

Child Sexuality: Recent Developments and Implications for Treatment, Prevention, and Social Policy

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The subjects of children and sex can form such an explosive admixture that it may be controversial merely to raise questions about childhood sexuality as a matter for research and scientific consideration. Those questions which have been raised by professionals, researchers and therapists alike, have often been rather simplistic. They have asked, in effect, "Is incest or adult-child sex harmful to children?" Or, still less scientifically sophisticated, "How harmful are such experiences?" If we are truly concerned for the well-being of children, we must raise somewhat more difficult, more sophisticated questions. We need to ask, "What is the range of effects of early sexual experiences and the range of ultimate outcomes? And what accounts for the differences across this range?" Only when we fully understand the effects of various sexual experiences in childhood and can account for the range of outcomes will we be fully able to help children grow up to their fullest and healthiest sexual potential.

For a recent review of literature on childhood sexual experiences (Constantine 1981), findings from 30 studies were compiled and synthesized. Research studies were selected which dealt with the outcome of such experiences, especially data relevant to understanding differences in effects. Although these go back as far as the classic paper by Bender and Blau (1937), 11 of the studies have been published or completed within the last 5 years. The studies, listed in the bibliography, deal primarily or exclusively with the effects of incest or of sexual encounters with adults. Perhaps because of the human fascination for the exceptional, there is a notable lack of research exploring the effects of more common childhood sexual experiences, such as masturbation, sex play with non-related peers, and the sexual restrictiveness of anxious parents and ambivalent cultures.

The present paper is not a comprehensive or complete scholarly analysis. For details and further references the reader is referred to the complete review and to an earlier version (Constantine 1980). The purpose here is to summarize conclusions to be drawn from the literature taken as a whole and to explore the

implications in three areas. Findings will be discussed concerning implications for treatment approaches for victims of sexual abuse, what is indicated in the way of appropriate preventive measures, and, finally, what the implications might be for social policy, particularly laws concerning sexual activities with children.

New Research

The conclusions about childhood sexual experience drawn from this review may be considered new in two respects. The review constitutes a new and specifically focused look at many studies, and it draws particularly from newer studies which, as a group, tend to differ significantly from previous work in this area. Differences in methodology are reflected in differences in conclusions. The recent research often samples populations not well-studied in the past, and different sampling methods are used. A greater emphasis is being placed on samples drawn from the general population rather than from clinical or court cases. Snowball sampling which seeks out volunteer participants through advertisements and chains of referrals has been used in three recent studies (Nelson 1981; Symonds et al. 1981; Tsai et al. 1979). Research designs are becoming more sophisticated, especially in the use of controls. Meiselman (1978), for example, constructed a control group for her clinic incest cases by drawing at random from the same files an equal number of cases in which no incest occurred. Tsai and her colleagues (Tsai et al. 1979) used two control groups for her volunteer sample of victims who had sought therapy subsequent to a childhood encounter with an adult. The first control group consisted of volunteers who reported such experiences but who had never sought counseling or therapy. The second control group consisted of a matched sample who had not had any such sexual experiences.

Measurements are also becoming more sophisticated. Sociometric scales and standard psychological tests are being used more frequently. The Tsai study used the MMPI in evaluating long-term impact from molestation, and Finkelhor (1981) constructed and validated a special scale of sexual self esteem for his study of sibling incest. Even where sophisticated instruments are not employed, researchers are making greater use of concrete, objective criteria, such as the categories of family functioning used in Ingrams's study of boy victims of homosexual molestation (Ingram 1979). Paralleling this trend toward objectivity is a new interest in subjective experience, with subjects being asked simple but long neglected questions: whether they enjoyed the experience and whether they considered it a negative or positive one. Finally, analysis is becoming more sophisticated, with the use of factor analysis, ANOVA, and partial correlation, in addition to standard tests of significance. This is not to say that all the more recent work is completely rigorous and all earlier studies inadequate. Some recent work is clearly flawed methodologically. But the tendency is toward better design and execution and toward more unbiased exploration of the issues.

Only more recently have studies even raised the question of possible benefits or positive evaluations of such early sexual experiences. This more open, scientific approach is absolutely essential for a more complete understanding of childhood sexual experiences. We would not expect to learn much of real value concerning

sex in marriage if we only studied battered wives or recently divorced couples or if we only asked questions like: "On a scale of one to ten, how bad was it?"

