).

The Medical Research Council further indicated that of the 52 617 rape cases reported in South Africa between April 2006 and March 2007, 60 per cent were withdrawn, of which 44 per cent were closed by the South African Police Service (SAPS) and 16 per cent by the National Prosecuting Authority (NPA). The conviction rate for cases during this period was approximately four per cent (Vetten, Jewkes, Sigsworth, Christofides, Loots, and Dunseith, 2008). Summatively, if children are a third of the world's population then the reported cases of child sexual abuse are grossly an underestimation as children are sometimes reluctant to disclose abuse for a number of reasons, families and service providers are reluctant to report to authorities, and statistical systems are not always reliable.

Sexual abuse is a global concern of enormous proportions and has been a harsh reality for children since the dawn of history. Child sexual abuse is a serious social, economic and public health problem that hurts all who are victimized, affecting the

quality of life and life chances of an uncounted number of survivors worldwide. It is an age-old epidemic yet there has been no cure and inadequate attention has been focused on the problem to ensure its dissipation.

This background provides the picture that the prevalence of child sexual abuse is almost a normality in the life of a child, and considering the destructive nature of abuse in the lifetime of an individual, this has horrendous implications for the potential of society.

Systems of inequality, the issues of tradition and masculinity together with other factors contribute to the explanation for South Africa's high levels of sexual violence against children. Situational factors such as poverty, substance abuse, family violence, are inadequate on their own as explanations of these factors should be seen in the context of inequality, inadequate institutions, and a history of violence perpetrated against South Africans by the apartheid system. South Africans still carry the scars of violence, which has to be offloaded, and children are bearing that brunt.

Men are more dominant to women and children in our patriarchal society, generally occupying positions of power, influence and privilege to maintain their position. Men in South Africa are the breadwinners, and women and children are dependent on them in this patriarchal society (Pierson, Castles, Naumann, 2014).

The child may have a right to access to institutions of criminal justice, but the incompetence, gross inequalities and inconsistencies of the intervention systems do not allow children to be protected. Mismanagement of cases allows abuse to continue. These conditions may be systemic, unintentional, but thrives consciously and unconsciously into daily activities (Pierson, Castles, Naumann, 2014). Policy and legislation are meaningless if not implemented.

Offenders have mind sets that are distorted by stereotypes and myths that entrenches their offending behaviour; and those who are entrusted with disclosure of the sexual abuse by children may have a self-protective mythology that prevents them from believing the victim (Summit, 1983).

Purpose of the study

Child sexual abuse is a traumatic and life-altering experience, too destructive to society and children not to invest in the protection of children. The current prevention strategies in South Africa have not prevented children from being sexual abused, as child sexual abuse has been increasing and the proportion of adult men from the general population who have raped is between 28-37% (Jewkes, Vetten, Jina, Christofides, Sigsworth & Loots, 2012).

Child sexual abuse is fuelled by societal myths, stereotypes, deception, manipulation, children's inability to disclose child sexual abuse, uninformed and inappropriate management of cases, lack of political will.

The purpose of the research was to

- explore the aetiology of child sex offenders,
- understand the child sex offenders and their behavioural strategies of how, who, when and why they target children
- determine whether knowledge of the above two purposes will contribute to demystifying the complex phenomenon of child sexual abuse,
- to capture the strategies of grooming, planning and orchestration of the abuse by the child sex offenders, on a DVD
- to expose a diverse population of service providers, academics, managerial and policy implementers involved in child protection, including parents and caregivers of children who were sexually abused to the DVD
- to test whether knowledge of the behaviours and strategies of how offenders enact their crimes, perceive opportunities, manage risks, can assist in designing and implementing prevention programmes

The video that has been compiled depicts how abusers seek to maintain their behaviour through manipulation of those around them as, and although they take risks to abuse children, they always ensure that their tracks are covered so that their behaviours are not exposed. The abusive behaviour is dehumanizing to children as it is violating. They constitute a risk to children, and the community and systems that

serve to protect children must be mindful of the behaviour of the offenders. The DVD serves to expose the strategies of the offender. In screening the video to various groups and including them in reflexive discussion, it was hoped that relevant stakeholders involved in the field of child protection and parents and caregivers, would be able to prevent abuse and protect children more effectively.

Significance of the study

Rape in South Africa is predominantly initiated in the adolescent period, three quarters of men who raped indicated that they did it for the first time before the age of 20, and nearly one in 10 admitted raping a child before the age of 10 years. This has implications not only for child victims but children who perpetrate abuse (Dunkle, Jewkes, Brown, et al., 2004).

The South African Constitution is widely known as one of the most progressive constitutions in the world. It emphasises human rights and human dignity for all. However, the nature and extent of child sexual abuse in South Africa robs children of their right to dignity and justice and to live in freedom without fear of sexual violence. Changing the face of child sexual violence in South Africa is a crucial and indispensable step towards paving the way for a safer, healthier and more just country for current and future generations (Jewkes, 1999).

Would understanding and rehabilitating child sex offenders be an option to address the prevention of sexual abuse of children and save the lives of potential victims? Understanding sex offenders as well as their *modus operandi* of how and who and why they target children may contribute to demystifying this complex phenomenon and preventing it. There needs to be a serious position about addressing this contaminating phenomenon of abuse and be serious about protecting the childhood of the most vulnerable and powerless. The answers to these questions have significant practical implications for the public, clinicians, caregivers, politicians, policy makers, advocates and implementers of child prevention and protection strategies. Hence, the current research study brings together these various groups to instil commitment, zest and create an emancipatory process of addressing the injustices against children. There is danger if communities, children and service providers do not understand the behaviour of abusers or their predispositions.

Hence, if we delve into the experiences of the offender, and explore his motivations and life circumstances, this may contribute to the enriching of current child protection programmes, rehabilitation strategies, enriching training programmes for service providers and members of the criminal justice system who are still uncertain of the issues of risk that an offender in a South African context may pose, the levels of remorse, *modus operandi*, habits and characteristics, trends of such offenders. During the course of my work experience, a magistrate in the Durban court indicated that he and his colleagues would be most interested in evidence based training of this nature, as did other service providers. They expressed a desire to be included in developing new strategies for child protection.

This study contributes valuable insights and theory into the integration of the modus operandi of offenders into a strategy of Child Protection, especially in the light of the amount of resources being dedicated to the implementation of Child Protection models. There is a need to understand the mind-sets of offenders to understand their perspective of the crime to build more effective intervention strategies at various levels. The results of this study may be utilized to develop improved training models. It is evident that the potential impact of Child Protection strategy cannot be overlooked. The results of this study may contribute valuable insight and theory into successful implementation to prevent the sexual abuse of children. Furthermore, I drew on the involvement of various participants in ascertaining the success of the forms of praxis adopted in this study. I attempted to understand the problem through the lens of the offender, as only an offender could authenticity help us to understand his crime. In testing out the feasibility of integrating understanding of the grooming strategies adopted by offenders into a child protection strategy, I found there to be unanimous agreement that a strategy of this nature holds potential for prevention, more appropriate intervention with offenders and victims, and more appropriate court judgments and sentences meted out.

Increase in prevention, awareness, reporting, and in convictions will begin to address the culture of sexual violence and impunity that continues to exist to erode the fabric of our society in the daily lives of children in South Africa.

Theoretical framework

The theoretical framework of critical social work guided this qualitative research and has the underlying principle of transforming the world, in this case transforming the world for children to be more socially justice.

Mullaly (1998) indicated that we should have a vision for life. South Africa is dominated by the scourge of child sexual abuse that is destroying the lives of our children. Hence the research was done with the purpose of looking at alternatives to managing this scourge, which was consistent with the mission of the organization that I previously directed "a society free of child abuse." Critical theory acknowledges the reality of those who are victims in society, and looks at how their hopelessness and despair can be transformed, and this is pivotal to my commitment as a social worker. According to Sewpaul (2013) critical theory confirms that, "it is critical that everyday life experiences become the context for learning, deconstruction, and action" (p.116). She argued that we must be able to reflect on and challenge all forms of discriminations and inequalities, and challenge the reproduction of dominant discourses and practices that marginalize and oppress people on the basis of criteria such as sexual orientation, age, gender, race and class.

All social workers need to be constantly critically reflective of their own practice and aware of the situation of the abused and the roots of their social problems and injustice, in order to bring about a more emancipatory approach and transformative change. They need to introspect on the wider structural issues related to inequality along with gender, economic, social forces, power structures and systems of resource distribution that undermine the well-being of those who are abused, disadvantaged and neglected (Fook 2002; Dominelli, 2002; Rogowski, 2013; Sewpaul, 2014). Critical theory in the current research is used as a framework to critically explore and actively address the possibility of an alternative child protection and prevention model to alleviate the sexual exploitation and abuse of children.

It further tries to engage service providers in exploring their personal and institutional experiences in their work with sexually abused children to seek emancipation and transformation. The interactive and engaging spirit of the methodology of the

research study is strongly aligned to the theoretical framework and allowed the participants to engage with those elements in a form of praxis and active reflection.

A complex challenge such as the sexual victimization of children can be viewed from various major perspectives that of the personal, political, and professional (Mullaly, 2002). The personal perspective encompasses the impact on the capacity of the individual, their functioning, their requirements and needs. The political perspective encompasses the legislative, governing processes of how the issues get prioritized, funded, resources allocated, status, power, the passage of legislation. The professional perspective encompasses the response by the service provider and follow-up, management decisions that affect the child victim's best interests. Often these perspectives overlap and all three have a significant interrelationship on the victim. There needs to be professional and personal commitment in addition to political priority and initiative to serve the best interests of children.

It does not serve the interests of our children if our social structures, practices, social institutions and laws are not aligned and fully responsive to the needs and protection of children. This contradicts the spirit and intention of "the best interests of our children" clause existing in our legislation, perpetuates the circle of oppression and keeps children in a relationship of disadvantage and deprivation. Critical social research points to the possibility of change in response to knowledge about that behaviour. Children are being failed by the very systems built or in existence to protect them.

The contribution by various participants from different countries such as Mozambique, Tanzania and Finland enabled me to reflect and affirm that the sexual abuse of children is a global phenomenon that requires to be addressed. The data from these participants were not used to compare the incidents of sexual abuse across countries as this is not the focus of the study. For instance, the sexually abused child in Finland may have a different experience of the criminal justice system, than does children in South Africa. An understanding of these differences were extrapolated through dialogue with those working or exposed to these systems in different countries, viz Finland, South Africa, Mozambique and Tanzania. Hence globally this phenomenon of violation to children can be reflected on to share

lessons and experiences; differences and similarities, to ultimately strengthen child prevention strategies.

All children by virtue of their innocence and developmental stage are vulnerable and at risk to sexual abuse. But access to resources means better opportunities to obtain justice. The criminal justice system is more likely to better serve an offender who has access to resources and legal representation in a case although the child has rights. In South Africa this there is no substantiate equality.

The critical theoretical framework was most relevant as it allowed me to situate the participants' individual experiences within broader structural discourses, and analysis of disadvantage. Critical theory makes sense of the interaction between the individual and the structural – "the micro and the macro" (Pease and Fook, 1999, p.222).

South Africa has a widespread problem of violence in all contexts but especially in the area of sexual abuse against children, but there has been a lack of adequate leadership in the area of violence prevention from Government. The incarceration of the abuser in itself is unlikely to be a useful long-tern solution to the problem. There needs to be political, social and economic reforms, to address the roots of violence and the dominant discourse on patriarchy and ideas of masculinity that underlie the problem of violence in society.

The qualitative research methods used in the research included a range of research tools.

Some critical questions emerged in this research: the value placed on sex in the media; prevailing ideologies; stereotypes; values in society; gendered power relations; perceptions of treatment; beliefs related to the abuse of children.

The theoretical framework of critical theory enabled me to situate the study. In summary it is a broad approach to challenging social structure, established knowledge and seeks to understand the lived experience of real people in context. Critical Theory shares the ideas and the methodologies of some interpretive theories, but lends itself to understanding the context of those that are oppressed.

Critical theory teaches that knowledge is power to effect action and change in the conditions that affect our lives (Fook 2002; Dominelli, 2002; Rogowski, 2013; Sewpaul, 2014).

Research questions

The following research questions guided my dissertation.

- What factors shape the sexual offender's behaviour?
- What are the life experiences of the child sex offender?
- What strategies do they adopt in sexually abusing children?
- What are the lessons obtained by service providers in being exposed to the sex offenders' strategies?
- What are the lessons learnt by parents and caregivers in being exposed to the sex offenders' strategies?
- Does viewing of the video – depicting the mind-set and the strategies adopted by the offender in sexually abusing children – hold potential for the prevention of child sexual abuse?

Delimitations

The delimitations used by the researcher in this study were determined by the desire to better gain an understanding of the child sex offender, why do they offend, and how do they offend, their behavioural characteristics and the understanding of the crime. In order to gain the perspectives of the participants, the researcher sought participants who were expressive in English, and were willing to expose this behaviour by being video-recorded. The video consisted of English-speaking participants. The researcher tested the DVD on Zulu-speaking parents of victims, and other cultural and language groups, through an interpreter. Hence a balance of cultures was considered in the research. The potential limitations of the study are detailed in the methodology chapter.

Research assumptions

The research sample of child sex offenders is typical of the population and will accurately portray:

- Factors that shape the sexual offender's behaviour
- The life experiences of the child sex offender
- The strategies that they adopt in sexually abusing children

The service providers and caregivers are also typical of the population of service providers and carers and will accurately portray:

- The challenging aspects of understanding a child sex offender
- The lessons obtained from being exposed to the sex offenders' strategies
- Whether viewing of the video will hold potential for the prevention of child sexual abuse?

Definition of terms

To avoid confusion this study provides a spectrum of definitions and delineations to distinguish between concepts used in body of this thesis.

Abuse

A deliberate act of ill treatment that can harm or is likely to cause harm to a child's safety, well-being, dignity and development (Children's Act of 2005).

Child

According to the South African Constitution and the Children's Act (38 of 2005), a child means a person under the age of 18 years.

Child molester

The term child molester conveys some type of sexual activity conducted with children by the molester (Feelgood and Hoyer, 2008).

Child pornography

Child pornography includes any image, real or stimulated, however created, depicting a person who is or who is shown as being under the age of 18 years, engaged in sexual conduct on display of genitals which amounts to the sexual exploitation, or participating in, or assisting another person to engage in sexual conduct which amounts to sexual exploitation or degradation of children (Film and Publications Act, 2009).

Child Sexual abuse

Sexually molesting or assaulting a child or allowing a child to be sexually molested or assaulted; encouraging, inducing or forcing a child to be used for the sexual gratification of another person; using a child in or deliberately exposing a child to sexual activities or pornography; procuring or allowing a child to be procured for commercial sexual exploitation or in any way participating or assisting in the commercial sexual exploitation of a child.

The Act governing the age of consent, and other related sexual matters and offences in South Africa are the Criminal Law (Sexual Offences and Related Matters) Act 32 of 2007, as amended. This legislation indicates the following key aspects.

Although in South Africa a person is considered to be a child, when he or she is under the age of 18, the Sexual Offences Act does allow consensual sex for persons 16 and older. It is illegal for any person under the age of 16 to consent or be involved in any sexual act, thus both parties can be prosecuted for statutory rape regardless of their ages. However, this aspect of the law has been amended by a controversial court ruling in the Pretoria High Court on the 15th of January 2013. Judge Pierre Rabie ruled the two sections of the Sexual Offences Act, which criminalises consensual sexual activity between children age 12 and 16, invalid and deemed them to be inconsistent with the South African constitution. At present, children between the same ages of 12 and 16 may have consensual sex with each other without prosecution. It is unequivocally a criminal offence to have sex with any child under the age of 12, consensual or not (Criminal Law (Sexual Offences and Related Matters) Act 32).

Commercial sexual exploitation

Commercial sexual exploitation as defined in relation to a child, means the procurement of a child to perform sexual activities for financial or other reward, including acts of prostitution or pornography, irrespective of whether that reward is claimed by, payable to or shared with the procurer, the child, the parent or care-giver of the child, or any other person; or trafficking in a child for use in sexual activities, including prostitution or pornography.

Emotional abuse

Emotional abuse consists of acts of omission and of commission; these acts affect the cognitive, behavioural, social, and psychological functioning of the child

Exploitation

In different terms, "exploitation" refers to the use of people as a resource, with little or no consideration of their well-being. In relation to a child, exploitation is defined in the Act as including all forms of slavery or practices similar to slavery, including debt bondage or forced marriage; sexual exploitation; servitude; forced labour or services; child labour prohibited in terms of section 141 of the Act and the removal of body parts (Childrens Act, 38 of 2005).

Extra-familial abuser

The child sexual abuser who abuses outside of the family such as an educator, religious leader and so on.

Grooming

 Grooming has been defined as "The process by which a child is befriended by a would-be abuser in an attempt to gain the child's confidence and trust, enabling them to get the child to acquiesce to abusive activity. It is frequently a pre-requisite for an abuser to gain access to a child (Criminal Procedures (Sexual Offences) Act of 2007)**.**

Intra-familial abuser

The Intrafamilial abuser is a person that commits sexual abuse within the family. This may be a family member such as siblings, relatives, or anyone that is considered part of the family and may not necessarily be blood related, such as mother's live-in boyfriend

Neglect

Deliberate neglect; deliberate failure to meet a child's need for affection, attention, stimulation; deliberate failure in the exercise of carer responsibilities to provide for the child's basic physical, nutritional, medical, intellectual, emotional or social needs; deliberate failure to protect the child from exposure to danger, substance abuse or violence; abandonment.

Paedophile disorder

Paedophilia is classified as a paraphilia, one of the psychosexual disorders. The DSM V diagnostic criteria for paedophilia require there to be fantasies, urges, or behaviours that are recurrent, intense, and sexually arousing and all of which involve prepubescent children, generally age 13 or younger. The absence of any of the key criteria could technically eliminate the diagnosis (APA, 2013.)

Physical abuse

The non-accidental physical injury or physical assault of the child; any other form of deliberate and/or repetitive physical action inflicted on the child.

Prevention programmes

Refers to programmes that are designed to serve the purposes of preserving a child's family structure; and provided to families with children in order to strengthen and build their capacity and self-reliance to address problems that may or are bound to occur in the family environment which, if not attended to, may lead to statutory intervention (Children's Act, 2005)

Primary caregiver

Primary caregiver is the main person responsible for the child's care and well-being. This could be the parent, guardian or any other caregiver as defined by the Children's Act 2005 (Children's Act, 2005).

Stranger

The term "stranger" that appears in the thesis, refers to the identity of the child sexual offender abuser as being "unknown" to the child victim, that is, not related, nor acquainted, in any way. No form of relationship exists between the child and the abuser.

Survivor of Child Sexual Abuse

An individual who was sexually abused as a child and is surviving despite the traumatic experience.

Organisation of the research design

The research design was subdivided into three phases as follows.

Phase One

- Selection of participants for the research study
- Compilation of the life stories or biographies of a sample of approximately 12 child sex offenders from the researchers therapeutic programme;
- Various tools were utilised in the compilation of the life stories such as the participants journals, case records, statements of the victims, psychotherapeutic tools

Phase Two

- An exploration and assessment of the strategies of the participants were conducted
- Compilation of video footage on the testimonies of the participants

- The production of a video on the strategies used by four child sex offenders in abusing their victims

Phase Three

- Compilation of questionnaires for service providers and parents or caregivers
- Selection of participants for the screening of the video
- Screening of the video to several members of the criminal justice system (policemen, magistrates, prosecutors, and probation officers), social welfare services providers (government and non-governmental organization), correctional supervision, health and education service providers, in sectors of policy development and management.
- An assessment of the DVD by service providers and administration of a questionnaire to determine whether the video could contribute to the protection of children
- Selection of parents and caregivers, who had children that had been sexually abused
- Screening of the video to the caregivers and administration of a questionnaire to determine whether the video capacitated them to protect children

Outline or synopsis of chapters

The research study is across several chapters

Chapter one includes the background to the study, a statement of the problem, the purpose of the study, the significance of the study, the theoretical framework, research questions, delimitations, research assumptions, definition of terms and an outline of the study.

Chapter two addresses the following aspects: Introduction; understanding the phenomenon of child sexual abuse (CSA); a framework of protection; abuse and its impact; reasons for non-disclosure of abuse; the understandings of sex offenders who sexually abuse children; the strategies of abusive relationships; child pornography and the sex offender; the role of the multidisciplinary team and the family, and conclusion.

Chapter three includes: the introduction; research questions; research method and design; data collection; ethical considerations; potential limitations; conclusions.

Details of the research design are provided together with an outline of the three phases guiding the research process. The research participants and methods of data collection and analysis within the three phases are also described. A consideration of ethical issues and the way in which the study was conducted to conform to standards is presented and the chapter concludes with a discussion of the limitations of the study.

Chapter four presents the case studies of each offender participant in detail, analyses the demographics of the offender participants and concludes with the summary of the demographics of their victims. The contents of the chapter are: case one on Bungie; case two on Tom; case three on Mathew; case four on Ronnie; case five on Derek; case six on Larry; case seven on Jason; case eight on Roy; case nine on Alton; case ten on Deshan; case eleven on Khuzwayo; case twelve on Tony. An analysis of the case studies is provided as well as the details on the demographics of the child victims.

Chapter five presents the analyses of the life experiences of the offender participants. The chapter provides details of the abusive experiences of the offenders in their childhood and includes: family violence – "when he use to beat my mother, I felt helpless and afraid"; abusive experiences of the participants – "he stopped the sexual abuse but the hitting continued"; use of child pornography – "on the Internet you can pick up just about anything you want" and the chapter concludes with the motivation for the offending behaviour.

Chapter six presents the strategies and mind-set of the offender and understanding the offensive behaviour. The contents of this chapter are: identifying and selecting the victim; the relationship forming stage – the friendship; the molestation stage; maintenance and prevention of disclosure stage and ends with the conclusion to the chapter.

Chapter seven presents the responses and analyses of the service providers and parents, to the DVD. It starts off with the introduction to the chapter, details the

emotive responses of the participants to the DVD – "I felt so angry! How could he kill and destroy a child's innocence and expect forgiveness!!" others indicated that "it was new to hear from the offenders perspective" and " now I know how they operate" and "feel that I am more wary when I am told stories by the offender and that I should examine the evidence from a variety of sources". The chapter also obtained feedback on partnerships and collaborations.

Chapter eight provides details on the analyses of the responses from questionnaire two and outlines parental responses to disclosures, the emotive responses to the DVD, the response to child protection programmes, new lessons and recommendations, victim blaming assumptions, recommendations and conclusions

Chapter nine brings this study to a close and provides insight into the key themes and recommendations that emerged from the data analysis.

Conclusion

In this chapter I introduced various aspects related to the framework of the research study: the background; the statement of the problem; purpose and significance of the study; theoretical framework; research questions; research assumptions; definition of terms. Subsequently the overall purpose, objectives and research assumptions of the study were outlined.

The following chapter, Chapter two, provides a review of the literature for the research study.

Chapter Two: Literature review

Introduction

Chapter one provided an outline of the rationale and background to the study, an overview of the purpose, the objectives, the context and the value of the study.

The theoretical framework provided the lens to explore the broad landscape of the literature that impinges on child protection. The study builds on and contributes to research in transforming a society that can protect its children by exploring factors that predispose a person to sexually offending by connecting the micro level aetiology of offending, mezzo and macro factors of society and human agency (Sewpaul & Jones, 2004).

There are two polarities of concern in relation to child protection presented in this dissertation: the one side involves understanding the sex offenders who sexually abuse children and the second side involves understanding the victim. The theoretical components of these critical aspects will be covered in this literature review.

Hence the body of the literature review will focus on a wide gaze of information, understanding the development of the phenomenon of child sexual abuse, a framework of protection, key concepts, impact of abuse, reasons for the non-disclosure of abuse, the understanding of offenders who sexually abuse children; strategies of abusive relationships, child pornography, the role of the multidisciplinary team and family.

Understanding the phenomenon of child sexual abuse

Child abuse including child sexual abuse appears to have a long history in our world. According to De Mause (1998) "There is extensive evidence that the history of childhood has been a nightmare from which we have only recently begun to awaken" (p.220).

Children are the silent, hidden exploited sufferers as society has failed to realistically confront the phenomenon of child sexual abuse.

The rights of children have historically been non-existent, ignored, violated, hence allowing abusive practices toward children, including child brides, slavery, child murder, brutality, abandonment, physical injury, maltreatment, infanticide and trafficking among other forms of violation. Children have been so devalued that organisations existed to protect animals before organisations were established to protect children. There is a strong historical presence of the horrendous levels of neglect and cruelty to children especially in the hands of their carers, who viewed their children as their property or possession (De Mause, 1998).

Prevention and awareness campaigns on child abuse have to date been most popularly cited as a strategy to address child protection. These programmes for the protection of children have evolved over time. One needs to question the efficacy of the programme if abuse still exists at alarming proportions, but there are various other reasons for the existence of child sexual abuse. Nevertheless, the content, focus, objectives and target of these programmes should be addressed.

One of the most focal messages of the programme is that children are the targets of abusers who are strangers, and some monstrous fiend or villain, like the bogeyman. The 'stranger danger' myth is a popular and deeply entrenched misunderstanding that abusers are easily identifiable (Lanning, 2010, p.6). The findings in the current research and ample evidence of many others have confirmed that between 75-95 per cent of offenders are either related or known to the child (Herlihy, 1993, Finkelhor, 1994). The expectation of child to self-protect and their ability to immediately disclosure the abuse, ignores the basic subordination and helplessness of children within authoritarian relationships (Summit, 1983). Strangers, monsters, kidnappers, all provide a convenient insulation for - children, the public, parents, against a much more destructive and immediate risk: the betrayal of essential relationships, rejection by trusted family and carers, and the possible annihilation of basic family cohesion and stability (Summit, 1983). Children are helpless, powerless and do not have free will as adults do or expect. Adults need to be informed on empathizing with the absolute powerlessness of the child (Summit, 1983).

Nevertheless this myth pervades even to today within the South African public arena and practice by service providers, whether by attitude of ignorance or denial. This overlooks the presence of the abuser in contexts such as the home or in key positions of trust, within the school environment, religious institutions, child care institutions and so on. This pervading myth allows the practice of sexual abuse of children to continue and remain largely undetected (Lanning, 2010)

Child protection campaigns appeared simple and clear-cut, graphically depicting the abuser who was a risk to children, as "an unknown man, with a hat and black coat, lurking in the area or in his car, with sweets, waiting to pounce on a little girl walking home from school alone." Children were informed of the various rules to protect themselves: "turn down gifts from strangers, don't assist with directions, refuse rides offered by strangers, and don't walk alone." Children were warned to protect themselves by saying "No!" or to "Yell and tell" (Lanning, 2010, p.5).

We have over time obtained statistics and evidence on the identity of offenders that indicates that the abuser can be anyone, known and even liked. Regardless the concept of "stranger danger" appears to be fixed in the public mind. Surprising during Child Protection in June 2013, there was a news report on e-TV of a child protection programme in the Cape Province. The educator of the class, who was responsible for the programme, commented that she had educated her class on 'stranger danger' and that children needed to protect themselves from abusers. This was on national television! It is blatant that the inappropriate messages have become fixed in people's minds and even those who are professional carers of children perpetuate this myth. Collings (1997) also reflected on these very stereotypical depictions.

Other simple, enticing concepts used in children's awareness campaigns still remain today, such as "good and bad touching" and "good and bad secrets" (Lanning, 2010). These concepts appeased adults and created a complacency that children were adequately skilled to protect themselves from the advances of offenders. Campaigns based on these concepts not only misled the public, but misinformed children, and created a sense of guilt and shame when they could not stop the abuse or protect themselves (Lanning 2010). These campaigns allowed abusers to remain

protected and undetected (Lanning, 2010). Furthermore offenders justify their abusive behaviour as something that was consented to by children who did not say "No!"

Offenders are not as easily identifiable as the campaigns made them out to be, neither was reporting them. In South Africa today, the various forms of legislation have progressively embraced the broader concepts of abuse and exploitation, but when discussing the offender the identification becomes a challenge. With the introduction of the trafficking awareness programmes during the World Cup in 2010, the public had been in panic, reinforcing that strangers would use the event to abduct children. It appears that it is easier to see the abuser as an external, sadistic threat who abducts, and violently rapes a child (James, 1997; Lanning, 2010).

Regardless of the challenge of the identity of the abuser there has always been extensive knowledge about the identity of the abusers, the forms of abuse and the impact of this upon a child. Sigmund Freud in 1896, addressed all of these issues. He indicated that his 18 cases of "pure hysteria" were a result of abuse by an adult, including, "all too often, a close relative" (James, 1997, p.115). Freud appeared to accept that the relationship was sexually exploitative, seductive, committed by a trusted family member, and caused extensive trauma to the child (James, 1997). The sexologist, Krafft-Ebing also pointed out the sexually abusive nature of child abusers and indicated that abusers appeared "psychically normal" (Krafft-Ebing, 1965, p.54).

In assuming that abusers were strangers, there was a reluctance to prosecute abusers who were respectable members of society, as in the cases of educators, politicians and religious leaders, despite children's disclosures (McGeorge, 1966). The abuser is not an unknown presence. The presence of catholic priests having abused children, over decades, throughout the world, is an example of this. Another example is South Africa's huge challenge with educators being abusers. In an article in July 2013, the Department of Basic Education and the South African Council for Educators indicated that 45.5% of educators found guilty of sexual violence against pupils continue to teach (Daily News, 2013). This is despite our new legislation (The Children's Act, 2005 provides for the establishment of the National Child Protection Register that records all persons found unsuitable to work with children) that prohibits their involvement and work with children.

If the victim is ignored or denied, one cannot empathise with their pain and suffering. The broader structural state of society and its pervading discourses need to be considered along with the combination of entrenched patriarchal values, norms of power, control, traditional gender roles, globalization and modernization, that have silenced society to the pain and suffering of children (United Nations, 2006). With available contemporary evidence, there is no justification for the ignorance of the prevalence of sexual abuse Not only should the problem be more clearly defined and elucidated, but offenders and their strategies must be exposed in order to deal with it comprehensively and effectively.

Today awareness and education programmes for children provide pivotal information of the various forms of abuse, the presentation of these forms of abuse, the reporting process and the rights of children. There have been more attempts to empower the public and service providers; however, the emphasis has not been on the prevention of abuse but rather on the detection of abuse. The relevant aspects of the programme for adults focus on the types of abuse, the signs and symptoms of abuse, the reporting of abuse, and supporting children in the disclosure process. Secondary intervention has been to provide victim empowerment services to children affected by child sexual abuse, but therapeutic services to offenders have been minimum. This strategy is not preventative as it does not influence the roots of the problem.

The current dissertation addresses the identity of the abuser, the mind-set, strategies and predisposing factors of the abusive situations, and the potential that these hold for child protection.

A framework of protection

In this section I introduce a framework that guides the protection of children by discussing pertinent legal instruments that influence the protection of children within the South African context. It is critical the service providers have an understanding of the legal and policy framework that dictates the practice issues concerning children.

Most legislation for children in South Africa derives its influences from the basics of the United Nation Convention on the Rights of the Child. It is indicated that child

protection must ensure proactive and preventative measures for all forms of violence (UNICEF, 2012). Children are protected and their responsibility or accountability is limited because they are developmentally immature. The developmental vulnerability of children is recognised and legislation provides the framework to ensure their protection. When we consider developmental immaturity, we consider aspects of physical, emotional and intellectual development. Hence children need to be protected as they are not in a position to give consent, as in the case of sexual interaction with adults and older children (UNICEF, 2012).

South Africa ratified several significant international instruments pertaining to the protection of children, which have influenced our national legislation. The most fundamental of these is the United Nations Convention on the Rights of the Child (CRC), with others being the African Charter on the Rights and Welfare of the Child, International Labour Organization (ILO) 182 on the Elimination of the Worst Forms of Child Labour, Optional Protocol to the UN Convention on the Rights of the child, on the sale of children, Child Prostitution and Child Pornography, International Convention on Cybercrime, Declaration and Agenda for Action Against Commercial Sexual exploitation, Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children – Supplementing the UN Convention against Transnational Organised Crime.

Children in South Africa are protected by the South African Constitutional Act 108 of 1996, and in particular Section 28 (1) and (2) of the Constitution, which specifies every child's rights. Children's rights, are basic to one's humanity, and is foundational to many international human rights instruments and the constitutions of many countries (Rainey and Harrison, 2008). Respect for human dignity is fundamental to human rights. The role of the law is therefore to provide a framework to help preserve the opportunity for a dignified life. This applies to every person including sex offenders and paedophiles. All have the right to have their dignity protected, irrespective of the crime that they have committed (Rainey & Harrison, 2008).

The Children's Act (No. 38 of 2005), was an important milestone in child law reform for South Africa as it addresses a developmental and preventative approach of child care and protection. Some of the salient aspects of this Act for child protection are:

mandatory reporting of all forms of child abuse and deliberate neglect; a child protection register; an offender register; the identification and reporting of children in need of care and protection; designation of social service professionals for investigation, assessment, referral, support and treatment services; and courts. It makes provision for support to families to enable them to care for and protect their children, children who are at risk may obtain interventions at various levels ranging from non-invasive involvement at a prevention level, or early Interventions or statutory services, and reconstruction and after-care services which lead to the reintegration of children. A similar related policy that guides this intervention is the Draft National Policy for Families (2012). Regardless of the mandatory reporting of child abuse, the legislation is not enforced and cases are still not reported and there are no consequences for this.

The Criminal Law (Sexual Offences and Related Matters) Amendment Act (No 32 of 2007) also incorporated changes that relate to the protection of children as it redefined 'rape' to include all forms of sexual penetration irrespective of the gender or the manner of penetration, recognizing sexual grooming as an offence, including the use of children in pornography and the display of pornography to children. This is particularly important as it widens the protective net for children by addressing all forms of sexual violation. The Act also considers the context of South Africa and its prevalence of HIV, and provides for testing of offenders for HIV, as there are concerns about and interrelationships with HIV and the rape of a child. The Act also increases the obligation of reporting of sexual offences against a child and allows for the creation of a Sex Offender Register to prevent offenders who have been convicted of sexual abuse to work with children.

Other major legal developments on the protection of children have been the Child Justice Act of 2008, Films and Publications Act of 2009 (as Amended).

There are several national policies and plans, which are relevant to the child protection such as National Policy Framework and Strategic Plan for the Prevention and Management of Child Abuse, Neglect and Exploitation, National HIV/AIDS and Sexually transmitted infections (STIs) Strategic Plan for South Africa, Child Labour Programme of Action. Against the background of such significant legislation, all service providers are required to play a holistic, integrated and collaborative role in

the protection of children from all forms of abuse, and in the National Policy Framework and Strategic Plan to ensure the effective management of cases of abuse, neglect and exploitation

But despite all of the policy and legislative developments, South Africa's rate of child abuse still remains one of the highest in the world, as children are not adequately protected, professionals working with abused children lack capacity, resources, integration among other factors,　resulting in communities and children being disempowered. Sexual abuse of children is a serious concern, because of its impact on the development and potential of children and on the ultimate productivity of society. The devastation of so many victims of sexual abuse of children globally, is attributed to the control of a minority population of sex offenders. From the detailed outline of the legislation it does appear that the legislation is adequate and comprehensively able to attend to the protection of children, but it lacks adequate implementation. An incident of sexual abuse needs to have a context in which it can be disclosed, reported, and followed up for justice to be served.

Abuse and its impact

This section provides an overview of some of the concepts of abuse used in the study such as that of family violence, sexual, emotional and physical abuse and the impact of abuse on the lives of children.

De Mause (1998) observed that "all social violence – whether by war, revolution or economic exploitation – is ultimately a consequence of child abuse." This summarises the devastating effect of childhood trauma on an individual and ultimately society. A child's sense of self is influenced by its environmental context, be that of the family, community, society, globally as well as access to resources and its cultural context (Rock, Karanbow and Manion, 2012). There is an automatic imbalance between children and adults by virtue of physical size, age, strength, knowledge, cognitive skills, and authority. Abuse of this relationship by adults destroys the principles of healthy child development. An immense amount of research indicates that child maltreatment, childhood abuse, neglect and domestic violence exposure are widespread and leads to lifelong issues affecting one's health, relationships, innovation, family, mental health, economy, developmental and

cognitive domains affecting educational performance (Klebanov & Travis, 2015; Wortley & Smallbone, 2001; James, 2000; Hagele, 2005; Salter et al. 2003).

People try to make sense of their lives by exploring their family experiences, as the family is a foundation for identity and validation, but it is also the vessel for the inequalities and structural constraints of wider society, which can imbalance the family, causing social problems (Allan, Pease & Briskman, 2003). In understanding the problem of child protection, one has to look beyond the microsystem of the family to the macrosystem of society in which the family is nested. Individual choices are influenced by the constraints and conventions of a wider social structure (Fawcett, Featherstone, Hearn & Toft, 1996).

Family violence is linked to traditional patriarchal expectation – that men are the authorised holders of control in the home (Pierson, Castles, Naumann, 2014; O'Toole & Schiffman, 1997). Rather than the home offering security and nurturance for the development of its members, it becomes a site of maltreatment. Through the family, ritualistic social relations of power are acted out and transmit messages to its members – a boy and girl watching their father assaulting their mother, learn about the extent to which men can utilize violence and fear to exert power and control over women, and whether that violence is acceptable. These experiences though not directly violent, constitute abuse, emotional abuse (O'Toole & Schiffman, 1997). Unlike sexual and physical abuse and neglect, emotional abuse has been slower to gain acceptance and intervention (Iwaniec, 2006). Boys are more likely to learn that male violence and sexual oppression is normal behaviour for men. Our culture abounds with alluring images of violence and sex in musical videos, movies, video games, advertising, which all contribute to a generalised, acceptable environment of male violence and females objectified as sex symbols and victims. The boundaries between fantasy and reality became blurred and confusing for children so that it is very difficult for them to ascertain what a violation, an infliction, and what entertainment is (O'Toole & Schiffman, 1997). Gender violence is not only a feature of family but is entrenched in societal patriarchal relations, institutional structures and systems (Dallos & Mclaughlin, 1995; O'Toole & Schiffman, 1997).

Poor or distorted early emotional attachment of infants may have implications for the emotional bonding and development of personalities, which are prone to

psychopathology, depression and anxiety, and sexually offensive behaviour (Bowlby, 1983; Marshall, 1989; Craissati, McClurg & Browne, 2002).

The sexual abuse of children takes on various forms with incest being the most common (Maniglio, 2011). A number of influential studies have indicated the detrimental effects of child sexual abuse not only during childhood but in adult life (Barbaree & Langton, 2006; Blackshaw, Garneau, Merskey, Moscarello, 1996; Burgess, Groth, Holstrom, et al. 1978; Corby, 2000; De Mause, 1998; Finkelhor, 1984; Jones and Trotman Jemmott, 2009). The impact of sexual abuse varies from victim to victim, depending upon the unique combination of circumstances of the abuse, the nature of abuse, age at which the abuse occurred, relationship with the abuser, treatment options, patriarchal ideologies, parental relationships, resources and support available to the child, risk and protective factors that influenced that victim (Maniglio, 2011; Prentky, Knight, Lee, 1997; Seto, 2008). The impact of the abuse poses challenges in the lifetime of an individual. Child sexual abuse tends to impact on a child emotionally, physically and psychologically resulting in many disorders related to mental health, personality, substance-related disorders, dysfunctional relationships, gender identity issues and sexual dysfunction (Maniglio, 2011). A deviant sexuality appears to be the potential outcome of child sexual abuse (Maniglio, 2011; Prentky, Knight, Lee, 1997). But other considerations such as female victims outnumbering male victims, and male offenders outnumbering female offenders need to be factored into preventive, rehabilitative and protective interventions. (Prentky, Knight, Lee, 1997; Seto, 2008)

Sexual abuse affects children at various developmental periods, as it affects the way they process the trauma. Sexual abuse in childhood may be associated with various adverse mental health outcomes both in childhood and adulthood. Intervention should be evaluated at various developmental periods like infancy, the pre-school, school-age, and adolescent periods (Burgess, 1988; Maniglio, 2011). The traumatic incident is furthermore complicated by disclosure of the abuse and the child's ability to cope. The trauma of pre-school children is intensified by their dependence on others, their limited language skills in relating the abuse, and their concept of time. They lack the language skills to verbalise the abuse and express their reactions through behaviour and action, by acting out their fear, anxiety and confusions. They

express a number of psychological and physical symptoms including sexualised and regressed behaviour (Burgess, 1988).

The older school-going child has more developed language skills, which enables them to communicate the trauma of the abuse. Children at this developmental stage feel responsible for the abuse, have a distorted perception, a preoccupation with social opinion, and they often re-enact the trauma. The adolescent child may feel responsible for the abuse, and tends to feel ashamed and embarrassed and acts out by engaging in self-destructive behaviour (Burgess, 1988).

Child sexual abuse is a violation of body, boundaries and trust, which may affect the survivor's body image, relationship with one's self and others. The abuse may leave them feeling out of control, powerless, disconnected, devalued and betrayed. They have lost the ability to own their body, care and respect it, as it is controlled by the abuser. Thus the victim loses connection to his or her sense of self, and identity. This develops a diminishing sense of self, responsiveness, inhibition capacities, sensations, power, nurturing, and self-preservation behaviours. The child learns that his world is an unsafe place and no one can be trusted. The victim becomes a survivor and employs defences, coping in ways that may be maladaptive (Burgess, 1988).

CSA survivors may experience a diverse number of negative and traumagenic states as a result of the sexual abuse in their childhood which may affect their cognitions, emotions, behaviour, physical and interpersonal self (Maniglio, 2011).

Survivors may sometimes experience distorted beliefs and perceptions about themselves, their behaviour, and the intentions of others, which leads to guilt, self-blame, low self-esteem, and a sense of powerlessness (Senn, Carey, et al. 2008).

Some may experience problems in the regulation of their emotions and typically feel sadness, anxiety, anger, fear, numbness and even dissociation. They cope by avoiding their emotional pain and engage rather, in self-destructive behaviours, like substance abuse, addictions, eating disorders, risky sexual behaviour. Poor levels of self-image affects their social competencies and relationships (Senn, Carey et al. 2008; Robertiello and Terry, 2007).

They are sometimes unable to trust, are uncomfortable in relationships, have sexual problems and fear rejection, loneliness. They may furthermore, have difficulty in respecting the boundaries of others as their own boundaries have been violated. They experience varying physical problems like psychosomatic manifestations, or the abuse itself may have left permanent structural damage (Schachter, Stalker and Eli Teram, 2001; Senn, Carey et al. 2008; Robertiello and Terry, 2007).

The sexual abuse accommodation syndrome model describes how the child psychologically copes with trauma (Summit, 1983). How the child responds depends on the child's coping, defensive responses and trauma integration. If the child is forced into being silent about the abuse, the child develops ways to cope with the secret, and psychologically accommodates the trauma (Furniss, 1994). The trauma integration tends to disrupt normal development of other areas of life. The child can present with different behavioural patterns when dealing with the trauma, described as integrated, anxious, avoidant, disorganized, aggressive, or delinquent (Lanning, 2010). When the trauma has been overcome the child is integrated and recovers well. When the trauma is compounded and prolonged, the child feels powerless and anxious.

In the avoidant phase, the child's anxiety about the abuse is suppressed, either consciously or unconsciously. In the disorganized pattern the trauma is suppressed in delusional symptoms, and the child cannot distinguish between illusion and reality. In the aggressive pattern, the child integrates the anxiety by transforming into the abuser. In the delinquent pattern, the child develops an anti-social pattern of behaviour. When the trauma is not attended to, the child might experience post-traumatic stress disorder in which the child intrusively and uncontrollably re-experiences fragments of the abuse both unconsciously and consciously (Lanning, 2010). This may be experienced through thoughts, images, nightmares, and dissociative states and unconsciously in re-enacting the incident of sexual abuse as either the victim or aggressor (Jones, 2000). The experience of sexual abuse produces trauma that is processed and managed in various ways but always to the detriment of the victim and all victims need unconditional support. It needs to be unequivocally accepted that all children are victims and must be given unconditional support!

All children are vulnerable to abusers, but children who are plagued by substantial social circumstances are even more vulnerable to adult men. In the South African context, many children have been robbed of family love, care, support and stability and their circumstances revolve around financial impoverishment, family dysfunction, death of their parents, and HIV and AIDS. Collings (1994) indicated that dysfunction within the family does affect a child and places a child at risk for childhood sexual abuse.

