Sexual

Abuse
Versus
Consensual
Sex: Issues
to Consider
When
Treating
Latina
Adolescents
Who Have
Been
Kidnaped
or
"Robbed"

Monica Benitez

Kelson, Ph.D.

CULTURAL ISSUES

This article presents a framework for understanding the complex situation of Latina adolescents who have been kidnaped by someone they knew for the purpose of having sexual contact. In my clinical experience conducting sexual abuse evaluations with Latinas at a Child Guidance Clinic, I have encountered situations where it is not clear if the adolescent whom I am evaluating is the victim of sexual abuse, or if she, in fact, wanted to be sexually active

"El me robo" (He robbed me). These are the words that some Latina adolescents use to describe the act of being kidnaped by someone they know for the purpose of having sexual contact and possibly marriage. In order to clarify this issue, I would like to illustrate it with an example. Names and other variables have been changed in order to ensure confidentiality.

Elena is a 15 year old Spanish-speaking girl who comes from a very traditional Mexican family from a rural area. She is tearful during our meeting, and provides little detail while her mother is in my office. Elena's mother is furious and speaks about Elena's "robber", a Latino named Eugenio, with much anger. The Department of Children Services and the local police department are involved in the case.

When Elena and I meet alone, I notice that she has difficulty looking me in the eye. She hunches her shoulders, appears very timid and is hesitant to provide firm answers. When Elena begins to feel comfortable and I am able to obtain details of the event, I find out that Elena knew Eugenio. Eugenio is a 29year-old Hispanic male, who was her father's supervisor. Elena liked Eugenio, and she felt flattered by the fact that he would be interested in her. In fact, Eugenio had told Elena that he wanted to "rob" her. Although Eugenio did not tell Elena when it would happen, Elena had told Eugenio that the best time to rob her would be right after school. Eugenio "robbed" Elena and took her to an apartment, where they stayed for three days. Elena struggles as she describes sexual intercourse and other sexual acts. It becomes clear to me that Elena feels confused since she seemed to have liked Eugenio, but she either did not enjoy the sexual experience or is too embarrassed to admit it to herself or to me

At some point, Elena's family discovered Eugenio and Elena's location and Elena was returned to her parents' home. Eugenio escaped and his whereabouts are unknown. Elena's parents now want Eugenio to be arrested and to marry Elena. Elena tells me that she does not want her parents to have Eugenio arrested. Elena, however, does not know if she is ready for marriage. Neither Elena nor her family return for treatment after our second meeting. A few months later, I speak with a colleague who informs me that Elena had been hospitalized in a psychiatric unit as a result of a suicidal gesture.

I have evaluated other Latina adolescents who relate similar stories. Some cooperated with the kidnaping by giving the robber a signal, others are ashamed as they describe enjoying the sexual experience. I am also aware of adult Latina clients who describe having been robbed when they were adolescents Some of these adult clients are now either married to or living with their robber, while others have moved on to other relationships. It is essential to have a better understanding of this phenomenon in order to find effective ways of addressing it in treatment. Most of the adolescents that I have evaluated have been from rural areas of Southern Mexico. However, this does not mean that this phenomenon can be generalized to all Mexican adolescents from rural areas since Latinos are a very diverse group. Furthermore, although I have encountered this scenario when conducting sexual abuse evaluations, I would consider it an important but not a common occurrence

Culture and Religion

Most Latinos come from countries where the majority of the population is Catholic. Many of these very conservative societies have rigid rules regarding male and female sexuality, with rural areas being the most conservative. The culture frowns upon the open expression of women's sexual desires. Most men expect to marry a woman who is a virgin. In some small villages, if it is discovered that a woman is not a virgin when she gets married, her husband is allowed to return her to her parents' home, as if she were an object I hypothesize that some of my female clients were overcome with sexual desires, but they were trapped in a family system and culture that would not tolerate these desires. Therefore, for these women, having sex as a result of having been robbed was the only acceptable way to satisfy their sexual urges. Admitting to the desire and enjoyment of sexual activities leads to shame, since a good woman is expected to remain a virgin until she gets married.