Yet, merely to ask open-ended questions which allow for positive as well as negative responses is to invite attack. Some researchers and clinicians have even come under attack in the popular press (Time 1980; Leo 1981). The need to sensationalize rather than understand new findings and perspectives on child sexuality has led to accusations of professionals conspiring to promote incest or adult-child sex and to the labeling of their research as "mischievous" and "reprehensible"¹.

The Findings

The most important and consistent finding should not be in the least surprising, but many parents, as well as therapists, jurists, and social workers, express shocked disbelief when they hear it.

[1] There is a range of outcomes in both short term effects and long term consequences. These range from clearly traumatic experiences which appear to have caused serious social and psychological impairment, through experiences in which no negative effects are discernible, to instances where the early sexual encounters were experienced as positive or appear to have been beneficial.

Two thirds of the studies reviewed identified at least some children who were unimpaired by their experience or unaffected in any measurable or observable way. And a fifth of studies identified at least some children who seem to have been positively affected and/or who personally evaluated their experience as a positive/beneficial one. The percentage of children reported as harmed varies from study to study, but two recent surveys of college populations found that only about a third of participants in sibling incest had clearly negative experiences (Finkelhor 1981) while fully 77% of molested girls either overcame negative consequences or developed no subsequent problems, sexual or otherwise (Fritz et al. 1981).

It is absolutely imperative to recognize that childhood incest and child-adult sexual experiences cannot, on the basis of the available scientific evidence, be labeled as categorically negative or detrimental; neither are they necessarily positive and therefore to be advocated or recommended. But far more interesting than noting what ought to have been known all along is to try to understand why there are such varied outcomes.

Reported outcomes are a function of the type of study, among other things. Of the 30 studies reviewed, 13 deal with clinical cases, that is, with subjects in therapy, counseling, or psychiatric treatment. Criminal or court cases were used

¹ One controversial article (Leo 1981), was later criticized by The National News Council (a journalistic watchdog agency), which concluded (Complaint No. 48-81) that the article did not meet "accepted journalistic standard for fairness and accuracy of reporting," saying that it "distorts and misrepresents some of the views of the professionals" cited. The newsmagazine's treatment of the professionals was called "offensive," not only because they refused to publish letters of correction, but for their responses which "manifested an obtuseness to the issues that seems studied." Of course, the Council findings remain generally unknown and the original article appears to have been widely accepted, even among other professionals, perhaps because of the stature of the magazine

in another 9. The remaining 8 drew from the general population, that is, from subjects who were not preselected by virtue of being in treatment or because their cases had become criminal matters.

All of the studies of general populations report some neutral or positive outcomes; half report at least some positive outcomes. Of the studies of clinical cases, only one reports some positive outcomes and 1/3 report only negative effects. Of studies using criminal cases, only one reports any positive outcomes and 2/3 report only negative outcomes. It is clear that one reason incest and adult-child sex have been described in the past as so damaging is that the cases have been preselected in such a way that these findings are all but inevitable.

No positive outcomes were reported in research studying only short term effects, and more than half such studies found only negative outcomes. Where some medium to long term effects (more than one year after the experience) are considered, 3/4 of the studies report some neutral to positive outcomes. It is possible that the adverse effects of such sexual encounters diminish with time, although this hypothesis has not been tested directly. It is also likely that what is considered negative in the short term is different from what is considered negative in the long term. I did not like cutting my thumb on a jackknife when I was 7, nor did I like the first time I had a tooth cavity filled. From my reactions in both instances one would judge the short term effects as negative; but my thumb is unimpaired and my teeth are the better for the dental work, thus the long term outcomes would be considered neutral to positive. Comparisons are made still more difficult because most of the studies dealing with only short term effects have used informal, clinical criteria, as opposed to the more concrete and/or objective criteria employed more often in the long term studies.

Newer research is somewhat more likely to find some positive outcomes; none of the nine studies published prior to 1960 report any, while 5 of the 6 published after 1975 do.

A consistent finding in a majority of studies of all types concerns the effect of childhood sexual experiences on sexual behavior:

[2] Early incest or sexual experiences with adults tend to awaken sexual awareness in children, leading to heightened interest in sex and more sexualized behavior.

This is not per se a negative outcome, but can be problematic for parents and other adults who are unprepared to deal with explicitly sexual interests and behaviors in children. The attitudes of the children, on the other hand, are often that sex is an interesting and enjoyable activity, but hardly a central concern. Sandfort (1981) studying boys in pedophile relationships with men, and Johnston and Deisher (1973), reporting on sexually active children raised in permissive communes, both reached similar conclusions.