I have dealt with several cases where brothels that concealed child prostitutes were exposed. Having worked with these children, I discovered that they ran away from challenging, abusive home circumstances and were entrapped by life on the street, and the positive attention given to them by their pimps. In South Africa this is not unusual, and we need to take cognisance of the growing vulnerability of our children; 'sugar daddies' and transactional sex are growing concerns amidst economic impoverishment (Sewpaul, Osthus, Mhone, et al, 2012; Osthus and Sewpaul, 2014) the lack of the family unit and a growing orphan population as a result of HIV and AIDs. Jones (2009, p.31) confirmed that "gender inequality and poverty does have an impact on the creation of risky environments for children". Jones (2009) points emphasises factors that contribute to abuse that are characteristic of the South African context, such as harmful cultural practices, patriarchal values which consider protecting males more important than the protection of children, inefficient systems of reporting abuse. Women may be becoming more emancipated in South Africa, however, our society still has greater inequality for women who are dependent and subservient to men, men who are still given special privilege and status (Sewpaul, 2013) – this resonates at every level of society and so children are also devalued and unable to assert their rights (Jones, 2000). Lalor (2004) highlighted a patriarchal-dominated society and the "African child's socialization for obedience and acquiescence as a vulnerability factor for abuse and exploitation" (p. 34).

Men who offend, often use their resources to seduce vulnerable children, as they can offer financial and emotional security (Higginson, 1999). The abuser provides a compensatory relationship, and an interchange of sex, affection, money, material goods and perhaps the opportunity to explore one's sexual identity (Finkelhor and Hines, 2007). In addition to the myriad physical, psychological and emotional

problems that victims experience, it is highlighted that child sexual abuse victims are vulnerable to re-victimisation, high-risk sexual behaviour, multiple sexual partners and sexual promiscuity (Lalor and McElvaney, 2010; Lalor, 2008).

According to Blackshaw, Garneau, Merskey, Moscarello (1996, p.305), being abused affects the development of "affect regulation and interpersonal relatedness", which in turn affects awareness of danger and ability to respond to threatening situations, maladaptive coping abilities and increase in the risk of rape. According to Blackshaw, Garneau, Merskey, Moscarello (2006), the victim's attempts to minimize or reduce negative emotional states such as guilt, shame, fear and rage, and associated thoughts and memories, emotional avoidance behaviours of dissociation, substance abuse, and self-mutilation, ''are negatively reinforced by the reduction or suppression of the intense affective responses associated with sexual abuse experiences'' (p.305). In this context, high-risk sexual behaviours (such as frequent, indiscriminate, and compulsive sexual behaviours), serve to modulate emotional pain by providing more pleasurable, distress-incompatible input (Blackshaw, Garneau, Merskey, Moscarello, 1996). Survivors develop dissociative coping behaviours that lead them to ignore cues to dangerous situations, in addition to developing feelings of unworthiness and being sexual objects (Arata, 2002).

These abusive relationships may have a detrimental effect on children, regardless of the so- called gains obtained from the relationships. They remain, cases of child abuse, in which children are taken advantage of, and sexually exploited for their vulnerability. The effects are always negative and the child is more likely at some stage, to be self-destructive, use alcohol or drugs, or get pregnant (Arata, 2002). Several studies indicate that children who engage in relationships with older men as partners have riskier sex as they do not use adequate contraception, are more likely to contract HIV, sexually transmitted disease, or fall pregnant (Sturdevant et al., 2001). Not only are these men abusive, but they develop reinforcing patterns of behaviour in seeking to manipulate and exploit young, deprived children, by objectifying them and their love (Finkelhor & Hines, 2007). These men have had poor school outcomes and were less likely to have a high school degree, have poor self-esteem, poor psychosocial development, and poor earning potential, but they seem to be financially well off, and lure children who come from impoverished

circumstances (Finkelhor & Hines, 2007). This explanation is typical of cases in which young girls in South Africa are drawn to taxi drivers and bus conductors in their communities.

Another influence that makes children vulnerable is the media. Media reflects the patriarchal values of society. The media is one of the most potent influences on child development as it not only transmits information but also shape attitudes that can allow children to be susceptible (Strasburger, 2004). Children are exposed to some form of media whether it is television, print, electronic, video games – and these influence their perceptions of social behaviour and social reality, whilst developing their values. Media is rife with violence and sex, providing information on human sexuality, stereotypical sex role attitudes and women as sex objects. One critic (Strasburger, 2004) felt that "musical videos created a 'dreamworld' in which women are all nymphomaniacs, waiting to be ravaged" – as men conducted the songs and scantily dressed women tend to dance in a lewd, lustful manner (p.67). Not only are children influenced, but abusers have their perceptions distorted about what is acceptable and unacceptable behaviour; what is reality and what is enacted behaviour.

Against the background of this vulnerability, children experience difficulty in reporting or disclosing their incidents of sexual abuse.

Reasons for non-disclosure of abuse by children

Children's ability to disclose, tell or provide testimony on their abusive incidents are important issues for the protection of children. But the various dynamics illustrated in the above section, and in this section present the challenges experienced in exposing the ordeal of sexual abuse. According to Paine & Hansen (2002), "a child's self-disclosure of sexual abuse is a critical component in initiating intervention to halt the abuse, address its immediate effects, and decrease the likelihood of negative long-term outcome (p.271).

Various retrospective studies of adult survivors of childhood sexual abuse indicate that sexual abuse is under-reported and underestimated (Kendall-Tackett, Becker-Blease, 2004; Lanning, 2010). According to Collings (2011) approximately 90 per

cent of South African children do not report incidents of sexual abuse. Hence, legal systems do not officially attend to these matters. The non-disclosure of abuse means that the abuse may continue, other potential victims are at risk, but importantly the victim does not receive treatment and support (Goodman-Brown, Edelstein, Goodman, Jones, and Gordon, 2002).

Children infrequently or seldom talk about their abusive experiences due to many reasons. A primary reason is the various fears that they have related to disclosure; and indeed, children are at risk of being stigmatised, punished, accused of lying, manipulation, ostracised or blamed for their own abuse (Summit, 1983).

Children cannot give informed consent to sexual contact with adults and older persons, as they do not understand sexual behaviours and are developmentally unable to participate as full partners. Children have a status, that accords them less power, knowledge, and physical strength than older people and are socialized to trust and obey adults. Children also do not know that the only person responsible for the abuse is the person who perpetrated it (Goodman-Brown, et al, 2002). Disclosure of child sexual abuse is almost always viewed sceptically and victims suffer negative post-disclosure experiences, (Arata, 1998; Berliner & Conte, 1995; Briere & Elliot, 2003; Roesler & Wind, 1994) and abandonment by the very carers most crucial for the protection and recovery of the child. This unaffirmed response from professionals and carers can attribute to children's increased sense of self-blame, alienation, anger and revictimisation (Summit, 1983).

Children are seduced most often into complying with sexual acts and tend to be ashamed by their compliance and submission to these activities. Offenders use elaborate strategies of grooming (which I will substantiate on in the latter part of this chapter) to engage children in sexual acts that tend to confuse children (Lanning, 2010). According to Lanning (2010) the responsibility of the abuse always lies with the offender, as children cannot give consent, whether they co-operated, initiated the act, did not resist, did not "yell and say No!" and even accepted gifts or money for the sexual engagement (p.54).

Children feel responsible for the abuse, which increases their sense of guilt and shame, further prohibiting them from disclosure of the abuse. They are also afraid of

the consequences of their disclosures (UN Secretary General, 2006). They may feel compromised into protecting the integrity of their family and their abusers, especially if the abuser is a significant caregiver, and they might be concerned about what would happen to them and the abuser. Issues of loyalty, attachment and fear are important in inhibiting disclosure (Alexander, 1992; Hindman, 1989; Paine & Hansen, 2002; Summit, 1983). Marshal (2009) reported that 100 per cent of incest victims in his study indicated that they would not disclose their abuse if it reoccurred due to the imminent consequences related to - the loss of the abuser (if breadwinner), family embarrassment, stigmatised by peers, lack of credibility and lack of support by family. Various studies confirmed that children took longer to disclose their abuse committed by family members than abuse committed outside the family (Arata, 1998; Goodman-Brown, et al, 2002). Children are also more reluctant to report a significant caregiver or family member (Paine and Hansen, 2002).

The believability or the credibility of the child's disclosure is furthermore questioned by constant requests to repeat the details of the incidents such as "Tell us again what really happened" and questions about the long delays of their disclosure "why didn't you tell us earlier?" or scepticism "What did you do to cause the abuse?" And "how can you live with something so horrible?" (Lanning, 2010: Alaggia, 2004).

Summit (1983) refers to the accommodation strategy and comments on 'the basic subordination and helplessness of children within authoritarian relationships, the issues of secrecy as a silencing strategy, entraps and compromises children to accommodating the ongoing abuse as the only realistic option" (p.182). Summit (1983) refers to the manner in which children psychologically but dysfunctionally cope with the abuse, and inhibit their disclosure.

Parents' supportive attitudes are closely associated with children's ability to verbalise the abusive events. Children most commonly disclose to family and friends before they decide to disclose to professionals and it is left ultimately to the discretion of these adults to make decisions on whether the matter should be reported or not (Alaggia, 2004). Children are the most vulnerable after disclosing because of their immaturity, relative powerlessness and dependency on their family and systems of reporting.

Stereotypical gender roles also play a part in the non-disclosure of abuse by children. Girls have to deal with notions of being pure, and preservation of one's virginity is a huge consideration in many cultures. Girls fear being ostracised, expelled, labelled or considered as prostitutes or 'sluts' if their virginity has been compromised because of the abuse. The fears of such responses silence many girl survivors. The stereotypical notions of masculinities also create a perception that boys are supposed to enjoy sexual activity, and hence they fear reporting the abuse, and if abused by a male, they fear being considered homosexual (Faller, 1989; Gartner, 1999; Goodman-Brown et al., 2002; Reinhart, 1987; Summit, 1983; Lanning, 2010). Girls may have some of the same fears of homophobia if abused by an older girl or woman. Studies do indicate that a higher rate of girls than boys disclose sexual abuse in childhood (Finkelhor, 1990).

Structural factors and dominant discourses impact and deter disclosure of abuse by children in South Africa. Sexual abuse of children is perpetuated within a climate of cultural and religious barriers, poverty, and respect for people in authoritative positions among other factors. Various cultural practices, such as polygamy, young women being compelled to get married to older men, traditional circumcision and initiation schools, all increase the risk of adopting unhealthy behaviour. For instance, educators, traditional leaders and other prominent figures who abuse tend to respond by financially compensating the families of the abused child, who are generally in impoverished socioeconomic circumstances, and the matter is hence not reported to the police. The economic needs of adults supersede the rights of children. Children's rights and views in many communities are ignored, and many children report feeling powerless and unprotected by their parents (Alaggia, 2004; Fontes, 1995; Paine & Hansen, 2002), not atypical as I observed in my several years of experience in the field.

The age of the victim also affects disclosure. In a study conducted by Collings (2005) it was determined that both the oldest and the youngest children tend to disclose directly or obliquely while children in the middle-childhood age range (seven- to nine-year-olds) more commonly had their abuse detected by significant others. It was concluded that preschool children do not have the cognitive and social competence

to inhibit their disclosure and adolescents are more competent in understanding and disclosing abuse (Collings, 2005).

There are various patterns in the disclosure process. Collings (2005) presented patterns that emerged with disclosure pertaining to intent, spontaneity, detail, latency, and temporal duration. According to Finklehor, Wolak, and Berliner's (2001) two-stage model of crime reporting, barriers to disclosure by child crime victims can be defined by those that inhibit the recognition of a problem, and those that inhibit disclosure of a problem, even though a problem is recognised. In the first stage of the model, namely, Problem Recognition, they found that many children do not disclose child sexual abuse, as they were not able to recognise that the sexual activities that they were exposed to, as being abusive. Earlier campaigns also taught concepts of "good and bad touches" – which created some level of guilt for children who experienced the "bad touching" as good and pleasurable. All children are sexual beings regardless of age and may obtain pleasure from seductive, gentle touching, and may not report.

When the abuse is recognised as a problem, the child's caregiver or confidant may not wish to report the matter as they minimise the seriousness of the abuse and/or do not believe the child (Finkelhor et al., 2001; Faller, 2004; Paine & Hansen, 2002). The second stage of Finkelhor et al.'s (2001) disclosure model is called the Consideration Stage, whereby children and their families weigh the costs and benefits of reporting the abuse. The benefits of support from child protection systems are considered, against the costs of perhaps the stress of reporting, and further victimization (Faller, 2004; Finkelhor et al., 2001; Sas & Cunningham, 1995).

An important aspect of child protection strategies is that meaningful detection by community members is more frequent (61 %), than the actual disclosure by the child (39 %) (Finkelhor et al., 2001; Collings, Griffiths & Kumalo, 2011). One of the types of disclosure is behavioural manifestations, whereby the victim does not directly tell about their victimization verbally, but presents with various symptomatic behaviour that can be identified by adults who are informed of the symptoms of abuse. But that in itself can be a challenge as change in behaviour can be symbolic of various distressing occurrences and events in a child's life. The myths, misunderstandings, and victim-blaming associated with child sexual abuse shifts attention away from

perpetrators and silence the survivors. Hence the personal challenges for victims make the process of disclosure disempowering and debilitating. Furthermore professionals required by law to report abuse also fail, leading to the wide scale underreporting of abuse. The availability and access to professional resources, and confidence in service providers to respond, such as the police, social workers, doctors and psychologists are also important factors that contribute to the non-reporting of sexual abuse.

If adults and caregivers become more informed about the offenders' strategies and about their responsibility to protect children, this may hold more promise for the protection of children. The following section addresses the identification of the abuser.

The understanding of offenders who sexually abuse children

Various studies cite several contributing factors to sexually abusive behaviour, which are biological and early developmental factors; insecure attachment; personality characteristics and irrational thinking styles; inadequate coping and inadequate social skills; mental disorders and substance abuse and situational and structural factors (Marshall, Barbaree, 1990; Lanning, 2010; Myers, Marrero and Herkov, 2005).

Offenders can appear to be fairly regular, normal people, in authoritative, credible, entrusting positions of child care, such as educators, police, priests, and fathers (Lanning, 2010). Society has the greatest abhorrence for strangers who abuse and the response is generally punitive resulting most often in castration (Lanning, 2010). Society finds it challenging to accept the reality of offenders being in caring positions to children, and generally there is a response of denial and disbelief to these cases (Lanning, 2010; Summit, 1983).

Herein lies the contradiction – there is an attitude in society of denial on the one hand to the identity of the abuser and victim-blaming on the other hand (Lanning, 2010).

So who are these people who offend?

People who have sexually abused children have been described as "child abusers", "child molesters", "paedophiles", "child perpetrators" and to derogative extremities of "pervert" and "crackbrain". Definitions can be challenging and although these terms have been used synonymously, they can be very different in their meaning and damaging to a person (Lanning, 2010). Types of abusers are not exclusive entities but typologies can form a foundation to understanding and providing insight on the offender. Offenders who abused children were and still are described in entirely exclusive entities, which portray their characteristics, their victim preference, and their risk levels among other aspects. This dichotomous perspective is being seen as problematic and worthy of review (Abel, Becker, Cunningham-Rathner, Mittleman, & Rouleau, 1989; Myers, Marrero, Herkov, 2005; Conte 1991; Studer, Scribney, Aylwin & Reddon, 2011).

From the early 1980s typologies were developed to organize child abusers according to their reasons for the deviant behaviour, aetiology, choice of victims, type of behaviour, and intrusiveness of sexual acts. The most substantial being Groth's "fixated-regressed dichotomy" (Groth, Hobson, and Gary, 1982, p.10). Another classification was developed to encompass 24 possible types of child abusers, addressing social competence, type and frequency of contact with children (Knight and Prentky, 1990). The fixated offender is said to have "a persistent, continual and compulsive attraction to children and the regressed offender tends to be situational and precipitated by external stressors" (Groth, Hobson, and Gary, 1982, p.24). According to this codification, fixated offenders sexually abuse children external to the family, are high risk due to compulsive interest in, especially male children, their activities are planned and executed with vulnerable children who are seduced into compliance (Groth et al., 1982; Johnston & Johnston, 1997; van Dam, 2001).

In contrast, regressed offenders are more vulnerable in managing their stressful circumstances such as marital or interpersonal problems, negative affective states and tend to cope by sexually abusing children with whom they have easy access, as it affords them a temporary measure of relief (Knight & Prentky, 1990). The precipitating stress causes the regression, and children become the sexual substitute (Salter, 2003).

This typology has formed the basis in providing explanations to the deviant sexual behaviour against children by expanding into a continuum, (Knight & Prentky, 1990; Leclerc, Proulx, Lussier, Allaire, 2009). By the classification evolving over the years it has fundamentally contributed to the understanding of offenders, hence assisting with police investigations in interviewing processes, in the collection of evidence, in determining the modus operandi, patterns of risk, in protecting potential victims and also in developing intervention processes (Leclerc, Proulx, Lussier, Allaire, 2009).

Lanning (2010) developed a continuum of situational to preferential offenders that indicated that an offender can be driven by both sexual and non-sexual needs with the characteristics of "biological and physiological sexual needs on one end and psychosexual or deviant motivation at the other end" (p.33). He described situational offenders to be more frequent in the lower socioeconomic community and the less educated. Their opportunistic, more simplistic but impulsive deviant sexual behaviour was based on sexual needs of lust or nonsexual needs like control, power and anger. They are more general in their choice of victims, are spontaneous and violent in their behaviour (Lanning, 2010). A situational-type child abuser may have a single sexual encounter with a child or abuse a child over a longer period, and he may change his behaviour patterns to be more like the preferential offender.

South Africa has a high rate of sexual violence according to police statistics (presented in the introduction). Situational offenders appear to be motivated by structural issues of inequality, financial impoverishment or poverty, unemployment, and offenders are most often uneducated and unemployed (Lanning, 2010).

According to Lanning (2010) situational offenders may develop other behavioural patterns such as regression, moral indiscretion, and inadequacy. Regression refers to an offender's poor coping skills, which leads him to commit the deviant behaviour. Morally indiscriminate patterns of behaviour describes the more egocentric offender who likes to get his own way in a situation even if he hurts, violates, lies to and manipulates others. The inadequate offender is the one who feels inadequate, has poor self-esteem, poor social competence, and eccentric personality problems and vents his frustrations on helpless victims. He sees relationships with children as his sexual outlet. He may kill a victim to avoid detection, but almost any child abuser might commit murder in order to avoid identification (Lanning, 2010).

Preferential sex offenders are viewed as more educated and financially stable individuals, whose sexually deviant behaviour is driven by their attraction, fantasies, and preference to have sexual encounters with children (Lanning, 2001). They use sex toys, pornography, fetish items, seduction or grooming behaviour with their victims (Lanning, 2001). They have poor psychosexual development, desire affection from children, and are supposedly more often attracted to male children. A paedophile's sexual interest in children might be combined with other sexual deviations or paraphilias that could range from being harmless to being extremely destructive (Myers, Marrero, Herkov, 2005) such as compulsive exposure of one's private parts (exhibitionism), spying or watching others engaged in intimate activities (voyeurism), compulsive obscenity (scatologia), sexual exploitation of animals (zoophilia), sexual excitement to urination (urophilia), sexual interest to defecation (coprophilia), sexual attraction to activities involved in binding (bondage), sexual arousal related to baby role-playing (infantilism), sexual arousal related to infliction of pain (sadism, masochism), and sexual attraction to real or simulated death acts (necrophilia) (Van Dam, 2001). Understanding the paraphilias, the behaviours, the acts and sexual motivation are important in the context of understanding children's allegations and the risk to them (Van Dam, 2001).

From experience with members of the criminal justice system, they seem to fail in prosecuting the sex offender, because they do not understand their strategies, and their techniques of investigating and resources are limited (Lanning, 2010).

According to researchers (van Dam, 2001; Lanning, 2010) preferential offenders present with four main patterns of behaviour, one of which is diverse, and another such as seduction, introversion and sadistic. The introverted offender is attracted to children but he lacks the verbal skills to seduce them, so he engages them in indirect ways via the Internet, telephone or exhibitionism. He presents in situations where children congregate just to watch them. He abuses especially young children, multiple children or his own infant children (van Dam, 2001). The sadistic offender is sexually aroused or gratified when he imposes hurt or suffering on his victims either psychologically or physically. He uses methods of luring, physical force and abduction, and can also resort to killing his victims to prevent exposure of his identity (Salter, 2003). The diverse offender experiments with prohibited, unusual or bizarre

deviant sexual activities with victims such as sexual rituals, child swapping and so on. His victims may be his own children or children obtained through marriage (Salter, 2003).

Regardless of the various descriptions, there should not be stereotyping of offenders, as they do not fit into neat categories and attempts to see them as such may lead to inappropriate judgments and diagnosis of their behaviour. For instance, the incest offender may be more of a preferential offender and high risk than indicated by theorists and researchers, because an incest offender has prolonged access to children within the family, so has adequate time to refine his grooming behaviour over a lengthy period of time. Victims within the family experience the greatest challenge to disclosing abuse as they are pressured to keep the family secret, thus providing the sex offender with indefinite access to them. Thus he can evolve to developing his skill in conducting deviant sexual acts and other such behaviours. An incestuous father may initiate the abuse of his children but may continue to abuse outside of the home, by abusing his children's peers and so on (Salter, 2003; Lanning, 2010).

If an offender is exposed for his deviant sexual behaviour he can present various responses to defend his actions and protect himself to deflect blame and responsibility. These defences can be used to deceive and mislead others. Child abusers most often deny their sexual behaviour either totally or partially. He may attempt to minimize the offence either in terms of quantity and quality. For instance, if a child indicates that he was raped 30 times the offender may claim that it was just three times and it was just a "touch". For instance, sex offenders may claim that they were providing sex education to children and were not talking dirty to them or that they are naturists and hence they conduct their activities with their children in the nude at home. Offenders may justify, rationalise or validate their behaviour, but a crime against a child should be seen for what it is, as children cannot give consent. Unfortunately service providers tend to be influenced by sex offenders and their decisions tend to be misinformed and distorted (Leclerc, Proulx, Lussier, Allaire, 2009; Lanning, 2010).

The typologies have provided a basis for understanding offending behaviour and its different manifestations, but behaviour is, ultimately a choice and the uniqueness of

every individual cannot be codified, nor behaviour totally predicted on the basis of categories. The problem of classification currently in the field also leads to presumptions from professionals that the behaviours of some offenders cannot be changed and treatment prognosis is poor or that some are too high risk to be treated. Individuals have agency to abuse and to ultimately decide to change their deviant behaviour. In cases of incest the abuser who may be a father, may be merely confronted or treated leniently, but this does not result in the behaviour discontinuing or disappearing. The abuser is allowed to remain in the family; he has access to other victims and may develop an entrenched pattern of behaviour. According to the classification it is assumed that the extra-familial offender is more risky than the intra-familial offender (Lanning, 2010).

Child abusers may have various psychosexual disorders, personality disorders, or psychoses or may be involved in other types of criminal activity. Not all child abusers are the same, just as they can appear like everyone else but are driven by a number of influences. Offenders aim at ensuring their sexual needs are gratified and that they have constant exposure to a victim or victims, in order to make their fantasies a reality, but also aim to avoid their detection and exposure. If they are confronted they deny their behaviour (Leclerc, Proulx, Lussier, Allaire, 2009).

Working within a multidisciplinary team can generate much of the information to understand, expose and collaborate a case of child sexual abuse. An expert witness can do much to educate the magistrate on the behaviours of offenders and the risk they pose to children (Summit, 1983).

Respect and understanding of roles, institutional changes, reassessment of current systems, staff development and training and inclusion from research studies should be considered for current child protection systems (United Nations, 2006).

The strategies of abusive relationships

This section presents the deviant sexual strategies and processes involved in sexually abusing children. There are reasons for children not disclosing or reporting the incidents of sexual abuse, one of which is the technical strategic relationship of

the offender, which entraps and silences the victim. Chapter seven provides an analysis of the strategies adopted by the research participants in the study.

Lussier, Bouchard, Beauregard (2011) indicated that every offender attempts to be successful in his crime, reducing all risks in the performance of the crime and thereafter. They indicated that after more than 50 years of research, researchers have still not been able to provide a formal evidence-based explanation of the criminal activity of sexual offenders (Lussier, Bouchard, Beauregard, 2011). Common elements of the modus operandi of the offender are deception and manipulation in the grooming process, to ensure the abuse of a child and yet avoid detection or exposure. McAlinden (2013) indicated that "grooming is a process entailing the use of a variety of manipulative and controlling techniques, with a vulnerable subject, in a range of inter-personal and social settings, in order to establish trust or normalise sexually harmful behaviour, with the overall aim of facilitating exploitation and/or prohibiting exposure" (p.4). Prevention programmes should not focus just on not only on the detection of the abuse or risk strategies but rather by the detection and exposure of the offender by their strategies, to prevent children from being abused.

According to Block (1981) the situation of abuse is the "microenvironment" (p.745). This context "consists of the events and structures surrounding the abuse, the relationship of victim and offender, the location of the abuse, the incident of abuse, tools and action, the weapons available and the dynamics of interaction" (Leclerc, Proulx, Lussier, Allaire, 2009, p.595). There are various stages in the seduction process as it is a well-planned and elaborate scheme. Minnie (2009, p.6) provides a loose structure of possible stages in the grooming process that commences with "identifying and meeting the child, which progresses to the friendship-forming stage, and then into the relationship-forming stage, culminating into the molestation stage and finally, the stage of maintaining the victim and preventing disclosure of the sexual".

In the first stage the abuser obtains information about the potential victim including connecting with friends and family of the victim. These sources are manipulated and desensitised to earn the offender some credibility. For instance, the offender may assist in coaching the potential victim to improve performance at an academic

subject. During the relationship-forming stage the abuser proceeds to desensitise the potential victim through a grooming process by asserting psychological and emotional control over the child. Children are vulnerable and are easily groomed as they consider the activities, sexual or otherwise presented by the abuser, as normal, and do not understand concepts or the situation that they are getting into (Lanning, 2010). "Grooming hence is a premeditated behaviour, emotional manipulation, seduction, games, and enticements" (Robertiello and Terry, 2007, p.512). Grooming is best achieved over a longer period of time and family members have the greatest opportunity to achieve this without being detected (van Dam, 2006). Young (1997) indicates that the offenders use normalization of routine activities, roles and relationships, which allow them to remain undetected. The abuser then carefully invests in the ultimate stage that he has been fantasying and planning for the molestation stage.

During the final stage of the reinforcement and maintaining the victim stage, the abuser attempts to maintain his relationship with the victim to continue the abuse but also secure the victim's ongoing silence (Minnie, 2006). Abusers continue the manipulation and deception by trying to convince that they do not have a sexual preference or interest in children. They introduce methods of negotiation, concessions, bargaining (as in a seduction game), over which the child has no control or power. In this way the offender creates a normalised, sexual environment, which continues the abusive interaction. This entraps and deceives the victim into feeling ashamed, confused and compromised. This situation is similar to the Internet abuser who conducts most of the grooming on the Internet before meeting to molest his victim (Lanning, 2010). Abusers choose the most vulnerable children – and are perceptive of their needs for love, material goods, and developmental necessities – by depicting their care and concern for them. These children ultimately return to the abusive situation believing that the offending behaviour is an expression of love and care, and remain silent about the abuse. It is for these reasons and others (mentioned in previous sections) that children cannot disclose abuse. Disclosure of the abuse by the victim may not happen until circumstances of abandonment by the offender, or perhaps years later when the victim is older and more able to disclose (Summit, 1983).

Some abusers resort to the abduction of their victims and control them through threats, or violence. Abusers may also blackmail their victims especially if their victims engaged in illegal substance use, theft, were involved in sex rings, traded sex for money, engaged in homosexual acts or pornography. A "Stockholm Syndrome" involving a control process of survival and a process of interdependency develops (Lanning, 2001, p.124). Abusers may be authoritative figures in society who do much for children or work with children, such as educators, religious leaders. This guise of deception allows them to get away with the offending behaviour as they are respected and appreciated (Lanning, 2001).

Child pornography

Behind every child pornographic image is an exploited child – a real child that has been exploited, desensitised and treated as a sex object (Sheldon, 2011). In South Africa, the acknowledgment of the harmful effects of child pornography has resulted in criminalisation through legislation encompassed in the Films and Publications Amendment Act, 3 of 2009.

Child pornography is not only kept for personal use but has a huge commercial or profit-making benefit (Sheldon, 2011). Although accessing child pornography is risky, offenders access it to feed their personal interest and compulsive behaviour (Lanning, 2010). Children who took or allowed pictures of them to be taken are finding out the risks of their behaviour, as they must live with the knowledge of this permanent circulation of their images in cyberspace.

As of the end of 2009, the National Child Missing and Exploited Children's Child Victim Identification Program database indicated that of the children identified in child pornography the relationship to the offender was: 35 per cent by parents or relatives; 31 per cent by acquaintances; 16 per cent by online enticement; and 14 per cent self-produced by the child in the image with no adult involvement (Lanning, 2010). The N-JOV Study of reported law-enforcement cases found that 67 per cent of the child offenders who committed Internet sex crimes also possessed child pornography (Wolak, Mitchell, and Finkelhor, 2003).

Offenders feed their compulsive behaviour by collecting erotica, paraphernalia or souvenirs, in various forms such as books, articles, and images. This is used to endorse, rationalise, reinforce or even comprehend their deviant behaviour. An exchange of this material with others provides support for the behaviour and enables the ongoing exchange of this material based on their interest and preference (Lanning, 2010; Sheldon, 2011).

Child pornography fuels or feeds sexual fantasies which may not be acted on, but it is a concerning activity that cannot be predicted (Quayle, 2004; Sheldon and Howitt, 2007; Taylor and Quayle, 2003). Children can be shown child pornography to convince them that it is an acceptable and perhaps exciting activity for them to also try. Once children participate in child pornography they can be blackmailed to remain performing in these sexual acts and be photographed or videoed.

Child pornography provides various functions: an increase in users creates a demand and a market for profit from child pornography; these images foster deviant sexual fantasies, which may lead to the sexual abuse of a child; the images may be used to groom other children into sexual abuse as the impression is created that it's an acceptable activity for children to engage in (Jones and Wilson, 2009; Sheldon and Howitt, 2007). Child pornography furthermore, serves as a collectible, it facilitates social relationships between offenders and potential offenders, is a means of escaping from the real world and negative emotions, validating deviant sexual fantasies, desensitizes all users in general, serves as a means for sexual gratification, exploration and experimentation, serves as a guide to the sexual abuse of children, functions as means for blackmailing a victim, to keep as a souvenir of the abuse of child victims (Aftab, 2000; Calcetas-Santos, 2001; Caple, 2008; Carr, 2006; Choo, 2009; Davis, 2001; Durkin & Bryant, 1999; Foley, 2002; Hill, Briken, & Berner, 2006; Holt, Blevins, & Burkert, 2010; Itzin, 1997; Ost, 2009; Quayle, Erooga, Wright, Taylor, & Harbinson, 2006; Rettinger, 2000; Seto, Reeves, & Jung, 2010; Sheldon & Howitt, 2007; Warden, Phillips, & Ogloff, 2001; Hannah, Merdian, Wilson, Thakker, Curtis & Boer, 2013).

Ward and Beech (2006) indicate the motivation for this type of behaviour as a combination of these deficits, which induces deviant sexual arousal to children. They identify an emotional system, like problems in intimacy or attachment deficits; action

selection and control system such as self-regulation problems related to moods and so on; perception and memory system, like the maladaptive belief systems related to pro-offending attitudes, distorted sexual scripts. But, for the exploited victims behind those images there is never closure, as there is an ongoing sense of victimisation as people continue to view the images (Leonard, 2010).

McLaughlin's (1998) introduced a broad typology of cyber-sex offenders, which should not be seen as exclusive entities, these were collectors, travellers, manufacturers and chatters. Collectors are described to be single, socially-isolated persons who collect and trade pictures of children, and have occupations that give them access to children. Travellers chat, groom and solicit meetings with victims, while manufacturers make child pornography and have sexually abused children. Chatters collect erotica, chat with, and meet children (McLaughlin 1998; Robertiello and Terry, 2007). Gillespie (2008) indicated that that there is a relationship between crime and technology, as criminals are always a step ahead of law enforcement, who tend to lag behind, due to the lack of resources, in the use of technology for investigation, apprehension and prevention.

Importantly in the protection of children is the process of identifying the role of service providers, caregivers and parents, community members within the larger 'caring community' that will play an active role in preventing the sexual abuse of children. The following section addresses the members of the caring community and their respective roles.

The role of the multidisciplinary team and the family

The myriad of challenges facing any child victim begs for a comprehensive, holistic and supportive response to every child in every context of abuse. The complexities of non-disclosure and the manipulative and deceptive strategies of the offender call for a creative, proactive response in the prevention, protection, intervention, evaluation and corroboration of child sexual abuse matters. A collaborative, coordinated multidisciplinary team can do much to beat the offender at his game and support the victim and the family. Caretakers are sceptical when faced with the incredulous disclosures of the child especially if the abuser was a credible, trusted

family member, and so depend on service providers to legitimise and clarify the abuse (Summit, 1983).

The sad reality is, however, that the services provided to child victims are fraught with prejudices, personal biases and lack of credibility that should be recognised and addressed in order to ensure just management of cases. Permission or consent from a child is irrelevant regardless of the circumstances, as children according to legislation cannot give consent in child sexual abuse cases, but the subjective perception of service providers allows this to be a challenge as victims are blamed or judged in cases of abuse. Collings (2003) indicated concern about the entrenchment of myths and stereotypes of therapists in the child sexual abuse sector, as it is detrimental to the therapeutic relationship.

In cases in which a child was not forced or threatened, did not resist and even co-operated has been challenging for service providers to manage. children are discredited by attorneys and magistrates because they claimed to be abused, yet admitted they had made no protest, and this continuing assault on the child, increases their sense of guilt and helplessness (Summit, 1983). The test in criminal court requires specific proof which is, beyond a reasonable doubt, and the attorney can very easily present reason to doubt the child's fantastic claims, without substantial proof or support from the multidisciplinary team. If the child's testimony is rejected in court, it is more likely to be rejected by carers, professionals, the public, who may be eager to restore trust in the accused adult and to stigmatise the child as disruptive. There are also cases where children do not consent because of self-induced use of drugs or alcohol. A straightforward case appears to the one where the child was physically forced or perhaps abducted. Having presented the strategies and mind-set of the offender, it becomes apparent that the children are seduced and are most often compliant, and so cases are not so straight forward and clear-cut. The cases in which children were willing to trade sex for money, material goods, drugs and even attention, is an additional challenge.

The lack of confidence in the processes that support victims inhibits the reporting of abuse. Children are exposed to secondary abuse when they disclose abuse, due to poor, inadequate management of cases, and the inappropriate and insensitive attendance to victim needs.

Collings, (2007), Roesler & Wind, (1994), and Collings, (2009) identified a number of reasons for the occurrence of secondary victimisation of survivors within the medical and criminal justice systems. Firstly, the exposure to the processes of the medical examination and the atmosphere of the court context   bears a close resemblance to the situation of the abuse that it may re-traumatise the victim. Secondly, a distorted belief system by social service providers, related to myths and stereotypes, may negatively influence or affect the management of the child (Collings 1997). Thirdly, inadequate and unempathic service delivery impinges on a victim (Van Zyl and Sinclair, 2006).

Since the events depicted by the child are often perceived as incredible, skeptical caretakers turn to experts for clarification. Victims who have been manipulated and feel ashamed or conflicted may most likely not be confident in their testimonies. A coordinated, collaborating multidisciplinary team of service providers who understand the case dynamics, avoid duplication, and who are skilled in the collection of evidence can provide support while reducing the level of trauma evoked by the abuse. A competent expert witness can articulate the position of the child in the prevailing adult imbalance of credibility, providing understanding and assessment of the trauma of a child and the risk posed by an offender, without embellishing or confusing the details for a magistrate (Summit, 1983). Generally in child sexual abuse there is no third-party eyewitness and sometimes no physical evidence, hence the validation of the child's perception of reality, acceptance by adult caretakers and even the emotional survival of the child may all depend on the knowledge, skill and articulation of the clinical expert witness (Summit, 1983). Any child victim may experience negative psychological effects of testifying, which can be surmised to be more deleterious if the offender is not convicted (Lanning, 2001).

The social worker must assist in disarming skeptical carers into a position of belief, acceptance, support and protection of the child. Unless there is support for the child victim and immediate intervention to force responsibility on the abuser, the child may self-sacrificially retract her or his complaint, in the face of alienation from his or her family (Summit, 1983). This restores the equilibrium in the family and the ongoing access of the child by the abuser.

From the literature presented thus far there are many lessons that can benefit and contribute towards the protection of children. Development levels and vulnerability of children is an important consideration for child protection programmes. Adolescent children are curious about sex and want to experiment without always understanding the risks involved, and younger children don't always comprehend the information provided to them on child protection, for them it does not always make sense: "why can't I trust this person and not the others".

The challenges related to the disclosure process of children and the complexity of the modus operandi of offenders must be incorporated into child protection programmes. Children should be given the language to adequately describe the deviant behaviour presented by offenders (Laws, Hudson, Ward, 2000). Both victim vulnerability and offender opportunity should be explored and understood by service providers. Service providers must be aware of these dynamics and communicate their understanding and empathy of the seduction process to the victim. Children should be supported through their disclosure processes bearing in mind that children would minimise, deny, provide incomplete partial evidence, or completely change or recant their reports (Howard, 2002). They present in this way as they may still be controlled and manipulated by the offender, physically, psychologically or emotionally. Furthermore they are confused and do not have a frame of reference for accurately describing sexual abuse. It is necessary to understand the sexual offending against the child by focusing on the relationship dynamics and engagement between the child and the abuser.

To this end Ward et al. (1995; Hudson, Ward, and McCormack, 1999) described a model of the offending process that incorporates two stages, in which there are three focal areas in which the offence is carried out. In the first, the victim is chosen to serve the offenders sexual gratification. The second focus becomes the process of ensuring the child's compliance and sexualisation so that the victim becomes actively involved in the process, so that the act of sexual abuse services the needs of the child as well as the offender.

McAlinden (2013) made some important suggestions for prevention: one of which was to address early offending behaviour; and another the training of professionals around the dynamics of new and emerging forms of grooming and its impact on

victims Incorporating how sex offenders operate would be of practical and policy utility within the bio-psychosocial and structural approach. Furthermore, targeting child pornography, and recognizing that even "nice guys" can be child abusers should improve the ability of professionals to investigate these cases, and for people to be more perceptive to them (p. 269).

The parent or caregiver has a role in protecting and preventing the sexual abuse of children. Families can play a dual role and contradictory role of nurturer, and yet provide a context for abusers to exist, or be exposed (Jones, 2000). The parent is the child's safest harbour and with perceptive guidance from a professional, the parent will be adequately equipped to support the child through any healing from trauma. (Alaggia, 2004).

A child may be empowered to disclose to a parent, and it is the parent who determines the ultimate course of action to be taken (Leclerc, Proulx, Lussier, Allaire, 2009).

A parent could dismiss the report, pressure a child not to disclose or to recant the matter. Parents have a significant role and they need to be informed and assisted to respond empathically to their children (Walker-Descartesa, 2011). A parent's response to the disclosure influences the accuracy of the disclosure.

Parents also express strong responses to the abuse of their child, and they tend to directly affect their children's responses to victimisation. At a time when the child most needs support, acceptance, affirmation and exculpation, the unprepared caregiver may respond with disbelief, rejection and confusion. Disbelief and rejection by potential adult caretakers reinforces the child's tendency to deal with the trauma as an intrapsychic onslaught accompanied by helplessness, pain, hopelessness, isolation and self-blame that make up the most damaging aspects of child sexual victimization. Victims are usually more embittered toward those who rejected their pleas for help and acceptance than toward the one who committed the sexual abuse. If a child is sexually abused by a trusted adult such as a father and then not believed by a mother figure, and validation is crucial to the psychological survival of the victim, a child becomes defenceless against multiple harmful consequences (Summit, 1983).

Parents may be confronted with a dilemmas analogous to that of the abused child and hence unsupportive for many reasons: they may believe that a child is lying; they may blame the child for the abuse to insulate themselves from the painful realities of the abuse; they may suffer personal pain, guilt, frustration, or embarrassment at the abuse of the child; there may be external factors related to economic pressure and substantial dependence on the approval and generosity of the abuser (common dependency in a patriarchal society); there may be family disruption caused by the disclosure; they may have personal childhood trauma; the mother's sense of security, life adjustment and much of her sense of adult self-worth demands a trust in the reliability of her partner- to think otherwise requires an annihilation of the family and part of her identity (Howard, 2011; Summit, 1983).

Collings (2007) indicated that the maternal figure has a history of being blamed for the sexual abuse of a child. Mothers rarely know, but rarely report as they fail to believe the disclosures.

Informing parents about the grooming strategies of offenders and the routinisation of activities that lead to the abuse can be most insightful and legitimising of the many disclosures of children that are rejected.

Conclusions and recommendations

The purpose of the research was twofold, first to understand offenders, and second to link this understanding to child protection.

In this chapter I have provided a historical context for the evolving understanding of the phenomenon of child protection. A review of the literature on offenders, victims and service providers was presented – and as simple as this triad connection appears, empirical demonstration of the influence of understanding the offender and its impact on sexual abuse of children and its protection strategies, has been elusive. Hence this quest has been to identify the relationship between the criminal and the victim in creating prevention alternatives to abuse.

I have explained the issue of child protection, the impact of abuse on victims, the typologies of offenders and their strategies, and the role of service providers – and to

link these as a force in explaining how we can address child protection. It may be an optimistic approach, but the recipients involved in the research have also indicated their optimism at this possibility. Understanding how offenders perceived their opportunities, managed potential risks and implemented their crimes, can be the bedrock for designing and implementing successful prevention programmes and development of policy (Copes 2012).

It is as much for these reasons as it is to examine issues left unresolved by the existing research that the study explored, with child sex offenders why they do what they do, and raising consciousness about the same in the hope that this would make a particularly useful contribution to the field.

In reviewing the literature, I believe the following standpoints are significant for this study to be utilized for the protection of children.

There needs to be open and engaging community discourses on what constitutes child sexual abuse, and allow that responsibility to be everyone's. Children and families should participate in policy development on child abuse. We need to accept that children are vulnerable and dependent and hence cannot always disclose. We should address their risk and susceptibility to offender opportunity. We need to recognize that understanding the ways offenders operate is of utmost relevance in protecting children.

There is the need to take into consideration the full and holistic perspective of protecting children, by being open about every case, the offender behaviour, patterns of operation and proactive techniques. To this end, policy makers and professionals need to confront and address poor attitudes and myths, bureaucratic practices, absence of resources and ineffective action. Rock, Karanbow and Manion (2012) indicated that intervention should be more holistic than "blaming of the individual but understanding and addressing the social, political and economic forces that influences an individual's situation and action" (p.354). In order for the protection of children to be informed there needs to be structural change. Rock, Karanbow and Manion (2012) indicate that there are various "conceptual maps" that exist on engaging children at risk, such as "local development, social development, active participation, anti-oppressive approaches and consciousness raising" (p.354). They

emphasise the need for "preventive policy and programmes that promote children's agency" (Rock, Karanbow and Manion 2012, p.354).

The structural and entrenched patriarchal attitudes in South Africa, and social inequalities are putting children at risk. Societal values are of concern as child sexual abuse is becoming trivialised and underreported. Children are becoming objectified and their protection is becoming of little consequence, which allows abusers to become more predatory and confident about not being apprehended.

The next section details the methodology of the research study.

Chapter Three: Research methodology

Introduction

The primary goal of this study was to understand the lived experiences of the sex offenders, and their strategies when sexually abusing children, and the potential of these insights for the protection of children. This chapter provides the research questions, the research method and design, data collection strategies, ethical considerations and potential limitations of the study and how these were addressed. Other aspects also addressed are the rationale for the selection of the research paradigm, discussion of the selection of participants, sampling process, data collection tools and methods of data analysis.

Research questions

The research questions for the current study are:

- What factors shape the sexual offender's behaviour?
- What are the life experiences of the child sex offender?
- What strategies do they adopt in sexually abusing children?
- What are the lessons obtained by service providers in being exposed to the sex offenders' strategies?
- What are the lessons learnt by parents and caregivers in being exposed to the sex offenders' strategies?
- Does viewing of the video – depicting the mind-set and the strategies adopted by the offender in sexually abusing children – hold potential for the prevention of child sexual abuse?

