

Care and Treatment of child-victims of **child-pornographic exploitation in Germany**



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Nationwide mailing 555 x questionnaire 1

Answered by:

- 108 specialized counselling centres = 44.4%
- 26 Child and adolescent psychiatric clinics = 17.7%
- 23 Client centred psychotherapists for children and adolescents = 21.3%
- 7 Psychotherapists for children and adolescents with trauma qualification = 12.3%

Being confronted with **child-pornographic exploitation (CPE):** (06/2000 – 06/2005)

- 84,8% reported „no“ or „rare“ confrontation with CPE,
- 14,6% reported „some“ or much („often“)
confrontation with CPE
within their work.

Counseling of CPE victims (06/2000 – 06/2005)

From 2000 until 2005 a total of **245** child and adolescent victims of CPE were being treated: **197 girls and 48 boys**

- **Most girls** (68) were aged 11 – 14, followed by the age of 6 – 10 (48 girls).
- **Most boys** (21) were aged 11 – 14, followed by the age 6 – 10 (16 boys).

Suspicion of cases of CPE and their distribution via internet (06/2000 – 06/2005)

A total of 88 institutions responded:

- 42% suspected CPE in **218 cases**
- 58% had no such suspicion

- 74% knew of no cases where CPE images had been distributed via internet

Questionnaire 2:

Was requested by 84 professionals from 39 institutions

Return: 39% (32 professionals)

Counseling/treating victims of CPE:

- Certain cases of CPE:
23 professionals reported about 53 girls
and 15 professionals reported about 23
boys
- Suspected cases of CPE:
38 girls and 55 boys – meaning that in
cases dealing with boys, suspicion of CPE
for boys was 3times as high as for girls.

Most victims were aged between 6 to 14.

What makes it difficult for victims to disclose CPE?

- “guilt”
- “fear of the threats of the abuser”
- assumption that maybe suggestions the victim might have made during counseling/therapy were not interpreted rightly by the professional.

Types of CPE images

- sexual acts between child/adolescent and adults
- touching of genitals
- vaginal abuse
- oral abuse
- posing for nude pictures and
- photographing/filming genitals.

Distribution via internet

- 50% of the professionals did not know whether CPE images of girls had been publicized via internet. Concerning boys this insecurity was even greater.
- 15 girls and 5 boys knew that CPE images depicting them were publicized via internet. 6 girls and 5 boys had seen 'their' pictures in the internet.
- Professionals suspected distribution of CPE images via internet in 24 cases concerning girls and 16 cases concerning boys.
- On the other hand 11 girls and 13 boys expressed such a suspicion themselves.

Data concerning perpetrators

A total of **118 perpetrators** was reported.

Concerning 58% of these abusers (68) more information was given:

- 90% of the abusers were male between ages 22 to 40, 61 male and 7 female perpetrators were of German nationality.
- Most of them were the “father” or a “father figure” or had a close relationship to the family as a family friend.

Strategies of the perpetrators

- “showing ‘emotional affection’, preference over others”
- "pretending wrong sexual behaviour to be normal."
- “presents, money”
- “threats” were used to abuse children for CPE
- “modern slavery, trafficking” played no vital role.

This seems to allow for the assumption that CPE takes place within close surroundings of the victims.

Treatment offered to victims

- therapy
- counseling
- preparation and accompaniment to trial
- pedagogic work.

Striking was the fact that rating concerning diagnostic assessment showed the greatest variation in comparison to all other categories.

What enables victims to disclose CPE?

- if professionals let them know that **THEY** know about CPE
- a trusting relationship and patience

Disclosure was being accompanied by shame, hate, disgust/loathing for both girls and boys. Girls would also show fear and denial. Boys would show guilt and speechlessness.

Networking / Cooperation:

- Most cooperation took place between professionals and youth welfare services, attorneys and police.

This cooperation was rated mostly as satisfying.

- Least satisfying was the cooperation with judges, experts on credibility of victims and district attorneys.

Overall cooperation was seen as being very dependent on a functioning personal level of all concerned.

Interviews

28 professionals from 13 institution
participated at 1 to 2 hour interviews

What is special about treating victims of CPE?

- Cases of CPE are cognitively as well as emotionally more challenging for the counselor/therapist,
- whereas for the victims the issues regarding the abuse rather than the filming or picture taking are of more relevance.

Confrontation

- Confronting victims of abuse with the question as to whether pictures were taken/films were made was usually not done by the professionals. They believed doing so could retraumatize the child and it would contradict the position of letting the victim set the pace as to what to disclose at which point in time.
- Some specialized counseling centers believed that their specialization considering sexual abuse would be enough to encourage disclosure – also disclosure of CPE.

Permanence of the images on www

- The fact that images of CPE could never be erased from the internet lead to feelings of discomposure and powerlessness for counselors/therapists. They assumed that victims would be just as challenged by it as soon as they would cognitively grasp the implication of permanence within the world wide web.
- In order to cope with “permanence” some professionals would use traumatherapeutic measures. Others believed coping as in healing not to be possible considering permanence.

CPE as a crime within close familial and social surroundings

- All reported cases of CPE had been taken place as part of sexually abusing a child within close familial or social surroundings.
- Structures of organized crime (mafia) or internationally operating rings were rarely ever mentioned. It seems that victims of such organized crime hardly ever find any help within the German counseling/therapy services.

Cell phones

- Sexualized assaults which are being photographed or filmed by peers using cell phones mean that victims are almost immediately being exposed as such within their close surroundings such as school or peer group.
- Quite often this fact leads to a gauntlet for the victim which enforces their feelings of shame and guilt. So far counseling centers have not developed coping and/or prevention strategies for this issue.

Demand #1: specialized training for professionals

- Information about magnitude, form and number of reports concerning CPE,
- information concerning diagnosis, symptoms of victims as well as how to help those victims,
- information on how to confront a client with the possibility of CPE within counseling/treatment,
- information as to how the fact that images were being taken affects the victims,
- information about the perpetrators/abusers.

Demand #2: Continuous and broad networking

- Networking within the psychosocial treatment and care structures as well as
 - other close areas like police, justice and medical care,
 - as well as regional, national and international networks
- are necessary!

Demand #3: Prevention

- Create a prevention tool with children and adolescents
- Install popups which will give links to help lines or online counseling
- Education about emotional as well as social consequences concerning peer violence via internet and cell phones by external experts
- Expanding online counseling



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