Researchers have found that adolescents' sexual decision making is influenced by a variety of social, demographic and personality factors. The groups most likely to be influenced by others include females, Hispanics, individuals of low socio-economic status, and those who are religious (Juhasz & Sonnenshein-Schneider, 1987). Religion plays a key role in the Latino community, and religious beliefs should be considered when treating girls who report that they lost their virginity as a result of being robbed. Satisfied virgins and regretful nonvirgins show signs of greater "religiosity" and greater regard for "God's law" than frustrated virgins and satisfied nonvirgins (Young, 1986) White non-Hispanics are more likely than Hispanics and African Americans to report that they feel better about themselves after engaging in sexual intercourse for the first time (Langer, Zimmerman & Katz, 1995)

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Family Values

It is useful to obtain a family history from Latina adolescents who have been robbed since it may reveal that many of their female relatives (e.g. mothers, aunts) have had similar experiences. It is almost as if the family condemns but then continues the practice since it is the only acceptable way to have sex before marriage. Many families do not consider "robberies" abuse. Instead, the robber is expected to marry the girl or to live with her since he has now made his mark on the girl. Many Latina adolescents who have been robbed are emotionally rejected and thought of as failures by their families For some families, marriage rectifies some of the damage done to the girls as a result of the robberies. This does not mean, however, that any of these young women were ready or wanted to get married

Shame, as opposed to guilt, is the primary emotion most likely experienced by girls who have been

robbed since "the self" is identified as the cause of the event, as opposed to a specific feature or actions of the self that led to failure Having a good understanding of the role of shame in defining stigmatization is crucial to creating a treatment plan for these patients (Feiring, Taska & Lewis, 1996)

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Some Spanish expressions reflect a deep condemnation of premarital sex, and the blame is usually placed on the girls. Girls are held responsible for their virginity. "Honrar la familia" (Honoring one's family) is one of the most common expressions used by many Hispanics

It is important to keep in mind that talking about sexual issues is not an easy task. Adolescents who are not familiar with psychotherapy and the rules of confidentiality may not be willing to openly discuss their feelings, for fear of what therapists may do with the information they disclose. Young women may also refuse to openly discuss sexual issues with an evaluator because such discussions might lead to exposing other personal and/or family secrets (e.g. being sexually active prior to being kidnaped, being molested by a family member prior to being kidnaped, domestic violence, alcoholism, etc.).

Rape versus elopement

Just as I have had clients who have been robbed and enjoyed the sexual experience, I have also had clients who reported feeling excited when they were initially robbed, but who then became terrified when they had sexual intercourse. Many of the adolescents whom I have treated and evaluated come from conservative families who were originally from rural areas. Most of these girls had no access to even the most basic information regarding human sexuality and the reproductive system, and had no idea of what

sexual intercourse involved. Some cases were very clearly rape, and the girls used the word rape (me violo) to describe what happened to them. However, girls who have been raped often do not realize or admit that they were raped (Allison & Wrightsman, 1993). Many of my clients experience symptoms associated with post traumatic stress disorder, including flashbacks, nightmares, and intrusive recollections of the experience It is possible to hypothesize that many girls felt comfortable with kisses and hugs, but were not ready for intercourse. Nevertheless, they may have believed that they had no choice in the matter since they went willingly with their robbers Mynatt and Allgeier (1990) found that sexual assault by an acquaintance is only reported 2% of the time. It is often difficult for people to consider forced sexual intercourse between people who are dating or romantically involved as rape. A review of the literature suggests that males tend to perceive women in acquain-

tance rape situations as being willing participants rather than victims (Bridges, 1991). Rapists do not perceive themselves as committing a crime (Vogelman, 1990).