Research method and design

All research designs and processes of research are shaped by frames of references, or paradigms that assist in explanations and observations (Bhattacherjee, 2012; Rubin and Babbie 2013). All studies of social phenomena are shaped by philosophical assumptions. However, if the researchers believe that the best way to study social order is though the subjective perspectives and interpretations of

participants, an interpretivism paradigm is used (Bhattacherjee, 2012). The current study lent itself to the interpretivism paradigm, as it sought to study patterns of behaviour of the child sex offender, through their subjective lens, understandings and perspectives. Furthermore, I sought to use the research for transformational purposes in child protection, and was informed by critical theories of social work (Philip, 1991; Bhattacherjee, 2012)

The current study considers praxis, which has its roots in neo-Marxist traditions and critical theory. Paulo Freire (1973) contributes to an understanding of "praxis as the union of action and reflection", which he believes is essential to obtain "critical consciousness" (p.23). Critical theory was chosen to guide the current research study and lends itself to the method of enquiry adopted for the data collection process (Lafont, 2008). There is no one explanation for social problems, and hence in the current research study, multiple factors – that contributed to the underreporting of sexual abuse of children, the increase in child abuse, the low conviction rate of sexual offences of crimes against children, and ultimately the systems and processes that appear to protect children – need to be understood, against the backdrop of the presence or existence of child sexual abuse itself.

The term "interpretive research" is often associated with "qualitative research", which utilizes methods of action research (Bhattacherjee, 2012, p.21). The qualitative paradigm coheres with the chosen theoretical framework of critical social work theory in the research study. Qualitative methods also provide meaning to social justice. The approach allowed for depth of the data and yielded a substantial and meaningful understanding of the lived experiences of the participants who had sexually abused children. The qualitative research paradigm enabled detailed accounts of the small, purposive sample of sex offenders to relay their experiences of their own real world situations. Qualitative research methodology is rigorous in nature and it allowed me to explore the many components and interrelating layers of the life experiences of the sex offenders leading to the onset of their abusive and aberrant behaviour. Qualitative methodologies opened the space for hearing the voices of the offenders, and given the unique contributions that they can make, the research participants are positioned as the experts on their own reality. This approach validated the experiences and understandings that the participants contributed, and in doing so,

readdressed conventional power imbalances between the researcher and participants. According to Presser (in Copes, 2012), "the stories of offenders are invaluable for detailing the meanings that people give to their violations: (p.44). Offenders can contribute richly to our understanding of the context in which crime occurs, and how criminal processes are enacted through providing intrinsic details of motivation in child sexual offending behaviour.

The qualitative research methodology enabled me to delve into the thought processes and mind-sets of the participants that could only be obtained over a prolonged, qualitative process, and so the practicalities of the therapeutic context offered a relevant foreground.

According to Copes (2012) criminology has a long history of using qualitative methods to understand the perspective of offenders and that of those who seek to obtain justice, incarcerate, treat, or rehabilitate them. Understanding how offenders enacted their sexually offensive crimes, perceived opportunities of access and managed potential risks can be the bedrock for designing and implementing successful crime prevention, CSA prevention programmes and policy development. The in-depth qualitative accounts of actions and stories appeared to be the best kind of data, to provide insights into the meanings that the participants gave to their own violations, including violations and strategies that members of the criminal justice system did not know about. The methodological issues surrounding the narratives of persons involved in crime are challenging, as their motive and stories are always doubted, and they are construed as villains that should be imprisoned. Hence I was prepared for the ambivalence and scepticism of the participants, who viewed the DVD on the testimonies of the offenders (described in Phase Three of this research).

Qualitative research can be used to influence social policy. "Qualitative research can isolate target populations, show the immediate effects of programs on such groups and isolate the constraints that operate against policy changes" (Denzin 1989, p.482). It was hoped that the recommendations arising from the current research study would have utility for policy changes in the child protection field.

The detailed qualitative descriptions provided by the offenders on their strategies, was used as the content of a video. The video was shown to parents and service

providers to allow them to reflect on the mind set of offenders and their sexual offending strategies. The participants evaluated the effectiveness of the DVD to making contributions to child protection. Hence, the service providers responsible for child protection had been included in the current study to engage them in a praxis – a process of transformation to reflect and motivate their thinking in child protection. Thus the research is transformative: the production of the video depicted the voices of offenders who themselves hope to become part of the change process; the process of screening the video to parents and service providers was intended to heighten their awareness of the mind-set of the child sex offender. The screening of the video and getting participants to reflect and respond to it, is a form of praxis (Friere, 1975). In the case of service providers, to design appropriate intervention and/or sentencing, and in the case of parents, to become more vigilant about the protection of children and the prevention of secondary victimization, which so often happens when children are disbelieved.

Criteria such as trustworthiness, dependability, confirmability, and credibility tests the rigour of qualitative interpretive research (McLaughlin, 2007; McCleary, 2007).

To ensure dependability, interpretive researchers must provide adequate details about their phenomenon of interest and its relevant social context to allow objectivity in readers to determine their interpretive inferences. Interpretive research can be considered to be credible or have internal validity, if the conclusions and assumptions are believable. Furthermore, the researcher has had extensive engagement (20 years) in the field of child protection; in addition the researcher has used various data collection techniques and a meticulous data management and analytic process, which included transcription of interviews, records of contacts and interviews. The various participants in the study can add to the verifiability of the findings reported in the current research.

There is evidence of transferability or external validity in the current research that refers to the extent to which the findings can be generalized to other settings. The researcher has provided substantial descriptions of the research context, assumptions, and processes from the data to facilitate the findings being transferable to other settings (Bhattacherjee, 2012; McCleary, 2007).

In order to ensure rigour and lend credibility to the findings of my study, I employed a variety of strategies. The first strategy I used was prolonged therapeutic engagement with the participants, in a group and individual capacity, over a period of six months to two years (Creswell, 1998). The length of the therapeutic intervention, with lengthy compilation and analysis of each case study and the frequency of contact with the participants lends credibility to the study (Ross, Polaschek, Ward, 2008). Rigour was more easily achieved due to the qualitative nature of the research, as my focal questions in the face-to-face interviewing and group interviewing were repeated, particular themes were established, a considerable period of time spent and relationships developed with the participants. On account of me being a therapist *inter alia* researcher there was rigour based on my ability to understand the participants' meanings, feelings, events and experiences. I looked at data that was consistent across all cases, and for possible atypical cases. My concerns about rigour of the study also provoked reflexive questions in my planning, methods of data collection and choice of participants (Noffke & Somekh, 2009).

In order to increase the trustworthiness of the research findings, triangulation was used. Triangulation is "the systematic comparison of findings on the same research topic generated by different research methods" (Bloor and Wood, 2006, p.170). I used a variety of sources and prolonged individual and group engagement with my participants to obtain a fuller and holistic understanding of the phenomena under study. I had multiple sources of data; multiple participants; multiple written data, like statements from the criminal justice system, police, family members, service providers, interviews, journals and reports. Hence, the triangulation consisted of different methods of data collection and different sources of data. Data were collected via group and individual sessions with the primary sample. Service providers working in the area of sexual offences were an additional source of information. I employed data triangulation, method triangulation, and document analysis as part of triangulation (Bloor and Wood, 2006; Flick, 2007).

Research design is a "comprehensive plan for data collection on an empirical research project, as it is a "blueprint" for empirical research aimed at answering specific research questions" on three processes related to the data collection

process, the instrument development process, and the sampling process (Bhattacherjee, 2012, p.35).

Data collection

Based on qualitative approaches, case research and action research processes were followed and various techniques were used to collect data such as interviews, reference to documents both external and internal (Bhattacherjee, 2012).

I used a non-probability sampling method, which involved the purposive selection of relevant cases that would be informative and of particular interest to the objective of the study (Miles and Huberman, 1994; Arber, 2001; Bloor and Wood, 2006; Bhattacherjee, 2012). Qualitative research designs typically require a smaller but representative sampling group to develop inferences for the study, hence 12 sex offenders were chosen for the study, as well as eight parents, and 60 service providers (Babbie & Rubin 2013).

I generated an analysis from vast numbers of transcripts to generate explanations, understanding and meaning of the findings related to the life experiences of the child sex offender. I collated the raw data and intensively extracted events, incidents, actions, perceptions, and interactions that were relevant to the study (Strauss and Corbin 1998; Bhattacherjee, 2012). My analysis was supported by a software program called Nvivo 10, which automated the coding processes. Although I used Nvivo 10 to code the data, it was still a laborious process reading through the transcripts, breaking down the data into plausible themes and collating and analysing the information, as the software itself cannot sort and separate the relevant themes. Beyond sorting out the information, the information was organised to determine connections to develop a thematic analysis, which is "inductive of themes that emerged from the data and are not imposed upon by the researcher." (Carey 2009, p.164). The relevance of the themes to practice was also determined.

I am mindful that although the participants discussed circumstances that they believe contributed to their sexual offending, these conditions in themselves do not determine their actions, but rather they lead to certain problems, dependent on the participants' unique responses to them admits a broader macro-context.

There were three phases to the research design in this study.

Table One: Design of phases

PHASES	NATURE	SAMPLE & METHODOLOGY	DATA COLLECTION STRATEGIES	DATA ANALYSIS
Phase One	Case Studies	12 sex offenders selected via theoretical sampling	In-depth interviews & group discussions, journals, case records & statements. In-depth interviews	Thematic analysis Nvivo 10 Thematic analysis
Phase Two	Production of a DVD	4 sex offenders Opportunistic sample	Guided interviews	Thematic analysis
Phase Three	Service providers, parents as a secondary sample	8 parents 60 service providers Convenient & opportunistic sample	Questionnaires & group discussions	Praxis and critical analysis. Links micro experiences to wider experiences of institutional practices

Phase One

Introduction

The first phase of the research focused on the compilation of biographies of a sample of 12 adult sex offenders who had sexually abused children. The victims were all minor children, below the age of 18 years, who were unable to consent with sexual activity with adults. The unit of analysis was the offender. A purposive sampling process was used, and a small number of the participants were selected in

addressing the particular focus areas and questions of the current research study. The nature of the research questions rendered in-depth analysis, exploration and understanding of the individual life experiences of the participants suitable for the study. The offenders were members of a therapeutic, rehabilitation programme that I had facilitated. Data collection occurred over six months to two years. The period of therapy varied for each participant. Some of the characteristics of the participants were: eleven were employed; five of the participants were the eldest children in the family and five were the middle-children; three of the participants were in the 20 to 29 year, five were in the 40 to 49 year, and three were in the 50 to 69 years age group. With respect to their marital status, two were single; five were married; one was widowed and four participants were divorced, primarily as a result of the sexual abuse of children. Hence regardless of their offending behaviour the participants engaged in relationships with adult women.

Collateral data were obtained from a second participant related to the offender. The second participant was a family member, victim and/or the spouse of the offender. Various documents were referred to such as the victim's statement, school reports, police dockets, and reports from other service providers.

Sampling Plan One

The study utilized a collective case study method, which allowed for the exploration of the participants' life histories. This allowed for all 12 cases to be analysed, interpreted and theorised for their unique contribution, significant patterns and themes (Mills, Durepos & Wiebe, 2010). Hence the collective case study enabled me to explore similarities and differences within and between cases, in relation to the participants' life experiences and sexual offences. Case study research offers a rich, description of the sequence of events and themes, as well as an understanding of the perception of events by participants (Hitchcock and Hughes, 1989).

Data collection methods

As a specialist therapist in rehabilitating sex offenders who sexually abuse children, I engaged the participants in therapeutic discussions over a period of six months to two years. The therapeutic relationship allowed me to obtain detailed, intimate

disclosures from offenders, which a non-therapist might have had challenges to obtain. As a therapist I was able to manage the disclosures of sensitive information, and balance the research and therapeutic processes. The interviews were scheduled fortnightly, at a set time and place in a conducive, therapeutic setting. The treatment format was semi-structured to include fortnightly group therapy and periodic individual, conjoint or family therapy as required. Treatment was generally over a period of two years, but remained open ended, until all treatment goals were completed. Initial individual sessions were scheduled for a term of approximately seven to 10 sessions, which served as an assessment process. The sessions thereafter culminated in group work. Each group session lasted 90 minutes. Each individual session was 60 minutes. In-depth discussions in face-to-face group discussions revolved around sessional themes. Individual interviews were the most reliable to clarify and review sensitive information, and explore the key themes of the offenders' lives that the participants may have not wanted to disclose in the group process, like their sexual practices. The individual interviews and group sessions were used to understand the personal experiences as well as the emotive aspects of the offenders' lives, the sensitive areas of personal prior victimisation experiences, trauma, sexual behaviour, as well as in-depth privileged information on the mind strategies, and information on specific offences.

The lengthy duration of the interviewing process ensured the development of the relationship and yielded consistency of disclosures, and enhanced the credibility of the information. The participants provided detailed accounts of their own victimization and that of their current offences in the individual and group sessions, and theoretically it is understood that, when adults are asked to recall significant details of their own childhood they are generally accurate, especially when these experiences are unique, sensitive and unexpected (Sheldon and Howitt, 2007). The researcher was able to help move the offenders from a process of denial to acceptance of responsibility and disclosure. The group was open-ended, which enabled new members to be supported by older members. Experiences were shared and the group also took responsibility for supporting members, and gently confronting them when there was inconsistency in detail, or denial. Participants, over the course of the therapeutic process, became aware of danger signs for relapses and denial. The participants were informed that the research was not part of the

treatment or any decision-making process that will prejudice or benefit them. The question of the credibility of their reports must be considered in terms of the recruitment process and the motivation of the participants. The participants on their own accord, found value in the sessions and wanted the process to be captured in some way to help others.

Each participant documented their own learning at the end of each session, and was given homework tasks to ensure the transference and practice of new lessons in managing their sexual behaviour. The offender's experiences were so unique, and heterogeneous, that their stories were captured in their entirety. Many say offenders lie, and if we believe that offenders are lying, then let's listen to what their "lies" can tell us about their lives (Copes, 2000). When there was inconsistency in detail I was able to confront the participant in constructive ways. Participants were prompted by the openness of other participants who provided disclosures of their offences and all information obtained from the offenders was checked with other sources like family members, victims and other service providers. My experience as a researcher and clinician helped considerably in conducting the interviews, but my role as therapist took precedence in the rehabilitation and healing process of all participants.

With the permission of the participants, who were informed about the research and its objectives, the interviews and all interactions were recorded with either a video recorder or a tape recorder, and complemented with written notes by both myself and the participants. Materials for the research was hence derived from the therapeutic sessions, with full approval and concession from the participants. The researcher informed the existing, predominantly long-standing clients of the research process, and separate interviews were held to complement the data required for the research.

The resulting recorded data were transcribed at a later date. The participants were informed of this process and were initially conscious of the use of the recorders but because this process occurred over a long period of time, they became more relaxed. The recording really assisted me, as I was able to focus on the therapeutic process unperturbed by the research process. Other sources of data were journals of offenders, case or file records, and victim statements.

The various means of obtaining the data ensured reliability as well as validity, or credibility, confirmability and trustworthiness of the data.

Methods of Data Analysis

Data analysis is the process of ordering, structuring and eliciting meaning to the information collected (Denzin & Lincoln, 2000). An inductive process was used to explain and describe the data (Denzin & Lincoln, 2000). Thematic analysis focused on analysing common themes for the current research (Terre Blanche, Durrheim and Kelly, 2006; Leininger, 1985; Attride-Stirling, 2001; Braun, & Clarke, 2006) I also repetitively engaged with the data analysed with critical reflexivity to ensure that my own values and prejudices did not influence the research process.

For the first phase of the data collection process, I compiled all the biographies. The various biographies were analysed, major themes were noted and written up in Chapter four as part of the analyses and discussion.

Content of Interviews

Specific topics that were covered in the interviews and discussions:

- Biographical data and family details
- Description of offence/s
- Life stories and experiences
- Traumatic incidents, abuse and other events
- Predisposing factors
- Life skills and coping abilities

During the process I had to ensure that I was always sensitive and responsive to the participants' needs and utilised my clinical skills and principles to maintain a person-centred, cognitive-behavioural approach to therapy. The programme was based on the premise that treatment would reduce the risk for re-offending and protect potential victims. The content included:

1. Understanding and reflecting on their unique offence cycle and the sequence of thoughts, emotions and behaviours that put them at risk of offending;

2. Recognize precursors to a re-offence and develop pro-social skills and strategies to manage those circumstances;

3. Interrupt the chain of events that could lead to another offence;

4. Learned to manage and cope with healthy daily cognitions, and behaviours to prevent precursors to a re-offence; and

5. Therapy to ameliorate underlying psychosocial, psychosexual, lifestyle and other behavioural and cognitive challenges.

(Rehder, 2014; Marshall, Anderson, D. & Fernandez, 1999)

It was within this empowering climate that the participants voluntarily proposed to give back to the process and society by sharing the benefits that they had gained, and thus to protect other children. They indicated the need to reach out to other offenders to encourage them to engage in the process of therapy and change. They also were motivated to share with parents how best to protect their children as they felt that the current education programmes provided to create awareness was inadequate to ultimately prevent the sexual abuse of children. They recommended a production of a DVD to educate parents and service providers.

Phase Two

Introduction

The unit of analysis was the video. According to Alasuutari et al (2008) images are a rich source of data for understanding and representing our knowledge of that social world – image-based research includes expression and representation. Images are essential to human sense-making. Hence, in collaboration with the participants I produced a video on the abusive strategies of the sex offenders as we believed this would provide compelling evidence. It allowed the participants to experience the complexity, richness and depth in a way that could not be explained verbally. It brought alive a reality of the mind-sets and the strategies adopted by the offenders in sexually abusing children. The participants involved in the production of the video were Bungi, Deshan, Ronnie and Derek. Two of these participants sexually abused their stepdaughters and other two sexually abused their biological children.

The DVD presented a "visual dimension to conventional methods of data collection" and expression that verbal communication cannot provide (Alasuutari et al 2008, p.4). The accessibility of images suggested a new medium through which knowledge and the credibility of the information could be shared, and it provoked instantaneous emotive responses and vibrant discussions that would not be obtained if traditional techniques, such as an interview or lecture, were used (Mills, Durepos, & Wiebe, 2010). The DVD provided an informed practical, detailed, in-depth, examination of the strategies of the child sex offender, and highlighted the complexity and multi-dimensional nature of the phenomena under study. Hearing the reality of the strategies from the voices of each offender, was an experience best expressed through imagery to provoke a more deeply felt response, by the participants; its value is elucidated by Alasuutari et al (2008).

The production, screening and assessment of the potential impact of the video brought the research into the realm of action research. Action research is practical and transformative and perfectly aligned to the current research undertaken. Action research "…is concerned with developing practical knowing in the pursuit of worthwhile human purposes, grounded in a participatory worldview"… bringing together "action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people, and more generally the flourishing of individual persons and their communities" (Reason & McArdle, 2008, p.186).

Sampling Plan

Convenience sampling was used in Phase Two, as it was convenient to use the same participants from Phase One, due to their availability. The offender participants had, over a long period, indicated their interest in volunteering for a television show or compile a video that would assist in the prevention of child sexual abuse, and so they enthusiastically volunteered to participate in this production. Although several participants were filmed, only four video-clips were chosen for inclusion in the study, primarily those who were current clients, as the video had to be re-recorded and edited several times to ensure quality, and the I had to work within a minimum budget and time constraints.

Data Collection Methods used in Phase Two

A simple guided interview schedule was used to elicit holistic information from the participants, in the production of the video. The production of the video was by no means a trivial task, as it required much preparatory time to record and edit the video. The creation of the four videos easily consumed 20 hours of recording time and about 40 hours of editing time.

Data Analysis for Phase Two

The participants were informed of information that was required for the recording of the video, by being provided with a schedule of guiding questions. Some of them preferred to write up a transcript before being recorded, others preferred being interviewed by me, on the questions on the schedule.

Content of the video

The content of the video depicted particular information based on the *modus operandi* strategies, and his mind-set in sexually abusing the child. The production was specifically developed and executed for assessment to protect children at risk of sexual abuse.

Content of the video (Transcription is in Appendix A)

- understanding the offenders methods in selecting,
- grooming children,
- ensuring compliance of child victims in the sexual act
- process of desensitization and maintaining children as victims
- Avoiding detection.

Phase Three

There were two groups of participants in this phase: service providers in the field of child protection, and parents whose children had been sexually abused. This phase consisted of the screening and analyses of the usefulness of the video for prevention. The sample chosen for this phase was one of convenience and

opportunity, as the participants had experiences and direct and indirect exposure to child sexual abuse (Babbie, 1995). Members of the criminal justice system, service providers within the child protection field and caregivers of abused children were included. Participants from several provincial forums who were involved in the management of children's issues including sexual offences were also involved. Permission was sought from these forums for the members to view the video and to respond to a questionnaire (See Appendix B). The MEC for Education invited the researcher to do a presentation on the social ills affecting children in the province. The researcher used this opportunity to request permission for the video to be screened and to obtain participants' responses to it via the questionnaire, as many different provincial sectors responsible for policy development and the management of children's services were present. The researcher also contacted the Department of Justice and Constitutional Development to screen the video and administer the questionnaire with magistrates and prosecutors involved in the sexual offences courts or who prosecuted matters of child sexual abuse. Parents and caregivers of victims of sexual abuse were also invited to participate in the research to determine if the video held potential for prevention of abuse. They were further engaged in a discussion as to whether the video might have aided in the prevention of abuse had they watched it prior to the sexual abuse of their children.

The data collection instrument included a questionnaire with open and closed -ended questions. Through this phase of data collection, emerging themes were identified and were analysed. I analysed the responses to the video on several levels of interpretation, including the emotive reactions, acquisition of knowledge, and recommendations made by the participants. Thus, the visual research method within a case study research contributed to achieving the objectives of the project by adding to the flow of knowledge that was being produced and to make recommendations for future action in an action research process (Mills, Durepos, & Wiebe, 2010). This may ultimately lead to policy development and strategic implementation changes in child protection.

The screening of the video and the praxis of reflective thinking aligns with the objectives of critical research where the aim is to use research for transformational purposes as highlighted by Sewpaul, Osthus, and Mhone (2013) who detailed the

application of critical theory in research with children at risk. Sewpaul, Osthus, and Mhone (2013) indicated that critical theory provides opportunities to reflect and discern beyond the obvious to express some deeper perception.

Critical theory has the potential to transform and address the connections between individuals and structural dynamics and how that intersection influences individual and society (Babbie and Mouton, 2001). Freire (1970, 1972), who is one of the foremost proponents of critical theory, offers a praxis that enables critical awareness and reflection in order to make changes. The use of the video, constituted a Freirian form of praxis that enabled participants' responses to critically reflect, and be critical heightened to consider themselves as active agents in transforming child protection.

Expert and opportunistic sampling was used, as respondents were chosen in a non-random manner based on their expertise on child protection (Bhattacherjee, 2012). The service provider participants were purposively chosen based on their involvement in sexual offences in the various government and non-governmental sectors; and with students in the school and academic arena.

The following is a list of participants who were involved in the third phase of the research study. The 60 participants were a diverse sector of professionals from the government and non-governmental sector who were involved in child protection. The following table indicated their organisations, the reason for their inclusion in the study, their professional involvement and responsibilities in their respective organisational structures. The questionnaires had open and closed ended questions.

Table Two: Participants for Phase Three

SECTOR	REASON FOR INCLUSION	ROLE & RESPONSIBILITIES	NO
Department Of Education	Involved in policy-making, planning life orientation; counselling of students; education regarding protection of children.	Chief Directors; Advisors and Managers in the Office of the MEC for Education; Supervisors at the Dept. of Education	8
Department Of Health	Involved in assessments & counselling of children &	Head of Youth Health Services; Manager of Community Care	4

	manage specialised Centres for sexual offences against children. Involved in policy development, implementation of programmes on child protection	Centres and Thuthuzela Centres for Victim Empowerment	
Department Of Social Development	Responsible for policy and development & development of programmes on the protection of children; assessment of offenders	Provincial Coordinator of Victim Empowerment; Court Probation Manager; Child Care & Protection Coordinator	3
South African Police	Involved in developing forensic assessments of children who have been sexually abused; investigating of coordination & training on sexual offences against children	Forensic Social Work Commander; Head of Family Violence, Child Protection and Sexual Offences	2
Department Of Correctional Services	To capacitate on developing appropriate policy and interventions for offenders in prisons and community based programmes.	Policy Coordinator, Monitoring & Evaluation on Admission, Detention Of Offenders	1
Legal Aid SA	To capacitate attorneys on the protecting the legal rights of children and better representation of child complainants	Training Supervisor Candidate Attorney	1
National Prosecuting Authority	Empowered at representing cases of child victims and ensure training of other personal on strategies of offenders	Coordinator: Specialised Prosecutions; Heading the Sexual Offences Child Abuse Unit in KwaZulu-Natal	3
Department Of Justice	Capacitated to improve policy, prepare witnesses, understand the mind-sets and grooming strategies of offenders to	Court preparation officers, Family Court Section Head; Magistrates At Sexual Offences Court who adjudicate on Sexual Offences In	6

	improve conviction & support to child complainant & families	criminal Court & Children's Court	
Non-Government Organisation	Implementation of child programmes would be improved by being capacitated on offender strategies	Management, Development, Child Protection Programmes; Monitoring; Dev. Programmes For Children	8
Universities	To develop capacity & theoretical frameworks for implementation	Students and Academic leaders	19
Congress Of South African Students	Inform children on protection and rights	Chairperson of all learner bodies within the school system	1
National Association For School Governing Bodies – KZN	Policy Implementation and governance of school bodies	Chairperson of School Governance Bodies in South Africa	1
Minister for Women, Children, Disability	Improve programming and policy development on child protection	Staff involved in programmes pertaining to children's rights	3
Total			60

Paradigm

This phase of the research was in the form of praxis or reflective practice. The screening of the video and engagement of the participants constituted a form of praxis, which is a merger of theory with practice (Carey, 2009). Action research is a creative process that enables communication and practice on critical social concerns (Carey, 2009).

According to Reason and Bradbury et al. (2008, p.4), action research is defined as: "a participatory process concerned with developing knowing in the pursuit of worthwhile human purposes. It seeks to bring together action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern of people, and more generally the flourishing of individual

persons and their communities." This definition aptly resonates the objective of the third phase of the research study. It is a union of *action* and *reflection,* which can bring about a critical consciousness to build a just society. It was a liberating and emancipatory process for the service providers and parents, as they were incited to reflect and contribute to transformative actions for child protection. (Reason and Bradbury et al, 2008; Carey, 2009).

This phase constituted praxis-oriented research that challenged the social injustices of child abuse, and created a dissonance in the mind-sets of the participants, to understand how they might be able to evolve new approaches to child protection. I was not merely interested in including the relevant groups to be passive partners in a piece of research. I wanted to engage them in thinking of alternative strategies for the protection of children and the prevention of child abuse. Reflection on action can give rise to new challenges and considerations about quality and effectiveness and how we can improve practice to create better futures (Reason and Bradbury et al 2008, p.24).

Data Collection Methods used in Phase Three

Semi-structured questionnaires were administered to participants who viewed the DVD. Participants viewed the video and were asked to respond to the questions (See Appendix B and C). Designing the questions was a challenge, as it needed to meet the goals and objectives of the research study; and the questionnaire had to be piloted a few times prior to the formal administration. The language had to be simple and unambiguous and I had to be clear on questions for analysis purposes. Some of the questions were open-ended while the other questions were closed-ended. The participants were given approximately 25 minutes to complete the questionnaires. The participants in this phase had an opportunity to reflect critically on their praxis as individual and collective participants in their service to child victims of abuse. By opening up the communicative space for reflection on their respective practice roles in child protection against the knowledge obtained from the video, they could reflect on new action.

Data Analysis for Phase Three

Qualitative research does not preclude some quantitative analysis of data, generated by the use of tables and graphs in tabulating data. Some of the qualitative data were analysed statistically and then interpreted qualitatively. The practitioners background, skills and knowledge and experience in child protection contributed to the narrative interpretation of therapeutic results.

Focal areas addressed in the questionnaire are:

- Participants' emotional reactions to the content of the video.
- What information did they obtain about the strategies of the offender
- What lessons might be learnt from the video
- How would they use the information obtained from the video in the protection of children and in the prevention of child sexual abuse

Ethical considerations

I addressed all risks to the participants by addressing the relevant ethical issues in the research pertaining to project worthiness; researcher competence; informed consent; benefits and costs of the research; harm and risk; relationship with respondents; right to privacy, confidentiality and anonymity in the reporting of the data; research quality; data ownership; and the use of results. All of these also have clear implications for analysis and the quality of conclusions.

The first two basic principles, "respect for persons" and "beneficence," address the overlapping applications of autonomy, informed consent, anonymity, and confidentiality (McCleary, 2007). I addressed a critical right of my participants, which relates to being respected. The anonymity and confidentiality of the participants in the research needed to be ensured, so that data used in the research cannot be traced back to participants (McCleary, 2007). It is crucial to protect the anonymity of those connected to the material being used to prevent feelings of violation. Before the study began, all prospective participants were involved and informed about the purpose of the study and were given assurance about confidentiality and that their participation was voluntary and that they could withdraw at any time. One client was

unwilling to participate as he believed that his case would be compromised, as it was presented in court at the time of the research. This decision was respected and he continued with therapy. They were reassured that their willingness or refusal to participate would in no way affect the services they received from me. As I am a therapist and not only a researcher I was able to adequately work through these issues with the participants, as the level of vulnerability of the participants were discussed, and we weighed the benefits versus the risks of the research. A research participant's autonomy is diminished if they are not adequately informed and empowered to consent. I allowed them to choose voluntarily to participate in the research, by carefully detailing all aspects of the research to them. They provided informed written consent to participate in the research and to further participate in the production of the video. The participants themselves felt that they benefited from the treatment programme and wanted to give back in some way to the community and ensure the protection of children. All participants faced risks in participating in the research related to being stigmatized (McCleary, 2007). Besides obtaining informed consent, I had disguised quoted materials, names were changed and the information was stored in a lock up cupboard. These principles of respect, confidentiality, and anonymity amongst others are indicated in the code of conduct and ethics of the South African Council for Social Service Professions (Policy Guidelines for Course of Conduct, Code of Ethic and the Rules for Social Workers). The Social Service Professions Act of 1978, Section 27 (1) of this Act provides the mandate to enact the Code of Ethics. The University of KwaZulu-Natal Research Ethics Committee granted ethical clearance to conduct the study.

Participants were informed that the interviews would be tape-recorded and I explained that my reason for doing so was that this was a more effective way to gather information than just taking notes. I experienced no resistance to tape-recording the interviews. I also explained that I would compile all the transcripts myself. Despite its advantages, the video-recording and audio-recording of the data presented with additional ethical issues. The main problem is the loss of anonymity as the participants were graphically featured on the video; and in both the video and the audio-recording the exact words and voices are recorded and consequently there is always a danger that the respondents' identities might be disclosed. The participants themselves volunteered to participate in the video production. The

participants were however, not accustomed to being videoed. Some were nervous and they did not appear spontaneous. The participants were an integral part of the process of the visual production; hence they reviewed their recorded sessions. The participants discussed at length the impact of the production and the messages that it would impart to the audience and the type of audience that it would benefit. They discussed the extent to which this may compromise their anonymity. Some participants were willing to participate in the written research but not in the production of the video. They were informed that they could withdraw their produced images if they felt uncomfortable or if they believed their anonymity would be compromised. I needed to constantly reflect upon the ethics of representation and what that representation looks like for their case study (Noffke & Somekh, 2009). Although the participants gave me their informed consent, it was an uncomfortable responsibility to display the images and I did not entrust the possession of the video to any other person; neither did I allow for its duplication and distribution. The participant's display of commitment to the protection of children should be applauded. I needed to develop a solution of working through my concern about the problem of anonymity by balancing the constructive use and benefit of the video. The participants were convinced that this medium would best express their strategies and hence contribute meaningfully to the protection of children. Ethical issues are often intertwined with copyright and other legal issues; the latter is generated by the former. The principle is that by producing the videotape, the creator brings something into being that did not previously exist and therefore has rights to it. The offenders by virtue of their participation are not owners of the video (Noffke & Somekh, 2009). It is necessary for social work researchers to be well grounded in policy to do research in this area (McCleary, 2007). My knowledge of the field and the research knowledge that I developed as I engaged more with the field helped me to be aware of the legal and ethical aspects of the research.

In addition to the other stated benefits, the compilation of the DVD emphasized to the participants that their requests and views to make a difference, were taken seriously and that their recommendations were respected.

All my participants were male, both Indian and Caucasian. This may have presented some level of difficulty, and hence I introduced a male therapist to the group process.

The participants indicated that they felt comfortable with the male, but the lengthy period of interaction with me, strengthened the relationship and the ease in which the participants responded to me. The duration of the process of interaction of six months to two years did much to enhance the quality of the data and the credibility and the integrity of the process.

Ideally a researcher should not be the practitioner and perform the research interviews because of bias or contamination of information. But because of the sensitivity of the cases, I served as both researcher and practitioner, where I was ideally positioned to obtain data due to the therapeutic alliance, and it served to ensure a rich context for the accumulation of data. A researcher needs to observe sensitivity when probing the life experiences of the offender, and this is best achieved when the researcher is a practitioner who understands the dynamics that underpin the context of the offender. It must be understood that denial is functional for offenders. The researcher hence needs to be an expert in unravelling denial and managing sensitive information as it unfolds. I used empathic entry to understand those interacting personal and structural factors that contributed to sexual offending behaviour. There has to be a fundamental respect for the dignity of the participant as a human being, without bias. The combination of the researcher-practitioner role, given the sensitive nature of the topic, has the advantage of developing a relationship of trust and rapport to gain such in-depth insights. I need to admit that the role as therapist superseded that of researcher, and I attempted to maintain a critical reflexivity in my analysis.

Social work research can offer new visions for improvement to become better social workers by understanding the targeted social objectives, needs of service users. This research addresses the gaps in the child protection systems and programmes. We are obviously not being effective or efficient in our service delivery if we continue to see an escalation of the sexual assault of our children in this country. As Lynch (2008) pointed out, "Those who have experiential knowledge of inequality and injustice can ally this understanding with academic knowledge to create a new and deeper knowledge of their world. This deeper understanding can (help us) challenge established wisdoms and ideologies around inequality and injustice" (p.95). I have during the research process developed deeper levels of analytic reflexivity so as to

be mindful of possible stereotypes, or prejudices and possible personal influences. The philosophical aspect of the dissertation has certainly allowed me to see the world differently with opportunities for creative possibilities for children. The topic and the objectives have always been prioritized. The researcher being a therapist was guided certain fundamentals: child sexual assault unacceptable, destructive and criminal; the protection of children should always be a priority and prevention is primary; offenders should be managed in partnership with the criminal justice system.

Although I commenced my research study by addressing the problem of sexual abuse of children, I have also contributed to what can be solutions to this social problem. All social research is contaminated by the perspectives and lens of the researcher (Silverman, 2001, p.260). As a children's-rights advocate, I offer no apology for my stance in this research that it is not done solely for the purposes of knowledge and wisdom, but to have practical payoffs in contributing to child protection. As a clinician and researcher I have chosen an emancipatory paradigm as I would like to engender social change, and social transformation for children. Dominelli (2002) argued that social workers should seek to equality and social justice, for the vulnerable and powerless like children- they have no voice, we need to be their voice

This research was grounded in my long-term exposure to the field of child protection and my personal values, as I have lived what Swantz expressed as: "I do not separate my scientific inquiry from my life" (cited in Reason and Bradbury et al, 2008, p.12). The inquiries made, have demonstrated vigour and rigour by the conscious and critical engagement of the various participants, praxis by the researcher and service providers, and in the balance of philosophical and theoretical perspectives. Carey (2009) also argued that rigour should be based on a researcher's capacity to understand and communicate the participants' emotions, perceptions and experiences, which was achieved by the existing relationships with the various participants, whether as a therapist, service provider, child advocate or other.

Potential limitations of the research study

Every aspect of a chosen research methodology has limitations that can influence the utility of the final research report. Amongst these, the main limitation of this study was the sampling. The primary participants interviewed, the caregiver/parents and the service providers were non-randomly selected. The study included participants who volunteered to be included in the study and in the production of the DVD. This means that the data cannot be generalized. However, the strength of qualitative research, is analysing data in context and ensuring some attempt at obtaining representation of the population under study. The DVD of the testimonies of the offenders were tested on a multiracial population in South Africa, Tanzania and Mozambique and they could identify with the social phenomenon manifesting in their communities.

Another limitation was that the sample was an English speaking population hence, excluding non-English speaking persons. The nature of the study required intensive and extensive engagement with the primary group of participants, thus only English speaking participants were included for convenience of communication.

In this study the findings are independent of various socio-demographic factors, which might pose particular challenges to transferring knowledge in other contexts. On a general level intra-familial abuse should not be ignored not only because of the negative impacts on the development of children but because it also reduces the likelihood of children being further vulnerable to other risks like HIV and AIDS.

The potential influence of the researcher was dealt with through the use of reflexivity, the thick description of data, and giving voice to participants.

Multiple data collection strategies meant a voluminous collection of data and managing this was labour intensive and time-consuming. As a researcher I had to be judicious in selecting what to include and what to exclude without prejudicing the results of the study. In this respect, I allowed myself to be guided by the study topic and the key research questions and objectives.

Conclusion

Knowledge gained through research needs to makes it contributions to society and integrated into practices; it should be a common journey. Having used participatory action research, I have found it yielded a philosophy that can do much to change the future of our world for children, by adding not only wisdom but theories of practice. The research process created the opportunity to develop reflexive dialogue between the participants and myself, and to look for opportunities for the protection of children. Indeed, the most reasonable way to overcoming and developing strategies for social change and against the abuse of children is to form alliances with other like-minded persons concerned with social change, and to this end this research has demonstrated, it's potential.

In this chapter, I described the research paradigm and design, the three different phases of my research, the sampling strategies used and my rationale for employing the research paradigm and design. I provided an overview of all the phases: the procedures; paradigms; sampling; data collection processes; recording and analyses of each phase; and content of the processes and the ethical concerns. Particular attention is paid to the challenges and benefits of adopting the researcher-practitioner role, and to the ethical considerations of the research.

The subsequent chapters deal with the presentation and analysis of the data, from the differing phases in several chapters. The next chapter provides short narratives of the 12 sex offenders as part of the first phase of the research study. The subsequent chapters will address the 2nd and 3rd phases.

Chapter Four: Presentation of case studies and analyses of demographics

Introduction

This study was designed to understand the strategies of sex offenders in sexually abusing children, with the purpose of providing strength to child protection interventions. This is one of four chapters that present the analysis of the results in relation to the stated research questions.

This chapter presents the case studies of 12 offenders who have sexually abused children. The procedure for the first phase of the research focused on the compilation of biographies or case studies of a sample of twelve adult sex offenders who had sexually abused children. The offenders were participants of the researcher's assessment and therapeutic, rehabilitation programme. The information was obtained from transcripts of interviews that were audio recorded or video recorded, with the primary and secondary participants. Other sources of information were established to collaborate the offenders self-report, as I had access to interviews with victims, significant others of the offender (partner, wife, mother, sister), witness reports, as well as documentation connected to the case of the offender, in order to obtain an accurate and holistic view of the data. This was also done to ensure that offenders do not feign victimization themselves in order to obtain sympathy, leniency in sentencing or any preferential treatment.

A qualitative research paradigm was used to obtain details of the twelve cases in key categories pertaining to significant life events such as personal history, records of school performance, chronic behaviours, sexual behaviours and critical points of every case. This chapter covers data obtained in Phase one of the research. Pseudonyms are used in all of the profiles. The following chapters of the analysis and discussion, draws on the analyses of the life experiences of each offender from their own perspective, grounded in a critical theoretical framework.

The understanding of the child sex offender is unique in its field. Understanding of sexual functioning, especially sexually aberrant behaviour represents one of the

most intimate areas of human experience and delving into this topic is challenging under any circumstances. This challenge is increased by the attitude of abhorrence and contempt by society for the offender who sexually abuses children. Hence a therapeutic alliance is vital in this exploration as well as ensuring that interviewing is augmented with other measurements and tools. The men who took part in this study knew they would not be given any special privilege if they consented to participate, such as leniency in sentencing.

Assessment and treatment interventions took place at different points of referral: the assessment phase during the trial processes; planning for sentencing; planning for release for the convicted offender, treatment once released on parole; voluntary treatment and assessment (self-referred or referred by family). Hence, in some of the cases, I was required to submit an assessment report to the prosecutor presiding over the case or provide expert testimony in the case. The process and period of the rehabilitation programme was structured: a minimum of six sessions for an assessment and a minimum of two years for treatment. The lengthy duration of the therapeutic intervention enabled the offenders to disclose much personal information.

The duration of this process of compiling data on the participants was approximately six months to two years. The therapist inter alia researcher had attempted to keep abreast of the various literature trends, used multimodal approaches and various caveats to ensure reliability of information. A cognitive behavioural approach aimed toward relapse prevention was used in the treatment process. Relapse prevention (RP) emphasises and enabled the self-control of the offender to prevent further abusive behaviour (Rehder, 2014).

Case one: Bungie

Bungie's family was characterized by family violence. His parents engaged in alcohol abuse, shared a conflictual relationship and relocated regularly, almost annually. They subsequently divorced when he was eight years old. He performed poorly in school, engaged in chronic behaviours of nail biting, and experienced social anxiety. His first sexual exposure to pornography was at the age of six years, when he watched a video of his parents having sex. He compulsively used pornography from

the age of 10 years, and masturbated to sexual fantasies. He engaged in penetrative sex play at the age of six years with friends, at the age of 10 years he had sex with his seven year old cousin for a duration of two years and at 12 years he had sex with his nine year step sister for a period of two years. He sexually abused his two stepdaughters, aged six and thirteen years, as well as his six year-old biological daughter, over a period of three years. He had groomed his child victims with pornography and sexually themed games. He indicated that he experienced some sexual dysfunctional and felt rejected by his adult female partners. Some critical points of concern were that he chose single parent partners with children, whom he had all sexually abused. He indicated that he felt addicted to sex. In two of the criminal cases of child sexual abuse, the charges against him were withdrawn, and in the third he was sentenced to a period of two years to a community based therapeutic programme. **Sources of information**: Bungie; two stepdaughters; Bungie's girlfriend.

