

Trauma-focussed treatment and support for individuals who have experienced sexual violence or abuse and their families

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Respond Mission Statement

‘To lessen the effect of trauma and abuse on people with learning disabilities or autism, their families and supporters’

Respond Services

Survivors service - children and adults

- Psychotherapy in clinic and in 7 schools
- Independent Sexual Violence Advisors

Family service

- Psychotherapy, group support & advocacy

Forensic service

- Risk Analysis, Parenting, Psychotherapy, Circles of Support and Accountability
- Training/consultancy/clinical supervision

Prevalence of Sexual Abuse

- Martin et al, (2006) study on 5,000 women reported that women with disabilities were significantly more likely than women without disabilities to have been sexually assaulted within the last year.
- Withers and Morris (2012) found children with LD up to four times more likely to be a victim of sexual abuse than those without.
- Briggs (2006) reported rate of 32% of sexual abuse victimisation among a sample of girls with LD.
- Spencer et al (2005) found that from a cohort of 120,000 children, those with LD had an 8 times increased risk of sexual abuse
- Balogh et al, 2001 indicated that the majority of abuse is committed against those with a disability in the mild to moderate range.



LOSERS

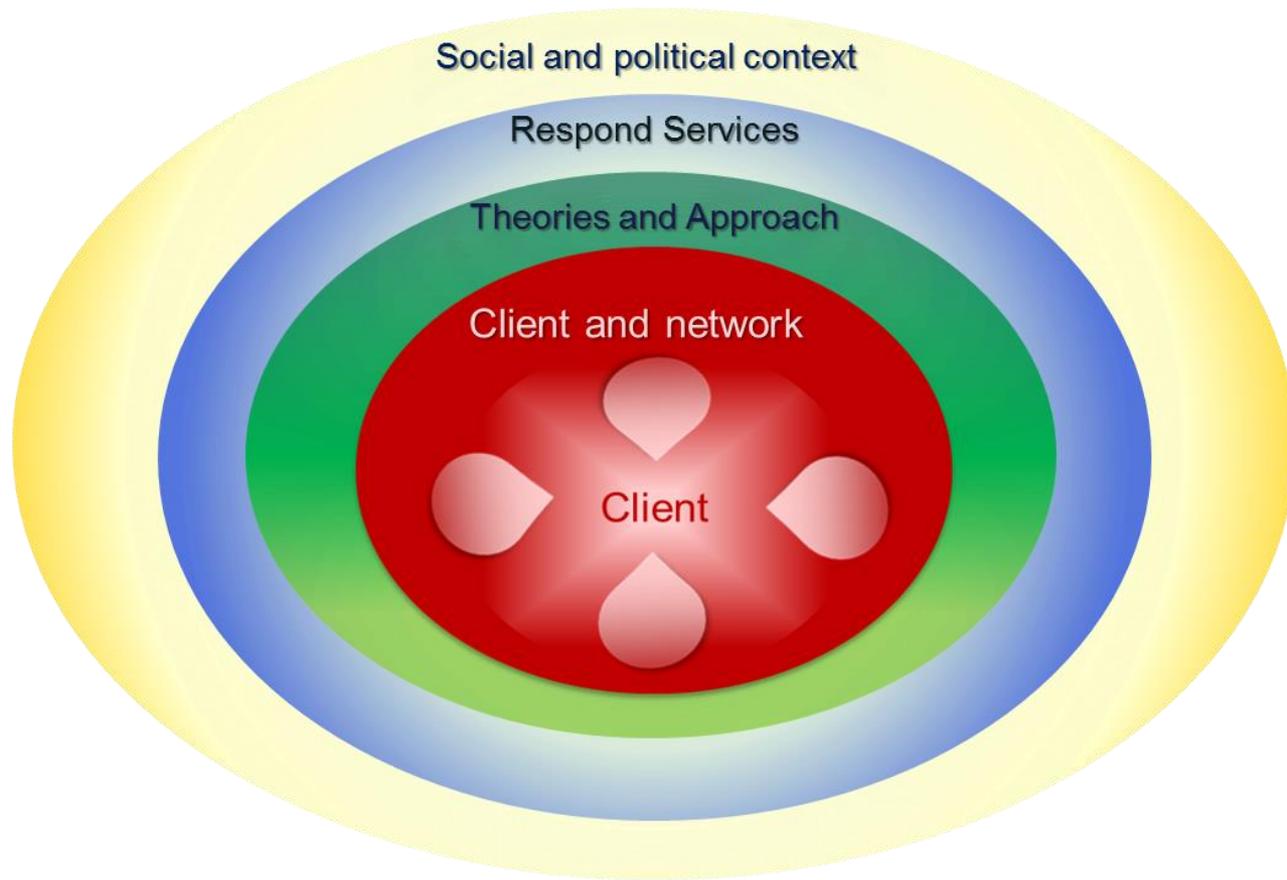
VERY RICH

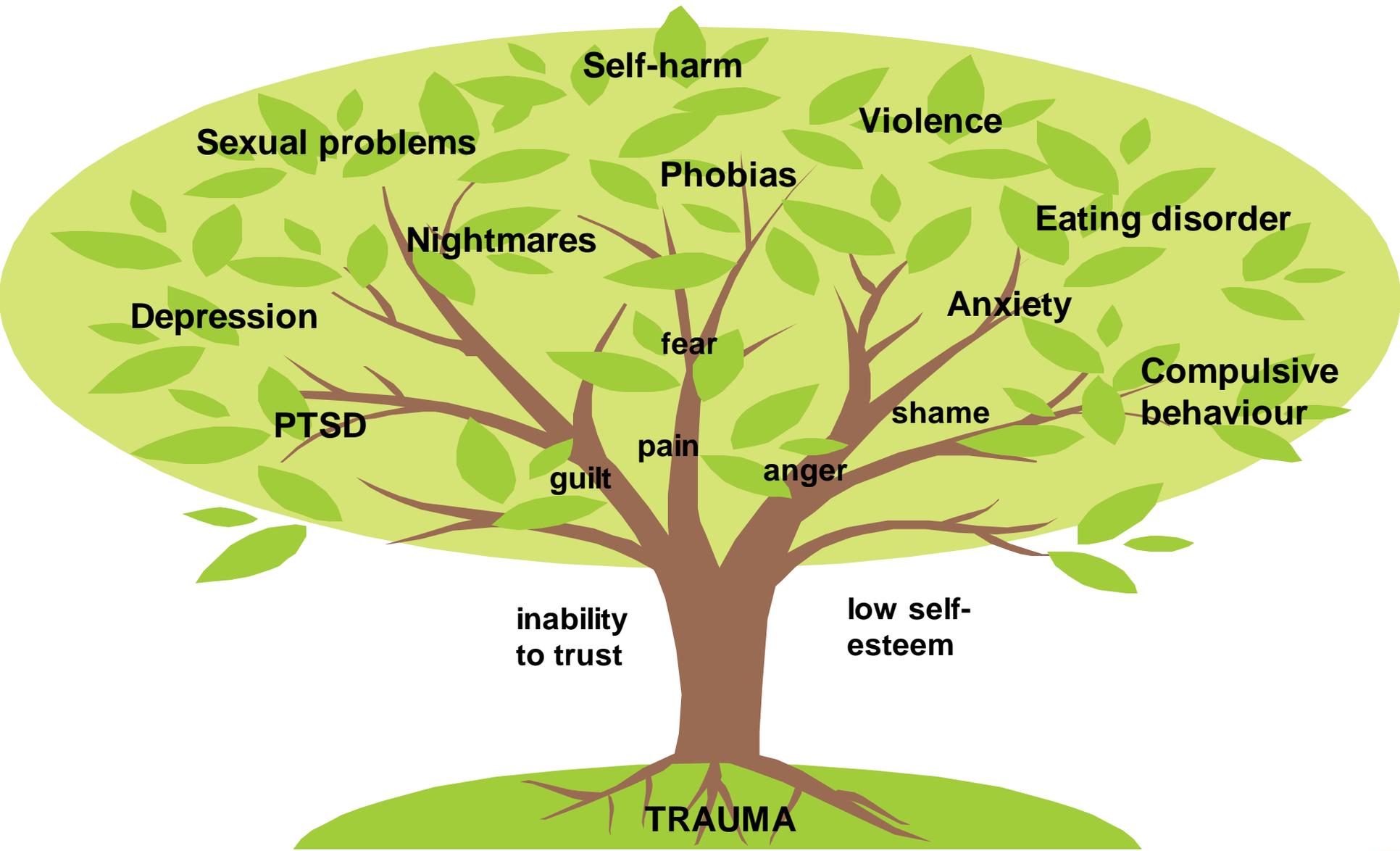
RIVER

LOSERS

NEW
SIMPLIFIED
MAP of
LONDON

Respond's Model





Professor Sheila Hollins' Three Secrets

**The three secrets that cannot be talked about are:
Disability, Sexuality and Mortality**

- The internalised sense of coming out 'wrong'
- Sex is what created their 'wrongness' – therefore it's felt as a destructive act and not a creative one
- The ability to consider death is hard for us all, but so much harder for those whose ability to think about life is restricted

Sexual Development Inhibitors

1. Often poor attachments and victims of sexual abuse and domestic violence
2. Lack of 'normal' sexual development and ability to experiment with peers