Subjects and Situations

The most important conclusions from the review concern differential outcome as a function of the subjects themselves and the nature of their sexual experiences. Despite widely varying methodology and criteria, some consistent overall patterns are evident.

[3] The type of sexual activity does not relate significantly to outcome; sexual intercourse is not more likely to be traumatic than genital fondling, for example.

The exception to this rule is that, compared to all other sexual encounters, simple exposure (of the adult genitals) is significantly less likely to be associated with negative effects of any kind.

[4] The research findings are contradictory regarding the age of the child at the time of the sexual experiences. Either it is not an important factor in itself or other factors are far more important.

Some researchers claim that younger children are more badly effected, while others argue that adolescents, because of their greater awareness of sexuality and sensitivity to social values, suffer more. But the two well designed studies by Tsai and by Finkelhor found no significant correlation between age and outcome. Tsai did find that duration of the sexual relationship and age at termination were significantly related with more negative outcomes.

[5] Age difference affects outcome. Relationships between partners far apart in age are more negative than those between partners of similar ages. Relationships between peers are more positive than those between different generations. (Therefore, other things being equal, sibling incest tends to be less problematic than parent-child incest.)

Finkelhor's study, for example, found that larger age differences between partners were significantly related with more negative effects for the younger partner.

Not surprisingly, the child's perception of the experience is closely related with outcome.

[6] The more positively the child evaluates the experience, the less likely there are to be negative consequences.

Various studies supported the importance of the child's evaluation of the experience as related to outcome. Certain factors turn out to be related to both evaluation by the child and to outcome.

[7] The use of force, threat, or coercion is associated with more negative evaluations by the child and with more negative outcomes.

[8] Children who are active initiators or perceive themselves to be willing participants evaluate their experiences more positively and are less likely to be negatively effected than are unwilling participants.

[9] Children who consent passively or unwillingly, that is, who give explicit or tacit consent but who do not actually feel able to resist or decline, tend to be more negatively affected than even those who were openly forced or coerced.

The evidence supporting this conclusion is somewhat indirect but also rather diverse. Benward and Densen-Gerber (1975) found that what they termed "passive consenters," children who gave verbal or implicit consent but did not actually want to participate, suffered the most. Both Finkelhor and Meiselman report that the use of persuasion and bribes between siblings was common, particularly where one partner was significantly older, and in Finkelhor's study, age difference between partners was more strongly correlated with effects than even the use of threat or force. Meiselman and others found that the ability to end a relationship on the child's initiative is a factor contributing to more favorable or less negative outcomes. The even more recent work by Fritz et al. (1981),

unavailable at the time of the original review, lends further support. They found that children who had been subject to "positive coercion," inducements by rewards or persuasion using positive reinforcers, actually fared less well than those who had been subject to "negative coercion."

It is possible to sum up these last three points, and the many different ways in which they are supported by the research, in a single, powerful concept.

[10] The most important determinant in the outcome of childhood incest or adult-child sexual encounters is the child's perception of freedom of choice in participating.

Not the nature of the activity, the age of the child, the structure of the incidents, or even the assessment of adult caretakers, is as important as whether or not the child felt free to participate or not in the sexual activity. It is very important to understand that this has nothing to do with conventional notions of whether or not children in a dependent relationship can give truly informed consent, nothing whatsoever to do with psychological models of development of cognitive abilities or acquisition of the skills in making informed judgements. It appears to be a basically situational and personal matter of whether or not a particular child in a particular relationship feels free to say no or to participate willingly.

The research supports the notion that early sexual experiences of the kind being considered are not, in and of themselves, the causes of social or psychological impairment. The findings are consistent with the notion of two emotional elements as intervening factors. The immediate emotional reaction, especially the experience of fear and anxiety, is most important in determining the short term outcome. It becomes related to long term consequences when these negative associations are generalized to other sexual experiences or to all members of the sex of the partner. Guilt seems to be the principal intervening element in contributing to adverse long term reactions. It is the most nearly universal component of clinical cases of incest.