Case two: Tom

Tom's family was characterized by violent onslaughts from his alcoholic, sexually permissive and emotionally abusive father. Tom was a weak scholar, and displayed chronic behaviours of drug and alcohol use, depression and suicide. He urinated in his pants when his parents fought, had feelings of self-loathing, felt rejected by his parents, experienced insecurity in social situations and in relationships, had low self-esteem, felt a sense of powerlessness, unhappiness and displayed anger outbursts. His parents divorced and later remarried other partners. He was sexually abused by several abusers: from the age of five years by his father; from six to eight years by his uncle; at 15 years he was sexually abused by his friend's 25-year old brother. His uncle also sexually abused his younger sister and two brothers. The siblings engaged in sex play with each other, as well as with two cousins and four neighbours. Whilst in self-induced detention after school, he was exposed to the self-masturbation activities of an educator for a period of 2½ years. At the age of 17 years Tom and his brother ran away from home. His brother became a drug addict and later a dealer, and was stabbed by the police. Tom married at the age of 21 years. He believed he was a sex addict as he had sex five times per day, frequent

sexual fantasies, sexual relations with approximately 50 sexual partners, collected pornography and video-recorded his sexual acts with children. From the age of 24 years, he chose approximately six relationships with single parents who had young children, whom he sexually abused. When he was sexually spurned by his partners, (four of his partners had other sexual relationships) which gave him a sense of inadequacy and hounded by flashbacks of sexual abuse by his father, he felt driven to sexually abuse these children. He had aberrant sexual fantasies and objectified women. Tom compulsively used pornography as a form of escape from his loneliness, and later created videos of his sexual abuse of children, which he used to groom his victims, and fuel his fantasies. All of his victims did not disclose the sexual abuse, and two of the victims were sexually abused over a period of five years. Concerns existed as he was not convicted nor mandated to attend therapy. He left the therapeutic programme prematurely and continued to choose relationships with single women with children. **Sources of information**: offender; girlfriend; school psychological services; victim

Case three: Mathew

Mathew's family was characterized by severe marital discord and family violence, perpetrated by the father, who abused substances. Mathew's father furthermore physically and sexually abused his children, when they were at the age of five to six years, for a duration of six years. His mother was an adult survivor of childhood sexual abuse. Mathew displayed chronic patterns of stealing from his parents, truanting, aggression, alcohol and drug abuse, withdrawn behaviour and compulsive use of pornography. He attended a remedial school at the age of 15 years and was not able to secure stable employment. From the age of 15 years he started sexually abusing other children in the neighbourhood, he also engaged in babysitting, which created an opportunity to access and sexually abuse children. He was not reported to the police during these encounters until, at the age of 25 years, he sexually abused his four-year-old nephew. He displayed characteristics of low self-esteem, poor social skills with women, (was rejected by two of his girlfriends) poor work skills and emotional immaturity. Concerns were that he enjoyed having sex with children and found it easy to manipulate children. **Sources of information**: Mathew, mother, sister and victim

Case four: Ronnie

Ronnie's parents divorced when he was just a year old, due to severe marital discord. The parents later remarried but experienced hostile and conflictual relationships in their new marriages. Ronnie stayed with either parent at alternate school holidays, but attended a convent boarding school with his sister. Ronnie displayed chronic behaviours: he urinated in his pants when parents fought; was a weak scholar as he indicated that he could not concentrate and cheated in tests; felt inferior to his peers, and chose negative friends; lied; stole; engaged in alcohol and drug abuse and was uncomfortable in social relationships. At eight years he engaged in penetrative sex play with friends. In his adolescence he engaged in compulsive masturbation, developed a fetish for women's underwear (stole them), and at 17 years, he sexually abused his nine-year-old sister (father dismissed the behaviour as sexual experimentation). He indicated that he was addicted to: pornography, including child pornography; and sex, and had multiple, risky sexual encounters with prostitutes and other women. Ronnie married his pregnant wife, an adult survivor of sexual abuse, who was diagnosed and treated for major depression. He indicated that he developed deviant sexual fantasies of his three-year-old, stepdaughter, groomed her in sexually themed games, lavished her with attention and sexually abused her when she was six years old for a period of three years. His personal characteristics were: low self-esteem, emotional - cried easily, lack of social skills, inadequacy and self-doubt, social incompetency, poor work skills and ethics as he stole from his work situations. Concerns related to his compulsive use of pornography especially child pornography, although criminally prosecuted on this aspect. **Sources of information**: offender; wife; sister; father and psychologist

Case five: Derek

Derek's family of origin was characterized by conflict and violence, and his father dominated the family with rigid and harsh discipline. Derek was an average scholar. At the age of 12 years he was sexually abused by a 17-year-old neighbour over a period of four years. At 15 years, he sexually abused his 11-year-old sister, over a three-year period, to prove he was not gay. He sexually abused his nine-year-old son and 10-year-old daughter, believing that he was entitled to some source of

sexual gratification, as his wife denied him any sexual relations. His wife was an adult survivor of sexual abuse, and was diagnosed and treated for depression for a period of 15 years, subsequent to the miscarriage of their first baby. From an early age, the children displayed uncontrollable behaviour, were manipulative and aggressive. Derek took responsibility for the care and discipline of the children, shopping, vacations and outings with the children, as his ill wife preferred to remain at home and was hospitalized on several occasions for depression. The couple separated after Derek was convicted for the sexual abuse of his children. He was a compulsive user of pornography on incest, particularly of children between 10-13 years. He had sexual fantasies of his abuser and masturbated excessively. He felt sexually inadequate, had a low self-esteem, was socially isolated, lacked social skills, engaged in excessive eating, passive in relationships and used economic manipulation with wife and children. **Sources of information:** wife, Derek and children.

Case six: Larry

Larry's family of origin was characterized by incest and family violence. Larry's mother committed suicide when he was 13- years old and his sister committed suicide a couple of years thereafter. Larry did not do well in his academic performance. Larry was sexually abused from the age of four years by: a female, teenage neighbour; family members; family friends; his teenage brother and sister. He was easily bribed and manipulated by the abusers, felt ashamed and guilty. Larry was violent, controlling and manipulative with his immediate family. He coerced his first wife into sexually abusing their four children, from their infant years; and coerced his second wife to have sex with his two male children from his first marriage. He sexually abused the children from his first two marriages; his wives three brothers, neighbours children, as well as his children's friends (it is alleged that he sexually abused 35 victims – he did not verify this). He was not able to accurately recollect the number of children that he had sexually abused. He exposed his three wives and children to acts of physical violence and intimidation. He was verbally expressive but showed little empathy, was deceptive, denied the details of his offences, manipulative, charismatic and engaged in intensive grooming of children. His children alleged that he engaged in demonic activities and he indicated that he was

demon possessed. Concerns remained that he left therapy prematurely, was living with his third wife and two little stepchildren and appeared to be a risk to children. **Source of information:** Larry, his children, two grandchildren, two wives, a neighbour child victim.

Case seven: Jason

Jason's family of origin was characterized by family violence and substance abuse. He indicated that he was sexually fondled by a teenage boy at the age of 15 years, and compulsively masturbated. Jason qualified as an electrician, married at the age of 21 years and engaged in three polygamous marriages of which he had 13 children. His youngest wife was 32 years his junior (24 years: 56 years). Jason had a hearing defect and his behaviour was characterized by temper outbursts and strong patriarchal dominance. He sexually abused three related children over an eight year period. Jason used his economic resources to control his family and victims. He viewed men as the head of the household, the dominant initiators of sex, who should introduce force to persuade women to comply. He had poor self-esteem, feelings of inferiority, was suicidal in his early adulthood, and had a sense of entitlement. His sexual experiences with children and women gave him a feeling of superiority. He had no close friends since he was a child and was insecure in new situations. **Sources of information:** two wives, Jason and prosecutor

Case eight: Roy

Roy was lonely, unhappy and attempted to run away from the catholic boarding school at which he spent six years of his childhood. He spent Christmas vacations with his family. He did not recollect many memories of his childhood with his family. His scholastic performance was weak, and he completed his grade nine. He had chronic asthma, which prevented him from engaging in sport and developing friends. He had poor impulse control in relation to his anger and aggression, poor social skills, introverted personality, had no friends in school, had a patriarchal view of sexual relationships with women and felt rejected by family. At the age of 15 years he sexually abused his eight-year-old sister. He dominated and controlled his family economically as he financially provided for them. His sexual relationship with his wife terminated early in their marriage due to her long-term psychiatric treatment for

depression, cancer and various other illnesses, and untimely death in 2008. He sexually abused his eight year old grand-daughter and her friend and was referred for therapy. He denied responsibility for the sexual abuse, and blamed his granddaughter for initiating the sexual contact. **Sources of information**: abuser, daughter, daughter-in-law, son, and victim.

Case nine: Alton

Alton's life was characterized by family violence perpetrated by his father on his mother and the children. Alton and his older sister attended a boarding school, but his youngest sister remained at home. Alton attempted suicide at the age of eight years, due to fear of being punished by his father, and twice subsequently as an adult. His performance at school was satisfactory but he received no tertiary education. He did not regard his parents as sexual beings as they did not show affection, did not communicate, and he did not notice any sexual nuances between them. At the age of six years, he played sex games with his ten-year-old sister and her friend. He was sexually abused by his grandmother at the age of eight years. From the age of 13 years he masturbated frequently after first nocturnal emission and has fantasies of his youngest sister. He was caught masturbating a couple of times and felt awkward about his sexuality. His marital relationship was fraught with conflict and sexual dysfunction. He indicated that he was not always able to climax during intercourse. Intercourse had occurred once a week with his ex-wife and once or twice per month with his current partner, as she decided on the rules of their intimacy. He sexually abused his 12 year old stepdaughter (for a period of three years) which was triggered by sexual fantasies of his younger sister (according to him, this was his best sexual fantasy that dominated his sexual life) and alcohol. He indicated that his substance abuse also led to his reckless driving in which his best friend died. He engaged in excessive substance abuse; had suicidal tendencies; a poor body concept; compulsively used pornography; had fantasies of teenage girls; had inadequate relationships with women, as he was not sexually satisfied in their sexual relationships. He displayed characteristics of: low self-esteem; loneliness; isolation; felt unwanted, abandoned and rejected by his family; had pent up feelings of revenge against his wife who had engaged in several affairs, as a result of which

two of the four children were born out of wedlock. He had a poor relationship with his son, who was suicidal.

Case ten: Deshan

The home of Deshan's adoptive parents was characterized by family violence and conflict, as his adopted father consumed alcohol excessively and was emotionally, physically and verbally abusive towards him, his sister and mother. At the age of six years, Deshan and his sister were informed that they were unrelated and that both had been adopted. He was an average scholastic performer. He was sexually abused by his cousin at the age of 12 years, over a three year period. He and his sister ran away from home during their late teenage years. Deshan married his wife who was pregnant from another relationship. He exposed his wife to physical and emotional abuse. Deshan groomed and sexually abused his eight-year old stepdaughter over a three year period. His wife divorced him as a result of the abuse of her child. His personal life was characterized by: loneliness, social isolation, fear, self-loathing, attempted suicidal attempts, aggression and anger, frustration for concealing his female nature (he was a male transvestite), risky sexual relationships with prostitutes (approximately 30-40 prostitutes), reckless behaviour due to alcohol and drug abuse, compulsive use of pornography, sexual dysfunction – erectile dysfunction. **Sources of information**: Deshan, wife and victim

Case eleven: Khuzwayo

Khuzwayo's parents' relationship was characterized by marital conflict; his mother was on tranquilizers and his father engaged in substance abuse. At the age of five, his mother abandoned the family to live with her boyfriend. Khuzwayo shared a poor relationship with his father and sought out his mother at the age of 19 years, hoping to reconcile with her. He stayed in a boarding school from the age of seven to thirteen years, at which he was sexually exploited by both the school personnel and his peers. He was a poor performer, scholastically. He had a chronic problem of biting his nails, was extremely anxious, and he was treated for his alcoholic and drug dependency. He was distrustful, introverted, self-reliant, reclusive in nature, had a poor self-concept and found expression in his poetry, and appeared to have an inability in maintaining employment. He was introduced to pornography at his senior

primary and secondary schools and became a compulsive user of child pornography, as it helped him to escape the rejection and loneliness. He had sexual fantasies of boys between seven and eleven years. He had not engaged in any sexual relationship and felt inadequate to socialize with women. He avoided his peers and family, as he felt inadequate and unloved. Concerns: he did not complete therapy; the police had not charged him for possession of child pornography; his presenting personal characteristics made him a risky candidate for the sexual abuse of children. **Sources of information**: referring organisation; Khuzwayo

Case twelve: Tony

Tony's family of origin was characterized by chronic disruption, instability and family violence, perpetrated by his father, who consumed alcohol and drugs, and spent late nights out, returning home when intoxicated. When Tony was 11 years, his father was murdered. His mother subsequently engaged in a relationship with a married boyfriend, who was unemployed, suicidal, a substance abuser and a thief. Tony was weak in his scholastic achievement until his matric year, and truanted school. Tony displayed particular behaviour patterns: poor social skills; introverted behaviour; urinated in his pants out of fear for his father; alcohol and drug abuse, which provided an escape from problems and gave him confidence. He was emotionally immature; belonged to a gang who engaged in anti-social behaviour; aggressive – stabbed a person; inept in relationships with women, as he was afraid of rejection, and maintained short-term (three months) relationships, until he met his wife who was 10 years his senior. His six-year-old marriage was characterized by marital conflict. He groomed his four-year-old stepdaughter extensively prior to his marriage, and sexually abused her after his marriage for a period of 3.5 years. He was motivated by sex fantasies of his victim, and felt dominated by his wife in their sex activities. **Sources of information:** Tony, wife, and victim

Analysis of the case studies

The 12 participants had some common characteristics and a common link: they were all child sex offenders who used sexual aggression against the most vulnerable and powerless, to mend their brokenness and affirm their own power and control.

The use of violence in any form by men is a "patriarchal characteristic" that infiltrates not just the family but every level of society whether it is in the workplace settings, institutions, media, culture, legislation that accepts violence and so on (O'Toole and Schiffman, 1997, p.6).

The participants were not a homogenous group although they had all, sexually abused children, as they lacked commonality in their life experiences, choice and means of accessing their victims, offence committed and other dynamic aspects (Veysey and Zgoba, 2010). Understanding their mind set and strategies has potential for the prevention and protection of children, and is the focus of this dissertation.

An analysis of the demographics and life experiences of the offenders will be presented as well as the demographic details pertaining to the victim gender, age, duration, relationship, form of victimisation, which will be discussed in the following sections.

Demographics of the participants

The study confirmed findings reflected in other studies, that child sexual abuse is generally committed by adult men of all ages, across all levels of social class, religious denomination, educational background and marital status. Research indicates the prevalence of male offenders being between 90 to 95 per cent (Myers, Marrero and Herkov, 2005; Jones and Trotman Jemmott, 2009). Although the participants were between the ages of 20 to 66 years, there was a predominance (43 per cent) in the age category between 40 to 49 years. Although the data merely reflects the age at which they were referred, many commenced their aberrant sexual behaviour earlier in their lives, commonly in their adolescence. This was consistent with other studies, which indicated that aberrant sexual behaviour may commence during the adolescent years (Abel et al. 1987, 1988; Abel & Osborn, 1992). The participants were English speaking, as therapy was provided by a therapist of the same language group of the client. English speaking clients volunteered to attend therapy, and could afford to pay for transport to attend services regularly. The criteria for service delivery to sex offenders at Childline was that they should be motivated to

change and committed to the full attendance of the duration of the process of therapy.

Eleven of the participants were employed, and one experienced challenges in securing employment as he functioned at a lower level of intellectual function. Eight of them attended a secondary school but not all completed schooling; with five having obtained some level of tertiary education at a Technikon. It is possible that those that are more educated and had access to resources, were motivated to attend the programme and were thus included in the study.

With respect to their marital status: five of the participants were married; two were single; one was widowed; four participants were divorced, primarily as a result of the sexual abuse of their children. The participants were involved in adult sexual relationships at the time of their offences against children. Greenfield (1996) indicated that two-thirds of those who committed a sexual offence against a child had been married.

Status with the criminal justice system

All of the offenders engaged in assessment and therapy with me, as a therapist inter alia researcher. In most of the cases, being motivated to change enabled the participants to be receptive to the therapeutic process and provided a foundation for the offender taking responsibility for the offence. The participants experienced various outcomes in the criminal process: One participant was diverted into the therapeutic programme; another participant was pardoned after serving a six year prison sentence, and referred to the therapeutic programme; nine of the 12 participants who were convicted were mandated to attend the rehabilitative programme. The three members that were not charged were referred to the programme on warning they commit to the programme or be subject to the criminal justice process. One of the twelve participants was warned by the police that he would be charged if he was found in possession of pornography again, and two of the 12 had volunteered to be in the programme. Referrals were made by various service providers.

Demographics of the victims

The eleven offenders in the current study, sexually abused 42 victims, and the twelfth offender participant engaged in compulsive use of child pornography, which is an offence in South Africa. The least number of victims chosen by an offender was one, and the maximum number of victims selected and abused, by a single offender was eleven. Some of the offences disclosed by the offenders to the therapist had not been disclosed or reported but had been disclosed within the client-therapeutic alliance context. In the case of Larry, he was implicated in further crimes against children, but no additional details could be obtained or clarified and hence all of his offences had not been included and discussed in this research. Researchers indicate that offenders are likely to have committed many more, perhaps 100s of sexual offences than ever become officially known (Abel, Becker, Mittelman, Cunningham-Rathner, Rouleau, & Murphy, 1987; Smallbone and Wortley, 2001; Salter 2003). However Richard (2011) indicated that it is unlikely that a child sex offender would have abused hundreds of children before being reported. Given the nature of child sexual abuse, and the lack of reporting of cases this poses a difficult situation. The period of the offending behaviour against the victims ranged from a once off incident to a maximum duration of abuse of 15 years, for a single victim. Approximately eighty six per cent of the offenders had more than one sexual encounter with their victim, which generally occurred in the home. This is consistent with other research that indicates that intra-familial abusers exploit their children over a longer period of time (Smallbone and Wortley, 2001).

Gender Representation

There was a higher occurrence of female children being targeted as victims, that is, 74 per cent (31) of the victims, as compared to the 34 per cent (12) of the victims being male. It appeared that females are more consistently victimized, as the statistics are similar for victims globally (Smallbone and Wortley, 2001; Finkelhor et al, 1990; Lanning, 2001). It is clear the females are more commonly targeted, reflecting the patriarchal nature of our society, where victims are commonly disempowered females. Perhaps it may be that females are more vocal about their abuse. Boys may be inhibited from reporting because of the socialisation practices of

boys should be strong – "boys don't cry", which prevents them from reporting any injuries or maybe that they are supposed to seek and enjoy sexual interactions in keeping with their perceptions of masculinity, alternatively they may be afraid of being considered homosexual when abused by men (Abel, & Harlow, 2001; Finkelhor, 1984). Many of the participants in the current study were abused and did not report the abuse and hence early intervention with boys is a critical prevention element of abuse.

The age of the victims

The victims of the participants in the current study were commonly between the ages of two and 13 years of age. The children most at risk of sexual abuse were children below the age of 10 years. The 10-year-old child (18.4%) was the most at risk. Other risk groups are children at two years (10.5%), three years (8%), four and five years (13.2%), six years (15.7%), seven (13.2%) years of age. It appears that the younger the child the more vulnerable they are to sexually abusive behaviour. This representation of victim vulnerability is reflected in the current trends of child abuse at Childline. Research studies indicate that females commonly below 10 years are chosen and older boys, between 11-15 years are chosen (Myers, Marrero, Herkov, 2005; Finkelhor 1994).

Relationship of the abusers to victims

Although offenders cannot be put into exclusive categories, for purposes of discussion I separated intra-familial from extra-familial and mixed offenders. The intra-familial offences were commonly committed by fathers, stepfathers, and mothers' boyfriends (had some guardianship over the child). Sixty-six per cent of the abusers had some form of relationship with the mother of the victim, whether they were married, co-habited, separated or divorced. With respect to the tabulation of the relationships that the offenders had with their victims:

- Six of the children were stepdaughters

- Eight of the children were biological children of the offenders

- Five of the victims were the children of girlfriends of the offenders

- All of the other victims were known to the offender and were within the extended family of the offender, and otherwise.

The current research certainly challenges the common myth that abusers are strangers. Estimates of abusers known to the child vary between 75-94 per cent (Gaudiosi, 2006; Myers, Marrero, Herkov, 2005; Jones and Trotman Jemmott, 2009; Smallbone and Wortley, 2001; Richards, 2011). Of the children in the United States who were reported to be sexually abused in 2006, 26.2% were abused by a parent, 29.1% were abused by a relative other than a parent, 6.1% were abused by an unmarried partner of a parent, and 4.4% were abused by a friend or neighbour (Jones and Trotman Jemmott, 2009).

Type of abuse

The abusers in the study performed various forms of sexual acts on their victims, including fellatio, frottage, cunnilingus, sexual penetration, mouth-to-mouth deep kissing, caressing of chests, buttocks, thighs, and sexual penetration of the anus or vagina with either penis or fingers. Hence various forms of abuse ranged from rape to fondling. The forms of oral sex, either fellatio or cunnilingus were the most common offence, as 26 (62%) of the victims, both male and female, were exposed to acts of oral sex by the offenders in the current research. The non-touch forms of sexual abuse included videotaping children in sexual poses, peeping on them (voyeurism), exhibiting their own sexual body parts and suggestive talk. Over the past few years due to globalisation and increasing access to information and technology, new forms of abuse have emerged.

Conclusion

The twelve participants were referred by a number of service providers for assessment and rehabilitation. The eleven participants sexually abused children between two to thirteen years, commonly known to them, with a majority of the child victims (74%) being, female. Sixty-six per cent of the offenders had an intimate relationship with the mother of the victim.

While there is now far more professional knowledge, awareness and openness about child sexual abuse, silence remains a significant component particularly for the individuals directly involved, due to the strategies described in this section. Secrecy and silence are essential for the abuser to continue his practices and to avoid detection. The child may be fearful of breaking the silence following threats of punishment from the perpetrator. Children may also remain silent because they love the abuser, despite the abuse, and fear the disruption of the relationship, the possible punishment of the abuser and the break-up of the family. Close family ties may be a means of maintaining silence, but where these ties do not exist then other methods of maintaining silence may exist (Fawcett, Featherstone, Hearn and Toft, 1996). The above chapter provided a brief synopsis of the various profiles of the participants, and a comprehensive description of their demographics. The following section provides details of the demographics of the offender participants and an analysis of their personal experiences and circumstances.

Chapter Five: Analysis and discussion of experiences of offenders

This chapter provides an analysis of the life histories of the participants. This study was designed to understand a number of factors considered to be of theoretical and practical significance, and which might inform preventative, and perhaps investigative processes. These factors include the offenders' bio-psychosocial characteristics, psychosexual histories, the offenders' *modus operandi*, exposure to pornography and motivation to sexually offend.

In comparing the experiences of the participants, there were many similarities but also many differences and it is apparent that child sexual offenders are heterogeneous (Myers, Marrero, Herkov, 2005; Smallbone and Wortley, 2001; Richards, 2011; Zgoba and Veysey, 2010). In this chapter, as well as the previous chapter, I present the characteristics of the participant's age, education, bio-psychosocial and psychosexual background, level of sexual interest in children, relationship with victims, the ways in which the abuse against the children were perpetrated, and so on. Gaining an understanding of the offender population is critical if children are to be protected from sexual abuse. There is consensus that the complexity of sexual offending makes it a "multi-dimensional and multi-determined phenomenon" (Smallbone and Wortley, 2001, p.1).

Using critical social work allowed for the deep, rich, qualitative understandings of the profound life experiences of the participants, and the way in which they perceived their circumstances (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2002). The participant's life experiences were analysed in terms of the bio-psychosocial perspective by looking at the intersection between their biological, psychological, social, and cultural experiences in understanding what may have led to the abusive behaviour). A bio-psychosocial approach is integrated in the analyses to try to discern the possible factors that predispose people to offending behaviour. Every individual needs to be understood in terms of the biological, the outer and the inner, the structural and the psychological. Adopting a critical theoretical framework and understanding the structural determinants of life does not preclude the place of

human agency and individual choice (Sewpaul, 2014; Allan, Pease and Briskman, 2003).

Obtaining reliable and detailed information from offenders is a challenge. In my engagement with the participants I was 'open-minded', had 'a reflective appraisal' and took into account 'different perspectives, experiences and assumptions' in order to obtain as much information as possible of the 'life politics' of the participants (Adams, Dominelli and Payne, 2002, p.2; Jones, Cooper, and Ferguson, 2008, p.33). "Social work means being thorough in building up our understanding of the world we are dealing with" (Adams, Dominelli and Payne, 2002, p.5).

The best practice engagement is that which encompasses respect and allowed for the participants to develop self-awareness, coping strategies, empowering solutions to manage his aberrant behaviour, prevent relapses, and not labelling or pathologising the participants.

This chapter provides a breakdown of the life experiences of the participants within their family of origin, in the relationships with their peers, and the abusive experiences in their childhood. Critical theory is concerned with how structural determinants influence individual growth, development, preferences and choices. The family constitutes one of the most powerful structures that shape human behaviour. But it must be remembered that the family does not function in a vacuum; the family is subject to wider socio-economic, cultural and political influences (Sewpaul, 2005; Fook, 2002).

The participants experienced various challenging and profound circumstances in their childhood as depicted in the following table.

Table Three: Experiences of Participants

#	Nature of experience	Percentage	Explanatory note
1	Marital discord	100%	All the participants' parents experienced severe conflict in their relationships
2	Domestic violence	83%	Participants were exposed to domestic violence in the family of origin
3	Substance abuse	42%	This reflects the prevalence of substance abuse by the fathers of the participants
4	Sexual abuse	75%	The participants experienced sexual abuse in the own childhood
5	Physical abuse	100%	All of the participants experienced physical abuse within their families in their childhood
6	Emotional abuse	100%	All of the participants experienced varying forms of emotional abuse in their childhood

This first section addresses prominent factors and events that have occurred in the lives of the study participants' family of origin, such as family violence, substance abuse, physical, emotional and sexual abuse.

Family violence: "When he use to beat my mother, I felt so helpless and afraid"

The offenders in therapy attempted to make sense of their lives and sexual offending behaviour and introspected on their childhood, family experiences and relationships. Many did not indicate positive experiences, but rather traumatic experiences.

The families of the participants in the study were characterized by domestic violence. Other circumstances that pervaded were instability, poor emotional bonds, poor supervision, various forms of abuse, early exposure to sexual material and

behaviour. Eleven of the 12 participants were exposed to family violence, five experienced the divorce of their parents, five of the fathers of the participants engaged in substance abuse, and all 12 of the participants were exposed to some form of neglect or abuse within the family. These circumstances were devastating to the participants, and they vividly described their recollections of various incidents of violence in their households.

Mathew: *When I was six years old, just before my mum can divorce my dad, he came home one day and because his food was not ready, he grabbed my mum and beat her. And although she fell to the ground he did not stop, until he saw me watching and crying.*

Parental mistreatment of their children is broadly defined to cover various aspects of abuse of children, whether direct or indirect, it is widespread and does negatively impact on children. The volatile nature of domestic violence causes children to live in constant fear as described by the participants.

Tony: *Although my father was a good man he was abusive when he drank alcohol. I grew up with a lot of fear. When my father entered the door after work and if my mother had to ask him why he was late, all hell will break loose. When he used to hit my mother, my sister and I would hide in our rooms. Every time my father used to drink my brother used to beg my mother not to say anything to him. Sometimes I think it was our prayers that removed my father that he had to die.*

In the above situation Tony's father, believed it was his inherent right to punish his wife for her failure to adequately fulfil her gender role by preparing his food. He insisted on submission and when she tried to defend herself by providing an explanation he perceived it as a "challenge to his dominance" (O'Toole and Schiffman, 1997, p.103). Men have always been the dominant authority in society and within the household, and they appear to have the patriarchal right to control, dominate and delegate roles and responsibilities. The right of men to control women and children depicts the foundation of a patriarchal society in which men confirm their masculinity through power, violence and control (O'Toole and Schiffman, 1997).

Tom: *My abusive dad was seldom at home as he would drink and have affairs with other women. My mom was never at home as she was always working and tired. My parents always fought. My father never gave us attention he would only shout and hit us. We were never together as a family. My parents just left us with the maid as they were not interested in us. We felt unloved and rejected.*

Tom's father engaged in a sexually promiscuous lifestyle, the very behaviour that Tom displayed most of his own life, as he declared that he had sexual relations with over 50 women. It is obvious from the experiences related by Tom, Bungie and others the climate in the home was sexualized, violent, distressing, tense, fearful and emotionally depleting on the participants. The children lived in a volatile, patriarchal, controlling atmosphere, not knowing what would provoke their father's wrath. Various forms of violence whether apparent or not have become ingrained in society overtime.

Although gender violence existed in these families, it is not just a feature of the family but a characteristic perpetuated and entrenched on a macro- level within society and institutions which ultimately influences the micro- level interactions of the family (O'Toole and Schiffman, 1997; Pierson, Castles, Naumann, 2014).

The case of Tony reflects his helplessness on witnessing the abuse of his mother.

Tony: *When he used to fight with my mother I felt helpless and could not defend her. I use to urinate in my pants.*

The siblings of the participants were also negatively affected by the circumstances of the family: four participants sexually abused a total of four siblings (two stepsisters and two sisters); and a fifth participant was sexually fixated on his sister and his fantasies of her predisposed him to sexually abuse his own daughter. A total of five siblings of the participants were also sexually abused by relatives, and their father (two brothers and three sisters). One participant was sexually abused by his two siblings. Four of the participants indicated other traumatic incidents pertaining to their siblings: a total of three siblings committed suicide (two brothers and one sister); one sibling had run away from home and engaged in prostitution; and another sibling who was a drug dealer was stabbed and killed by the police. It is evident that the

participants lived in a sexualized and traumatic atmosphere that affected not only them, but their siblings.

The above cases share a commonality of prolonged exposure to violence. This exposure combined with other familial, structural, personal and environmental factors may have contributed to the participants adopting sexually aggressive thoughts and attributes. There are many studies that point to the impact of exposure to family violence on a child's development: psychologically, emotionally, socially, intellectually and even neurologically. Children in these circumstances observe the poor treatment of their mothers, develop perceptions of gender roles that they might normalise, and treatment of women as the less empowered (Stewart, 2010). "Dominant societal patriarchal perspectives of violence trickle into family relations and the individual psyche of how individuals should relate to each other in gender relationships" (Dallos and Mclaughlin, 1995, p.2).

Hence family violence can be considered as a version of the wider inequalities between men and women. It has been argued that men expect to be dominant in their families and society, which allows them to use violence in order to control and subjugate women. The slippage from the public to the private is particularly difficult for domestic violence and other forms of abuse in families. As soon as we focus on the private, individual or interactional properties of family life, there is a danger that we start to blame families, which in turn largely punishes women. The family is a structural component affecting the individual development. The family in turn is influenced by the external structural factors and discourses in which it is located. The power imbalances, gender constructs and discourses, and oppression affect the intimacy of the family and can cause family dysfunction (Dallos, and Mclaughlin, 1994; Allan, Pease, Briskman, 2003; Fawcett, Featherstone, Hearn and Toft, 1996).

Abusive experiences: "he stopped sexually abusing me but the hitting continued"

This section refers to the victimisation experiences of the participants: the emotional, physical, sexual abuse and maltreatment experienced. Nine of the participants experienced sexual abuse; twelve of the participants experienced physical abuse; and twelve of the participants experienced varying forms of emotional abuse.

Children are a possible target for aggression and anger, because they are weak, and powerless to retaliate. But there are many ways in which child abuse is legitimated. For instance, children are seen as the property of their parents, who may justify physical and emotional abuse in terms of legitimate punishment or because children fail to live up to parental expectations. Abuse is traumatic and contributes to the reproduction of abusive behaviour. Research indicates a relationship between child abuse and domestic violence (Steward, 2010).

Child abuse is an act of violence and an abuse of power. Adults especially parents use their authority to abuse children. Violence is patriarchal in nature and masculinity is a dominant discourses of masculinity, which described male sexuality in terms of power and control (Mclaughlin, 2007). Boys who witness gender-based violence, imbibe messages that women are passive, yet provocative, need to be sexually controlled and dominated by men. Boys grown up to be men learning to objectify women and children and believe they can use them as an outlet to release their feelings of anger or inadequacy, and to compensate for states of powerlessness. Child sex offenders also present with psychological problems that may accompany feelings of distress, inadequacy, rejection, anger, low self-esteem, and negative effect. Tom had a pervading sense of negativity, poor self-esteem and attempted suicide on many occasions. According to Cortoni (2012), child sex abusers more commonly display lower self-esteem than other types of offenders.

Hence child sex offender too, present with psychological problems that may accompany feelings of distress, inadequacy, rejection, anger, low-self-esteem, and perhaps view their sexuality as something powerful that can be used to control others such as children to compensate for feelings of powerlessness. A small percentage of women do sexually abuse children, and perform other acts of violence against children, however the predominantly high rates of sexual abuse against children are committed by men, and we hence cannot negate the impact of gender and masculinity (Dallos, & Mclaughlin, 1994).

Physical abuse: "He use to take me to the bathroom and beat me up until I lost consciousness"

Physical abuse of the participants as children by the parents occurred in the form of physical injury, red marks, cuts, welts, bruises, sprains, and broken bones.

Tony*: I was the one who would open the driveway gates when my father came home drunk. After he parked his car I would take out his bag from the car but I was so scared, in case I said the wrong thing and he would hit me.*

Parents tend to legitimize or justify their punishment of their children to misbehaviour, poor discipline or not meeting expectations. This can be a challenging situation as corporal punishment is still permissible in the home environment. Physical punishment instilled fear in many of the participants in the study.

Tom: *The beatings started when I was just four years, with just about any object.*

Tom experienced several forms of violence in his childhood: family violence, emotional, physical and sexual abuse. The on-going abuse affected his self-esteem, performance at school, he had poor impulse control and placed himself at risk for repeating the cycle of abuse with which he had grown up. Tom also discussed his father's reign of terror in his home.

Tom: *My father was a very hard man; he was always in a bad mood, and he always punished us. Once he hit with me with a fist and I was thrown across the floor, because I spoke in the company of people who visited us. He used to take me to the bathroom and beat me up until I lost consciousness. He also used to beat me with a fan belt.*

The participants recalled their experiences of anger, helplessness, powerlessness, hostility, guilt, shame, anxiety, and confusion. They were unsupported by other relatives and family, as no one appeared to visit, and assumed everyone was afraid of their fathers.

Tony: *When my dad used to come home drunk I used to feel afraid, and helpless. One dark and cloudy day my father beat me with a fan belt and chased me out in the cold. I will never forget how scared I was. I felt like a mouse being trapped in a corner.*

The participants were blamed by their fathers for the problems in the home, diverting focus from their atrocious behaviour. Anton was terrified of his father, which led a suicidal attempt in order to escape any further assault. The circumstances of the family are internalised as Anton identified himself with these circumstances, and blamed himself, felt a sense of self-loathing and alienated.

Anton*: I felt very alone in the household and believed that everyone hated me. I was in big trouble with my dad again. I was terrified when I heard those words again – 'Just wait until your dad gets home'. I was petrified and I decided that I was going to end my life. I attached a rope to a tree and jumped onto a big oil-barrel and proceeded to hang myself. I woke up in hospital later on that day. To this day my father does not know that he was the reason behind the whole event.*

Family violence is intricately linked to the very prevalent attitudes, values and inequalities existing in society. So society's problems will manifest in the privacy of the home and in this case, in violent expressions (O'Toole and Schiffman, 1997).

The constant onslaughts of violence by men are unjustly tolerated and quite often exonerated in society, further allowing their denials, justifications and minimizations. (Fawcett, Featherstone, Hearn and Toft, 1996).

Emotional abuse: "She chose her boyfriend over me"

All 12 participants experienced emotional abuse, which is the core of all abuse and neglect, and has the most damaging impact. The focus is commonly on what can be immediately seen such as a physical injury or what is morally unacceptable such as sexual abuse and cases of emotional abuse in underestimated and neglected (Barnett, Miller-Perrin, & Perrin, 1997). Yet, when a person suffers any form of abuse they firstly emphasise the emotional and psychological hurt and pain.

In the following case, Khuzwayo experienced pervasive self-blame for his mother abandoning him, which was internalized and shaped his life.

Khuzwayo: *My mother abandoned me at the age of five years. She was able to make a choice and chose her boyfriend over me. I felt like second best. I saw her again 14 years later, only because we traced her in order to bring the family together again. I felt helpless and alone. It was never said that I was to blame but I couldn't justify why she left so I blamed myself. And that self-blame has travelled with me all my life. It's still a strong emotion that dictates how I relate to people and how people relate to me.*

Khuzwayo carried the burden of guilt and responsibility for his mother leaving the family home, and as a result he was plagued with a low self-esteem, a sense of worthlessness, was distrustful and fearful of emotional relationships and commitments. Khuzwayo felt alienated, abandoned, isolated and lonely from all his family, and withdrew from personal relationships. Research studies indicate that poor emotional attachments predispose one to offending behaviour, and that people "respond to threats of abandonment with greater levels of hostility" (Woike et al., 1996, p.1031). Marshall (1989, p.497) also confirmed that, "erratic and rejecting parenting behaviours, which alienate the children from the possibility of forming secure attachment bonds, distinguish the family context in which sexual offenders grow up". Difficulty in developing secure attachments can lead to people having little or poor empathy, the ability to be detached and tendency to sexually objectify others (Marshall et al. 1993). The lack of attachment was characteristic in the lives of the offenders as indicated by Tom.

Tom indicated that his parents were devoid of positive emotions towards him

Tom: *My biggest stumbling block is my family. My dad constantly verbally abuses me. That makes me feel like a failure, I have low self-esteem, and am withdrawn. My mother has got no trust in me. I cannot go out of the house as they always make it a problem. She drinks too much and finds fault with everything. I left home at 15 years, I had no childhood. I was 21 years old in my first marriage.*

Tom also held his family responsible for his poor self-concept and poor adjustment. Both his parents were alcoholics and kept the family isolated from others. His father isolated him by restricting his contact with others, preventing him from forming friendships. His father made him feel that he was not good or normal enough to

engage with others. This type of crippling isolation and rigidity is emotionally abusive, as children are unhappy, restricted in all actions and activities; secondly, their socialisation is impaired as they are prevented from doing things for themselves; thirdly, their abilities to interact with peers and to build meaningful and appropriate relationships are affected by the lack of exposure to other children; and fourth, their self-esteem and self-confidence are low. Isolated and overprotected children are not prepared for independent living, not only in the physical sense but also emotionally and cognitively. They are unable to make decisions, or experience success and act accordingly. Their behaviour seems to be passive, accepting everything, agreeing with everything and everybody, and waiting for things to be done for them and to them. Emotionally they seem to be flat, neither sad nor happy, and find it difficult to show appropriate emotions. Similarly Tom in his group and individual sessions had to be re-educated on socialization practices, using the group climate and practicing these with his parents and others.

The participants experienced constant emotional abuse and attacks by their parents, which affected their social competence, self-esteem, levels of security allowing them to feel rejected and lonely. This is consistent with other studies that described the lack of intimacy and emotional abuse experienced by child sex offenders (Marshall et al., 1993; Ward, Hudson & Marshall, 1995; Barnett, Miller-Perrin, & Perrin, 1997; James, 2000).

Mathew described the impact of the abuse on his life.

Mathew: *All the abuse that he did to me to makes me feel worthless, a good for nothing and a severe introvert.*

Loneliness and powerlessness created a sense of loss, and the participants experienced many losses in their lives which caused immense pain, whether it was in the form of death (Larry's mother committed suicide), separation by their parents, divorce and or acts of violation.

Khuzwayo felt isolated and lonely from all his family, and preferred being on his own rather than risk being hurt again.

Khuzwayo: *I am alone – I have no one – we all don't communicate, not my parents or my brother.*

The participants reported their parents to be rejecting, distant, cold, critical, not allowing them to express their thoughts and feelings, called them names, swore and humiliated them. The impact of psychological abuse is indicated to be one of the most destructive forms of abuse

Ronnie: *The families would all be together but I felt very left out and would not talk. I was quiet and did not have much to say. I got teased a lot at school.*

The family provides a haven for the safe expression of feelings and needs whether good or bad. Unfortunately children become the target of the negative and violent discharges. Those who are containers of self-doubt, poor self-esteem, and self-loathing find opportunities in this haven, to reaffirm and restore their sense of power and control (O'Toole and Schiffman, 1997). This form of violence takes the form of put-downs, swearing, shaming, threats, insults, manipulation against women and children. "This form of violence serves to reconfirm the negative self-image and the feeling of powerlessness shown by the fragility, artificiality, and precariousness of masculinity" (O'Toole and Schiffman, 1997, p.41). Deshan recalled the hurtful words used by his adoptive father, which not only caused him to question his identity but led him to feel unloved, unwanted, rejected and ashamed.

Deshan: *My father was a chronic drunk and called me a useless, good-for-nothing, sissy. Everything that I did was wrong.*

Feeling rejected and violated led Deshan and the other participants to turn to other forms of support like alcohol, sexual comfort from peers and victims (Craissati, 2002). Alton indicated his own feelings of rejection.

Anton: *I felt unloved by my father at times. My father was dominant. I respected both parents but was fearful of my father. The atmosphere at home was always cold and very strict and Victorian era.*

In the above case, Anton felt fearful of, unloved, ignored, rejected by his father, there was minimum communication, and an estranged atmosphere of control prevailed in

his home. The lack of communication or the communication was verbally abusive, diminishing and destructive appeared to be huge stumbling blocks in the participants' families.

Derek experienced a similar response in his own home, especially his father.

Derek: *My dad was very cold and I was never showed love as a child. For example, I was never hugged or kissed while growing up.*

Tony also reflected on the detached relationships that he shared with his parents.

Tony: *I guess that through this all I doubted my mother's love for me. She never told me that she loved me.*

The circumstances described by the participants depicted the presence of emotional abuse over long periods of time and this can have a lasting negative impact on them, to the extremity of suicide (Stewart, 2010). Children who have been consistently emotionally abused develop a sense of apathy and helplessness, believing that they have no control over their lives and they give up trying, which has a pervasive influence on their lives (Seligman, 1975),

It is suggested that individuals develop constructions during childhood, based on relationships with caregivers, which affect their development and maintenance of attachment and relationships (Bowlby 1979). These formulations are influenced by interaction patterns, protection, care with significant others, and determine the nature of subsequent attachments and one's identity and self-concept. In the current study, the participants developed negative views of themselves that were internalized at an early age, and became more entrenched into adulthood, affecting their relationships and stability. Distortions in bonding and early attachment experiences affect the development of well-adjusted personalities allowing them to be susceptible to psychopathology and sexually offensive behaviour (Bowlby, 1983; Craissati et al., 2002).

Emotional abuse is dynamic, multidimensional, difficult to determine and hence a challenging area of child maltreatment, and it has been slower to be accepted into

the realm of child protection, warranting intervention (Iwaniec, 2006). The effects are too far-reaching not to invest in this area of prevention.

Sexual abuse: "I am your dad and I am allowed to do this with your willy"

We may look at a sexual offender with dread and disdain due to the offensive acts he may have committed. But he too, like the participants in this research, was once an innocent child, who was inflicted by abuse. Nine of the twelve participants experienced sexual abuse, of which, seven participants were sexually abused by family members (father, uncle, grandmother, cousin, siblings), five of the participants were sexually abused by non-family members (neighbours, peers, family friends, doctor, principal) and two participants were sexually abused by both family and non-family members. Four of the participants were exposed to pornography in their early years between six to 10 years of age. There was a sexualized climate in the lives of the participants in the study.

Tom vaguely recalls memories of the incidents of sexual abuse perpetrated by his father.

Tom: *It happened the first time when I was five years old. I can recall feeling my father's genitals touch and rub on my skin. I felt strange like I knew it was wrong but it was my father so it was probably right and okay, and he still had some of his clothes on. My mother thought he was wrestling with me. Still to this day I can still see it in my memories. It still makes me unsettled and uneasy. Of all the times I was sexually abused this one stuck in my mind the most, and I don't know why.*

The participants did not disclose the abuse to their families at the time of its occurrence, which is consistent with other studies of underreporting, especially when the victim is male.

Mathew: *A social worker came to see me and asked me to draw pictures. Then my mum asked me if anyone touched me on my private parts – and I remembered what my dad said – that he would hurt my mum, so I just got angry with her and denied*

everything. After that my mum took me to a doctor who examined me, she came out crying from the doctors room having been exposed to the results.

In the above case the therapist had assessed that Mathew had been raped through his diagnostic drawings, and the district surgeon provided medical evidence of sexual abuse, but Mathew denied the acts of sexual abuse by his father to protect his family. Even though the abuse was reported to the social worker and was confirmed by the medical doctor, Mathew did not disclose. In many instances, when these cases are brought to the notice of professionals they are required by law to report, but as in this case regardless of the medical evidence it was not reported to the appropriate authorities. Personal biases of the reporters as well as availability and access to professional resources are also important factors that contribute to the non-reporting of sexual abuse. If Mathew's case was pursued instead of prematurely discontinued he could have been protected from further abuse.

Mathew*: I did not tell anyone as my father said "if you tell your mother I will hurt her and your sisters"*

Child sexual abuse is generally difficult to detect and may continue for a lengthy period of time, especially if children, being uninformed, believe it to be a normal activity. Hence abuse, especially by trusted members of the families, and especially if perpetrated by fathers go unreported. In the above case Mathew was also sexually abused by his father over a lengthy period of time and did not disclose the abuse out of fear that his father would harm his mother and sisters.

Mathew*: I started school and during the first holiday, I went to live with my father after my parents divorced, and this is when my dad started sexually abusing me. I use to sleep in my dad's room on his double bed and he would put his hand in my under pants and play with my penis. I did not like this and asked him to stop. He would continue stroking and rubbing my penis until my body became stiff and I felt a rush through my body. My dad would then stop and ask 'did u like that- u liked that?' I use to say yes. But I am not sure why I said yes, mainly because I was scared that he will hit me and that he will do that again.*

Children are sexual beings and will respond to sexual stimulation, as did Mathew, which may be confusing as it is confined to the body, although he was afraid, resistant and confused. Mathew was yet another victim, forced into silence to protect his sisters and mother. Having experienced and witnessed his father assault his family on so many occasions Mathew was easily threatened into silence. Mathew was sexually abused for approximately six years.