A good number of the cases that I have evaluated involved situations where adolescents were in love with their robbers and gave them information which led to a

successful robbery. These cases still cannot be considered elopement since the decision was not made by two adults, and therefore, was not consensual. Nevertheless, there are treatment implications, since victims of sexual abuse experience different symptoms depending on their perception of how much control they had during the abusive experience. A 16-year-old adolescent who gave her robber information regarding the time and place when he could rob her may cope very differently than a 16-year-old who was robbed but had no idea when or where it would happen. In addition, the amount of cooperation provided by an adolescent to her robber may affect her feelings of shame or guilt.

The Stockholm Syndrome

The Stockholm Syndrome refers to the development of reciprocal, positive feelings between hostages and their terrorist captors, which is said to enhance the hostage's ability to cope with captivity (Auerbach, et al, 1994). The Stockholm Syndrome can also be applied to Latina adolescents who have been robbed by someone they knew. Like victims who succumb to the Stockholm Syndrome, girls who have been robbed are isolated and feel unable to escape once they have been robbed. Many girls have described being locked up, or being in a secluded place. In fact, many girls have described not having access to doors. Therefore, in order to survive, massive splitting occurs

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as girls in these situations need to perceive their robbers as kind. Even when there is the possibility of escaping, girls may feel that they cannot go back to their families since they will be emotionally rejected because they are no longer virgins Therefore, remaining with and believing in their robber is their only choice I have heard many adolescents romanticize their experience by describing it as exciting and passionate. The robber is perceived as seductive, powerful and persistent. Some of my clients have reported being robbed by someone just a few years older than them (another adolescent), while others indicate that the robber was much older. My application of the Stockholm Syndrome to being "robbed" is only a hypothesis, which needs to be tested by conducting research.

Other potential reasons for being kidnaped

Although this article has hypothesized that the purpose of being kidnaped is to engage in pre-marital sexual contact, there are other factors that should be considered in these cases. In particular, young women who are victims may have experienced stress

prior to being kidnaped, which could have influenced their thoughts, feelings, and decision making processes. Clinicians should consider socio-cultural factors, including the following:

- a) The adolescent is in love with the kidnaper but their families are at odds with each other.
- b) The adolescent is the eldest of a large family and feels that she must leave to relieve the financial burden on the family.
- c) The adolescent's family might have sent her to live with other relatives in a part of the country where she does not have any friends, thereby creating feelings that her extended family does not really want or love her.
- d) The adolescent may be a victim of emotional, physical and/or sexual abuse and may see the kidnaping as a way out of an abusive household.
- e) The adolescent may seek to advance her socioeconomic status by being kidnaped by a man who is better off than her family of origin.

Clinical and treatment issues

Clinicians have many issues to consider when working with adolescents who have been robbed. These issues encompass interactions with other professionals involved in the case, cultural frameworks, the role of stigmatization, and an optimal treatment framework.

When a girl reports that she has been robbed, it becomes very confusing for all parties involved. The police may feel conflicted since the girl may not want to press charges, while the family wants the robber arrested. Child protective services may wonder why the parents want their daughter to marry her "rapist", which then leads to considerations regarding the appropriateness of keeping these girls at home with their parents. Clinicians may struggle with countertransference issues since therapists may at times experience these girls as oppressed young women who are not allowed to be sexual. Other times, clinicians may experience these girls as clearly rape victims. The clinician may need to consult with another clinician in order to provide appropriate treatment and work through their own countertransference as well as racial issues.

Stigmatization is the dynamic that most clearly encompasses attitudes towards self-blame and negative self-regard. Lewis (1992) discusses a model of stigmatization, which considers three dimensions to explain the causes of good and bad events: a) Internality vs. Externality; b) Stability vs. Instability; and c) Globality vs. Specificity. Internality suggests that the self is the cause of the event, while externality suggests that someone or something is the cause of

the event Stability suggests that the reason for the event remains the same, while instability indicates that the reason for the event may change Globality suggests that the reason for the event affects the individual's entire self, while specificity usually applies to a particular event or aspect of the self. It is possible to hypothesize that Latina adolescents interpret losing their virginity as a