The difficulties experienced by "passive consenters" are easily understood in terms of guilt. These victims feel caught in the bind of being culpable yet, ultimately, incapable of resisting. They consented superficially when they perceived no real alternatives. Often their experiences are negative in themselves. To the burden carried by the victim of force an extra burden of guilt is added for the passive consenter. They feel guilty for participating and guilty for not having actively resisted. The anger they could turn toward the molester had they been forced, instead is often turned inward. The recent study by Fritz and colleagues found that the "guilt induced by succumbing to molestation without physical force is the basic factor" in negative effects in later adult life.

Guilt can arise from pre-existing attitudes and knowledge, but it may also be induced by caretaking adults after any incident. Cases are reported of victims of forcible rape who, by the behavior and attitudes of their parents, the police, and social workers, were made to feel guilty for their own victimization.

[11] Outcome is not related to the sex of the child participant. Girls do fare somewhat worse than boys, not because they are girls per se but because, as girls, they are more likely to be the younger partner, more likely to have consented passively, and more likely to have been subject to force or coercion. When these factors are controlled for, sex differences disappear.

It is worth noting that nothing in the preceding summary supports the notion that child sexuality is in any fundamental way different from adult sexuality. The factors which emerge as important in differentiating more negative experiences of children from less negative ones are simply the same as ones which influence the outcomes of adult experiences.

Treatment Implications

What do these conclusions from research findings imply for treatment of children who are found to have incest or adult-child sexual experiences? The implications are fairly clear and simple, even if somewhat at odds with current practice.

[1] Treatment should reduce any anxiety or stress associated with the experience. The child should be helped to dissociate current negative reactions from feelings and attitudes about sex and sexuality in general. Where a child has experienced an encounter as positive, treatment should not undermine this association.

In view of the connection between children's evaluations of sexual experiences and outcome, it seems particularly wrong to attempt to convince a child that something experienced as positive was in fact bad. Attempts to deny or minimize the feelings of pleasure or well-being a child may have experienced are also contraindicated.

Treatment experience has shown that, by becoming aware of their own sexual feelings and pleasures and accepting without fault the part they played in their experiences, victims of sexual abuse are helped to overcome and to re-establish a positive sexual self-image (Reibel 1980). This, of course requires that treatment professionals see the child as a sexual being in a sexual relationship. The common denial and redefinition by parents and helping professionals may often be a sincere but misguided attempt to protect the child from further sexual experiences. It can also reflect adult ambivalence or negative attitudes about sexuality in general and that of children in particular. Again, an "early" sexual "awakening" leading to a heightened interest in sex may be problematic for parents and other adults, but it cannot be said to be a negative outcome in itself.

[2] The formation of guilt should be vigorously countered by parents and helping professionals. If already present, efforts should focus on reducing guilt.

Of course, guilt over sexual feelings in a situation can only be dealt with once the sexual feelings are acknowledged.

[3] The intensity of treatment should be related to the child's perception of the experience as positive or negative and to the child's perception of freedom in choosing to participate or not. "Passive consenters" and victims of "positive coercion" need special attention.

It is possible that no treatment or special attention at all is needed or appropriate for any incident which a child experienced as a voluntary and positive experience.

Implications for Prevention

Prevention should be aimed at reducing the likelihood of the kinds of experiences which carry the greatest risks for children and reducing the probability of adverse reactions from those that do occur.

[1] Children need to have full knowledge of the sexual situations they may encounter. Sexual knowledge and realistic information about the risks of molestation should be made more freely available to children.

Realistic knowledge about sex reduces the likelihood that a child could be tricked or misled into an undesired situation or relationship solely out of ignorance. Lack of knowledge increases the level of anxiety which can be expected in a sexual experience. Vague warnings about strangers or what "some people might try to do to you" also only serve to elevate fears and anxiety. Warnings about strangers are particularly inappropriate, as the vast majority of encounters are with family members or familiar adults.

Open and straightforward communication with children about sex and about their sexuality encourages the same openness in children. Sexually ignorant children, anxious and not experienced in talking about sex, are the most likely to keep an assaultive situation secret. At times, carrying such a terrible secret may be the most damaging part of the entire experience (Reibel 1980).

[2] Well-behaved, compliant children are particularly at risk. Children need to be encouraged to be independent and to make judgements about their own activities based on their own feelings. They need to be aware that they need not comply with the wishes of adults who would exploit them.

Unfortunately, many adults may be ready to encourage their children to say "no" to sex, but still want conformity in other areas. This attaches a special significance to sex. Moreover, if the child gets the idea that he or she is only free to say "no" but never to say "yes" to sex, then the notion that sex is something bad or undesirable is communicated. There remains then the added risk of setting up a fascination with implicitly taboo activity or of creating strong approach-avoidance feelings.