Mathew: *A few days later my dad did the same this time I did not resist I just let him do what he wanted to do and when he stopped he said, 'see you like what I did with your winky'. This continued for days. During the next holiday, I went to my dad's house, he had a girlfriend who had two kids. But he still sexually abused me when he could. When I went back home, my mom noticed a change in me, as I was angry all the time and I would spend a lot of time alone in my room, which I did not do, before.*

Anton was sexually abused by his maternal grandmother and also experienced an involuntary level of sexual stimulation.

Anton: *On occasions when I had a sore tummy, my gran would rub my tummy in a circular fashion. She stressed that this was the way to make it better. The circles would get bigger until such time as her hand would disappear down my pants. She would fondle my penis and brush against my pubic hair. I remember that I use to get an involuntary erection and be embarrassed about it.*

Sexual activity between women and young children has been difficult to identify. Primarily because it is not expected, and could be normalised as females are the primary caretakers who dress, bathe, change, examine, and touch children with little suspicion and detection. In Anton's case, his grandmother used the pretext of caring to fondle him sexually.

Larry was sexually abused frequently in his childhood by various relatives, family friends and acquaintances; and his teenage brother and sister. He had a sense that their activities were not appropriate but they bribed him or emotionally manipulated him into conceding to the activities. He did not disclose the abuse to his parents, as he felt ashamed and guilty. Larry indicated that sexual abuse appeared to exist within his

family and extended family and he suspected his elder siblings of being sexually abused by family and relatives.

Tom and his siblings were also sexually abused by his father and a paternal relative, who was in a position of authority and respect due to his position as an educator.

Tom: *My relative, a teacher, used to visit our house when my parents were at work, and would give us gifts and sweets. He sexually abused us for three years. He used to ask me to take off my clothes and he used to ask me to kneel and then he used to put his penis between my bum cheeks and move forward and back like having sex and then rub his penis on my anus hole. He used to have me lying on my stomach, and his penis was inserted between my legs, him lying on top of me and he ejaculated between my legs. Sometimes my uncle would be lying on his back, myself sitting on top of his legs. He made me play with his penis until he ejaculated. He made me suck and play with his penis until he ejaculated all over my face. Other times he used to take my sister and have sex with her in the same way and I use to watch. I can still remember when he ejaculated it was sticky between my legs. With all this happening I knew what sex was. My brother performed the same positions with this relative.*

As a result of the excessive exposure to sexual abuse and sexual activities, the pattern of behaviour became an addiction; hence Tom continued this activity with others. For instance, Tom had sex with his sister, the little children next door, his peers and other relatives who were 1-3 years younger.

Tom: *We use to play nurse games with the children in the neighbourhood or teacher games and we used to have sex with everyone. When we were caught, my parents moved out of the area. But the sexual urges became too great in us, and my sister and I use to have sex regularly. We had sex for a year, then her friends starting having sex with me.*

There may be force and or coercion in sexual abuse of children or not. Nonetheless, most abuse causes trauma. The activity may also be somewhat consensual between children who engage in sexual play. Tom may have experienced many forms and severity of abuse, but the more Tom engaged in sexual acts, the more intense was his desire for more and more of these sexual activities. Tom may have engaged in

the consensual sexual activity that was a substitute for nurturance- as it provided him with the nurturing and affection that was somehow lacking within his family. Tom and his siblings lived in circumstances of violence, their parents were disengaged, lack of supervision and monitoring, his father had several sexual affairs and his mother was depressed. This may have also promoted the sexual relationship between the siblings in an attempt to nurture each other, until they grew older and realized the implications of their actions. However, for Tom his sexual need became addictive and he ventured outside his family to engage with relatives, friends, domestic maids, neighbours. It was apparent that it also interfered with the development of his social skills as he sexualized all relationships and found comfort in just sex. Tom's social skills were affected, and his development and dependence on his parents continued into his adult years. Although he was in his 40s, he still lived with his parents. This is consistent with other research findings (Dube, Anda, Whitfield, Brown, Felitti, Dong, Giles, 2005).

Furthermore Mathew may have experienced a sense of powerlessness due to the abuse, and these abusive interactions provided an opportunity to re-enact and master his own abusive experiences (Dube, Anda, Whitfield, Brown, Felitti, Dong, Giles, 2005).

Research has attempted to study this type of abuse and isolate its effects, as it is deemed to have associations with sexual abuse and promiscuity, as well as additional family dysfunction, and it is difficult to determine the effects of sibling abuse as separated from other forms of abuse (Dube, Anda, Whitfield, Brown, Felitti, Dong, Giles, 2005). Most of the participants have been exposed to all forms of abuse and family dysfunction. The participants experienced lack of engagement as Tom did, but others like Alan experienced a rigid family structure, which discouraged open communication and others like Ronnie, Derek, and Deshan experienced an atmosphere of repressive attitudes toward sex. But in all these circumstances, women were devalued and enforced patriarchal authority existed.

Rigid and repressing environments may more likely lead to parent-child abuse rather than sibling-sibling abuse. However, brother-sister abuse can result, modelling father-daughter abuse, as if the father's actions tacitly gave permission to the brother to abuse. Sadly, in considering these cases, Tom and Mathew were both exposed to

sexual abuse by their fathers and both of their mothers were adult survivors, who were really uncomfortable about sexual intercourse in their relationships. It is indicated that a history of sexual abuse in a parent may also prevent them from noticing the signs of abuse or sibling sexual activity. Both Tom and Mathew's mothers were adult survivors but the participants later married adult survivors of childhood sexual abuse, who were not alerted to the abuse on their children.

The participants in the research also experienced sexual abuse outside of the family structure, commonly by people known to them, and sometimes people in positions of authority.

Child abuse is a phenomenon most commonly committed by persons that children know. Extra-familial child molestation is sexual abuse that non-family members perpetrate. The participants experienced abuse at the hands of friends of the family, teachers, doctors and peers.

Anton: *One day I saw my father's friend's penis when he was urinating. He asked me why I was staring and I said because it was big. My father's friend forced me to perform oral sex on him, on three occasions.*

The participants were commonly sexually abused by peers and friends.

Ronnie: *I was playing on a day and had to urinate with a friend and I noticed his private parts were different; he had a foreskin and I didn't. We felt each other's penises and ended up sucking each other's penises. When I went to my friend's house, we bathed together and played with each other's penises and sucked each other's penises. This happened with three other friends.*

Their perpetrators were not only adults, but other children.

Derek: *While I was growing up and about 12 years old, another boy about five years older than me abused me and made me perform oral sex on him. We were lost while we played and I relied on him to take us home, he would only take me home, if I performed oral sex on him. I could not tell anybody about this incident and would have sounded stupid and kept it a secret. This sexual relationship started as abuse but became a game and went on for about four years. He practically followed me around.*

A common situation is that regardless of the number of incidents or intensity of the sexual abuse experienced, the participants like Derek, did not inform their parents.

Mathew displayed symptoms of the sexual abuse that was noticed and reported to child protection service providers. Mathew's family was under constant threat by the father, hence although he was given the opportunity to disclose, he was too afraid, and wanted to protect his family.

Deshan was sexually abused by his cousin for approximately three years. He did not disclose the sexual abuse to his family, as he thought that they would not believe him.

Deshan: *We use to bathe together, and that's where it started. He wanted me to touch him and play with his penis and masturbate him. For a while it was ok. I thought all boys do that and I was curious and it was a type of exploring. After a while it really started to bug me. He became more persistent and we slept in the same bed when he stayed over. One morning in bed I asked him if we were gay and he got angry. He swore me and called me a liar. He said if I told anyone he would tell everyone at school that I was a queer. There were approximately 25 – 35 incidents. But I never told anyone in the family. They would have taken his side and my father would have beaten me.*

In this case Deshan feared that he would not be believed, or worse, blamed for the abuse, as he believed his mother favoured his cousin over him. His fear, as an adopted child, was borne out of rejection, being punished, stigmatized and ostracized. Questions such as "Why didn't you tell?" "What did you do to provoke the abuse?" "How could you let it go on for so long" are automatic for many people, when a child discloses sexual abuse, hence, it is a hindrance for disclosure. Children who are sexually abused are generally chosen, because they are more vulnerable and less likely to disclose the abuse. In the above case, the abuser knew that Deshan would not risk losing his adopted family and had feelings of insecurity and non-acceptance.

Tom experienced an extremely high number of incidents of sexual abuse in his life, but as he indicated "you just don't report or mention those things."

Tom: Our teacher who was in the class used to play with herself under the desk. She used to put her hand inside her panty and rub her fingers up and down. The desk was open in the front and I saw everything. She knew I was watching and used to smile when I was watching. Even after school I used to masturbate 4-5 times just thinking about it. I used to get into trouble just to get into detention just to watch her masturbate. Sometimes she would put her fingers in her hole and have her fingers move in and out of her hole while I was watching. She used to lick her fingers and put them into her hole and used to play with herself when she did this. I used to remember it and it used to arouse me even more. This went on for more than 2½ years. I never reported it because you don't do those kinds of things like, report a teacher. Even though she resigned, I could not get those images out of my mind and masturbated to those images.

It is evident from the various cases that perpetrators are diverse and are significant, trusted, authoritative persons in the lives of the participants; educators, medical doctors, college professors, bus drivers, priests and pastors, politicians, pastors, are just some of the job categories that extra-familial perpetrators occupy.

Sexual abuse can be perpetrated by the most senior person at an institution or facility, by persons in authority, as in the case of Khuzwayo, who was sexually abused in his boarding institution, by the professionals who managed the institution.

Khuzwayo: I was abused from the age of seven to thirteen years old. This all happened at boarding school from seven years. The headmaster made me remove my clothes many times and sexually play with the other boys. The school doctor also did the same but also sexually fondled me as well. Mostly the abuse came from the other boys. They would gang up on the younger boys and molest them. Group masturbation would occur. All I remember of those times distinctly in my mind are the thoughts of the times when I was abused. The rest in my life is blurry and indistinct. The first time was in the headmaster's office. The whole boarding school had been summoned to his administrative building. There wasn't a lot of us, maybe about forty boys. It was early in the morning. I think it was five o' clock. I don't know why we were called there. He called a few boys up to the front. He told them to take off their clothes and sexually play with each other. This happened while we were all in that

room, including me. This wasn't a once off occurrence. It happened many times after this. The next time was in the doctor's office. He sexually fondled me. I can't remember for how long. Eventually I was told I could leave. When I left I felt confused – I wasn't sure what had happened. I knew deep down inside that it was wrong but I had no previous experience to base it on. After this things slowly became worse. All the kids that had been abused began copying what they had seen. They would gather in a group at night and re-enact the incidents. The boys would touch each other; fondle one another. Over time this became an every night occurrence. The boys became more forceful they would gang up on the younger ones and force them to participate. We all started to enjoy what they were doing.

The sexual abuse of children within organizations and institutions responsible for their care is a significant problem (Abel, Jordan, Hand, Holland, & Phipps, 2001). In South Africa, studies reveal high prevalence rates of educators being abusers. In South Africa, new legislation requires that sexual offenders be registered on a database according to the Sexual Offences Act 32 of 2009. However, this process is far from being complete, as the register has minimum names and cases are generally under reported.

It is indicated that many of the offenders commence their sexual abuse of children in their adolescence; this may be related to the discovery of sexual attraction, and the emergence of sexual interests during this stage of development (Seto, 2008; Sheldon & Howitt, 2007). According to research conducted in South Africa, rape mostly begins in the teenage years, as it was found that three quarters of men who raped, did it for the first time before the age of 20 (Dunkle, Jewkes, Brown et al., 2004). Sexual abuse and sexual play may be precursors, influence or reproduce abusive childhood experiences in adult years (Sheldon & Howitt, 2007).

Everyone has innate biological propensity to abuse, but the circumstances, experiences, contextual issues pertaining to patriarchy, values, and ideologies are more likely to formulate the experiences of offenders in the development of child sexual offending behaviour.

Regardless of the constant focus on the family, in no way am I blaming the parents, and holding them responsible for being inadequate parents. The critical possibilities

exist in addressing the context of the families and their broader structural issues of poverty and inequality, and societal discourses on gender. Having been in the child protection field for a life-time, interventions are most often targeted at mothers rather than addressing broader concerns of gender, violence, the father and the wider structural factors that affect the family. Fathers are commonly less implicated, and the problems persist. We need to take cognizance of socio-cultural, economic and political factors that impact on families and individuals and not blame families for their problems.

Feminists link violence experiences in ones childhood to performance of violence in adult years. Children are furthermore linked to a "gendered system of power through their historical social position as the property of fathers, as well as their own identity as male or female" (O'Toole and Schiffman, 1997, p.305).

Institutions, patriarchal ideologies and practises have failed to adequately support women and children in situations of domestic violence. In addition family violence is constituted as a result of a variety of socio-structural factors, cultural acceptance of violence, including social, economic and health stressors, norms that condone violence as a means of solving conflict. (O'Toole and Schiffman, 1997).

Impact of abusive experiences

This section focuses on the impact of the life experiences and negative outcomes experienced by the twelve participants who were child sex offenders. This section discusses pivotal challenges that they experienced related to their substance use, school and work performance, relationships, development of sexual sexuality and use of pornography.

The participants experienced various levels of abuse, neglect and exploitation influenced by their macro context.

The negative outcomes for child abuse are well documented. The negative psychological impact varied widely from participant to participant, depending upon their adversities, inequalities, wider structural constraints, patriarchal influences, available resources, support of their families, and nature of their abuse and

relationship with the abuser. The participants experienced multi- and interlayers of experiences. Their problem areas revolved around their emotions, their beliefs about who they are, which affected their interpersonal competency and even had implications for their psychological and physical health. But all problems cannot be reduced to neurobiological issues as individuals interact with macrosystems that influence their families and lives. The participants were dominated by their sexuality, which was expressed in dysfunctional ways

Men who have been abused during their childhood tend to have difficulties with their sense of masculinity. One of the primary discourses related to issues of masculinity and that "it's a man thing to have sex and lots of it – and so it is not possible to get abused". Sexual abuse affected their sexuality and gender identity. It challenged their sense of being adequate as a man, and their ability to have power and control in their relationships.

Unfortunately, men who have experienced child abuse not only have to deal with some of the above problems, but a set of difficulties specifically created by our society's limited gender expectations. These problems often confront and relate to the gender expectations of what a man 'should do or be' in our community puts pressure to "prove" his manhood, and being sexually in control.

All the challenges experienced by the participants were interrelated or connected.

The participants reported problems regulating their feelings, as they experienced a roll-coaster of emotions that moved from explosive outburst of anger, to a pervading sense of fear and sadness sometimes leading to attempts of suicide.

Mathew: *I stole from my parents, took drugs, bunked school, and was always angry. My older [sibling], who was also sexually abused by my father, was also self-destructive. My anger problem became worse – and I used to hit my sister until blood came out.*

Mathew described the behaviours that reflected his inner turmoil, distress, and confusion and became destructive, aggressive, volatile, avenging, hostile, neglectful, rejective, and dismissive.

Khuzwayo: *I believe these experiences killed something in me. I found myself now unable to trust or feel. I remember times hiding in a corner and crying because of these feelings that were inside of me.*

Both Mathew and Khuzwayo experienced an on-going sense of helplessness, hopelessness, despair, shame and guilt, as well as feelings of being completely different from others (Stewart, 2010).

Mathew*: I just had a feeling of "not caring about anything, but wanting to hurt others".*

Mathew felt powerless and out of control and indicated a sense of worthlessness and vulnerability.

Larry: *I did not know it then as I was too young to understand that the deep scars of my own abuse dictated my mind-set and would grow with me in my teens and adulthood.*

Larry and Tom expressed inadequacy, humiliation and loneliness in their lives.

Tom*: I feel like a failure, I have low self-esteem, and am withdrawn. I feel I don't have control over my life*

These thoughts expressed by the participants about the perceived inadequacies lead to suicidal thinking and self-destructive behaviours (Robertiello and Terry, 2007)

Tom experienced the pervading influence of his family in all his circumstances as it affected his personality and relationships.

They experienced low self-esteem, believing that they are not worthy of being loved, wanted, or able to achieve much in life; which put them in a state of never-ending anxiety, fear and uncertainty.

All the participants coped in some maladaptive way with their circumstances, for instance, 75 per cent had problems with substance abuse such as alcohol and or various forms of drugs

Khuzwayo: *My need was becoming more or I was becoming less and less satisfied with what I was getting out of it, because of that I would use more, I would look for more and then it created a downward spiral because I needed the hole more, there was no end to the cycle. There was no way to end it. I just didn't know how to deal with my own pain and so I did drugs and it created its own cycle with the cycle of using, feeling guilt and then using again to cover that pain so it just became a repetitive*

According to Schraufnagela et al, (Schraufnagela, 2010) uncontrollable use of alcohol is common with male survivors of CSA; and had been associated with risky decision-making, risky sexual relationships

Tony: *The only time that I felt good about myself was when I was drunk and drugged. All my fears and doubts would disappear for the moment.*

Deshan and Ronnie also engaged in excessive alcohol consumption and various sexual encounters with prostitutes during their drinking binges.

It was apparent that drugs and, or alcohol provided the purpose of a self-medication mechanism or the function of a coping strategy (Maniglio, 2011)

Deshan, Tom and Khuzwayo had to be admitted into a rehabilitation Centre in order to manage their addictions to substances.

Khuzwayo: *I am learning daily to deal with my substance addiction. But all the while my other addiction tries to remain hidden, only surfacing briefly then hiding. Now that's gone, it's left a gap, I know I need help.*

The substance usage helped deal with or anesthetize their painful feelings and memories, affect (Maniglio, 2011). The participants also looked at engaging in gangs that gave them a sense of identity and supported their addictive lifestyle.

But numbing the pain did not enable functionality in other areas of their life as with their relationships

The participants lacked social skills, which reflected in their difficulty in all their relationships. Their perceptions of how they saw themselves in relation to other people was an important aspect.

Khuzwayo: *Relationship with the opposite sex was non-existent because of the way I saw myself and my self-esteem and my confidence. I could never really get close to the opposite sex. It was hard to with the same sex nevertheless the opposite sex. I could never really get my head around how to bridge that gap so perhaps it was the fear. I never really tried. It makes me feel lousy that I have never had a girlfriend. Never had a sexual relationship. I really want too. It is a greater part of me that wants to be loved and love someone else but there is that part of me that just can't take that step*

The participants felt stigmatized by their victimisation experiences resulting in sexually risky behaviour. The participants felt betrayed as the abuser was also supposed to be a carer and protector and found too difficult to develop trusting relationships with others, which led to a series of brief, sometimes abusive relationships (Briere & Elliott, 2003)

Having been sexually abused over a long period of time, the participants felt a sense of powerlessness continuing into their adult sexual relationships leading to sexually risky behaviour. They believed they needed to "acquiesce to whatever others wanted them to do, sexually" (Senn, Carey, & Vanable, 2008p.729), and lack the behavioural skills necessary to avoid or control risky sexual behaviour (Senn et al., 2008)

The lack of basic social skills inhibits the development of their relationships.

For other participants there was a mixture of promiscuity in their relationships, which was fleeting and unconnected as they were otherwise too afraid of being rejected.

Tony: *When it came to girlfriends. I had a lot of girlfriends. But the longest relationship would last three months. I would be afraid of approaching girls. But if I was drunk I would promise them the moon and the stars. I guess that's why I never had a steady relationship. The only reason why I should be afraid to approach a girl for a relationship was I could not handle rejection.*

The participants appeared to be predominantly social isolates and experienced difficulties in having appropriate relationships, including romantic relationships, which reflected on their intimacy deficits & emotional loneliness (Cortoni, 2012).

The feelings of rejection with the accidental pairing of sex with a child and other sexual learning experiences, can lead to deviance, risk and offending behaviour (Cortoni, 2012).

Tom: *One weekend when I went to my mother's work I saw this woman with dark hair and blue eyes and I liked her immediately. But I did not say anything. Then one day she invited me for coffee and started touching me, I asked her what about her husband she said that they were having problems. She was very demanding and rough and likes to be on top. She wanted sex at least five times a day. We went away for a weekend and she wanted to have sex during the whole weekend.*

The participants were more often attracted to or attracted) dominating, controlling partners, or passive partners (Paul, Catania, Pollack, & Stall, 2001). This is due to their own lack of self- competence, and assertiveness. The lack of social skills, leads to social isolation and perhaps anger arising out of feelings of inadequacy. The participants lacked social skills and this inability to initiate and sustain relationships with partners can lead to anxiety, and anti-social behaviours.

Tom sexualized all his relationships and chose partners that were sexually permissive. But although he was lustful and addicted to sex his greater need was to feel loved, but he did not know how to be loved or express love. .

Tom: *Soon after I met another woman at Point, she was very promiscuous and liked sex, but she was demanding. She loved playing with herself and would phone me and tell me when she was doing it.*

Like Tom, many of the participants who were exposed to intra familial child abusers, their sense of self-worth appeared to be linked to their sexual activity with their partner. If their relationships with their partners were dysfunctional they obtained a sense of power and control only achieved with children. This was a compensatory mechanism directly linked to the offenders' low sense of self-worth. He feels

rejection, inadequacy, anger, humiliation, and loneliness following any relationship conflict.

Khuzwayo: *I bite my nails when I am nervous. I don't have a good image of myself. I don't enjoy who I am. I know my abilities but I can't achieve as I just see what I have done. My relationships with everyone was affected when I was at boarding school, I was reserved, a loner, I relied on myself. I felt scared to expose myself to anyone as I was a composite of what happened to me with my mother rejecting me so I was too scared to trust. I pushed people away, scared to accept people but I want to. Am not sure if I can ever conquer the fear. I have never trusted anyone. I just never feel comfortable, I feel like I am lacking in my identity. Initially I felt not worthy or accepted.*

The adverse experiences affected the participants in their intrapersonal and interpersonal functioning, especially when lacked coping strategies to deal with distress (Maniglio, 2011).

Khuzwayo: *It's still a still a strong emotion that dictates how I relate to people and how people relate to me, my relationships with those around me. There is always that battle to trust the feeling that I'm not lovable, that I'm not worthy of love. So why try to form healthy relationships. The anger at myself eventually turned to self-hatred. I thought I was defective and unlovable. All my relationships became toxic. I needed comfort and approval from friends for me to function. I pushed people away and became more and more isolated. I remember being teased a lot about my looks and my size. I cried a lot, sometimes I remember I couldn't stop crying at all.*

The offenders needed more than to learn to communicate within relationships, but to be empathic and correct their cognitive distortions of relationships.

Sex offenders are deficient in the skills, which leads to challenges in their adult relationships

Tom: *I am an introvert and cannot communicate, I am a loner. I don't have friends, family anyone to talk to. I was only good at work.*

Khuzwayo: *I wasn't able to keep friends for long, so I became distant and a loner. I would spend most of my time alone. Now looking back, I see that I became sexually active too young and learnt to enjoy it. Today I struggle with feelings of inadequacy. I don't like who I am. I seem to be like two people stuck in one body. The abused boy and the man. I wish I wasn't like this. I wish I was normal.*

Jason: *I never got too close to my peers I left inferior because of my past experiences*

Marshall and Barbaree (1990) suggested that negative experiences in childhood, contributed to the development of poor interpersonal relationships in many sexual offenders (Covell & Scalora, 2002).

Khuzwayo: *The one main thing that I have always felt the need for was having that love connection. I never wanted extravagance, it's just something so plain and simple, to be loved and appreciated for whom I am. That's all.*

The current offenders in the study also lived alone or with their parents. This is typical of the case of Tom in the current research; he has sexually abused many of the children in several relationships with his married and unmarried partners. Mathew also sexually abused several children and preferred to remain with his mother. Derek also lived with his parents, after the separation between him and his wife. Deshan preferred to live alone after his divorce. Khuzwayo lived alone, and had minimum contact with his peers and no girlfriend. Tony returned to live with his mother and gave his wife a divorce. Hence many had limited dating relationships as well. They seemed to have given up on relationships with their peers. Deshan is a loner, refuses to reunite with his wife or have any relationship and prefers to live alone, isolated from friends.

Tom and Bungie always married or entered into relationships with women with whom they could have access to children. Their preference was female children under the age of eight years. Several of the partners of the offenders in the current research, refused to engage in sex with the offenders, although they had no knowledge of the sexual offending behaviour.

So what do the participants in this current research indicate of their influences that shaped their sexuality? What were the influences of family, society, media, and friends?

The research depicted that the participants had obtained their influences from a variety of sources independent from their family, as sex issues were not discussed within the family. If the role of the family is to generate morality, then this would be lacking in the psychic of the participants in relation to their sexuality.

Alton*: Sex was never discussed. Initially there was not much discussion re the opposite sex. It was done disparagingly. In my teenage years I heard them having sex once. I never regarded them as sexual beings.*

Alton had similar experiences in his home environment to that experienced by Derek, Roy, and Bungi. The issue of sexuality and of caring sexual relationships was non-existent in the relationship of his parents.

Hence the participants addressed their curiosity by obtaining their own sources of education, as did Bungi.

Bungi: *Sex was not discussed at all, and I got my sex info from the neighbours and porn videos. I also learnt sex on my own since six years, as I played mommy and daddy; boyfriend and girlfriend with my cousins. As a child I was caught for having sex with my cousin, and spoken to by my father but never punished. I also watched dogs having sex and a sex video of my parents.*

The parents of the participants did not impart any information on sex, and they appeared to experience no reprisals for inappropriate behaviour. This is still a common experience in society where education for boys is overlooked. And their engagement in sex is put down to "boys being boys" (Finkelhor, 1984).

With sexual development comes sexual knowledge, beliefs and attitudes which needs to be corrected and informed by sex education, including cultural and traditional values about sexuality, behaviour and boundaries. Unfortunately not only did the participants have their boundaries violated by they were not provided with sexual knowledge by their parents and carers. Sexual education affects and

influenced the way a child develops their sexuality and is influenced by a variety of sources including society (Hyde, 1994)

The sexual victimisation also created some level of confusion for Derek's and Deshan's sexual identify. For instance, having been sexually molested by an older boy in his school had these confusions and challenges, in addition to his wife, refusing to have sex with him. He doubted his ability to be a 'man in bed who can perform', and somewhat had confusions about his sexual identity. Derek had the anxiety that the sexual abuse has caused them to be somewhat 'homosexual' or 'gay'.

Derek: *I wanted to prove that I was normal and not gay because of me having a sexual relationship with another male teenager friend. By me giving him oral sex, it made me feel dirty, gay and too embarrassed to tell anybody. I still have thoughts of him, and I wondered how I will respond sexually when I see him.*

Stereotypical gender roles play a part in non-disclosure.

Ronnie: *I am not sure why, but I use to dress up with my aunt's and sisters bras and panties. It made me feel like this was how I should be, I mean, maybe that's why I was sexually abused. I feel weaker to a woman. My wife just controls me. I cry all the time, like a girl.*

They had to find some rationale about why they were chosen as victims of sexual abuse by another male, and they somewhat believed that they may have possessed some characteristics of a female.

Deshan had other challenges of his sexual identity too.

Deshan: *Without any doubt or hesitation. I want to grow up as a girl and be soft and sensitive. I want a vagina and breasts. I want to dress in soft clothes and be a girl. I want to do ballet and wear makeup. I want to be compassionate and tender. More than anything. More than you know. And would I be attracted to men? I think not. Men appear insensitive and they hide their feelings. A lot of them are repulsive and loud. They do things to prove they are real men. They think because they carry a penis they can do anything. I think I would be a lesbian*

Deshan felt most comfortable being a transvestite and when he divorced his wife he felt at peace and safe to explore his sexuality to dress as a woman. He was a transvestite but was attracted to women.

Although some adult male survivors who are victimized by men may experience sexual identity confusion, some do not. In addition, men expect be in control. This loss of control clashes with the stereotypical notions of masculinity, and boys may tend to blame themselves by thinking that they allowed it to happen. Other people may blame them, too.

The participants also experienced some inconsistency in their performance at school and in their employment. Poor school grades are associated with trauma and sexual abuse.

Roy: *I was a very young age I was put into a Catholic boarding school to standard four. This made me feel rejected and I could not focus on my schoolwork.*

Poor self-esteem affected school performance*.*

Tony: *When I was in high school I use to abscond from school a lot. The result was that my grades dropped. After school I never use to worry about homework I use to worry about drugs.*

Tony also poor self-esteem and his engagement in substance abuse took priority over school.

Khuzwayo: *There is one incident that stands out from one of my first few memories from when I was at school. I think my teacher didn't know how to deal with it. I remember her saying to me one day that I'm not going to amount to anything, I can't remember the exact words but it was to the extent that I'm no good, I will never get anywhere in life, it would be a miracle if I could finish school at all. So that was one of the things that made me think that there was something wrong with me.*

But for Khuzwayo, it was also another adult that reinforced his worthless just as his parents devalued him

Mathew: *I got involved with the wrong company and I was so affected by my problems that I think maybe that's why I went to a special school.*

Ronnie: *At school I was average and felt that there was something wrong with my brain as I could not remember things that I would learn. I got lots of hidings for cheating in tests. Also now I can't think properly and I feel everyone is better than me.*

Tom: *We started a new school and I was always in trouble and got detention.*

Pornography: "On the Internet, you can pick up just about anything you want"

"Pornography provides what those who consume it want."

 (O'Toole, and Schiffman, 1997, p.393)

All of the participants in the study commenced watching pornography from an early age, some as early as eight or nine years and this pattern of behaviour continued. Ten of the 12 offenders were chronic abusers. The participants also chose to watch child pornography. One offender claimed that he found child pornography more addictive than drugs, as he was able to rehabilitate from his drug addiction but could discontinue viewing child pornography.

Khuzwayo: *Even though I am five years clean of drugs and I know that I can never use it again but I am not sure about pornography, as it also allowed me to escape from the past. I feel stuck in the past and part of me has not grown up.*

There appears to be a clear relationship between the watching of child pornography and the commission of sexual acts against children in this study but also in the statistics cited globally. Cases of child pornography accounted for almost 82 per cent of the escalation in child sexual cases from 1994 to 2006 in the United States (Motivans, Kyckelhahn, 2009; Wolak, Finkelhor, Mitchell, 2009).

Bungi's experiences of pornography commenced at eight years, as he watched a video of his parents having sex, and he continued watching pornography including child pornography into his adult years. He also watched pornography before and

during the incidents of abusing children. The participants appeared to have easy access to pornography even as children, as indicated by Khuzwayo.

Khuzwayo: *I started watching porn from a young age from my primary school, and it hooked me straight away. My problem started at boarding school and because of my own sexual abuse experiences, I became sexually active. I was introduced to pornography at the boarding school and it became a bigger problem when I went to a high school, as porno movies were easily available.*

The participants in the study were exposed to various types and forms of pornography; adult and child and in electronic, print and web-based formats.

Derek: *As a young adult in the army I saw a movie with animals and humans having sex. I then read Scope magazines and Playboy. I obtained videos and I used to also watch the sex movies on e-TV. I initially watched nude women on the Internet at work, and later watched incest between family members, which I enjoyed.*

The participants progressively increased the amount of usage of pornography, moving from adult to child pornography

Khuzwayo: *There was a progression of what and the type of pornography I watched over the years. I started with normal porno but it was not enough I needed more. I started with naked females, and then couples having sex then multiple partners having sex. I initially liked watching women that were attractive, moving to erotic, and all forms of sex. Then it became more degrading porn, more intense but not violent. The pornography started to include younger participants.*

The participants also indicated easy access to the various forms of pornography, which incited their deviant fantasies

Ronnie: *On the Internet, you can pick up just about anything you want, and I started watching teen porn – and I felt like doing it to them.*

It seemed that watching pornography fulfilled various purposes some related to their own victimisation, for others it was a form of escape, others it was a temporary fulfilment of a need.

Ronnie: *I have pictures in my mind of the past that haunt me, porn helps relieve my mind of the abuse.*

It appeared that for Khuzwayo, he had more than a need to satisfy his curiosity, but a sexual preference for boy children between 9-11 years, and a means to satisfy his sexually deviant urges. But he had indicated that he felt stuck at the time of the abuse and this could have been a time of obtaining the only physical relief and not seen as exploitative. He was socially isolated and had difficulties in his interpersonal relationships.

Khuzwayo*: For the last seven years, I watched porn of boys between the ages of nine to 11 years because I wanted to relive and rethink what happened to me, when I was sexually abused at the age of 11 years. When I watched the porn it was like reliving my entire experience at boarding school. In the porn they boys are naked and usually masturbation takes place. I download it off the net and watch it at night. Before I watch I feel lonely, but planning to get the porn makes me feel a rush of adrenalin, and I look forward to it, and as I watch it I become aroused. It reminds me of my own abuse as a boy and the feelings I felt then. I wanted to feel powerful and in control. But when I am done I feel empty and ashamed. It didn't make me feel the way I wanted it to. I felt betrayed by the porn for not giving me what I wanted. I found that experience at boarding school unacceptable but I felt guilt too.*

Various research studies indicate that various factors such as early sexualisation, attachment problems, neuropsychological functioning problems, as well as loneliness, dis-inhibition, distorted cognitions, together with the privacy, anonymity and accessibility of child pornography encouraged usage of child pornography, especially if justified and motivated by other users. With regular usage, the individual becomes more entrapped to pornography and skilled to avoid detection (Seto and Eke, 2005; Taylor and Quayle, 2003).

Tom created various homemade DVDs of his child victims, which were confiscated and used to convict him. It could not be confirmed, however, if he had created the DVDs for distribution. His explanations for the production was:

Tom: *I decided to make a tape of me and the daughter having sex. The tape kept me from sexually abusing her and when the images got really bad I would just watch the tape until the images went away.*

Some offenders indicate that the use of the pornography fulfilled a need, others indicated that it incited their offending behaviour. It is reported that some offenders may lead to the commission of offences but other researchers indicate that offenders don't progress from the use of child pornography to abusing a child. Sullivan and Beech (2003) argued that "viewing child abuse images antecedes the desire to resort to physically offending against a child so, pornography could escalate to the commission of a contact sex offence through the process of pairing images with fantasy, masturbation and cognitive distortions" (p. 52). Other researchers disagree, and indicate this may or not, escalate to actual contact offending (Seto and Eke, 2005; Taylor and Quayle, 2003). The results of this and a previous local study (Naidoo and Sewpaul, 2014) support the view that watching pornography seems to serve as a precursor to sexually offending behaviour.

Derek: *I've never wanted to abuse a child, but it's the thoughts that come to me that scare me – picturing a child naked more so on a computer screen than in real life. That's the reason I began to look at pornography at a young age. It became an outlet for all my frustration. It didn't take long for it to become an addiction. Soon that's all I could think about. From adult porno to child porn, became known to me. So I spent all my time searching for child porn. At the time I didn't care if it was illegal. I just had to have it.*

Pornography not only destroys the lives of children but also harms the users. It is apparent from the participants the use of pornography becomes an insatiable obsession, it shaped their perceptions, relationships and interaction. Pornography also hurts men's ability to relate to women as in the case of Tom, as his long history of exposure to pornography led him to treat women as non-human, objects for sexual use, which ultimately robbed him of the ability to develop meaningful relationships with them, leading him to feel more alienated and alone, an issue discussed by O'Toole and Schiffman (1997).

Tom: *I watch porn and other sexual material. This has made me focus on just having sex with my partners not having relationships of love.*

Continuous exposure to child pornography also led to distorting Khuzwayo's perceptions facilitating him to feel less guilty.

Khuzwayo: *My intense guilt of watching pornography disappeared with time, and it became easier to watch and indulge. The more I saw, the greater was my need to have more; it became addictive like drug dependency. But it was worse. It was on my mind all the time; I could not stop thinking of it. The sexual aspect of me was uncontrollable, I was hungry and needed to meet my need and it was worse than alcohol, I should know, as I am a substance abuser too, but it's no comparison. It was a burning compulsion and I could not constrain it or restrict it, as I looked at every opportunity and I wanted it all the time. I am addicted to sex. Not so much the act but the thought of it.*

Eight of the twelve participants watched and downloaded child pornographic material and one participant created child pornography and invited the children to watch it. But all of the offenders watched pornography, in different forms and content, on the Internet, photographs, magazines, and videos. Some of the participants intended on watching adult pornography but stumbled on child pornography and as indicated by Ronnie "*you can access any material on the net*". One participant in accessing child pornography related to incest, planned and sexually abused his daughter. Four of the participants reported the addictive nature of pornography. The frequency and type of pornography used depended on the participant, as the pornography was used for purposes of releasing internal pressures or urges. The Internet has certainly made it easy to obtain pornographic material, including child pornography. However, behind every picture is a real victim of severe acts of child abuse, and these images and videos exist because of that atrocious act, worldwide. In South Africa, the Films and Publications Amendment Act (Act No. 3 of 2009) allows for the conviction of these crimes, but they are not easy to detect and sentencing does not appear to be stringent. One of the participants was simply warned not to continue watching child pornography by the South African Police. In my attendance at several conferences with Microsoft and the Films and Publications Board, the discourse was that it was impossible to detect usage of child pornography on the Internet.

Whereas all persons watching pornography may not be predisposed to offending against children, but the concern does exist of the influence that it does have on those minority who do watch it and become child sex offenders, as in the current study and many others. Hence pornography does have pragmatic implications for child protection and policy decisions. A further discussion on pornography is explored in the literature review.

Motivation for the offending behaviour

How did the participants prepare for the sexual abuse of children? It is essential to understand the motivation for the current participants offending behaviour, why would they commit such horrendous sexual crimes against children. They knew that the abuse was wrong and that it was a crime, they knew that the abuse was damaging to the child, yet it continued. What are the explanations for the commission of this offensive behaviour?

It is essential to understand the motivation for the offending behaviour in order to address the underlying factors to address the prevention of sexual offences against children

Immediately prior to the sexual abuse of the children, the participants indicted that they used drugs or alcohol, pornography, and fantasies to disinhibit themselves from committing the offending behaviour. The offenders also had a life history of negative experiences, which impacted on their lives as indicated in the previous discussions. Elliott, Browne, Kilcoyne (1995) indicated that stress related to all life circumstances including psychological problems can be a precipitant to the sexual offending behaviour.

During the course of the treatment process, the participants were more clearly able to determine some of the reasons that may have motivated the offensive behaviour. They cited the existence of repetitive fantasies. Preoccupation with deviant fantasies can increase the risk of the occurrence of sexual offending behaviour (Gee, Devilly, Ward, 2004).

Tom had been sexually abused by his father, and continued to experience post-traumatic stress disorder with a typical symptom of flashbacks. Whenever Tom experienced rejection by his adult female partners, he sexually abused children to alleviate the images that plagued his life, and it temporarily made him feel empowered and in control.

Tom: *My girlfriend said that she does not want to have sex with me anymore. This was the time that the images started – I saw this figure lying on top of me rubbing his genitals on me and I felt so bad. I had to get rid of this disgusting feeling I was getting. I took her 5-year-old daughter and lay on top of her and rubbed myself until I came. I was so angry and disgusted with myself. This was the start of the many incidents of rape of children.*

Tom experienced painful flashbacks of his own sexual abuse, whenever he felt rejected, disempowered or inadequate. He had feelings of powerless and helplessness that were temporarily alleviated by the sexual abuse of his stepdaughter and other children of his many partners. The sexual abuse of little children gave him a sense of empowerment to cope with his situation. According to Maniglio (2011) a combination of negative symptoms, memories, inadequate coping skills, and deviant sexual fantasies, might lead one to enact a fantasy.

Tom: *"I was transferring the guilt and anger of my abuse on someone else. The visions of the abuse were driving me to this. The abuse was giving me relief from the anxiety. It took away the anxiety, frustration, pain, anger from my abuse and gave me a sense of relief. The anger and anxiety went away. It made me feel like I had more control over my life. When things started to go wrong, the self-loathing comes back. I was getting these visions of someone lying on top of me and abusing me. I started abusing my stepdaughter. The shame I felt was overwhelming but I had to keep it in I could not share it with someone. I did not want to but I relived the pain and the resentment I felt. I know that I should have stopped. But I at that stage my mind was playing games with me. It was a relief. I started this behaviour many years ago, it started when my relationships were not going well. I felt inadequate and started getting images of being abused. In the beginning it thought it was normal behaviour that everybody did. People in my family did it and friend's family did it to me. I didn't do it out of pleasure I did it as an escape from the things I was angry about to ease the pain*

and disappointment I felt. It stopped when my relationships were going well. It started just with touching in the beginning, but when my marriage was going bad, I started having sex with my 13-year-old stepdaughter. That felt more like a stable relationship more than anything I have felt. That is the only time of the years of abuse that I got pleasure and excitement of the abuse."

The availability of a victim, poor impulse control, such as anger, alcohol and drug abuse, stress, may propel the need to offend (Finkelhor 1994).

Tom attempted to re-enact the situation experienced with his father whenever he experienced this state of rejection.

Tom: *We were married for six months and then she told me she did not like sex- and we stopped. The images of my father sexually abusing me started again and I started abusing her seven-year-old daughter I felt disgusted with myself and angry but could not do anything as the images were getting more frequent. I felt so bad I started working longer and longer hours so that I would not abuse her daughter. I could not avoid abusing her daughter.*

Tom lacked the ability to cope with his circumstances in a pro-social way and restaged the abuse with a new victim.

Other participants discussed the impact of fantasies on their offending behaviour. Derek fostered sexual fantasies of his preadolescent sister in his adolescent years, and planned and orchestrated the abuse of his daughter subsequently, when she turned preadolescent. He vividly described his fantasies and abuse of his sister. These sexual fantasies precipitated incidents of sexual victimization, which was also carefully planned and acted on.

Derek: *I would play chess, cards, monopoly etc. with my sister for hours and she would wear see-through panties with her pyjama top and I would get aroused by looking at her visible pubic hair inside her panties and I got fantasies. I wanted to feel her pubic hair and planned to do this while she was sleeping. I would wait until everybody was asleep in the house then I would check that my sister was sleeping and go in her bedroom and feel her pubic hair under her panties as it would turn me*

on and make me sexually exited and gave me an erection and thereafter I would go and masturbate in my own room to satisfy myself. I did this a few times over a two to three year period. My sister woke up on a few occasions but she did not say anything.

The normal reaction for a child is, to feign sleep, to shift position and to pull up the covers. Derek's daughter as with other children, simply do not respond with force to deal with an overwhelming threat, they try to hide, and cope silently with terrors in the night- even if that monster is daddy.

Bungie indicated that his deviant fantasies exerted an influence on his *modus operandi* of sexual offending.

Bungie*: It started with a vision of kissing. I was alone with her, my vision led to a fantasy of being naked together, lust, then the art of pleasure and the fulfilment of that pleasure. I just could not control these fantasies. I convinced myself it was okay – as the child would not risk losing me as a father, no-one was there and that child wouldn't understand why and what was happening. I was aroused and I wanted to feel, touch and see a vagina – and feel bare skin. I felt a sleeping child would not realize what's wrong. During the incident, whilst touching and rubbing their vaginas was like seeing a grown-up but shaven, which was stimulating enough for me to gratify myself. I was so aroused I didn't even think that this person was my child, but just a naked female to please my needs. After that – once I gratified myself I did a reality check of what I saw – It was my own kids! I felt relieved and angry with myself at the same time. I also wanted to let them experience some pleasure and I didn't know better that they would be too young to understand as an adult would. I had the curiosity to teach a child about sex. To find out if a child when touched would have the same feelings as an adult and respond in that situation. At that time I thought nothing of sexually abusing them as I was only caressing them sexually "so I didn't hurt them". I thought they would enjoy it and didn't think they would tell on me as I was their dad and they loved me.*

The role of fantasy and opportunity were significant attributes to the offending behaviour in the case of Bungi.

Ronnie: *I would fantasize about being touched and I would masturbate to these thoughts. I would fantasize about her touching me in an innocent way. I would think of a way to get her to do more. I saw myself in her. I saw her as being very sexual. I would fantasize about her touching me. I wanted to have sex with her but knew there was no way that could happen. It's rape.*

Making a seemingly logical decision to take care of a child can trigger off the offending behaviour according to Ward and Hudson (2000). Ward and Hudson argued that due to the poor regulatory control of an offender, that even a child's touch or smile can trigger an "offense-script and the fantasy unfolds into reality" (2000, p.71). The role of opportunity is also emphasized in its role in the offending behaviour (Richard, 2011; Wortley and Smallbone, 2006; Naidoo & Sewpaul, 2014).