result of having been robbed as something that is internal, stable, and global. Latina adolescents are most likely to see themselves as the cause for what happened. Therefore, the cause of the event is internal The self is the cause since some of them gave their robbers information which led to a successful robbery, while others felt too ashamed to admit that they wanted sexual contact. The event is most likely seen as stable because there is no way of recovering one's virginity, although many of my adolescent clients fantasize that a medical doctor might be able "to sew them back" Finally, the consequences of the event might be seen as global since, in the family members' eyes, the girl no longer has the same value Clinicians need to keep in mind that not all Latinas come from the same background, which would make this model of stigmatization inapplicable.

Given patients' negative self-attributions, a psychodynamic conceptualization is useful Clinicians need to be aware of transference issues that the adolescent client may display during treatment. A good balance must be maintained between exploring issues with the client, while at the same time strengthening the client's defenses to prevent decompensation. Cognitive behavioral interventions are of great value to

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these clients since cognitive distortions contribute to higher levels of depression. A key treatment issue is framing the kidnaping in a way that decreases the victim's isolation and stigmatization. Many of these adolescents are trying to do the culturally appropriate thing just as their ancestors did. Therefore, clinicians need to enlist the victim's family to help with the victim's recovery. Clinicians, however, should assess and determine if there has been any abuse in the family prior to making the family a part of the victim's recovery.

The patient's social and cultural background should be explored and factored into the clinician's formulation of the case and subsequent treatment approach. An adolescent's motivation for going along with her robber's plans should be understood and taken into account. Falicov (1988) discusses the importance of learning to think cul-

turally, and to consider a variety of factors in our work with clients. In particular clinicians must have a good understanding of not only the "client's map" but also the "therapist's map". Cultural Maps usually involve four dimensions with each dimension having its own sub-divisions a) Ecological Context: living conditions, employment status, community norms, housing, schedule, education and achievement, legal issues, medical and mental health conditions b) Migration and Acculturation: migration pattern, process of acculturation, language, social network, religion and intermarriage c) Family Development: Ideals and norms, developmental stages, transitions and rituals. d) Family Organization: Extrafamilial and intrafamilial boundaries Falicov indicates that by comparing the therapist and the client's map, we can obtain a qualitative estimate of cultural distance between the client/family and the therapist. Falicov suggests that a moderate degree of cultural distance is optimal However, if there is too much cultural distance, the therapist may become cautious, superficial, confused and/or judgmental. Conversely, too little cultural distance can block the therapist's behavior to become part of the family system.

In order to have a better understanding of adolescents who have been robbed, one should consider the following guidelines:

a) Young woman's age versus robber's age; b) young woman's and robber's ethnic background (including rural vs. urban upbringing); c) young woman's and robber's number of years in the United States and level of acculturation; d) relationship between the young woman and her robber (acquaintance, friends, etc.); e) young woman's level of involvement and participation, whether the young woman assisted the robber in any way (e.g., by providing a signal or giving the robber helpful

information, such as the best time to rob her); f) the young woman's concept of being robbed (e.g., romantic, passionate, rape, etc.) and whether someone in the family been robbed in the past; g) whether virginity is a value that the young woman's family respects; h) whether any aspect of the sexual relationship felt forced and at what point the young woman felt coerced; i) other factors that motivated the young woman to assist her robber (e.g., wanting to be robbed in order to alleviate the family's financial pressures, or to stop incest or other forms of abuse); j) Socio-

economic similarities or differences between the young woman and her robber.

Latina adolescents who have sexual contact as a result of these kidnapings often report a variety of symptoms ranging from anxiety to post traumatic stress. Clinicians treating these clients not only need to deal with clinical issues, but also need to deal with

the family's resistance to sexual education. Although sexual education is an important issue which is frequently discussed in the schools, many families may not be supportive of the schools' efforts to provide sexual education. Without appropriate education, Latina adolescents involved in these kidnapings can be exposed to sexually transmitted diseases and possible pregnancy.

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