[3] Positive, unconflicted attitudes about sex as a healthy, desirable part of a normal life should be promoted from the earliest ages.

[4] Appropriate, low-risk outlets for sexual curiosity and means of acquiring sexual experience should be encouraged. Sexual experiences between children who are close in age and under conditions which do not in themselves generate stress or anxiety would be appropriate.

Social Policy Implications

There has been some interest in The Netherlands (Melai 1980), as well as in England and the United States, in the matter of legal reform regarding the age of consent, that is, the age which, under the law, a child is considered capable of consenting to sexual relations. The matter of the appropriate legal stance regarding incestuous sexual relations and sexual relations between a legal adult and a minor have arisen in this connection.

For this discussion we are considering only sexual encounters where one or both parties is a legal minor. Sexual relations between adults are a separate and somewhat simpler matter. Were we to base our legal structure on the scientific findings available now, it would have to distinguish three forms of participation by the child: unambiguously voluntary participation, where the child was clearly an initiator or willing and active participant in the sexual activities; unambiguously involuntary, where the use of force, threat of force or other serious consequences,

or coercion precludes voluntary participation; and ambiguous participation, where the nature of the child's participation was unclear. Into this last group would fall not only borderline and ambiguous cases but also those of "passive consent."

Because of the special risks attendant to cases of "passive consent," the law would also have to distinguish between relationships involving peers and those involving partners of substantially different ages, even where both were minors. The research makes clear that it is not enough merely to treat adult-child sexual relations as a distinct category, as a substantial age difference in itself increases the potential for abuse and "passive consent." For the same reason, some special consideration must be taken of children in "dependent relationship" to older minors or adults.

Two classes of sexual crimes with minors would be recognized: (1) felony sexual assault of a minor (a serious crime) and (2) misdemeanor sexual activity with a minor (a minor crime). The punishment for these two classes would differ accordingly. In addition, an added charge carrying an additional penalty could be brought where a position of special authority or responsibility were misused in a way causally related to criminal sexual activity with a minor.

[1] Any use of force or the threat of force or of threats of other serious consequences (such as blackmail) causally related to sexual activity with a minor would constitute felony sexual assault.

No distinction under the law would be made depending on the age or sex of the participants or their relationship. Assault is assault.

[2] Where force or threat was not involved, the law would distinguish relationships between age-peers from those between nonpeers. Non-assaultive sexual activities between children who were peers would not be a matter for the law.

The age of the younger partner would be the determining factor. Many guidelines are possible, but any rational scheme would have to take into consideration that a small age difference among very young children can be significant. On the other hand, all such age thresholds will be arbitrary, and there is the risk of burdening the law with unnecessary complexity which may not stand the test of scientific or social progress. Based on his research, Finkelhor suggests that, under the age of 9 less than 2 years age difference should be considered a peer relationship; up to 13, less than three years difference would still be a peer relationship; up to 18 (or the legal age of majority), less than 5 years would still be a peer relationship. Under the law, however, cases where the older partner was under 18 would generally be handled by the juvenile justice system in any event.

The law in the Netherlands and its proposed revision (Melai 1980) makes distinctions at the ages of 12 and 16. The age of 12 is developmentally significant in that the capacity to make informed judgements is, on the average, fully developed by then.

One among many defensible compromises would be to define as peer relationships: (a) cases where the younger partner is under 12 and the older partner is no more than three years older, (b) cases where the younger partner is 12 or older but younger than 16 and the older partner is no more than five years

older, and (c) all cases where both partners are 16 years or older. Again, these criteria are, of necessity, somewhat arbitrary, but some similar criteria are probably necessary for legal precision.

[3] In non-peer sexual activities (not assault) where one or both participants is a minor, the perception of free choice of the younger partner would determine legal status. The determination would be made on the basis of the child's own testimony in an in-depth interview by a court-appointed professional. Where the younger partner is determined to have clearly and unambiguously participated willingly, in his or her own perception, then no crime would have been committed. Where there is doubt that the younger partner's participation was fully voluntary, a misdemeanor (minor crime) would be charged against the older partner if a minor and a felony (major crime) against the older partner if an adult.