Beech and Ward (2004) also asserted that deviant fantasizing sets in motion the orchestrated set of events leading to the sexual offending behaviour as in the case of Mathew and Ronnie.

Mathew: *I met a friend and his 3-year-old boy. They would visit me and would leave their son for us to care for. When I was at my friend's house, this child would ask me to read stories to him in the room and play games with him. So I did. But I would fantasize about this boy. On one day I was going to leave the room and this child said no I must stay so I stayed. The next day as well I wanted to leave the room and he said no- and I said "okay only if you show me your winky" and he did. I did this a few times until one day I asked him if he trusted me and he said he did and I asked him to close his eyes and I sucked his winky. Then I asked him to do the same to me and he did.*

In therapy with the participants, the researcher equipped them with a strategy called relapse prevention plan that allowed them to avoid or escape the vulnerable situations that enabled their fantasies (Sheldon, 2011). This was role-played repeatedly.

Derek had deviant fantasies of his younger sister, which he did not activate, but which never subsided. Perhaps, as indicated by Sheldon (2011) some cues were lacking. He eventually enacted these sexual fantasies by sexually abusing his

daughter in her early entry into her pubertal years. His preference remained girls in their early pubertal years.

Derek: *When my daughter started puberty she became my 'sister' in my 'nocturnal emission'. It started out as a fantasy, and then progressed to sexual activity.*

Derek's deviant sexual fantasies paved the way for future sexual offending behaviour

Sexual fantasy on its own is not likely to motivate sexual offending behaviour, but it will react with a combination of factors, cues, motivation and particular disposition of the person (Hudson and Ward 2000; Langton & Marshall, 2001; Ward, Hudson, & Keenan, 1998). Gee, Ward, and Eccleston (2003) noted that sexual fantasies can serve various needs such as "regulate affect, enhance or induce sexual arousal," assisting in coping, and "re-live an offense or simulate a future offense" (p.45).

Alcohol played a disinhibiting role in the lives of the participants.

Derek: *Before the abuse, alcohol always seemed to trigger my fantasies. My fantasies remained constant and were focused on my first nocturnal emissions. My victim would be awake most of the time, in her room or watching TV. And my wife would be sleeping or watching TV. I would enter the victim's room and ask her if she was horny, or did she want to be naughty. My fantasy would be constant as before I would stimulate via oral sex and masturbation. I would enquire if she was happy or aroused and climaxed. Once she had climaxed I would then ask her to masturbate me. The level of intimacy was intense and frail. There were very few positives surrounding the relationship and it should have been concluded in matric, or before.*

Derek had a motivating context to enact his abusive behaviour, as he sought revenge against his wife, *"I wondered to myself how much of my actions were perpetuated by anger and hate for the pain that my wife put me through."* He believed that his daughter was conceived in an extramarital relationship, which could have served as a trigger to the sexual offending. This is consistent with the etiological model of risk proposed by Beech and Ward (2004).

For many of the participants, it appeared that their adolescent experiences were formative of their sexual experiences. The participant's deviant sexual fantasies also consisted of distorted cognitions of the sexual development of little children.

Whether a person has a normal or deviant sexual desire or craves a sexual activity, they are sexually aroused and seek to feed their interest, even though it is deviant and involves children (Toledano & Pfaus, 2006; Rempel & Serafini, 1995). Tony aptly describes this rationale.

Tony: *I use to watch her bathing as the door was left open so I looked a lot for two years. I watched her as she wiped her naked body and put lotion on it. And I got really aroused. And I wanted to see what it would be like to touch her.*

The participants cited other reasons for the motivation of the abuse of children.

Tony: *What made me to do it? I felt that my stepdaughter didn't love me and felt that molesting her was a way of showing her deeper love. I thought that was a way of expressing love.*

Stress was also cited as one of the reasons for offenders sexually abusing children.

Tom: *At the time of offending, I experienced family problems, exposure to alcoholism, my mother was going through a divorce, I had financial problems, communication, and death of stepfather of 20 years. I felt vulnerable; felt I could not please my partner sexually. My wife had an affair and she seldom slept with me. I felt embarrassed. I was exposed too early to sex and it became uncontrollable – I need sex at least six times a week in my present relationship; if don't get enough I have affairs to fulfil my needs – it's like an addiction like alcoholism. I could manipulate them – I was this strong figure, step dad and in control. I used love- that I loved her mother and her.*

Conclusion

Various factors motivated the sexual offending behaviour and one factor cannot be identified in isolation, but whether the behaviour was driven by social factors, fantasies, stress, opportunity and/or disposition, the importance of agency in sexual offending must be considered. Various theories leading to offending behaviour have

been presented in this section. Critical theory confirms the need for the practitioner to have an understanding of how child protection expresses the "dynamic interactions within social systems and how these play out for individuals within the context of established patterns of human growth and development" (Corby, 2000, p.31). To understand child abuse, Corby (2000) has suggested three perspectives. One dealing with the psychological qualities of individuals who abuse; the second focusing on the interaction patterns between the abuser, child and context and the third focusing on the social and political conditions that create the potential for child abuse.

There needs to be an integrated approach in accepting the contributions of all theories to understanding child protection, such as theories associated with genes, concerns with patriarchy, attachment and relationships, intra- and interpersonal dynamics, structures and relations of power and so on. A fuller picture ensures that no one is reduced to a label of, victim or villain of child abuse (Adams, Dominelli and Payne, 2002, p.3).

Critical Theory (CT) furthermore discourages individual limitations and beliefs but "advocates for human emancipation and the reduction of viewing oneself as a victim" – as it limit ones potential and development (Philip, 1991, p.21).

In summary, it is important to appreciate that these issues are very complex, and associated with how abuse and neglect can, depending on a variety of other factors, both internal and in the structural societal system affect various aspects of a person's life.

In this chapter, I described the various experiences of the participants in their childhood, such as domestic violence and conflict, but also the physical, sexual and emotional abuse experienced by the participants. I further illustrated the impact of these childhood traumas on the participants in the study. Factors that influenced and motivated their sexual abuse behaviour was also indicated such as fantasies, pornography

The subsequent chapter provides an illustration of the strategies and mindset of the current participants in the study, in planning and conducting the offending incidents.

Chapter Six: Strategies and mind-set: understanding the offensive behaviour

This chapter presents the strategies and mind set of the offender, which is the focus of the study. The strategies are presented to explore its potential for the prevention of the sexual abuse of children. The aim of this section is to: deconstruct the strategies of the offender and examine their actual role in the onset of the sexually offending behaviour against children; and draw out the implications of these complexities for policy and practice, particularly in terms of the prevention of the sexual abuse of children. The strategies of the offender in abusing children are detailed in the literature review.

Adults and children occupy different social roles. Children are dependent on adults for their daily provisions related to care, intimacy, protection, supervision, control, discipline, and values. It is within this context that adults distort their role of carer, nurturer, and educator and create opportunities to abuse children (Young, 1997). This distortion of roles was revealed by the expressions of the participants in the current research.

Jason: *It is very easy for a father to abuse his own children because there are many opportunities and you could manipulate your own children with your power, authority, instructions to keep secrets and so on.*

The various participants developed their own "modus operandi" to ensure their child victims involvement and cooperation in the sexual abuse act which will be discussed later (Leclerc, Proulx, Lussier, Allaire, 2009, p.598). The grooming behaviour presented by the abuser establishes a bond between the abuser and victim.

The participants used the process of grooming to create opportunities to abuse children, as grooming lowers sexual inhibitions, and creates an atmosphere of normalization and acceptance to sexual activities introduced by offenders (Leclerc, Proulx, Lussier, Allaire, 2009). Deshan indicated that a child is totally subject to the control, manipulation, authority of an offender, especially a trusted person like a parent, and hence cannot fend off the sexual advances. He commented on the offender's determination to succeed in committing the sexual abuse.

"Once an abuser has set out to abuse a child, that child has no chance of getting out of that situation."

The grooming process entails a number of stages, defined differently by various researchers. Minnie (2009) indicated an initial phase of identifying and selecting the victim, followed by a process of gaining access to the child and then building a relationship to obtain compliance by the victim, which eventuates in the sexual abuse of the child. The final phase may include various techniques used by the abuser to ensure the child's secrecy of the abuse. These phases are not always distinct, or time bound and varies from victim to victim depending on the type of relationship shared with the victim.

Offenders use this process of grooming so that they don't get caught out and want to most probably have the opportunity to continue to have access to the victim, to continue the abuse. Hence preventing the exposure of the illegal behaviour is of priority. In order to conceal the abusive behaviour, Deshan manipulated and groomed his wife, educators and a psychologist into believing that he was not responsible for the abuse, when his stepdaughter exposed him. Deshan indicated:

"My stepdaughter was saying that it was me that I was abusing her, but I always got to convince everyone that I was the caring parent and that I wanted to get to the bottom of the problem."

In the current research the most common context for the abuse was the home, as the offenders in the current study sexually abused their victims in the home environment. But abuse can take place in many contexts.

Identifying and selecting the child victim

The offenders in the study used their circumstances and particular positions to gain access to children ensuring their trust, by luring and controlling their victims. Mathew was the reliable, affectionate, entertaining babysitter for neighbours, family, and friends, for children between 5-6 years. He played fun-filled, play games with children. Mathew could identify with children. In fact his relationship with children was more successful than with adults. This provided him with self-confidence but he

soon realized that children could be easily manipulated, controlled and used to provide him with sexually gratification that was lacking in his adult relationships.

Offenders like Mathew who prefer younger child victims tend to first develop a relationship with parents. Mathew used techniques of fun, games, and play to manipulate the children into sex. In the following case Mathew was entrusted to babysit a little girl. All his victims were between the ages of four to eight years, both male and female, but most commonly male. He sexually abused his male victims in the very same manner that he was sexually abused.

Mathew: *My mum invited a friend over with a little girl who I took into my room to read a story to. We lay on the bed and as I read her the story I took my penis out of my pants. She asked me what it was and I told her that it was my penis and that she could touch it if she wanted to. She touched it and I asked her if I could see her fanny and pointed to her vagina. She pulled her pants down and I rubbed her vagina. Then I heard my mum coming so I told her to pull up her pants and I did the same. When my mum entered the room, I told her that I was reading a story. This was the first time I abused a kid and I could not believe how easy it was.*

The above victim was one of five who were subsequently sexually abused by Mathew. Mathew reached his first discovery of how easy it was to seduce and sexually abuse little children. He took advantage of their sexual curiosity and need for attention (Groth, 1979; McAlinden, 2013). This child, and no child, is prepared for the possibility of sexual abuse by a trusted adult assigned to babysit her, she was therefore, entirely dependent on Mathew for whatever explanation he provided for the sexual activity. And the impression created was, that this was a secret not to be shared with other adults. A secret is self-serving and protective of an abuser (Summit, 1983). Mathew had been spurned and embarrassed by several of his girlfriends, and perhaps due to his poor adult social relationships, felt more comfortable in relationships with children who are easy, innocent, powerless, submissive, passive, dependent, less threatening (Groth, 1983; Robertiello and Terry, 2007).

Tom: *When my girlfriend started having an affair, I felt so hurt, that I turned to her child to help me with my feelings.*

When Tom was betrayed by his girlfriend – which occurred in several of his relationships – he too, turned to his stepdaughter for affection and sexual gratification.

Other participants showed an interest in single, female parents, who had minor children. Tom always chose partners who had female children below the age of 10 years, and because of his expressed interest in caring for the children, their mothers left them unsupervised in his care. This also indicates the vulnerability of single mothers who need additional assistance including structural support. Bungie also engaged in two different relationships with single mothers who had minor female children. He sexually abused two children from each of these homes, as well as his own biological daughter. Tony and Ronnie had initiated grooming of their stepdaughters prior to marrying their mothers, so it is not certain whether they chose these relationships to have access to the children or the context provided an opportunity to abuse the children. The circumstances of the families were similar as the children were vulnerable, having been in difficult families, abandoned or rejected by their fathers, unsupervised as their mothers were employed. Their new fathers appeared to be the rescuers who filled the emptiness and the gap of taking responsibility for caring and attending to the children's activities. The children, in some instances became the substitute sexual partners, as Ronnie was unwilling to have sex with his wife because '*she was too fat*', and Tom felt spurned by his partners' sexual affairs outside of the relationship, which justified and motivated his sexual abuse of the stepchildren. Tony ensured total care for his stepdaughter, as his wife was too preoccupied with their new-born baby and Tony undertook to supervise the bathing, dressing and sleep time activities.

"I would be in the bedroom when my stepdaughter came out of the bathroom to change. I would watch her daily as she lotioned herself, and check if she did it right. I would be at home after work and my wife would be busy cooking and attending to the baby".

Tony and the other participants Tom, Deshan, Ronnie, Roy, used the pretext of routine activities to groom and confuse their children into compliance to abusive activities. Their victims as well as the others did not know any better and accepted their fathers and stepfathers involvement as it was approved or sanctioned by their

mothers. The victims developed a dependency on the abusers who cared for them, gave them attention, nurturance. Tony used this context to foster and act on his deviant fantasies of his stepdaughter and strategized the abusive acts (Leclerc, Proulx, Lussier, Allaire, 2009).

Tony was very aware of her curiosity, and used this to manipulate the victim.

"The sexual abuse in any way, started before I can marry my wife. Once we were playing in the lounge; I was swinging her on my arms and we were playing a little rough. I told her to stop playing rough and asked her 'are you a boy or a girl – stop playing rough'. When her mum left the lounge she asked me if I want to see if she was a boy or a girl. I kept quiet. Then nothing happened for about six months. My girlfriend use to visit me when I was single at my mum's house. We use to lie on my bed with the victim in the same room. My girlfriend used to play with my private part under the blanket. Our relationship was very sexual. The victim must have seen us do that about 10 times before we married. This can be confirmed with my own mother. There were times when my mum use to tell the victim to even stop peeping through the window of my room. When we married, my stepdaughter of six years, used to sleep with us. And whenever we had sex my stepdaughter use to watch or remain awake or be restless."

He observed the child's interest and curiosity when he and his girlfriend were intimate under the blanket. So the marriage appeared to provide a further opportunity to obtain more access to his five-year-old stepdaughter.

Tom also assumed responsibility for the care of his girlfriend's children.

Tom: *I took care of the child, while her mother went out dancing and playing tennis. There was no one else. I did not complain.*

The participants all were well placed to supervise the care of the children and used those opportunities to further their schemes of abuse. Ronnie also indicated that it was unfair that his wife was always sleeping and he was charged with the care of the child.

Ronnie: *I would watch her when she was bathing and told her to put soap on her fanny- and would scold and show her what to do – so that I had the opportunity to watch and touch her.*

The grooming or seduction process can vary from a few minutes to even years. The participants appeared to be more willing to ensure that they got the scheme right so that they were not detected. Some abusers may start grooming a potential victim way before the child has reached the actual age preference (Lanning, 2010; McAlinden, 2013).

The participants in the study also appeared to have a particular preference for certain victims. Tom chose victims between 6-8 years, and Mathew chose victims between 4-to six years. Derek also indicated a victim preference.

Derek: *My victim preference is mainly girls, maybe boys at times starting puberty between the ages of 9-13 years but could be younger or older depending on opportunities.*

Abusers do not always focus on the age of a child, but the physical appearance of how old a child looked and presented is more important than the actual chronological age, as a 12 year-old child who looks and acts like a seven-year-old child could be a potential victim for an abuser preferring six to eight year olds (Lanning, 2010).

If the process of selection is so structured, the process of building a relationship to abuse a child is an equally intensive process. The various stages are presented however the abusive incidents cannot be separated in new categories as abuse is time-bound with discrete and separate stages or phases.

The relationship-forming stage: the friendship

In the following case Derek's wife was treated for major depression and was hospitalized on several occasions and she withdrew from family activities. Derek used his opportunity alone with the children to groom them by giving them more attention, affection and gifts. This is a common strategy used by abusers as all children want acceptance, attention – this earns their trust (Smallbone and Wortley, 2001).

Derek: *I abused my daughter by confusing her, showing her I cared more than her mother did. She did not know whether the sexual abuse was right or wrong. She had some doubt in her mind and I took advantage of the situation and created many opportunities to abuse her alone without the rest of the family knowing.*

Derek groomed his children before he sexually abused them, moving from a continuum of normal activities to deviant activities with them. This normalization of the inappropriate activities gains the child's cooperation and concession and prevents the child from disclosing the abuse since it is not understood as different or unacceptable. The participants distorted cognitions always them to believe that children enjoy the sexual activity with them.

Larry used Chinese books to educate his children on sexual practices, indicating that the Chinese bathe together so it was normal for them as a family to conduct these activities too. He also used animal books of mating to normalize sexual activities together. When testifying against him in court the children told their father: *"We are not animals, you compared us to animals".* He also exposed the children to pornography in the process of sexualising and establishing their compliance. He moved his interactions along a continuum of non-sexual to sexual activities, from stories to real situations. According to Larry, *My first wife and I were jointly involved in the sexual abuse of all our children. We started off by giving body massages to each other, in the nude.*

According to Larry, the whole family bathed together and the couple masturbated the children and they also went on nudist outings.

The participant's strategies with their victims also included gifts to form emotional bonds to gain the cooperation of children as described by Jason.

"After being in therapy, I can be honest and say that I enticed the victims with money, sweets, affection, sweet talks. We did stuff together like talking, playing card games and advising about problems. These acts progressed from touching their breasts to their private parts and oral sex. When I abused them I tried to achieve some sort of satisfaction thinking that the victims will not tell because I was so good to them."

Tony also used a similar strategy of enticing his victims to obtain their cooperation and then making them feel entrapped.

Tony: *I tried buying her stuff so that she owed me favours, sexual favours. I was curious to know what it would feel like teaching her about sex.*

The abusers in the current cases, were not just any men, but the fathers and step-fathers of the victims. Children may be given permission to avoid the dangers presented by strangers, but they are required to be obedient and affectionate with their father figures. Importantly, however, is that the wordless action or gesture of a parent/abuser to keep a secret is an absolutely compelling force for a child and the threat of loss of love or loss of family security is more frightening to the child than any threat of violence (Summit, 1983).

Manipulation did increase the possibility of them participating in the sexual activities and various studies support this (Leclerc, Proulx, Lussier, Allaire, 2009). The participants also groomed them by exposing or allowing them to see pornography to desensitize, as did Tom.

"I invited my girlfriend's 8-year-old nephew Joel, to stay over as his parents were alcoholics and neglected the child. I would shower with my victim, and leave the door open for Joel to be tempted to enter. He was curious by our laughter and would come into the ensuite *without knocking. I scolded him, but gradually invited him to join us in the shower. I had a camera posted over the shower and I would show the children the videos of our activities of fondling each other, oral sex and masturbating."*

The participants used pornography to lower inhibitions and others also used sexual jokes as did Derek, with his son. This is all part of the seduction process.

Derek: *I planned that my wife and daughter were not in the bathroom or in the car when I was alone with my son so that they would not know that I was joking in a sexual manner with my son. I used various moments to manipulate my children. For instance, one morning my daughter asked me to buy a new cellphone for her. I promised to buy her a cellphone and she got extremely excited and happy and I felt that she would allow anything.*

Mathew used various games to disarm and lower the children's inhibitions and resistance. He used the pretence of educating them, tickling games, wrestling, playing hide-and-seek, games involving being in the nude in the dark and so on.

Hence in such an atmosphere of normality, children do not doubt the activities. And even if they did resist or question the activities the participants just ensured that they were convinced into compliance.

Derek: *My daughter spent a lot of time alone with me over the years and I felt that she trusted me fully as her father to protect her and that I would not do anything wrong to harm her. My daughter saw me as a role- model; she looked up to me as her parent because I was supposed to offer her security. She loved me as a parent and would kiss me when she was small and growing up. She also did not tell my wife or anybody else about me touching her private parts. It became a game to me and a habit and I touched her on various occasions.*

How is it – in the above very typical case of abuse that the abuse can take place in the 'almost' presence of the mother and not be detected? And how is it that the abuser can take such control of the relationship with the child, and the child does not disclose.

Tony: *When my wife used to go to the kitchen or toilet, I would get my stepdaughter to play with my private part.*

In the above case the child was four years when the grooming took place and the sexual abuse incidents occurred over a four to five year period. The negative sequel on the child was far-reaching, as she attempted suicide on several occasions during her preadolescent and adolescent years, and regardless of the matter being ultimately reported to the police, the mother chose to stay with the abuser. This is the power of manipulation and deception of an offender and control of men in patriarchal dominated society.

The molestation stage

Initially when the various participants entered the therapeutic process they were not always able to clearly identify or aptly describe their strategies. The details of their cleverly planned seduction unfolded within the therapeutic relationship, when the

participants felt safe and they were able to introspect and define their mind-set and distortions. None of them used physical force or coercion in the sexual abuse of their victims. Others were afraid of being prosecuted but the safety and support of the group enabled many to be open and receptive to developing insight and to manage their behaviour.

Mathew made much progress in establishing a pattern to his offending behaviour.

Mathew: *When my five-year-old nephew came for a holiday, I sexually abused him several times. The first time I got him to sit on my lap and I put a blanket over us and put my hand on his pants and rubbed him until he was hard and then stroked him until his body stiffened. He did not fight this. A few days later I waited until he was sleeping and I offered to tuck him into bed and I would then pretend to go to the toilet. I would then sneak back to his room and then while he was sleeping, rub him until he was hard and then suck him. I did this many times over that period. The following year my sister and nephew returned for a holiday and I sexually abused my nephew several times until he told my sister. My sister and I sat down and talked about it and I promised to get help. Then a few months later they returned for a holiday and I sexually abused him again in the middle of the night when everyone was sleeping. I would sometimes take him for a walk and then hide somewhere and put my hand in his pants and massage his penis until it got hard and then I would suck on it.*

Sexual victimisation is not typically a one-time occurrence. Mathew was tortured with regrets, guilt, fear and resolutions to stop, but the forbidden quality of the experience and the unexpected ease of accomplishment seem to invite repetition and a compulsive, addictive pattern developed until the matter was reported to the police.

Derek too, focused on his need for sexual gratification rather than consequences of the victimisation on his daughter. He projected as the ultimate altruistic, caring father.

Derek: *I thought that this is a golden opportunity to feel her pubic hair as she was wearing shorts. I stood close to her and I placed my hand under her shorts and inside her panties while she was standing in the kitchen and I felt and rubbed her pubic hair softly with my fingers. She seemed a bit surprised but did not seem to be too shocked and was totally innocent and did not know that it was wrong what I was doing to her. I*

acted normal and asked her if she is getting hair down there and she said yes. I masturbated thereafter and planned on doing it again when I get the opportunity.

If one considers the enthralling and nurturing nature of a courtship process, then it is understandable why some child victims develop positive feelings for the offender. Tony was also able to map his process of seduction and manipulation.

Tony*: During a braai with friends, my stepdaughter kept jumping on me. Later on when my wife went to sleep, and when my friend was talking to my neighbour I went inside with the victim. I asked her if she wants me to play with her private part. Then I opened her pants and touched her private part. I also took her hand and put it on my private part. I made her believe that by doing this I love her and that's why her mum and I do it. Then I told her to go to sleep with her mum.*

Tony seduced his victim with affection and attention. He educated her sexually, sexualized her, and made her believe that they were in love and shared a special bond. And on another occasion

Tony: *One Sunday my wife fell asleep in the other room. I was reading the paper in my room. The victim came in the room and I told her to play with my private part. Then I asked her to bring the towel. I masturbated in front of her. She was curious; I crossed the line and took advantage of her curiosity. She asked me what a sperm was – I told her it was glue. My wife and I were so sexual she would ask me to shave my private part. I use to come out of the bath with a towel. When my wife leaves the room I used to show the victim my private part and ask her to feel if it's smooth. She use to tell me it is. I deceived her again by telling her that I made it smooth for her and asked her if she likes it. She always said yes! That's what I used to justify myself- that "she likes it". I never thought about how she really felt. That she did not like it but I made her believe it was good. I use to expose myself all the time when I come out of the bathroom with a towel. I used to lotion or oil myself in front of her. This happened more than 10 times. When she used to change her clothes, the thoughts and fantasies were there. I made excuses to be in her presence. So I went to my victim's room and made an excuse that I was waiting to use bathroom but I wanted to watch her*

And subsequently:

Tony: *When we got married. My thinking was very sexual. One night I got home late, the victim was sleeping in our room. My wife told me to leave the victim in her room. While carrying her to her room, she was semi-asleep and her leg rubbed against my private part and I got an erection. When I put her on the bed I told her good night. Then I asked her if she wanted to see something and I exposed myself to her. I took her hand and put it on my private part. I betrayed and deceived her by telling her that I love her. She asked me "is that what you and mummy do?" I crossed the line, I should have told her mum. Then I told her if I must show her. She hesitantly said okay. I took advantage of her. I did oral sex on her. I was in this and did not know how to get out of it. Sometimes the victim use to tell me if I 'I didn't give her love' she's going to tell her mother.*

Mathew realized that although he was not always able to succeed in establishing adult relationships, relationships with children were easier, and that it was also gratifying sexually to have control and power over these relationships. According to Finkelhor (1994) motivation to sexually offend is also driven by self-esteem problems, and a belief that sexual relationships with those of one's own age are impossible or undesirable.

Mathew: *When I was 21 years, I started working at this shop. I made friends with the little boy, whose mum worked on the premises. He would come play with me every day and tag along. Until one day I was in the toilet with this little boy. I pulled my pants down exposing my penis, then I pulled my pants up saying it's your turn to show me your winky and he did. I then asked him if he had tasted a winky and he said no. I then asked him if he would like to and he said no then I blackmailed him that I would tell his mom that he, asked to see my winky. So he said ok and I pulled my pants down and he did what I asked him to do. After I asked him if I could taste what a winky tasted like, and he said ok so I sucked him. I then asked him if he liked it and he said yes. This happened over a few months.*

Once Tony introduced the foundation of a loving, caring relationship to his victim each consequent activity became more acceptable and his victim even insisted on the sexual activities as she associated it with expressions of affection. He wanted to be seen as the better parent just like Derek, Deshan, Ronnie and the others did. They gave up the usual parenting structure of discipline to provide for the child's

entertainment, which ultimately served their advantage. Tom had created a cupboard of sexual toys and videos for his stepdaughter, which she had easy access to and could show off to other children to evoke their interest.

Roy did not have a sexual relationship with his wife for several years, due to her terminal cancer. He distorted expressions of love from his grand daughters and used the opportunity to manipulate her and gratify himself.

Roy: *I took care of my three-year-old granddaughter while her parents worked. During this time my granddaughter became very attached to me and I thought she wanted to love me this way and that she was enjoying it. I misinterpreted her feelings and I started to sexually abuse her. It started off with her giving me a kiss, which I used to intensify into a French kiss. So whenever she kissed me, I tried to distort the kiss and teach her, how the kiss should be.*

Just like Trix, Roy's grand-daughter, very young and even preschool-aged children (four or younger) are naturally spontaneous, innocent and may display open – and occasionally startling – curiosity about other people's bodies, and may want to watch and touch men's and women's genitalia. Children may also want to show, touch their own private parts, and find comfort from this. More than 60 per cent of the participants in the current research groomed and initiated the sexual abuse of very young children, the period of which ranged for long periods, approximately one to four years.

Roy: *And it progressed. And when she straddled her legs around me, I use to massage her private parts inside her panties, as she most often wore a dress. She did not resist at all to what I was doing and the incidents increased, and the moments intensified. This happened on many occasions. The incidents occurred everywhere even when her parents were around, as they did not know what was happening. I made like, I wanted to carry her, and would insert my fingers into her private part, under her panties. The incidents also happened in the pool. And she did not resist or say no or stop but continued to rub onto my fingers.*

Tom used the opportunities with several of his girlfriend's daughters to gratify himself, always justifying himself.

Tom: *I discovered that my wife was having an affair, and I was very angry. I kept busy all the time then one day my six-year-old stepdaughter came into the room when I was naked. I started feeling her genitals and licked it. It made me feel avenged. I did this often. She use to lie on top of me facing me waist down with the head at the bottom she use to play with me and I use to lick her. One day she came to me saying she had something to show me. She took off her clothes and started rubbing her clitoris and putting her fingers inside her hole. This turned me on. We started having sex soon after that. I use to lick her hole and then insert my penis inside and have sex.*

Tom provided instruction to his victim on how to be good, available without complaint to his sexual demands, with an explicit or implicit promise of reward. If she is good and if she keeps the secret, she can protect the family remaining preserved – after all her mother was being disloyal by having an affair and Tom was being loyal and caring towards the children. In the classic role reversal of child abuse, the child is given the power to destroy the family and the responsibility to preserve it. The child, as with Derek's daughter must secretly assume some of the role-functions ordinarily assigned to their mother. Hence maintaining a lie to keep the secret is the ultimate virtue, and telling the truth would be selfish. These victims thus accepted sexual contact without complaint, and structured their reality to protect their mothers and the family unit (Summit, 1983).

Even if an adolescent is sexually attractive, seductive and even provocative, no child has equal power to say no to her parental figure or to anticipate the impact of the sexual encounter with an adult caretaker. All adults bear sole responsibility for any clandestine sexual activity with a minor. In any event the stereotype of the seductive adolescent is an artefact both of the abuser and the sometimes disbelieving public, professional or non-abusing carer, and a prevailing wish to define child sexual abuse within a model that approximates logical adult behaviour (Summit, 1983).

Alton sexually his daughter because he was able to use and abuse his authority as a father.

Alton: *I sexually abused my daughter in her preadolescent and adolescent years. It was like living my fantasy of my sister that I carried from an adolescent.*

According to Sheldon and Howitt (2007) deviant fantasies influence a carefully planned out and manipulative strategy that eventuates into an offence.

So how did Alton and the other participants maintain their abusive behaviour over several incidents and in some cases years, from being discovered?

Maintenance and prevention of disclosure stage

The participant's sexually abusive behaviour was sustained and hidden over a longer period of time primarily due to their strategies.

Derek: *I sexually abused both my children for about two years. I always told her that she must not tell her mother, who was sickly.*

Derek, Tony and the other participants were successful in deceiving their partners and children due to their personal skill of manipulation, and intimidation. Regardless of how gentle or violent, the secrecy of the abuse, makes it clear to the child that this activity is something bad and dangerous, and not to be shared to further distress an ailing mother. The secrecy is both the source of fear and the promise of safety for the child and for her mother. The secret took on magical, but burdening proportions for Derek's daughter, stigmatising her with a sense of badness. The victims in the research never questioned the abuse, and only disclosed after several incidents. Unless victims can find some permission and power to share the secret in the presence of accepting, endorsing, non-punitive response to their disclosure, the child victim is likely to spend long-periods of time or perhaps a lifetime in carrying a burdensome secret, which inflicts pain, rage and guilt (Summit, 1983).

Nearly all of the victims in the current study did not disclose the sexual abuse at the time that it occurred. Even more startling was that, the offenders abused their victims while their partners were in the home, but their partners were not aware of the abuse. This was the extent and sophistication of their levels of manipulation.

In the following case of Tony, the sexual abuse of his stepdaughter occurred over a period of four years and there was no direct disclosure of the incidents by the child.

Tony: *My friends were all outside at the time, when I entered the house and sexually touched her. I am not sure if my wife suspected anything. On one occasion my stepdaughter told my wife in my presence "daddy is digging my bum!" My wife did not respond. The incidents of sexual abuse of my stepdaughter happened over a four-year period, it started six months before my marriage and continued three and a half years into my marriage.*

Tony's stepdaughter attempted to disclose the abuse to her mother on more than one occasion and several times to her educator, with no endorsement or acceptance of her disclosure. Affirmation is critical for a child's psychological survival and healing. She felt helpless and the increasing feeling of rage leads to self-destruction and reinforcement of self-hate; self-mutilation, suicidal behaviour, promiscuous sexual activity and runaways, until the school was forced to report her for her uncontrollable behaviour to a social worker. She also exploited the father for privileges, sexual favours and material rewards, reinforcing her self-punishing image as a sexual object in the process. She fought with her mother whom she believed was uncaring to intervene or too loyal to Tony. This reinforces the belief that she is unworthy to be cared for and destroys the mother-daughter bond.

Tom's victim also found expression in self-destructive behaviour after years of incubating her rage and helplessness of being sexually abused. His victim remained silent until she entered adolescence and become more capable of demanding a more separate life for herself and challenging the authority of her parents. When her mother confronted her destructive behaviour, his victim, had an outrage and disclosed the secret that lay buried for so many years.

Tom: *My victim in her adolescent years, started staying away from home, and she was drinking and having sex with other boys, and my ex-wife was having an affair, with all that I decided to leave. I sexually abused my stepdaughter from the age of six to 13 years. She told her mother that we were having sex. I left.*

This delinquency and rebellious anger expressed by the victim is seldom understood by social workers and other members of the helping profession and are rather alienated by the pattern, which is really a desperate plea for help. Most adults tend to identify with the problems of the parents in trying to cope with a rebellious teenager,

and assume that there is no truth to the sexual atrocities being alleged. In this situation her mother assumed she has invented the story in retaliation against the father's attempts to achieve reasonable control and discipline. So regardless of Tom's victim disclosing the seven-year period of sexual abuse, there were no consequences for him and he was allowed to leave without being reported.

Research studies do concur that when abusers are exposed they are not reported or convicted (Lanning, 2010). Thus, offenders "move around" and abuse many other children (Lanning, 2001 p.38).

In a particular case, an offender sexually abused his two girl victims of six and eight years, for three years, by being their after-hours carer, as their single parent mother worked late hours. He groomed and desensitized them with sex toys and child pornography before raping them. When he decided to relocate, he confessed to the mother, not expecting to be reported as he had never been reported before. Another offender indicated that after sexually abusing approximately 95 children, he wanted to stop, but no one reported him.

Chances are that although matters are known they are seldom reported so there is most often no official record or conviction and employment may have been terminated for some vague reason. I do recall a couple of years, having reported a principal of a Child and Youth Care facility for having allegedly molested children from his facility to the Department of Social Development. To my horror and concern, a senior manager made a comment: "I thought that he only sexually molested boys!" He had apparently relocated as principal from another institution, due to allegations, but no reports were made to the police. In a repeated offence, the child victims and staff anonymously reported the case, but the matter was not investigated by the police. This resonates with other researchers who have found similar patterns of ineffective management of child abuse cases. (Wiehe, 1990).

Victims usually have been carefully seduced and often do not realize they are victims, they repeatedly and voluntarily return to the offender. Society and the criminal-justice system have a difficult time understanding this. If a boy is molested by his neighbour, teacher, or clergy member, why does he "allow" it to continue? Most likely he may not initially realize he is a victim. Some victims are simply willing

to trade sex for attention, affection, and gifts and do not believe they are victims. The sex itself might even be enjoyable. The offender may be treating them better than anyone has ever treated them.

Derek very aptly described the vulnerability of his victims.

Derek: *Victims don't have a chance at all. You can manipulate children and win their trust and force the abuse on them. My children did not have a chance of not being abused. They trusted me as their father and I bought them presents to gain their trust and manipulate them.*

In another case, only one orphaned boy out of 55 boys exposed a scout guide and educator for sexual molestation, although there were several victims that lived at various times at the house of the offender. Adolescent boys feel ashamed as they are at a developmental stage where they are easily sexually aroused and feel responsible for the abuse.

Conclusion

In conclusion the detailed descriptions of the strategies of the participants highlight their deviousness and manipulation in the entrapment of children and adults, which makes children poor "witnesses of the truth" (James, 1997, p.8). These are not just fairy tales or figments of devastated children but are the realities of so many children who experience the horrifying effects of cleverly planned and executed strategies of offenders. Jones, Cooper and Ferguson (2008, p.33) suggested that we develop a holistic theoretical reference to understand "the personal, organizational and the structural whether by social or political or both". This chapter explored the intimacies of the personal lived experiences, vulnerabilities, violations and dangerousness of offenders. The manifestation of the structural factors on people's lives needs to be understood in relation to individual agency and choice. Adopting a critical, emancipatory approach to social work, Sewpaul (2013) highlights the complex relationship between structure and agency and concludes that while it is imperative to advocate for structural changes, the self must be the main site of consciousness raising and politicization. Thus from a critical theoretical perspective, therapeutic and political interventions are not antithetical with each other as the micro-macro divide is

a false one. The next chapter provides an analysis of the questionnaires and DVDs administered to service providers within the child protection sector.

Chapter Seven: Analysis and discussion of results - questionnaires with service providers

Introduction

This chapter is the first of two chapters related to the discussion of the outcome of phases two and three of the research process. During Phase Two, a Digital Versatile Disk (DVD), of the testimonies of the offenders who sexually abused children, was planned, scripted and produced. In phase three the methodological practice involved a DVD presentation on the testimonies of child sex offenders. The transcript of the DVD appears as annexure A.

In this phase I administered questionnaires to participants who watched the DVD and conducted focus group discussions with them, to explore, and delve into the research problem areas with various practitioners, professionals and carers, to obtain their solutions on managing child protection. Twenty of the participants in this phase of the research study were from Finland, Mozambique and Tanzania. My aim was to explore the impact and contribution of understanding the strategies adopted by child sexual offenders to the practice of child protection by also comparing other countries. I was interested in knowing whether or not participants believed that understanding the mind-sets and the manipulative grooming strategies adopted by offenders, as reflected in their testimonies in the DVD, held any potential for child protection.

The DVD consisted of the testimonies of four offenders, on their grooming strategies, thought processes, fantasies and mind-set in the process of sexually abusing their child victims. The offenders had suggested the idea of the production of the DVD as a tool to be utilised for the prevention of the abuse of children; and they volunteered to participate in this process.

The initial sample envisioned for the research was: 10 persons from the criminal justice system, who were involved in sexual offences (two policemen, two magistrates, one prosecutor, two advocates and three probation officers). However a total of 60 participants instead of 10 were eventually engaged in this phase of the

research process, as I found it was essential to obtain a broader spectrum of service providers within the child protection field such as academics, practitioners in the health, educational and social welfare sectors. Two questionnaires were constructed and administered: (Addendums C and D) one was designed for service providers and a second was adjusted and administered to parents and caregivers of sexually abused children. The questionnaires to service providers were self-administered.

To the best of my knowledge, no research had been done, in the designated area of child sexual abuse and child protection, to compare the form of praxis that I adopted in this phase of the research, so I was not able to obtain literature or compare this analysis to other studies. This praxis yields new information for the practice of child protection.

Emotive responses of participants to the DVD

This section provides the responses of the participants to question one: what emotive response did you experience after watching the video and why?

Graph One: Emotive responses of participants to the DVD

Feelings expressed by participants

	Anger	Compassion	Disgust	Disappointment	Empowered	Fear	Hurt	saddened	shock	Surprised
■ TOTAL	20	9	14	2	2	8	8	11	11	7
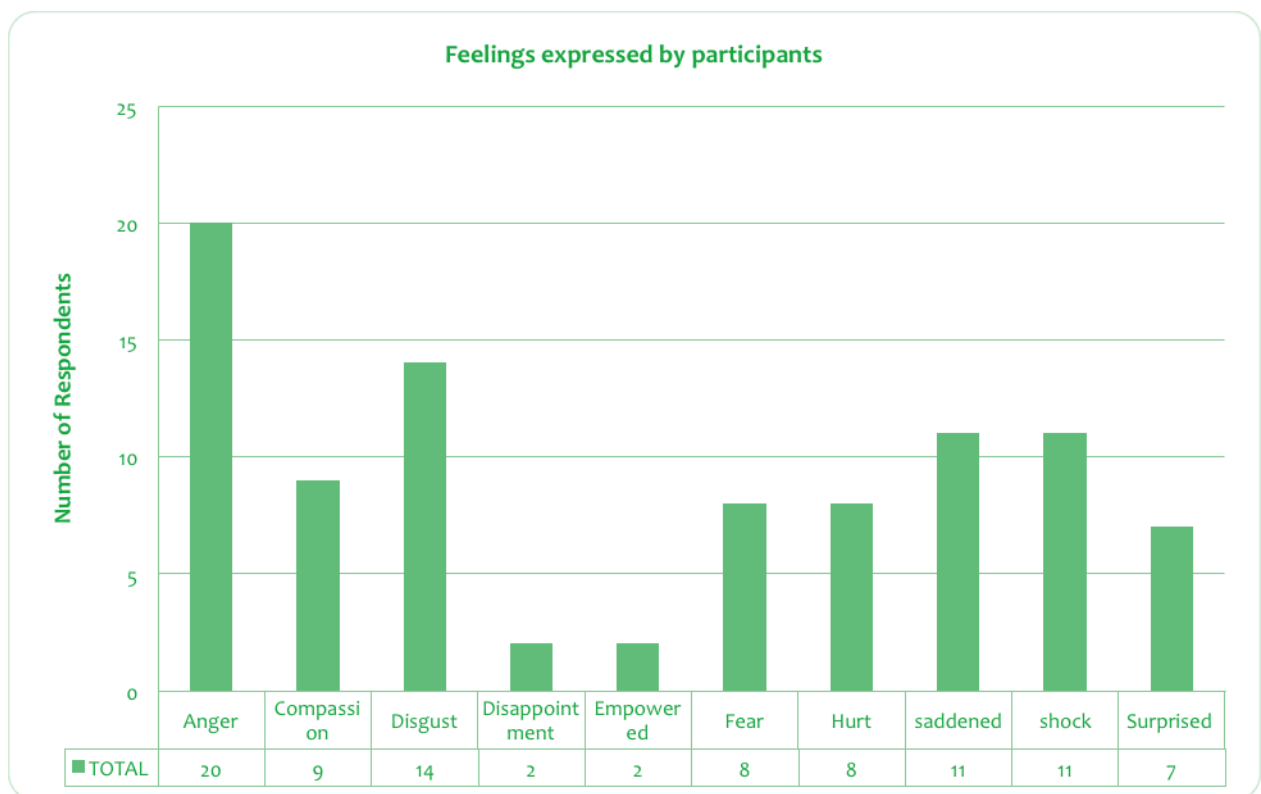
Graph two reflects the emotive experiences of the participants who watched the DVD.

The DVD elicited several intense responses in participants, which was grouped into 10 main categories of emotions, as indicated in the above graph. The direct responses of the participants were selectively chosen as some of the headings.

Emotive responses to the DVD and explanations thereof: "I felt so angry!! How could he kill and destroy a child's innocence and expect forgiveness!!"

The participants expressed a plethora of emotions such as 'angry', 'outraged', 'disgust', 'fear', 'mistrust', 'worry', 'concern', 'shock', 'compassion', 'surprise', 'interested', 'curious' that were summarized into 10 major categories of emotions as depicted in graph one.

I had not expected this level of intensity of emotive response from the participants, as I had assumed that the information provided on the DVD would be common knowledge, experienced in the day-to-day experiences of the participants during the course of their work with victims of CSA.

The participants responded with various emotions towards the testimonies of the abusers on the DVD and the carefully consolidated planning, orchestration of the violations against their child victims, the threat posed to children, the easy accessibility to child victims and the prevalence of the problem, and that the abuser is known and hidden.

The DVD opened a new door of reflection, as the participants were 'surprised', 'interested', 'curious' and in 'disbelief' as to 'why do the offenders want to abuse', and they 'could not believe that there are men seriously saying these things', 'the video made the situation of abuse and the schemes of the offenders, realistic' and 'hearing it directly from the offenders, appeared more realistic, especially the elaboration of the strategies, planning and manipulation of children'.

The offenders had been very vocal and comfortable with their confessions as they had been in therapy over a lengthy period of time. And this was conveyed in their ease of expressions and participants were surprised at 'how open the offenders were' in 'telling their stories', and how 'natural they seem to feel about it'.

They were exposed to the profound nature of the abuse in a quick six- to eight-minute exposure of the medium of the video but found that the 'behaviour of offenders is too complex, it was very straight forward in the DVD yet complex'.

Although many of the participants were exposed to sexual offences daily, in their field of work, they were exposed new information on the abuse of children as 'the DVD was interesting and gave me an interesting new perspective'.

Professional's knowledge and attitudes about child sexual abuse would be varied, in view of their differing roles and perspectives, and members of the helping profession are supposed to be trained to support and not blame the victim or hold them accountable in any way for the abuse committed. Members of the criminal justice system, including the police were more doubtful of the reports of children on their victimisation than mental health and child protection service workers and social workers, interdisciplinary differences with respect to the blameworthy of children could be partially explained by lack of education or maybe the holding of biases.