3. Society is often hostile, with many feeling isolated and marginalised
4. Parents/families deny or are rightly anxious of sexual development
5. Life is demanding and challenging leading to a desire to escape or disappear

LD & links to possible sexualised and/or offending behaviours

1. Limited sexual knowledge
2. More often supervised
3. More likely to be 'discovered'/lack of privacy
4. More impulsive (less inhibition)
5. Often unable to buy items for themselves that have an erotic charge
6. Difficulty in making peer relationships

Why psychotherapy?

1. Who needs it?
 2. When do people need it?
 3. How does it work?
 4. What can go wrong?
 5. What can some of the benefits be?
- It's not for everyone
 - It can make a huge difference but stability is needed
 - It can makes things seem worse before they get better

Challenges to containment

- Communication
- Network – family and external
- Medication
- Attachment issues
- Handicapped response to the world
- Societies response to disability

Trauma Treatment

Owing to environment/parenting/other factors - the mind has not developed to its full potential.

Treatment

Relational Psychotherapy with an Attachment approach

Aim:

to bring the client through the mental process attached to key stages of child development – enable them to become a robust ‘enough’ person who could then tackle the usual challenges of life – even an accidental event

Supporting Families

- Families are key to treatment success
- When ever possible we should include parents at all stages of engagement
- Robust communication with openness and honesty
- Providing a separate time and space for anxiety, fears and sharing concerns
- Containment of the family dynamics as well as the frame of the treatment

Support Staff

- Good selection procedures
- Specialist training opportunities
- Robust and regular supervision and support
- Good working environment
- Recognition by management of effects on staff
- Clear policies around complex issues
- Recognition of effects of the work/burnout
- Confidence that systems and policies are fit for purpose

Case Studies

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