These provisions would put the older partner, especially an adult, at a legal disadvantage. In view of the greater risk to the younger partner, especially that attendant on passive consent, it can be argued that the older and more knowledgeable partner should have an extra burden of responsibility to assure that a substantially younger partner was indeed participating willingly in any sexual activity. The criteria outlined above only concern criminal charges. In no way is it implied that due process for the accused would be abridged. An adequate defense would be to prove in court that the younger partner was sufficiently informed to make a decision whether or not to participate and did, in fact, feel free not to participate.

This proposal is quite different from that of the Melai Commission. They, too, are centrally concerned with distinguishing voluntary from nonvoluntary participation but make the distinction on the basis of "the subjective intention with which adults make sexual approaches to young people." They conclude that "the initiative of the perpetrator towards the young person is the essential element of the offence." But the intent and initiative of the adult is not what determines the impact on the child. The research to date points to the child's subjective experience as the central concern. If it is the child's person which is to be protected from being violated against the child's will, then it is the child's will which governs the determination.

The case of older partners who are in a relationship of responsibility or supervision toward children is a special one because of the potential for misuse of that position. This applies to teachers, parents, step-parents, youth leaders, counselors, and even baby-sitters, among others. It seems unwarranted to presume that sexual activity between a minor and a person with such a special relationship necessarily implies misuse of that relationship. All such relationships are, however, inherently not between peers. Furthermore, the person who takes advantage of such a relationship is guilty of a serious violation of social trust.

[4] All cases of sexual activities between a minor and a person who is in a position of responsibility or authority over the minor would be treated as non-peer relationships. Unless it is determined beyond reasonable doubt by preliminary interview that the the younger partner was clearly and unambiguously a willing participant, the presumption would be that the position of authority or responsibility was misused and a crime would be charged. The burden of proof that there was no misuse of position would shift to the accused. Where misuse of authority or responsibility is not then disproved, there would be an additional penalty for misuse of authority.

These proposed legal provisions are summarized in Table 1.

Table 1. Proposed legal disposition of sexual activities with minors

Relationship	Younger partner's participation		
	Clearly voluntary	Uncertain	Involuntary
Peer	No charges	No charges	Felony assault
Non-peer			
minor accused	No charges	Misdemeanor	Felony assault
adult accused	No charges	Felony assault	Felony assault
Special relationship			
minor accused	No charges	Misdemeanor and misuse of authority	Felony assault and misuse of authority
adult accused	No charges	Felony assault and misuse of authority	Felony assault and misuse of authority

The research does not support treating incest as any different from any other sexual relationship. Opinions are plentiful, but there are no consistent findings that incest is any more or less traumatic than comparable experiences with non-relatives. It may be that younger partners in incest are, by virtue of training to conformity and their dependent position, more likely to become passive consenters, but it is still not the incest per se which makes the relationship more undesirable. Parent-child incest would obviously come under provisions for "special relationship."

On sibling incest, some recent research reaches rather challenging conclusions. Finkelhor (1981) found that for girls, sibling incest which was seen by them as positive or which was with a brother who was near in age, was associated with higher levels of sexual self-esteem than found in girls who reported no or other forms of childhood sexual relations. On the other hand, boys who had sibling sex experiences exhibited lower sexual self-esteem.

It is not yet clear what can be made of these findings, but it is clear that more research is needed, especially careful research comparing matched incest and non-incest experiences. We now know some of the factors which would have to be controlled for: age difference and conditions of consent, for instance.

Conclusions

Although the research on the effects of childhood incest experiences and sexual encounters with adults is still limited, some consistent trends emerge across studies. Such sexual experiences may be traumatic, inconsequential, or possibly even positive. There does not appear to be any basis established by research for regarding the determinants of the effects of childhood sexual experiences as fundamentally different from the factors operating in adult sexual experiences.

The perception of the child of being a willing or unwilling participant is the aspect of such experiences with the single greatest explanatory power in accounting for differences in the child's evaluation of the experience and in the long term effects.

From the research, rational policies can be derived for the areas of treatment, prevention, and law. The proposals presented above follow logically from what is now understood about the effects of sexual experiences on children. They are certainly not the only ones which could be so derived, but any such informed approach could offer many benefits to children.

Those who see the purpose of law and social institutions as being the enforcement of a particular morality or the protection of children from all sexual experiences will sympathize with neither the approach nor its conclusions. But there are those who would have the law support the right of sexual self-expression and development of everyone's fullest potential as a person, protecting these from violation and intrusion by society as well as by other members of society. It is hoped that such people may find here ideas to stimulate both thought and further study.

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