It appears that professionals are commonly misinformed that most sexual abuse of children involve physical force, children can easily disclosure, that abuse involves intercourse and that a sexually abused child can have a physical examination with no abnormal findings.

The existing empirical research provides important insights into the beliefs and knowledge of professionals and the public on the dynamics of child sexual abuse. This review indicated that many, including professionals, are misinformed about child sexual abuse on the complexity of issues of disclosure, whether delayed, retracted, inconsistent, the presentation of symptoms of abuse and the mental health state of the victim. These findings are consistent with the view that many adults, including members of the criminal justice system may lack the knowledge of the presentation of sexually abused children in order to manage their CSA matters (Richards, 2011).

Nevertheless, if these misunderstandings on this subject are pervasive, this empirical study is significant and the praxis utility is worthwhile to be explored with other service providers – to inform of the offender and his behaviour. The short duration video appeared to have accomplished this purpose.

This form of praxis appeared most effective in achieving the aim of allowing participants to question, understand and see the relevance in child protection. As some felt 'empowered' and 'informed and more aware of the offenders' behaviour on the sexual abuse of children'.

Lessons obtained from exposure to the DVD

This section provides information in response to the question: Was their anything new or different that you learnt from the DVD?

Graph Two: Lessons obtained from exposure to the DVD
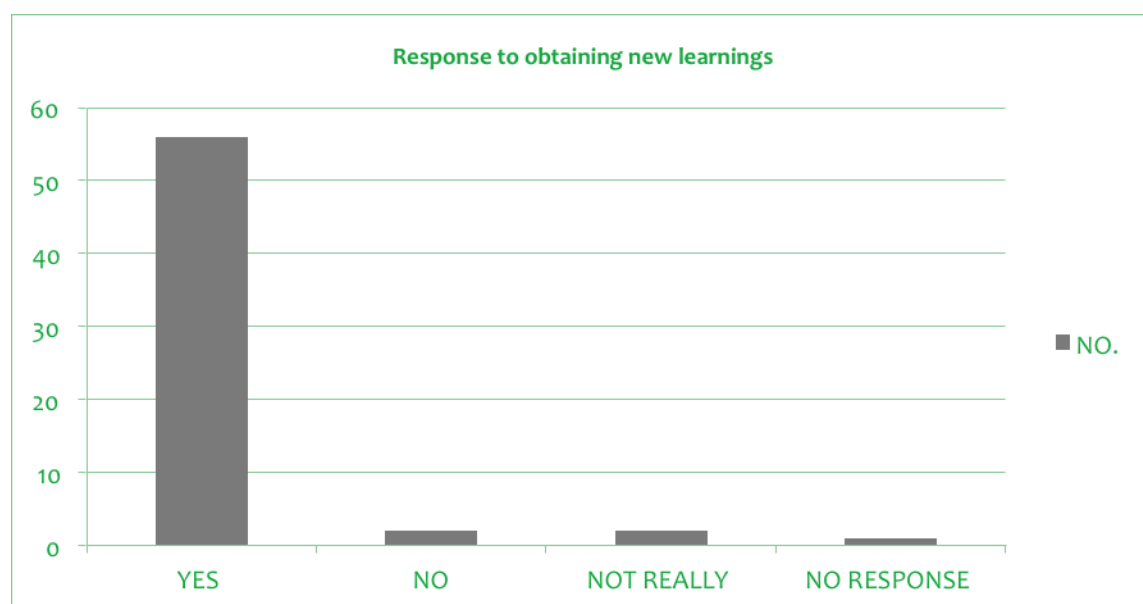
Graph two reflects some of the lessons learnt from watching the video

"It was new to hear from the offenders' perspective!"

In response to the above question many of the participants (91 per cent) indicated that the information obtained from the DVD was new and different and 95 per cent felt more equipped to address child protection. Those that indicated that they did not

really learn anything new (five per cent), explained that the reasons for them indicating so, was because; 'many fathers abuse their children' and 'the story is more or less the same in Finland'. The four participants, although in the minority indicated that it was not really new information. This is not unusual as they were purposely chosen as a sample having been exposed to this form of abuse to children over a lengthy period of time.

The majority of the participants had been purposively selected as they were experts in the field of child protection and had occupied senior positions in managing child protection for several years. However, they had indicated that they had not been exposed to this form or type of information.

In explaining their response to the above questionnaire the participants indicated that their new learning's were based on understanding the: manipulation of the offender; vulnerability of the victim; the abuser being a trusted person; the extent of the problem of CSA; lack of detection of the abuser; influence of pornography and alcohol.

Capacity developed on the strategies of the offender

This following section provides information in response to the question in the questionnaire: Do you think that you are more equipped, after being exposed to the video to understand the strategies of the offender who sexually abuses children?

Table Four: Capacity Developed On the Strategies of the Offender

Responses	Number	Percentage
Yes	57	95%
No	1	1.6%
I Need More Time To Watch The Video	1	1.6%
To A Limited Extent	1	1.6%
Total	**60**	**100%**

From the above table, 95 per cent, of participants believed that they were sufficiently capacitated to understand the strategies of the offender

Critical theories holds potential for critical action, and the implementation of more informed practice (Freire, 1970; 1973). The participants were given the opportunity to watch the video, and critically reflecting on its contents, and proposing action strategies for child protection based on their reflections. This constitutes a powerful form of praxis and part of a reflexive cycle of acting on new reflections. "Reflexivity means being in a circular process" of seeing, understanding, thinking, acting to "influence and change others and their social worlds" (Adams, Dominelli and Payne, 2002, p.3).

This question helped determine if the participants were impacted and capacitated by hearing the strategies of abusing children, directly from the child sex offender.

The sample of participants chosen to watch the DVD were selected at opportunistic settings, and under these circumstances the time allocated to watch the video was limited to 6-10 minutes and the appropriate amount of time to watch the full video was 15 minutes. So some participants were limited in their viewing time allocation and required more time in order to integrate their lessons. The length of the video hence varied from setting to setting.

The participants in interrogating their reflections, new knowledge and understandings of the abuser strategies provided a number of explanations. They indicate that:

"Now I know how they operate, I feel that I am now more wary when told stories by the offender and that I should examine the evidence from a variety of sources"

In relation to understanding the grooming strategies of the abuser in conducting the sexually abusive activities, the participants indicated that: 'by being aware what the offenders do and what can be expected from such actions'; 'I think prosecutors should be more equipped to reveal this aspect of sexual conduct instead of merely focusing on the actual sexual incident'; 'offenders are aware of their actions'; 'strategies of abusing children are now known to me'; 'I knew the strategies of the offenders am shocked that they are so similar to Finland'; 'the real offenders telling their stories helped us see the real situations of offenders and their strategies; 'everything is not what it seems and I learnt their strategies'.

Grooming has been defined as 'The process by which a child is befriended or prepared by a would-be abuser in an attempt to gain access to a child, gaining that child's confidence and trust. Then gaining compliance in abusive situations to avoid the child's disclosure.' (Kreston 2007, p.1)

The above discourses, however, neglected the fact that sex offenders may groom not just the child but also significant others in terms of the family or members of the community, including service providers to gain access to the child victim (Craven et al. 2006).

The term 'grooming' is generally used to describe the preparatory stages in setting out to sexually abuse a child, whereby abusers work to gain the confidence and trust of the child and perhaps significant others, to ultimately access and abuse the child. Our legislation and the literature to date have concentrated on the grooming of children and, to a lesser extent, that of families, service providers and community members (Salter, 1995, 2003)). Popular discussions on grooming have focused on 'on-line grooming' and abuse committed by dangerous and predatory strangers (Gillespie, 2001; Gallagher et al, 2003). The second is abuse committed in institutions by authoritative persons (McAlinden, 2013). "These social and political constructions of potential risks to children, tend to exclude consideration of other sources of harm, particularly those which arise from intra-familial settings" (McAlinden, 2013, p.1)

"It improved understanding of the offenders' mind-set!! I now understand how they strategise, and how they think, and how manipulative they can be!!"

The participants reflected and obtained new understanding on the manipulation of the child sex offender in the context of deviancy and crime. The participants indicated that they learnt more of how powerless and vulnerable the victim can be in the context of manipulation, and the fact that professionals themselves can be manipulated. The following words were used by participants to describe their capacity on manipulation: 'Manipulation is a shield used by offenders & can be highly deceptive'; 'perpetrators are masters of manipulation & deception and younger children are vulnerable to abuse'; 'the games that offenders used, ensured their own sexual gratification'; 'a perpetrator coming forward and admitting to new manipulation

& informing us that the victim is overlooked and distrusted'; 'that the offender is driven by own need to abuse & continue to do so come what may in cunning & misleading ways'; 'in the video offenders themselves show and tell how easy it is to victimise any child even by people they trust'; 'abusers are manipulative, creative, use their power, get a drive from manipulating people, pretend to be concerned about victim, manipulate people to think they are against child abuse'; 'offenders are cautious about what they do so that they don't get caught'; 'Jekyll & Hyde strategies of the dad'; 'offenders are manipulative & creatively use the victims weak points and lure them'; 'got me thinking of the causes, mind-sets/frame of mind of perpetrators, what causes, motivates, prompts, drives such behaviour'; 'the time the offender chooses to commit the act during sleeping time which explains why most children cannot tell what happened in detail or specific sequence'; 'the craftiness of the offenders on the strategy they use on the children and these expectations on the victims that are minors'; 'making themselves look good in the community by sharing their views on child abuse'; 'The offender don't mind what happens to the victim when they abuse them. They think about their own need and leave the victim without support and hurt'; 'Before I was not aware of how offenders talk or discuss the issue of abuse and the language and expressions that they use to abuse, I learnt how easy it is for an offender to manipulate people who investigate the case'

The participants indicated 'that perpetrators can be so manipulative that they can convince professionals. One rule should be that we always believe the child & remove the perpetrator from the situation'; 'that children do not and cannot fight off their abuser'; 'they choose children based on their personality', 'the power of manipulation goes beyond the victim to the people surrounding the victim and the professional's involved'; 'that conmen can deceive even the most qualified of professionals'; 'I did not guess that it is common to manipulate professionals'.

'I was sensitised to hear the cries of a child and be sensitive to the manipulation tactics of abusers'; 'the video highlights the manipulative strategies of the offender in abusing children'; 'he spoke of himself as the caring parent yet he was the one that was the offender & acting innocent and removing suspicion'; 'I can now see how a man's dirty mind works'; 'they are trusted people by the victims and that is the most

manipulating factor in child abuse'; 'Manipulations are used by abusers to protect themselves'.

Leclerc et al. (2009) indicated that offenders use the technique of manipulation as it had the strongest impact on securing the participation of the child victim, than in situations whereby children were not manipulated. Hence the modus operandi strategy involving manipulation, strongly influences criminal outcomes, as depicted in the analyses in chapter six. The offenders in the study had learnt that in order to obtain the compliance and participation of the victim in sexual abusive incidents, they had to manipulate and seduce their victims first. In this context, the offender worked on not coercing the victim but perceiving the victim as a willing partner (Ward et al, 1995). Ward et al. (1995) in describing the offending process, incorporated manipulation as part of the modus operandi stages in which a caring relationship of reciprocity is formed.

So does this any of the above comments have any implications for prevention? The participants agreed that it does. Offender modus operandi, especially manipulation to influence the victim into the sexual activity, should be regarded as a serious issue of concern for prevention strategies (Leclerc et al. 2009). Creating and maintaining a safe environment for children is necessary to safeguard a child, and this means monitoring and identifying the patterns of behaviours of abusers (van Dam, 2001). They believed that parents should be informed on the modus operandi of offenders to assist parents understand and recognize the behaviours of abusers, and to screen all persons within the family (Leclerc, 2009).

The process of manipulation was extended to the relationship with the victim and family, the incident of abuse, the process of grooming, as well as the dynamics of interaction (Leclerc et al, 2009).

"Offenders really place themselves in the position of a carer and see the children as victims"

Relationship with children**:** The participants commented on the relationship that the offenders appeared to have with the children. They indicated that the 'offenders have

knowledge about children, manipulative, good pretenders, appear caring, loving, creative';

Grooming established a bond between the abuser and victim, but it reduced the possibility of disclosure of the abuse (Craven et al; Leclerc, 2009). Hence the relationship between the offender and victim is of significance to understanding the context of the abuse and outcome in the offence.

The participants indicated that the offenders in the video used a language to entice and seduce the children into the sexual interaction.

"The most incredible was the case when the offender made it a play with the peanut butter on his penis, because with that kind of situation – how can the child tell right from wrong"

This Language of games entailed **'**bribes**'**; **'**use child language like games'; 'Well all these offenders had their own way of abusing children and to get the child to do what they wanted'.

In the video the participants recognised the language of the grooming process. In the context of child abuse, grooming is the seduction of the victim by giving them attention, affection, gifts, befriending them, talking to, listening to and spending time with their victims.

The nature of this seduction is dependent on the developmental stages, needs, and vulnerabilities of the child victims and offenders in the DVD, with their younger victims "seduced" their parents and then played games that evolved into sex games to manipulate the children into sex. Participants of older child victims are more likely to take advantage of time away from their family and then rely more on techniques involving ease of sexual arousal, rebelliousness, and curiosity to manipulate the children into sex. These seduced and compliant victims are less likely to disclose their victimization and more likely to voluntarily return to be victimized again and again.

'He loves these games that he plays with children'

The participants hence saw the Engagement of the child being a central focus 'awareness of the *modus operandi* of the offender'; 'his patterns of grooming, his thought processes'; 'the offence is a play for him'; 'when working with abused children I will understand their emotions and feelings in the process of grooming leading to the sexual abusive acts'.

"The *modus operandi* is the pattern of behaviours adopted by the offender to secure a victim's compliance to commit the crime. It includes behaviours exhibited before, during, and after the crime. Offender modus operandi is, by definition, at the core of the offender–victim interaction and crime event outcomes. Thus, one cannot understand the crime event without considering offender *modus operandi*" (Leclerc et al., 2009, p.598).

"It reinforces the nature & complexity of sexual abuse"

The participants appeared to understand the act of sexual abuse more clearly - 'the video has shown me how an offender offends, not just the offence itself, but how and why they do it'; 'I will always listen to children when they disclose abuse; more sensitised & more aware'; 'Why victims don't report abuse'; 'the video made me think about sexual abuse from an offenders perspective'.

"These perpetrators are among us"

Some participants became more aware of the abuse being performed by trusted people, especially the family – 'Lack of protection of the girl child within the home where you are supposed to be safe'; 'an abuser can abuse when people are still present in the home'; 'offenders are family members & they want to sustain their habits'; The participants also became acutely aware of the reality of who is an abuser. They said ' the stepfather clearly spelt out how manipulative a perpetrator can be'; 'this means that anyone can be an abuser'; 'I will not be convinced by an over-caring & sweet talking parent'; 'I will trust no-one'; 'Offenders are also silently asking for help'; 'this strategy seems to be - to do it when no one sees it'.

'I did not realise the extent of the problem'

Some had not realized the extent of the problem of sexual abuse and indicated: 'having worked in the court as a judicial officer for more than 20 years it was my first time to hear the offender elaborating on what triggers the abuse, despite having heard them plead guilty in court'; 'I have read on the topic however hearing the perpetrators narratives gives me a closer insight'; 'Did not realise that sexual abuse of children is common in every society and occurs in every class; and the offender is so difficult to detect'.

The participants from Tanzania, Mozambique and Finland (20) agreed that they experienced similar strategies by offenders in their countries. Children will always be a vulnerable group but having adults being fooled and manipulated by the offender too as well is something new to consider. Some precipitating aspects of sexual offences being pornography and substance abuse, is a similar experience to that in Tanzania. Reporting of abuse in all countries is challenging. In Tanzania, reporting is affected by patriarchal system and society. Even if cases are reported, dockets are lost and not pursued … It's common throughout the world, village and society. It's a big problem – what can we do, we feel overwhelmed by it and how can we be more effective but the video promotes knowledge. A Finnish student said – it's surprising, shocking that offenders only look at their own point of view, so selfish and not interested in the victim, they are self-centred, driven by their own need. It's incredible, shocking and unbelievable. It's surprising how cautious offenders are and children are not conscious and aware. The strategies of manipulation and adaptation are important. Children need to be aware, so that the offenders' manipulation cannot work any longer. In Finland sex offenders are similar, and strategies are the same. Regardless of culture, background, race or country – there is no difference. What is the impact of the abusers as fathers? But regular people don't hear stories. Children are exposed to secondary trauma of not being heard. If shown to children and parents, it will lend credibility to the abuse and disclosures of children so should be shown to parents to help in prevention of abuse, before abuse happens.

*"We should declare war on pornography"*

Others were concerned about the influence of pornography and alcohol as precipitating factors and believed that, 'there seems to be a trigger in the commission of sexual offences viz. drugs, pornography'; 'new insights but sad really to hear all

the mention about pornography that obviously desensitised the perpetrators & leads to child abuse'; 'almost all of them were looking for child pornography they were ashamed of what they did in a way they see victim as part of their secret, wanting it'; the perpetrators should be less "visible" . The participants were concerned about the role of certain Habits viz. 'they use pornography & substance abuse'; 'Lets burn this pornographic movies';' Most acts of sex offenders have been influenced by drinking and pornography'; 'Ban pornography and help children as if they are our own'.

Recommendations for the prevention of CSA

This section provides information in response to two questions: How do you think this information obtained from the DVD can be used to improve the protection of children – hence, what are its recommendations for the prevention of child sexual abuse

Graph Three: Recommendations for the Prevention of CSA
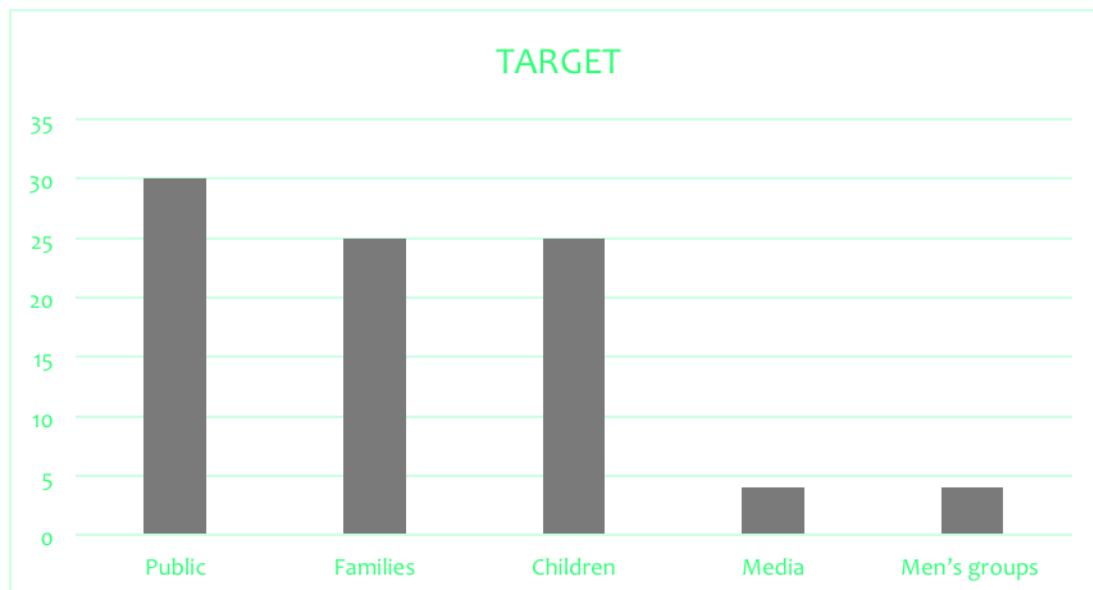
Graph three reflects the recommendations made by the participants for the protection of children after being exposed to the DVD

"Involve everyone in this knowledge of how the offenders' mind works"

I have combined two questions since the responses were similar, as the participants all believed that the information derived from the DVD could be used to contribute

towards the prevention of child sexual abuse. The graph depicts responses that were grouped and classified into five categories, involving significant target groups. The use of the DVD in training settings was indicated by the majority of the participants (63 per cent).

Thirty participants indicated that the content of the video should be used to create awareness to the public (50 per cent).

Twenty five (42 per cent) participants recommended contributions to programmes with children;

Twenty five (42 per cent) indicated awareness with families;

Ten (17 per cent) participants indicated that it would be beneficial in rehabilitation endeavours;

Nine (15 per cent) participants elaborated its inclusion in other processes involving self-awareness, media, and programmes with men.

'Increase sensitivity to the cries of children which go unheard for years, at times'

The 30 participants, who believed that the information could be used in contributing to the awareness on many public platforms, provided specific details on how the information could be used in the public fora. Some indicated: 'I would inform and empower people on the warning signs of child abuse as well as the manipulation techniques'; 'to help others in preventing sexual abuse and the grooming of children'; 'adults should hear how easily abuse happens in their house with mom & others not far away'; 'share the information as people sometimes think children make up stories'; 'it can improve the prevention strategies around issues of pornography, alcohol abuse & child abuse'; even the corporate sector'; 'The DVD shows the process of sexually abusing children which is important to use against the offender in the protection of the child'; 'the DVD can be used in different countries to conscientise the offenders that what they are doing is wrong and should stop'; 'it increases the knowledge'; 'maybe to make people understand that it is a complex situation and things in the family should be evaluated critically, things are not always

as it seems'; 'to teach us that sexual offenders are not people that you recognize by some special features from the outside'; 'it teaches the importance to listen to children'; 'for people to know that this happens, it's real and to give more attention to their children'; 'the information is important not to label offenders too but to hear their real stories'; 'it's harder to ask for help if you know you'll be stigmatized'; 'the first interview gave interesting points about how they are able to manipulate even psychologists'. 'The film was very eye opening – it's shocking but it's good for the awareness of abuse and it should be taught to many more people to face the reality of child abuse'; extend the video as a public awareness campaign'; 'I think it is a great idea to show these real cases and I suggest you show the cases of victims telling what happened'.

'Animate the video for children; create a stage play based on the video for schools'

Twenty five of the participants felt that programmes with children incorporating the content in a child friendly way was necessary. They recommended providing awareness at 'schools (at age appropriate levels)'; seven participants indicated 'show it to children (in a controlled environment), to learn about the strategies of sexual offenders'; 'to children so that they are aware of the sex games that are played are not as innocent as they appear'; 'I think this is the best movie to help to protect children because it is the way children understand'; 'it is true- stories that will help the children to understand that the abuse does happen and how the abuse takes place'.

'will definitely help mothers to listen more & more to the complaints made by their children & not dismiss them as seeking attention'

Twenty five of the participants indicated that education and awareness of family was critical and recommended: 'awareness to parents of possible victim children sensitive to child development & observe changes'; 'for family members, boy children, fathers, brothers, uncles'; 'to encourage mothers to open their eyes widely and objectively when it comes to looking after the interests of their children even within their homes'; 'to teach parents about the strategies used by offenders and to give them more knowledge on how offenders work'; 'as a prevention, early

intervention awareness before occurrence of abuse'; 'Knowing offenders creatively'; 'offenders are always close family members'.

"More education especially to young offenders who do not understand their actions'

Ten participants indicated that the content of the video will benefit the 'parole boards'; 'sex offenders support groups'; 'awareness to perpetrators in therapy'; 'Sex offender work is a specialized job'; but 'offenders can be rehabilitated'.

'Men's groups should be educated via this medium'

Four participants indicated that*;* 'make it available to adult men that are offending so that they understand it's a sickness'; 'Men are problematic in their responses to sex'.

'Use to advocate against abuse by using the media'.

Four participants indicated that the content of the video should be 'broadcast on 3rd Degree'; 'broadcast it on E.T.V'; 'use it to curtail pornography on social media'.

All participants expressed the view that the video can play an important role in the disclosure of abuse and the ultimate conviction of the offender.

Self-awareness: five participants indicated that they would personally *'*be vigilant to people close to the potential victims or children' and' inform their friends and family, staff'.

Graph Four: Recommendations for training
The participants indicated the significance of the DVD as a training tool with various service providers
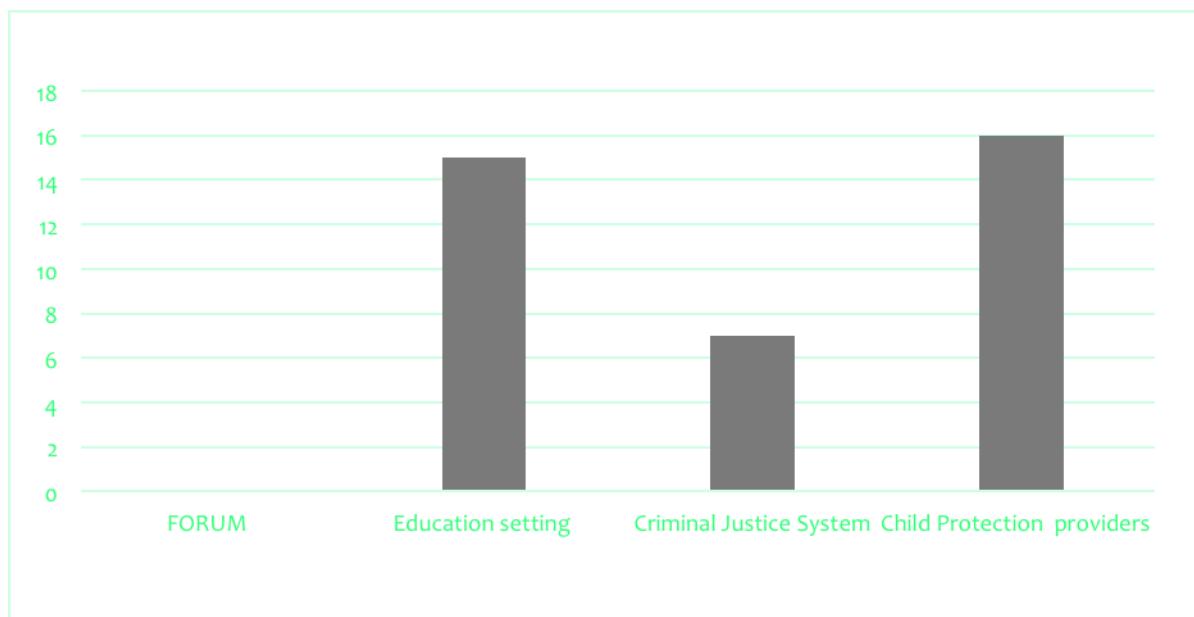
"People who work with children can be trained to see better behind the offender's stories"

The majority of the participants (63 per cent) indicated that the video could be used as a tool to assist in training programmes. It was suggested that the video could be a teaching tool, advising on steps to be taken to protect a child. The various settings or recipients of training could be the school setting; multiple service providers in the child protection field; or criminal justice service providers.

'As an educator I am now better able to be aware of abuse of my learners and how to listen to their disclosures and not be manipulated by a possible offender'

Fifteen participants indicated that it should be within the school or education setting, for instance: 'guidance teachers at school stokvel gatherings'; 'relook at trust issues- more educator programmes to make children aware more than ever before that family even fathers, uncles should not touch you inappropriately'

'To conscientious magistrates; with the prosecutors so that they can have some insight about how these offenders think'

Seven people believed that the training should include the criminal justice system and recommended; 'I would want to share this with the prosecutors and encourage

them to explore this aspect in the course of prosecuting cases'; 'present it to the national justice system'; 'to allow the courts to watch this video as it would give them a view of the minds of the offender'.

'The video indicated that regardless of their profession or role in the child's life all persons can be ignorant of detecting the abuse of children'.

Sixteen participants indicated that the training should include training child protection service providers. Recommendations included: '*education of professionals in the field of child abuse including social workers, school health nurses, psychologists, South African Police'; 'awareness programme – prevention and early intervention level, empowering the organisation working with children'; 'the training of social workers so that they are watchful of abuse of children & what they say'; 'departments of social development, SAPS, arts & culture'; 'all service providers working with abusive children and adult survivors should have an opportunity to view this video including attorneys'; they should listen to the children- even if the father contacts for help, he could be the abuser'; 'training for school health nurses'; 'churches; hospitals; this strategy to reach other organisations dealing with children as a training program leads to empowerment'; 'It is a reality from the offenders' confirmation; show it to church groups so that they can be aware of the Sunday school teachers'

Victim-blame in child sexual offences

This section provides information in response to the question: Society labels victims as sometimes being responsible for the abuse, do you think that, that is true, after being exposed to the video and why?

The most important thing is to identify and understand is that these are children and are real victims of crime because of their date of birth'

Fifty-eight (97 per cent) of the participants believed that the 'victims can never be held responsible for the abuse'. A participant believed that the victims are held responsible for the abuse – 'victims are said to be responsible because they excuse themselves and create chances to attract the offenders'. One person indicated that:

'society does label children as responsible for abuse but this does not mean that they are'.

The participants indicated the following explanations for the victims not being responsible for the abuse. Many believed that children are not responsible for the sexual assault because they are "innocent and can be manipulated". In the video the children were asleep when they were abused and comments were made: 'children are innocent and defenceless and can be abused when asleep'; 'how can a sleeping child be responsible, or any child'. In the Criminal Procedures Act as amended 2007 (Sexual Offences Act), a clause indicates that victims whether adult or child, cannot be held responsible if asleep or intoxicated. But all children by their very nature are not responsible for abuse.

Many of the participants felt more informed after watching the video and were emphatic that victims cannot take responsibility: 'after watching the video children cannot anymore be held responsible for the abuse'; 'the information on manipulation was creative of offenders and not easy to pick it up'' 'many accepted that victims are manipulated and cannot be responsible: the victim was manipulated and totally innocent'; 'they are victims of circumstances from people they trust and are close to'; 'children are easily manipulated and think easily that it is their fault'; 'they don't say NO and the offender may think it is okay for the child'; 'perpetrators use strategies that are beyond children's control'; 'sexual offenders are manipulative and appear loving & caring – so this can be confusing'; 'I just don't know how victims could be aware of such deception'; 'victims are in no way responsible for the abuse – the abusers are manipulative and strategize planning to self-protect, [which] renders victims helpless'; 'victims are sexualised and are tricked into enjoying the abuse'; 'offenders are able to manipulate society by denial and deception'; 'due to the grooming children are led to believe it's their fault and they wanted it but it is not'; 'the offender always label the victims as being responsible'.

Other participants also recognised the power imbalance between victim and offender which means the victim cannot be held responsible: 'a child cannot stop an adult as it is related to their stage of development – adults are superior'; 'children are innocent babies who do not understand abuse'; 'children should be aware of what is and what is not allowed'; 'I think victims are never responsible since they are children

and adults should be the ones protecting not hurting'; 'adults are always responsible but if there is a psychological and developmental problem, we can think that other people are also responsible and have to intervene'.

Others believed that it was always the responsibility of the offenders and indicated that 'offenders must take full responsibility'; 'the victims are powerless and exploited'; 'this is a human pathology'. Others mentioned the sexual nature of children: 'victims are never responsible but it may be exciting for her/him'. Some participants indicated that the system might fail the child: 'sometimes information is manipulated and because of corruption, offenders are not punished'. .

Partnerships and collaborations

Participants were of the view that public sector departments and non-governmental organisations were working in silos; 'we need integration between NGOs and government.' 'There is not enough exposure on the subject – other issues of teen pregnancy, HIV and AIDs are the focus of attention. These are all interlinked with abuse so exposure of these strategies can help all the problems; child abuse is a serious problem and needs to be taken seriously.'

This position is a fair reflection of the current agenda of government. Due to the huge amounts of funding brought into the country, the priority has been on HIV and AIDS programmes.

Child sexual abuse has generated growing concern among the public, the media and various professionals during the last three decades. Whether this reflects changes in the actual number of CSA cases remains largely unknown as it is so under-reported and an only represents the tip of the iceberg. But the complexity of the phenomenon and operating processes of the offender make it difficult to detect and respond to.

Conclusions

Participants unanimously indicated that they thought the DVD had potential to protect children. There was an impact on the lessons they learned. This form of praxis or medium does assist in altering people's thinking. The participants have made several useful recommendations that were relevant and practical and can be

realistically included for the prevention of CSA. The following chapter analyses the responses of parents and caregivers to the DVD.

Chapter Eight: Analysis of data from questionnaires administered to caregivers

Introduction

This chapter is the second of two chapters related to phase three of the research design. This chapter presents the results and discussion for questionnaire two that was administered to parents and caregivers of sexually abused children after their viewing of the DVD on the testimonies of four child sex offenders. It must be noted that these are not parents of children who have been sexually abused by participants in the current research.

The purpose of the discussions and questionnaires was to determine whether information presented by the offenders in the video would be relevant in the protection of children, from the perspective of parents and caregivers whose children had been sexually abused. The questionnaire administered to parents and caregivers of sexually abused children was self-administered; however they had to be guided through the questionnaire.

There were eight respondents who participated in completing the second questionnaire from various locations in KwaZulu-Natal of which six were biological mothers, one biological father and one grandmother. I did not administer the questionnaire to a large number of participants, as the language was a barrier. Most clients were Zulu-speaking, and would not have been able to grasp the English content of the video, or understand the written English. However I had Zulu-speaking social workers to assist in the translation of the English to Zulu and support the parents in the process. Four of the participants were English-speaking and four were Zulu-speaking.

The child victims were all below the age of 12 years. However the statistics at the organisation reflected that majority of the children were below the age of six years, which is consistent with the statistics from the Department of Health. The offenders in the video reflected that they initiated their abuse of their victims from a very young age, generally four years, but the victims only disclosed the abuse many years later.

In my numerous discussions with caregivers, they were not always well informed about the age of the onset of the abuse, as children could not remember the specifics and they also were in denial or sometimes preferred not to know.

Parental responses to their children's disclosures of the CSA

This section provides the responses of the participants to question one: Did you believe or accept your child's disclosure that they had been sexually abused? Please elaborate on your response.

Five of the participants qualified their acceptance to some degree, while three indicated directly that they did not believe their children. They stated that there was difficulty in accepting the credibility of the disclosures by their children. It was concerning that none of the parents and caregivers believed the incidents of sexual abuse when their children disclosed them for the first time. This is consistent with the underreporting of sexual abuse of children – matters are not reported as children are not believed. The literature provides a detailed review of this perplexing aspect of disclosures of abuse by children.

"I did not think people could do this"

The participants cited several reasons for disbelieving and doubting the disclosure of sexual abuse made by their children.

The reasons most commonly cited for not believing the child victim was that the offender was known to the caregiver or family of the victim, was trusted, believed to genuinely care for the child and were close to the family, and hence would not betray the family. For the various reasons presented the caregivers were reluctant to accept the children's disclosures: 'but I trusted him', 'he liked my child', 'I knew him, how could he!' 'She asked strange questions that made me question whether she was really abused.'

In my experience in working with child abuse cases and comparing statistics in the non-governmental organisation (NGO) that I worked in and with that of other service providers, it appeared that sexual abuse is extensively undisclosed and underreported. Hence statistics are unreliable from various sources (South African

police and Department of Social Development) as they depict very conservative estimates. The role of mandated reporters must be held to account as they are responsible for relaying this information to the necessary authorities (Walker-Descartesa, 2011).

So what are the perspectives of children and caregivers of victims that contribute to the underreporting? The study builds on and contributes to work in this area on the underreporting of sexual abuse. A detailed account of these reasons is cited in the literature review, and reasons differ according to the type of sexual offender, whether intra familial or extra familial. A number of influential studies have cited that some general reasons may be that for the child, this process is accompanied by feelings of shame, guilt, powerlessness, embarrassment, and fear. Children accept responsibility for the abuse and blame themselves, and the strategies used by the offenders, ignites these responses.

The non-abusing parent has been found to exhibit emotions similar to that of their child victim upon learning of the abuse. They are faced with the difficult task of dealing with their own reactions to the assault while deciding how to care for the victimized child. From the responses of the caregivers as indicated in the discussion above, they were not immediately accepting of the sexual assault on their child. They tend to express common emotions of guilt and failure in their ability as a parent to protect their children; ambivalent or hostile feelings toward the child; ambivalent or hostile feelings toward the offender; and rejection of the child. Another source of emotional distress for the child and the caregivers is generated by the various systems of reporting, whether investigatory and judicial processes, and the delays in this process.

The impact of current child protection programmes

This section provides the responses of the participants to question two and three: Have you been exposed to a child protection programme? Did the programme provide you with information to protect your child from child sexual abuse?

'The awareness programme does not give too much of detail of what is shown in the video'

It was necessary to determine if the caregivers and parents were exposed to a prevention programme and if this had the desired impact of capacitating parents and caregivers to protect their children. Two caregivers were exposed to a child protection programme, five participants were not exposed to an awareness programme and one was aware of the issues of abuse of children.

In asking the above question I wanted to determine if the current awareness programmes enabled the knowledge of the parent in protecting their children. The participants provided explanations as to their ability to protect their children after being exposed to the programme.

'Made one aware of signs to look out for. I knew this was unlikely to be a made up story', not really as you cannot watch the child 24 hours', 'helped me to not hold a grudge', 'I was told of different types of abuse but they did not tell me that someone I know will abuse my child',' I did not know that the abuser would trick me as was shown in the video', 'I did not know that an abuser, when he was treating my child nicely, was actually wanting to abuse her', 'The video was frightening – I cannot believe that these people or abusers are like that'.

The participants commented on the partial impact of the protection programmes and the impact of the video in relation to the protection programmes. But it appears that all benefitted from being exposed to the video and 'The video really thought me new things'.

The video also elicited intense emotive responses in the parents and caregivers as reflected in the graph

The responses to the DVD

Graph Five: Emotive responses
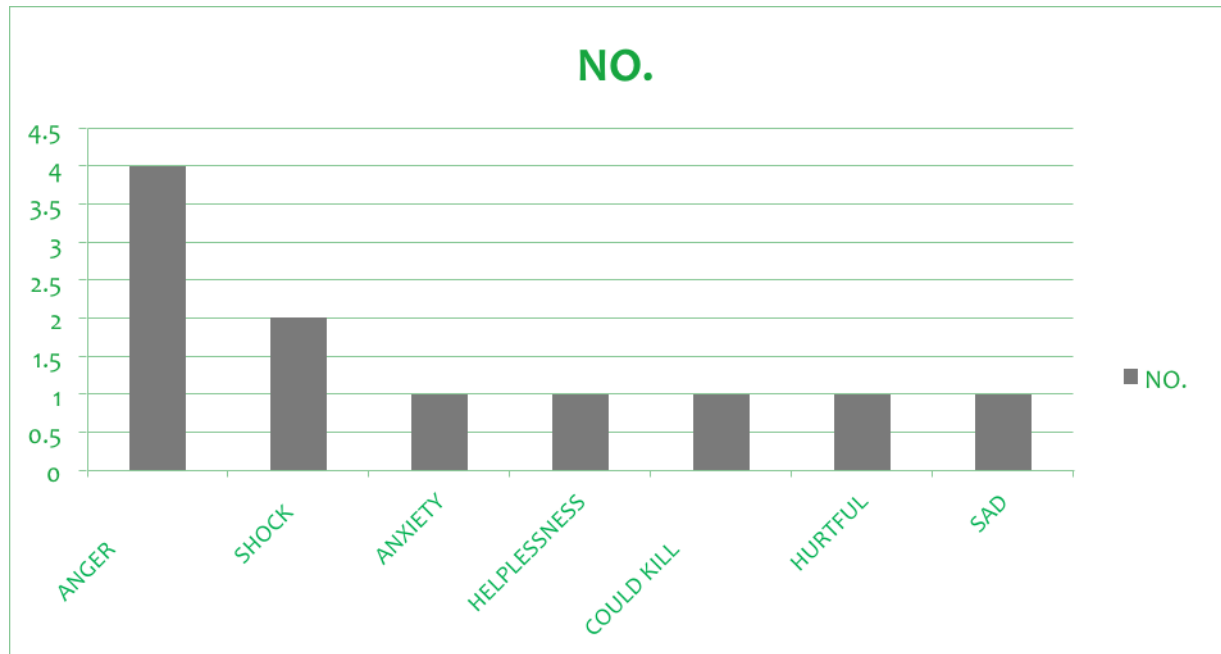
This section provides the responses of the participants to question four: what emotive response did you experience after watching the video and why?

The common emotion expressed by the caregivers and parents was that of anger, and other emotions were of shock, anxiety, helplessness, sad and hurt. The permission to express their emotions in a group setting with other parents was very cathartic for the parents, as they shared some of their bottled-up feelings that they did not feel safe to express previously. The process also enabled parents to channel their feelings towards the offender rather than the child, as there was ambivalence of emotions towards the child victims. The parents were able to understand the offenders were manipulative and deceitful and the children were innocent victims that were entrapped.

New lessons for child protection

This section provides the responses of the participants to question five: what have you learnt that's new from the DVD, in relation to the protection of your child?

'To learn the offenders' ideas makes me aware of the child being abused and how I can protect her'

All of the participants emphatically indicated that they would have been better equipped to protect their child had they watched the video prior to their children being abused.

Four of the participants indicated that they now have 'awareness of the offenders behaviour'; 'I have learnt their strategies'.

Others indicated they are aware of the manipulative capacity of the offender, that they did not know existed: 'I would have been able to stop it and move away from the abuser, when I saw him tricking her'; 'I would have spoken to my granddaughter's family about watching her, and not allowing her to sleep at the relative's house'.

They elaborated on specific lessons that they acquired by watching the video. They talked about learning of the manipulation of the offender and the relationship of the offender to the child: 'family members especially fathers or men use their positions to manipulate us all'; 'I have learnt their strategies of abusing children'; 'the cover ups and manipulation of even professionals by the abuser'; 'manipulation and behaviour change of the offender'.

But they also spoke about taking a more active role in the lives of the children and supporting them: 'don't leave a man in charge of all the functions related to your child'; 'I now understand that I need to be more supportive to my child she has been through enough, as these offenders are clever, and did so many games on her'; 'I learnt that I need to be more responsible for protecting my child'; 'to have a good relationship with my child so that I would pick up abuse'; 'I will be more of a friend and talk to her, this must have been difficult'.

This was an unusual turnaround, as the parents and caregivers were ambivalent, withdrawn and hostile towards these children, and watching the video allowed them to be more empathic in understanding the non-disclosure, the pain that the children endured and the manipulation of the children, and allowed them to be more determined in protecting, supporting and loving towards their children and to communicate more.

Victim blame in child sexual abuse

This section provides the responses of the participants to question six: After watching the DVD, do you think that your child was to blame for the occurrence of the abuse? Explain your response.

'She is not the problem he is'

The participants were questioned on the victim's blame in sexual offences and whether they could be responsible in any way for the abusive incident. The participants unanimously that the child was not responsible or could not attract the sex offenders and cited reasons such as 'victims are sometimes not aware of being abused'; 'she is young and their bodies are not only abused but their minds'; 'they can't cope and get so affected, symptomatic'; 'children are innocent and cannot protect themselves from these abusers'; 'perpetrators use their power'.

Recommendations for future child protection programmes

This section provides the responses of the participants to question seven: What are your recommendations for child protection programmes, so that we can better protect our children?

'The video should be played in communities continuously'
All of the participants unanimously believed that the video would assist in the awareness and training of others. Three participants believed that it would assist in informing parents and caregiver. One participant indicated that it would assist service providers to be trained on the video. One participant indicated that churches needed to be trained on the video. Two participants indicated that children & youth groups

would benefit from being informed on the content of the video. Two participants believed that the public should be informed and more awareness created on the protection of children by having.

Laypersons and professionals do not have a sound understanding about the behaviour of sexually abused children and the strategies used by offenders in abusing children, and how this impacts on the child, and their ability to disclose. Enhancing knowledge of how sex offenders operate has practical and policy relevance in terms of enhancing the efficacy of targeted interventions and the skills of those professionals who work in child protection.

There is consensus that child abuse is underreported. The fact that the conviction rate of sex offenders is so low means that we need to move from our current public protection processes as the problem has great complexities. Prevention needs to be enlarged, yet more direct and specific. Reactive legal and policy frameworks need to be supplemented with a broader proactive approach. In analysing the questionnaires I believed that the outcomes were valuable and need to be advocated and bring wisdom to the field.

Children are being seduced or groomed into sexual abuse; it diminishes the disclosure of these incidents. True understanding of this process must be incorporated into the response and investigation of these cases. We cannot ask children 'why they did not kick and scream and run away from the abuser', and we cannot go back to the world of 'stranger danger'. From the results this study from Phase one to Phase three, we see that the abuser was a friend, a father who seduced with attention, affection, authority and mixed messages. When we inappropriately question children and not understand the seduction process, we allow children to "adjust" their stories according to what they think we want to hear or try to explain with an excuse that an investigator or parent would accept and understand; or they resist disclosure. Children can suffer from the "say no, yell, and tell" guilt.

All the offenders in this study indicated that they never disclosed their own sexual victimisation, because they were too embarrassed, afraid or because no one seemed to understand the problem. Had they disclosed and received the necessary

psychosocial intervention, further cycles of abuse might have been prevented. Thus, secondary intervention with victims of abuse might constitute primary prevention for other potential victims.

The key then to getting child victims to talk is for us to understand and communicate to them that we understand the seduction process. The dynamics of their victimization must be considered. They are embarrassed and ashamed of their behaviour and rightfully believe that society will not understand their victimization. Many younger child victims are most concerned about the response of their parents and often describe their victimization in ways they believe will please their parents. Adolescent victims are typically more concerned about the response of their peers. We need to also understand that the victim may have many positive feelings for the offender and even resent intervention from service providers, because of the bond with the offender.

Some victims disclose incomplete and minimized information about the sexual activity. This creates significant problems for the investigation and prosecution of such cases. For instance when children call at Childline, a victim may disclose the exploitation and abuse, the victim furnishes a version of his victimization that he or she swears is true. Subsequently an investigation then exposes another version. A common example of this is that the victim admits he/she and the offender interacted sexually but denies that the offender took photographs of him/her. But when the police do a raid they find photographs of the victim in sexual activities. Additionally victims may confirm this, but then vehemently deny that they posed for nude pictures. The allegations of multiple victims often conflict with each other. Each victim tends to minimize their behaviour and maximize the behaviour of other victims or the offender. Some victims continue to deny the activity even when confronted with the pictures. A child that I provided clinical services to became extremely aggressive and enraged when asked about contradictions. Men sexually attracted to boys are the most persistent and prolific child molesters known to the criminal-justice system. Depending on how one defines molestation, they can easily have dozens if not hundreds of victims in a lifetime. They usually begin their activity when they are teenagers themselves and continue throughout their lives as long as they are

physically able. Many paedophiles spend their entire lives attempting to convince themselves and others that they are good guys who love and nurture children.

Parents experience various challenges and it's necessary to help them and seek their cooperation. It was astounding that the parents who participated in the completion of questionnaire 2, had a change of attitude from being resistant and ambivalent to the victimisation of their children, to seeming more understanding, empathic and determined to support their children.

Not all parents react the same way to the alleged sexual victimization of their children. Some can be supportive and co-operative. But many in the sample group were more resistant, and confused. Sometimes there was animosity and mistrust among parents with differing reactions. Others wanted the offender immediately put in jail. In addition it must be remembered that children can be sexually exploited inside and outside the home. There can be great frustration when, after a thorough investigation, an investigator is convinced that something traumatic happened to the child victim but does not know with any degree of certainty exactly what happened, when it happened, or who did it. That is sometimes the price we pay for a criminal justice system in which people are considered innocent until proven guilty beyond a reasonable doubt.

Regardless of 'grooming' and the modus operandi of the offender being focused on in this phase, I am in no way wanting the behaviour to become synonymous with the child sexual abuse. My aim for this research has been highlighted to depict the multi-faceted nature of sexual offending against children. Grooming cannot be a catch-all solution to child sexual abuse as 'stranger danger' cannot be. Child sexual abuse is and will always be a complex phenomenon.

The video was significant in projecting and sharing the offenders best kept secrets. If these best kept secrets are interrogated and shared with various sectors and systems, not only will it provide benefit as elaborated in the responses of the above participants. It will enable primary persons to protect children, and enable the criminal justice system to prosecute matters more effectively. It will furthermore enable the police to understand the modus operandi of the offenders and exploit this in investigating matters.

The current study demonstrated the potential of critical reflection, to raise the awareness of service providers of the gap between their techno-legal, clinical knowledge, on the basis of their newly acquired awareness to develop strategies for action.

Conclusions

There was ambivalence, reluctance and difficulty in accepting the disclosures of abuse, but parents and caregivers indicated that "they would have been better equipped" to protect to protect, support and believe the disclosures of their children if they had watched the DVD prior to the abuse. Hence this in itself conveys the power of this form of praxis. The watching of the DVD indeed, constituted a powerful form of praxis. The questionnaire and discussions thereafter opened up a renewed responsibility, commitment and zest to invigorate strategies on the prevention of child sexual abuse.

The impact has been significant for parents and service providers. The programmes cannot be standardized but should be adjusted for various target groups as well as adapted to the gender and age groups of children.

The next chapter presents the findings of the current study and is segmented into three areas: case studies of the participants, strategies of the offenders and the potential of the DVD. Several recommendations are suggested for the protection of children.

Chapter Nine: Conclusion and recommendations

Introduction

In the preceding chapters, the presentation and analysis of the data were reported. This chapter consists of the major findings, conclusions, recommendations arising from the findings and implications for future research.

The study was set in a framework of critical social work theory. Critical social theory focuses on holistic, contextual aspects in understanding individuals and enhancing practice. A qualitative research design with purposive sampling, guided the 3-phase research.

The first phase of the research entailed compiling the case studies of twelve child sex offenders, who had been in a treatment programme. Their life experiences were analysed to provide a fuller understanding of the aetiology of child sex offenders. In phase two, the testimonies of four child sex offenders were extracted to detail the mind-set and grooming strategies adopted in sexually abusing children. These testimonies were assimilated in the production of a 15-minute DVD. Phase three entailed the screening and reviewing of the video by 68 participants. The DVD was shared for an assessment of the impact and future possibilities of integrating the learning into a child prevention strategy. The participants consisted of members involved in the child protection field from government, non-government organisations, the academic field, as well as parents and caregivers whose children had been sexually abused. There were several assumptions of this research study. These were fully explored within the research study and supported by the results of this study.

There are two polarities of concern in relation to child protection in this dissertation: the one involved understanding the sex offenders who sexually abuse children and the second involved understanding the vulnerability of the victim. The purpose was to synthesize these understandings to obtain a fuller perspective of the prevention of child sexual abuse.

In the first part there is an attempt to offer an understanding of child sex offenders in the bio-psychosocial context against a background of structural factors and discourses, as the participants being sex offenders and criminals are also victims of a society. The aspect of human agency is nevertheless not negated, as CSA is an opportunistic crime that is carefully orchestrated. The research points out that merely adopting a punitive approach is not the answer to the problem as there requires a balance between prevention, protection, restoration and punishment.

In the second part there is a focus on the vulnerability of the child victim. Child protection campaigns have upheld unrealistic and impractical standards by expecting children to take responsibility for their own protection. Children's circumstances are furthermore exacerbated by their susceptibility to abuse and inability to disclose the abuse. By not understanding the guiles of the perpetrator, abuse against children has been further perpetuated amidst secondary victimisation, when children are not believed.

The research calls for a transformation and emancipation in the child protection service – a true shift in one's mind-set – by self-reflection and reviewing the context of practice, manipulation of offenders, and the broader structural context.

The building blocks of thriving and well-functioning societies rest on the optimal health and development of its people. Child sexual abuse is however, a threat to the quality of life and life chances of the uncounted millions of survivors in our society.

Purpose of the research study

The purpose of the research was to:

- understand the aetiology of child sex offenders,
- understand the life experiences of child sex offenders
- explore the behavioural strategies of child sex offenders of how, who, when and why they target children
- determine whether knowledge of the above two purposes will contribute to demystifying the complex phenomenon of child sexual abuse
- to capture the behavioural strategies of child sex offenders on a DVD

- to determine the lessons learnt by service providers in being exposed to the sex offenders' strategies

- to determine the lessons learnt by parents and caregivers in being exposed to the sex offenders' strategies

- to determine whether exposure to the DVD depicting the mind-set and the strategies adopted by the offender in sexually abusing children, hold potential for the prevention of child sexual abuse

Major conclusions

Based on the findings of the research study, major conclusions are presented under various headings. The findings are discussed within the framework of other research studies and the theoretical framework.

Case Studies

The stories of the offender participants revealed the horrendous experiences endured in their lives. The twelve participants were referred by a number of service providers for assessment and rehabilitation. The notion that abusers are strangers that use public spaces to approach unknown children is definitely misleading, as indicated by the results of the current research. Most victims of sexual abuse were victimized within the family, or someone known to them. The eleven participants sexually abused 42 children between the ages of two to thirteen years, that were known to them, with a majority of the child victims (74 per cent) being, female. The twelfth offender did not have sexual contact with victims but was engaged in compulsive use of child pornography. Sixty-six per cent of the offenders had an intimate relationship with the mother of the victim.

The offenders' stories are profound, but so are the attitudes about them, as people harbour a distrust of them and doubt the authenticity of their stories. Copes (2000) believed that stories provide some reality and should be considered and documented as it reveals emotions, perceptions to the events and experiences. I was clear about the roles of the participants in the research, as the offenders did not participate in the research to obtain any favour or pardon, all remained in treatment for a period longer than their designated sentence, and willingly provided their stories as a contribution

to the protection of children. I was not consumed by whether the participants were lying because I had spent months and even years, and consistently heard the same stories repetitively. As a therapist I was interested in their construction of the stories that contributed to their offending, and to help them manage their socio-emotional issues differently so that they do not relapse into performing the same criminal behaviour, and hurt other children.

The child sex abusers appeared more diverse, and definitely not what the various myths and stereotypes made them out to be. The study addressed salient factors and events that have occurred in the lives of the study participants' family of origin, such as family violence, substance abuse, physical, emotional and sexual abuse. The participants experienced various challenging and profound circumstances in their childhood: twelve of the participants' parents experienced marital discord, some of which continued into new relationships when they remarried. Four sets of parents remarried; 10 of the participant's families experienced domestic violence; five of the fathers of the participants were substance abusers; five of the participant's parents were divorced; nine of the participants experienced sexual abuse; twelve of the participants experienced physical abuse and all of the participants experienced varying forms of emotional abuse.

All of the participants in the study commenced watching pornography from an early age leading to the entrenchment of this pattern of behaviour into their adult years. Ten of the twelve offenders were chronic consumers of pornography, and by declaration, one found child pornography to be more addictive than drugs.

Various factors disinhibited the offenders and motivated the sexually abusive act such as use of drugs, alcohol, pornography, deviant fantasies, flashbacks, enactment of previous abusive incidents. The role of fantasy and opportunity played an important role in the offending behaviour as it exerted an influence on the modus operandi of sexual offending.

The research depicted other outcomes – unresolved psychological distress and trauma and its effects on the sexual offending behaviour. A response to psychological trauma in male children is critical to prevent recurring cycles of abusive behaviour. Psychotherapy can make an important contribution to the

physical, mental, and emotional health of survivors of abuse. But as discussed later, there is a need to transcend the micro-macro divide and to integrate therapeutic interventions with transformation in the: criminal justice, child protection systems, broader socio-economic, political structures and dominant discourses such as that on gender, ((United Nations, General Assembly, 2006) which is rooted in patriarchy.

Strategies of Offenders

The offenders abused children that they had constant access to, a majority of which were family members.

It is commonly assumed that incest offenders are less of a threat and may abuse a single child, and most often they are confronted about the abuse and allowed to return to the families (Lanning, 2010). But they require intensive treatment to prevent re-offending as they return to their families and have access to children. Confrontation in itself will not help them manage or eliminate their behaviour. Intra-familial offenders may be more of a risk as they remain largely undetected due to family secrecy and children's inability to report them (Summit, 1983). This study reveals that intra-familial offenders have a longer period of grooming of the child and their behaviour becomes entrenched. Studer, Scribney, Aylwin and Reddon (2011) confirmed that these offenders remain hidden longer, are more difficult to detect, allowing their offending to continue for a longer duration.

'Grooming' was widely used in the research to depict the multi-faceted nature of sexual offending against children. However McAlinden (2013) cautions on its overuse so "it does not become a 'catch-all' term which masks the complexity of the onset of sex offending against children and in particular the multifarious relationships between victims and offenders" (p. 285). The seduction process must be understood and incorporated appropriately into the investigation of cases, support to children and management of cases by all service providers.

The Potential of the DVD

The participants reflected several emotions on watching the DVD. The participants indicated that the information obtained from the video was new and different.

They indicated that they obtained new lessons based on: the manipulation of the offender; the victims and their vulnerability; the identity of the abuser – abuse being performed by trusted people; and the context and extent of the problem of sexual abuse. Others were concerned about the lack of detection of CSA by service providers involved in the protection of children; the influence of pornography and alcohol.

All of the participants in the third phase of the study, believed that the information from the DVD could be used and elaborated on the strategies of implementation to create public awareness and training. They recommended that the messages contained in the DVD could be adjusted to the developmental age of children and integrated into child protection programmes; programmes with parents; rehabilitation endeavours, personal awareness, media, and programmes with men.

Furthermore, the participants believed that they were sufficiently capacitated to understand the strategies of the offender on various aspects pertaining to: the grooming strategies; manipulation; deceptive relationship with children; language and games used by the offender; offenders' relationship with the child; identity of the abuser and the sexual abusive act.

The role of blame generally attributed to the victim was discussed and the spaces for expressing empathy with the victim was opened which clarified many of the victim-blaming perceptions.

The parents and caregiver participants were emotionally affected. They expressed concerns about the partial impact of the current protection programmes and felt more capacitated to protect their children by being exposed to the video. They expressed feeling more empathic towards their children by being more informed by the DVD on the challenges experienced by the victims in the hands of the offenders.

The participants from the four countries indicated the relevance of the information on the DVD to contributing to improved strategies for child protection in all countries. The awareness on the strategies of sex offenders appeared to be a missing element in awareness programmes for child protection and in capacitating service providers. The information on the DVD can be used for public education as it portrayed the

direct voices on the strategies of the participants. However, child protection requires an integrated preventation response.

Recommendations

Policy Development

The country needs a CSA prevention strategy that is systematic, coordinated, scientifically-informed, rigorously monitored and constantly evaluated.

Prevention has resonance for management approaches. First, legal and policy frameworks on sex offender management and child protection are by their very nature limited to familiar types of cases. It is necessary to move beyond awareness programmes and away from child disclosure as the trigger for intervention and protection (Kemshall and Wood, 2007). From the literature review it is evident that disclosure is a challenge for children. Legal and policy frameworks need to be supplemented with a broader proactive prevention that addresses both victim vulnerability and offender opportunity.

Children do not have the skill or practice to fabricate the kinds of explicit sexual manipulations they divulge. The offender will not release his power and control that he has over silent victims, until he is sufficiently held to account for his actions by a competent intersectoral team (Summit, 1983). The therapist alone cannot expect cooperation and recovery in an otherwise reluctant and unacknowledged offender. The justice system alone can rarely prove guilt without preparation and support from all service providers. All sectors working as a team give maximum promise of effective recovery for the victim, rehabilitation of the offender and survival of the family (Summit, 1983).

Prevention programmes should have a broader focus. Counselling services for boys to counteract the trauma is essential as it would give them an opportunity to cope with distorted beliefs, attitudes and perceptions. But it must be considered that boys infrequently disclose abuse and a programme to facilitate this process is a priority. Other focal areas: first-time and young (including children) offenders to address early offending behaviour; the training of professionals around the dynamics of

emerging forms of grooming, and the impact of sexual abuse on victims (McAlinden, 2013, p.269). Secondly, enhancing knowledge of how sex offenders operate are also of practical and policy relevance in terms of enhancing interventions and the skills of those professionals. Policy developments should be proactive not rescue oriented. Offenders also need to be equipped to recognize their own vulnerability and be empowered to manage themselves in the face of risky situations (McAlinden, 2013).

As a practitioner and researcher I have always supported and advocated for the counselling of sex offenders, both to increase their skills for self-management and awareness and to address their underlying problems related to offending. Offender treatment options should be expanded, to include quality treatments. Barriers to such treatment includes lack of trained therapists, sentencing to mandatory rehabilitation programmes, and the public perception, that, therapy protects offenders and "is a softer option" and offenders should be only harshly punished by incarceration.

Cognitive-behavioural therapy for sex offenders has received by far the most extensive evaluation as it addresses influences and teaches offenders self-management skills to reduce their risk (Finkelhor, 2009; Jones, 2009)

Smallbone, Marshall, and Wortley (2001) describe a strategy of "developmental prevention" to address developmental deficits that may lead a person to become a sexual abuser like "early attachment failures in childhood, poor school adjustment, and then non-involvement in early parenting as an adult" (p.88).

The "so- called" decline of sexual abuse in other countries like the United States of America creates hope that the situation is not impossible, that there can be solutions that work in relation to supporting the integrated responses to addressing child sexual abuse, like economic growth, job opportunities, increase in resources like the police, social workers and related protection staff; also enhanced and skilled capacity to identify, arrest, prosecute, and incarcerate offenders (Finkelhor, 2009, p.94).

There should be evidence-based practice in offender management and child protection.

Capacity Development & Empowerment

A renewed focus needs to be spent on child sexual abuse so that the general public is better educated and that professionals are better prepared to address and manage this phenomenon. Hence, social service practitioners need to be appropriately educated, capacitated, with an included focus on research and quality assurance.

All practitioners, with no exception to social workers in South Africa, work within the norms and principles most often "associated with the ideologies of the dominant race, gender, culture or group of people that are in control of the political context and the economics of the country" (Breunig, 2005, p.112). Practice and knowledge may be partially socially constructed as "we become an open repository to whatever government chooses to deposit in us" (Breunig, 2005, p.115). Practitioners commonly blame and hold the individual and their inadequacies as responsible for their failed circumstances and problems. The family and the offender are often seen to be responsible for their own failures without consideration of the wider structural constraints and influences.

No change in perspective and context will occur, if there is no initiative to challenge and alter structural factors, and the powerlessness of many will be perpetuated by the institutional structures and those people who wield power (Freire, 1970; Breunig, 2005; Sewpaul, 2013)

The screening of the DVD and getting colleagues and contemporaries to reflect on its content, constituted a powerful form praxis. The praxis provided an opportunity to participants to explore their own epistemologies, biases and stereotypes and to change the lens they use to see child protection. The participants consisted of a collective multidisciplinary force of service providers, who hold the power to translate their self-reflections, understanding and empowerment into a commitment to transform the criminal justice system and the child protection system in South Africa. Child abuse cases are increasing, which adds to frustrations and burnout, but they need to review their role, positions and be proactive about the way forward on child prevention and protection.

Nevertheless it would be naïve to conclude that the one experience posed by the study, will enable them to become emancipated and empower them to begin to take responsibility for the change in child protection systems and policies. But the participants appeared zestful and enthusiastic after the exposure to the innovative medium of the DVD to advance the initiative, which ultimately requires collaboration between theorists and practitioners (Reason & Bradbury 2008). All professionals working with children need to be capacitated to support children to ensure early detection, prevention, sensitive responses and management of abuse (Alaggia, 2004).

Finkelhor (2009) also argued for the use of extended resources to apprehend more undetected offenders. He pointed out to evidence that supports treatment and counselling strategies both for offenders, particularly sexually abusive children and adolescents to reduce offending, and for victims, to prevent destructive mental health and life course outcomes.

Various areas require focus

The caregivers and parents of abused children contributed to the impact of the DVD. Client participation is an important and necessary aspect of social work, to influence service delivery and plan for services and programmes. The client participation process makes the child protection advancement to be more relevant and realistic. The carers had direct experience of the abuse of their children and were well positioned to make recommendations on prevention. Not only were they more personally informed than the service providers, but their input was relevant and made real by their experiences. Their contribution was unique as it relied on their lived experiences as to what was realistic and practical solutions to their circumstances.

Much more attention needs to be given to the public and parents, as an informed public will advocate for the prevention of child sexual abuse. Providing psycho-education to parents not only provides support and education to protect and prevent abuse, but also capacitates them to support their children during disclosure and to help children overcome psychological trauma and secondary victimisation.

One fundamental problem in the justice system is that it is based on myth, stereotypes and misunderstandings of the offender, and it is plagued by ineffective systems for reporting, investigation and follow-up (Finkelhor, 2009)

First, the justice system should expand its efforts to reveal and apprehend undetected offenders, and improve investigative techniques, interviewing skills, improve relationships with the public to promote reporting, as currently there is little confidence in the justice and police service (Finkelhor, 2009). The criminal justice system, including the police do not appear to have the understanding, credibility, techniques, or resources to examine the evidence or strategies of the offenders (Lanning, 2001).

The criminal justice system and police need to have a greater presence, and improve its management of child sexual abuse. Other potential offenders can be deterred by the circulation of news that offenders do get caught, and can be refused bail – so that their attempts to intimidate and abuse a victim can be thwarted.

Yet another is to reduce the impact of post-disclosure events on victims – within the investigations, justice processes, and publicity that often ensue.

Children cannot be expected to thwart the deceitful attempts of adults determined to abuse them and it is burdensome and psychologically harmful to place the responsibility for preventing abuse on the shoulders of children. Hence adults should be more informed to take responsibility to prevent the sexual abuse of children. The goal of awareness programmes should not be for purposes of resistance or prevention of abuse but to promote disclosure, and reduce self-blame and stigma (Finkelhor, 2009).

Trauma-focused counselling interventions should minimize trauma after the experience of sexual abuse, reduce occurrences, sense of stigma and self-blame, negative mental health outcomes associated with abuse, empowerment during the reporting process. Family interventions provide support, education and negative self-attributions among abuse victims.

This level of therapeutic work on interventions with sexual offenders requires specialization, training and supervision. As described earlier, self-awareness and self-reflection are important steps in addressing professional's personal perspectives of clients and contextual work-related issues. There is an ethical obligation to ensure that any biases do not compromise the therapeutic interaction and quality of the service. Resources, attending to therapist care and burnout are essential and clinicians should take responsibility and engage in protective self-care activities to address the challenges of sexual offender treatment.

The entertainment industry needs to be informed that it has major responsibilities for young people and society. Sexual issues dominate modern day technology, and have influenced our children. It is a discourse that rules our world in magazines, the internet, music videos, and adverts. Pornography and the sexual messages in the media influence our social values and leads to sexualized individuals who abuse children out of lust. Regardless of messages that this adult pornography will not influence adults, the current research indicates otherwise. It is no wonder that the sexual abuse of children cannot be dissipated. There needs to be stricter sanctioning of pornography and substance abuse, which as indicated by the research disinhibits deviant behaviour. Several risks factors for child sexual abuse mentioned in the research needs to be considered such as the vulnerability of the very young child, substance abuse by caregivers, parents with mental health problems, domestic violence and so on.

Reframing Dominant Discourses

 "Men cannot be exonerated from the violence and abuse that they perpetuate" (Dallos and Mclaughlin, 1995, p.43).

Part of these problems are the contradictions and inconsistencies, when legislation introduces what is crime, but the actual operation of the law and service providers are inflicted with biases, perceptions, gender inequality and contradictory discourses which generally add up to the individual being exonerated from his crime in some way. There needs to be consistency and intolerance to halt behaviour that is criminal – a crime is a crime against humanity or otherwise (Dallos and Mclaughlin, 1995).

"Personalities, sexuality, needs, fears, our strengths and weaknesses, our selves are created – not simply learned – through our lived reality (O'Toole and Schiffman, 1997 p.33). "Explanations in terms of social structural factors cannot answer questions about individual abusers, but they attempt to address much broader questions about why abuse occurs, and why it is allowed to continue." (Dallos and Mclaughlin, 1994, p.71).

The offenders are victims because of their victimisation, experiences that predisposed them to their abusive nature. Bio-psychosocial factors and the structural context are significant for establishing our influences and ideologies. Grooming behaviour is the microframe of the offenders. It is their functioning at a cognitive level as they have made individual choices that are poor or maladaptive, and we cannot deny human agency or individual freedom in making poor choices, which led to the offending behaviour. But their thinking is influenced and embedded in social structures, which influence functioning and cognitive frames of manipulation, as is reflected in power, sexuality choices and the privilege of masculinity. There has to a total picture of an individual who cannot be reduced to labels of victims or villains (Adams, Dominelli and Payne, 2002).

The following cartoon appropriately depicts the highest level of power and control and constitutes of destructiveness to our society.

It is evident that this country lacks leadership in effectively dealing with the aspect of CSA in this country. President Jacob Zuma himself was accused of rape in 2006, and has made other inappropriate comments about the spread of HIV, sexual relationships and activities, and the responsibility of girls in the prevention of teenage pregnancy. CSA is a gendered phenomenon and gender relations are the product of social and cultural dynamics, historical forces, political structures, and interpersonal chemistry (O'Toole and Schiffman, 1997). The president's seemingly corrupt, reckless actions, abuse of privileges, patriarchal ideology, and self-entitlement as a leader provides the ideology, and inscriptions for the foundation of ongoing inequalities based on race, gender, culture in South Africa. The social and cultural norms, patriarchal and stereotyped views, lack of political ownership of policies, epitomised by the President, are significant for the leadership of the country. Individuals who hold discriminatory or gender-stereotyping attitudes, such as those supporting male dominance or entitlement are also more likely to hold and influence attitudes tolerant of violence against women and children (UN Women, 2012). Research shows that there is a direct relationship between levels of gender inequality, adherence to gender stereotypes and prevalence of violence against women and children (UN Women, 2012).

If the South African culture glorifies violence, sex, corruption, entitlement, pornography, crime, leniency to criminals and makes heroes of our corrupt politicians, it perpetuates the context to silent children. There has to be a 'moral compass' on issues of governance, leadership, with an economy that meets the needs of its citizens and not allow the excessive gain to the privileged few in leadership and corrupt businesses. The way relationships are modelled to children, the way in which the media reports on incidents of violence or portrays gender roles, and the way in which workplaces, organizations, or clubs promote (or fail to promote) equality, respect and non-discrimination, all have an effect on the cultural acceptability or otherwise of violence.

A sense of entitlement has pervaded during the post-apartheid era – people at the top have been allowed to accrue what they can, while those at the bottom sit with increasing oppressions, disadvantage, inequality and powerlessness at various levels including job insecurity, economic inequality which has led to frustration and ongoing violence – and violence in particular against children (United Nations, 2012).

There is hope if there is vision because as indicated by Sewpaul (2013, p.123) "hope and strategies for the development of an alternative consciousness can empower people to challenge the socio-political and cultural determinants of racial, gender, and class oppression and to demand policy and legislative changes toward greater equality, social justice, and solidarity".

Concluding remarks

Prevention of abuse enables children to be protected from harm and it is more meaningful to be proactive than responding after the harm occurred. Prevention of CSA is a matter of urgency, as not only are children being robbed of their unqualified rights but the economic and health costs to society are enormous (United Nations, General Assembly, 2006).

Children have suffered untold sexual abuse throughout history, and now that the scale and impact of sexual abuse is known, we must no longer neglect our social responsibility but respond with urgency. Otherwise it contradicts society's obligations to protect the rights of children and advance their development. Child sexual abuse

is unacceptable, unjustifiable, yet preventable (United Nations, General Assembly, 2006). If we allow it to continue then we are working against humanity.

Many explanations can be attributed to the perpetuation of child sexual abuse, whether contradictory, inconsistent and unjust, these elements silent victims and work in favour of the perpetrators. If children refuse to report sexual abuse because of damage done by society, service providers, the justice system, -- then abusers are allowed to act with impunity, detection and responsibility, - and children have been failed.

Myths, stereotypes, victim-blaming, disbelief, taboos related to discussion on sexuality and abuse, social customs, cultural traditions, denial, minimization of the impact of abuse on children, shame and stigma associated with being sexually abused, myths about who perpetrators are, and what they gain from sexually abusing children, financial exploitation and profit derived from the sexual exploitation industry – all perpetuate CSA (Lanning, 2010).

There can be no compromise in the protection of children. This does not mean sanctioning perpetrators only, but requires transformation of the "mind-set" of societies, the underlying structural conditions whether economic, social, political, and cultural and the dominant inequalities and patriarchal discourses associated with the abuse against children (United Nations, General Assembly, 2006).

The journey travelled in conducting this research has been considerably impactful in terms of my personal and professional development.

Implications for further research

No true evidence-based programs or policies exist in the area of preventing child sexual abuse, which is an area that should be explored (Finkelhor, 2009).

The objectives of the current awareness programmes should be re-examined to determine if they prevent abuse of children or protect children. Children do learn the concepts but it seems that they recite them rather than use them to avoid abuse. So do adults take sufficient responsibility in protecting children? These are the many areas that should be explored in research to prevent CSA.

It is also recommended that the DVD be screened and its impact evaluated with broader audiences in the South African context. The screening and assessment of the video in controlled circumstances with children would ascertain its potential to prevent abuse.

It may be possible to conduct a follow-up on the study with South African colleagues who participated in the viewing of the video, after a year or two years to ascertain if the lessons learnt were translated into practice, and if so how.

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Abbreviations and acronyms

CSA – child sexual abuse

DVD – Digital Versatile Disk

PTSD – Post traumatic stress disorder

Annexures

TRANSCRIPT OF THE DVD

TESTIMONIES OF THE SEX OFFENDERS WHO SEXUALLY ABUSED CHILDREN

PARTICIPANT 1

I am an offender who was caught about five years ago for sexually abusing my daughter. Manipulation is the biggest strength of the offender. He is very good at manipulating. Getting his way with teachers, psychologists. That is, what makes the offender tick – is the manipulation. It is important as a process of educating people to be aware of the manipulation and the dangers of it. So I am going to discuss some of the manipulation I did at the time I was offending, for a period of four years. I was also a heavy drinker so I planned my day drinking so that I can stay up at night. So that I can stay up and watch pornography, get aroused and then abuse my young stepdaughter. She was between the ages of 4-8 at the time I sexually abused her.

One of the strategies was to target the victim when she was sleeping and everyone was sleeping to avoid detection. Also in the hope that the victim will not be aware of what is happening to her, so that my abuse would remain a secret. I would also, at parties, let people know my stance on child abuse and paedophiles and things like that. So basically proclaiming how strong I am against this. It is all part of the manipulation to groom people to look at you in certain way- that is what it is about – about manipulating people's thoughts by your behaviour so that they don't realise what is going on. The offender takes a lot of time to sit and think about these things. Being caught is something he does not want so he is going to try to stay undetected for long as possible. When my victim started disclosing the abuse – I took the lead in contacting child psychologists. I contacted one of the best child psychologists. Even to my wife, the victim was saying it was me!! – but I immediately took the stance that I am a very concerned parent, that I am an over concerned parent and I want to deal

with this issue head-on, as if I was trying to get through the truth but I was protecting myself, so I was concerned and I took the lead, of contacting psychologists.

We went to a good child psychologist – and even there, the victim was saying it was 'me', who was abusing her. But the way I kept myself, the way I acted – no blame fell on me. They said she is just going through a phase or something she is making up for attention. So that issue was resolved, so I backed off for a few months to let things cool off. But very soon my desires got the better of me and I started thinking a lot of it again and my desires got strong. My victim was even speaking and disclosing the abuse at school. So as soon as I heard of this. I made an appointment with whoever was charged in assisting my daughter and I cast blame off myself and every time I got away with it.

It is very easy for an offender to offend. Once an offender has set his sight on a particular victim – it's going to happen it cannot be stopped. The act of abuse will happen – there is no chance for that the child. The child has no defences to protect against an act like that. Offenders rarely care what happens to the victim, how they feel. It's only about the offender and how he can fulfil his desires and stay undetected, and still stay a part of society. The internet and child pornography and normal pornography on the Internet – it is a fuel to abuse children. The pornography itself is the catalyst to create an offender. You may think you are a good parent and that you are aware but the offender – you are no match for him. He will manipulate you and you will think all is normal and okay in your family. That is the extent the offender will go.

The biggest defence to be used against the offender is to be informed, and spot these people (offenders) and bring their acts to light. My abuse came to a close when one night with the victim was eight years old – I was very intoxicated and I went to her room again and I ended up in her bed abusing her. She immediately woke up and went to wake up my wife. My wife caught me and left. They promptly contacted welfare, welfare contacted the therapist and I was called for an interview. Again trying to cast off suspicion I readily agreed to come for an interview but as soon as I came I was out of my depth. I was caught out because the therapist understood sex offenders who abused children. That is important.

PARTICIPANT 2

I abused my daughter and my son. I spent a lot of time alone with my children. My wife was sickly and suffering from depression- so I took care of my children. I did all the fun things with them, the shopping; dolphin shows so I was alone with them. So it was easy for me to abuse them. I was in a position of authority and power. I did not plan on it happening but it just gradually happened. I also started watching pornography and incest on the Internet, which further encouraged my abuse. I was thinking of doing some more exciting than the normal sexual relationship. And I spent all my time with my children.

I started going onto Internet and watching incest on the Internet. Pornography among families- like with wife and son, husband and daughter – it made me excited to think of something different instead of the normal sexual relationships I wanted to do something more interesting in my relationships. I also wanted to get away from the boring pornography –and the Internet fuelled my new ideas to abuse my children.

I slept alone in a room with my daughter and she would fall asleep on the couch, watching TV. So I spent a lot of time alone with her in her room. I also manipulated her by buying expensive presents like cell phones, play stations and a television. So initially when I abused my daughter she was confused and shocked. She did not know that I touched her indecently and what I was doing was wrong. My wife did not pick it up – we have a duplex and she was always upstairs in the duplex and my son use to go to bed as well and I use to wait for my wife and son to go to bed and I knew the chances of me getting caught were very slim. So I created opportunities for myself. When my daughter was downstairs watching TV and at the beginning she allowed me to touch her as she did not know it was wrong. But after a while instinct told her that it was wrong, and she use to push my hand away and I use to wait for her to fall asleep so that I could touch her again. I did not have any friends – it was just my wife and children. My daughter eventually told her school- the social worker at the school. And I denied it I told them that I was just moving the remote or blanket or putting a blanket on her when she fell asleep. They asked me to stop but I did not stop too long just for a short while and I started abusing her again for approximately six months. It was a game that I was playing and I thought that I would get away

because I was her father. And I use to watch E.T.V. my fantasies were wild and my daughter was asleep beside me.

PARTICIPANT 3

I woke her up and I told her she must go to the toilet because she had this habit of weeing in the bed. So I used this as my decoy or advantage to undress her and because she had to take her pants off to go to the toilet and I kept her pants off after she went to the toilet. She was very drowsy and in a sleep mode – and she would like make the sound "hrrrrrrr". So I carried her from the toilet to where I was sitting in the lounge. And what happened was, I would take of my pants and she did not have any pants on. And she would lie on her back on my chest and I would play with her vagina with my fingers to arouse her in such a mode, while also watching E.T.V and also masturbated myself. The feel of bare skin on me and watching an arousing movie – I just needed something to touch at the particular time.

My victim – my girlfriend's daughter did not say anything – she did not say 'please stop', which made it easier for me. I don't know whether she pretended not to be affected or just was too afraid to say anything. I also occasions when my own daughter slept over.

Both girls came over to my room to play games so I played along but I changed the game to suit myself because what I wanted from them was a game that will give me some kind of arousal – sex arousal so that I could later on masturbate, because my girlfriend was not around. Basically what would happen was that my fantasies and the images of what on TV all of it would come together and this played an integral role of coming together.

Both girls were around six years old. I had a blanket pulled over us and I first started with my girlfriends daughter – by putting my hands down her pants and playing with her vagina then showing my daughter what was happening with my hand on her vagina. Then I put my hand on my daughter's vagina, and she allowed me to- but it was basically a game that was played between the three of us. Why did you turn to a child when you can have sex with an adult? Because at that time there was opportunity was all open and it was all clear. I have a problem and I need help and

this is what I am getting in my current programme. The children don't have a say I was in control – it was my household and I was in charge. And I liked the game of seduction with children and if I played it well I could actually score. I found out that children close to me were an easy target even my own. I was a father figure and they needed to listen to me whatever I said and did. I manipulated my power and their trust and authority to selfishly gain my own personal sexual satisfaction.

PARTICIPANT 4

I victimised my stepdaughter she was five years old at the time. It started where I use to have to bathe her when she was very little. My wife expected me to bath her, change her, get her ready for supper and things. But she would also come into the bathroom when I was bathing and her mom would scold and tell her not to, but she would do it even more. Watched me bathe and get dressed. I picked up on it and I would let her come into the bathroom and watch me. And we started developing like a friendship and said that there was nothing wrong with it and I let her. She was curious and she would come into the bathroom and I would tell her that 'but you really want to do is wash me' and she would say 'no'. But I would insist that she was lying and that was what she wanted to do and she okay yes – that's what she wanted to do. And so I let her wash me and she would start and wash my legs and my arms and my back and I use to stand up and let her wash my private part. Then she would be in the bathroom and I would go into the bathroom and tell her that she was not washing well and I would take the soap and wash her and showed her how to do it and I would wash her arms, her back and bum and private parts. I don't think she took any notice of it and then later I would put be in my room putting cream and she would come in and I would ask her what she wanted and she would make an excuse to stay. I insisted that she was lying and that she wanted to put cream on me and I would allow her to put cream on me, throughout my body and on my penis and it started to get firm and I would tell her to leave. Then after that she would go to her room and I would go in and tell her now it's my turn to put cream on. And she would stand there and I would put cream on and rub her fanny and she would not enjoy it and I would say to her – 'See it does not feel nice'. On another occasion I was in the bathroom masturbating and I would leave the door unlocked and she would come in and I would chase her out and she would come back in and I would then insist that

she wanted to wash me and let her. And I would stand and when my penis use to get firm I would send her out.

I use to watch a lot of porn, first it use to be of older women, and then younger women, and pregnant women, multiracial women, you would get tired of the one thing and move to something more interesting and start to fantasise. I thought of how I could put my penis into her mouth without her knowing and I devised a plan and I called her into the kitchen one day and I asked her if she wanted to play a tasting game. And I blindfolded her with two dishcloths and there were pork sausages on the counter and marmite and a whole lot of things. I let her see them all then I blindfolded her. I took one of the pork sausages and I dipped it into the peanut put. Then I dipped my penis into the peanut butter and put it into her mouth and asked her if she knew what it was and she had this funny look on her face. But I got scared and I quickly put my pants back on and I took off her blindfold. And she asked 'Daddy why did you do that'. And I pretended not to understand what she was talking about and she said 'put your thing into my mouth'. And I said don't be ridiculous. But it scared me and I was frightened. Yes it was very easy to deceive my stepdaughter and my wife, and her granny.

PARTICIPANT 5

One of the ways of grooming was when my wife was busy cooking, and she would ask me to help with the bathing which I was eager to do at that point but I also made like it was a hassle so that she would get the impression that I don't really want to do it but it was actually what I wanted to do- to be close to my victim in the bath without any clothes. I would then have an erection and I would ask my stepdaughter to touch it only if she wanted to. She would become interested when it got erected in the bath. And she would touch it but I was very cautious as the mother use to come in to see if everything was okay and so I had to be very careful of that.

Another way of grooming – especially if there was discipline from my wife then I would make like I was the good parent comforting her or trying to portray to her that I was a good parent, just to get close to her, as I was frightened of being found out. In my mind the closer the relationship I had with the child will decrease the possibility of

me being caught or her speaking against it out and she would be loyal to me. So that's how I operated.

She was three years old when I started bathing and taking care of the bathing. I remember looking at her naked and fantasying and getting an erection. And the whole process escalated – the bathing and the fantasy. It continued with my victim up to the age of eight years and that was the way I closed in on the victim.

At other times I would touch her inappropriately – like playing and then ticking her in places on her genitals but very briefly – to get her used to the idea but most of the offences happened at night when everyone was sleeping. That was the time that I closed in on the victim. From four years to eight years I abused her and I did not get caught. I showed favouritism towards her but it was false, I did not have much feeling for her but I showed this false sense of favouritism because the other child was only a new-born baby. And all these small little things that you would try to get the child to trust you and lean more towards you as a parent then the other parent- by way of manipulation. I would make sure that I would get what she wanted as I was scared that if I did not give her what she wanted it would break the bond that I was trying to establish.

I wanted to have that sexual power over her while she was asleep I wanted to look at her vagina and her body, without being disturbed or watched. So that it was just me in my fantasies and the victim lying there. That was what I wanted. And in my mind also she would wake up the next day and she will never ever know that abuse happened. That is the way I planned it because I thought the best way for offending – the best way not to get caught as the victim did not know that she had been abused. So in my mind that was the best way.

PARTICIPANT'S INFORMED CONSENT

Participant's Name: _____

Researcher: Ms Linda Naidoo, UKZN, Durban

1. Title of the study

   Understanding Child Sex Offenders: Implications for the Protection of Children

2. Purpose of the study

   The purpose of the research study is to understand the characteristics, mind-set and modus operandi of the sex offenders who sexually abuse children to determine its implications for the prevention of child sexual abuse.

3. Procedures

   I will allow my file to be utilized, will participate in interviews, and allow tape and video recordings for the research purposes.

4. Possible discomforts

   I understand that I may talk about some painful events regarding my circumstances. This may evoke discomfort. I trust that the researcher is a qualified therapist that I have a relationship with her and she will do her best to minimize such discomfort.

5. Benefits of the study

   I understand that there may not be any immediate benefits for me participating in the study; however the results of the study may contribute to the knowledge base of those involved in the protection of children

6. Rights of the participants

   I have the right to withdraw myself from the study at any given time, should I change my mind about participating in the research.

7. Financial compensation

    There will be no financial compensation for participation in the study.

8. Confidentiality

    In order to accurately record what is said in the therapy sessions, a video recorder will be used. The recording will be only viewed by the researcher and will be stored at the office of Childline KZN and incorporated in the file records, together with other raw data material after the completion of the study. During the research period the interview notes and recordings will be kept in the researcher's home, however it will be securely stored away. I understand that all names, details and personal information will only be known to the researcher and will be kept confidential. My name will not appear in the research report or any other publication.

    Should I have further queries or questions I can call Linda Naidoo on 0837931449

    I understand my rights as a participant and I voluntarily consent to my participation in the study. I understand what the study is about, how and why it has to be undertaken.

    _____ _____
    Caregiver's signature

    Date _____

    _____ _____
    Researcher's signature

    Date _____

QUESTIONNAIRE ONE: SERVICE PROVIDERS OF CHILD PROTECTION

Researcher: Ms Linda Naidoo, UKZN, Durban

Information on the research study.

Title of the study

Understanding Child Sex Offenders: Implications for the Protection of Children

Benefits of the study:

I understand that there may not be any immediate benefits for me participating in the study; however the results of the study may contribute to the knowledge base of those involved in the protection of children

Financial compensation

There will be no financial compensation for participation in the study.

SECTION A: IDENTIFYING DETAILS

1. What is the name of the organisation that you are employed at?
   _____

2. What is your role and function at the above-named organisation?
   _____
   _____

SECTION B: RESPONSES TO THE DVD

1. What emotive response did you experience after watching the video?
   _____

   Explain your aforementioned response

   ._____
   _____
   _____

2. Was there anything new or different that you learnt from the DVD?

_____

_____

_____

3. Do you think that you are more equipped, after being exposed to the video to understand the strategies of the offender who sexually abuses children? _____

4. How do you think this information obtained from the DVD can be used to improve the protection of children

_____

_____

_____

5. What are your recommendations for the prevention of child sexual abuse

_____

_____

6. Society labels victims as sometimes being responsible for the abuse, do you think that, that is true after being exposed to the video? Explain your response.

_____

_____

_____

_____

Thank you for participating in this research study.

LKN

QUESTIONNAIRE TWO: PARENTS AND CAREGIVERS

Information on the research study.

Title of the study

Understanding Child Sex Offenders: Implications for the Protection of Children

Benefits of the study

I understand that there may not be any immediate benefits for me participating in the study; however the results of the study may contribute to the knowledge base of those involved in the protection of children

Financial compensation

There will be no financial compensation for participation in the study.

SECTION A: IDENTIFYING DETAILS

1. What is your relationship to the child that was sexually abused?

_____

2. Where do you live?

_____

_____

3. Did you believe or accept your child's initial disclosure that he/she had been sexually abused?

_____

Please elaborate on your response.

_____

_____

Have you been exposed to a child protection programme?

_____

Did the programme provide you with information to protect your child from child sexual abuse? _____

Explain your response.

_____

_____

SECTION B: RESPONSES TO THE DVD

1. What emotive response did you experience after watching the video?
_____

Explain your aforementioned response

._____

_____

_____

2. What have you learnt that is new from the DVD, in relation to the protection of your child?

_____

_____

_____

3. How do you think this information obtained from the DVD can be used to improve the protection of children

_____

_____

_____

4. Society labels victims as sometimes being responsible for the abuse, do you think that, that is true after being exposed to the video? Explain your response.

_____

_____

_____

5. What are your recommendations for the prevention of child sexual abuse

_____

_____

_____

Thank you for participating in this research study.