

Ritualistic Abuse of Children: Dynamics and Impact

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Abstract

Ritualistic abuse of children is a severe form of child maltreatment that has only recently come to the attention of mental health professionals and law enforcement officials. Ritualistic abuse involves the repetitive sexual, physical, and psychological abuse of children by adults who systematically and deliberately terrorize the child victims in order to prevent disclosure. Ritualistic abuse may be intrafamilial, which is often intergenerational, or extrafamilial, which is often associated with day care settings. As a result of this severe and multifaceted form of maltreatment, child victims experience persistent psychological disturbances. This paper discusses the nature and impact of the physical, sexual, and psychological abuse reported by victims, as well as the phenomenon's implications for policy, practice, and research.

Ritualistic abuse of children is a particularly disturbing form of child maltreatment that has recently come to the attention of mental health professionals and law enforcement officials. Ritualistic abuse refers to repetitive and systematic sexual, physical, and psychological abuse of children by adults as part of cult or satanic worship. All individuals who engage in satanic or cult worship do not ritually abuse children, and references herein to cult-based ritualistic abuse pertain to practices which are illegal and not protected as First Amendment rights.

Reliable estimates of the extent of this problem are not yet available. The majority of professionals are unaware of this form of maltreatment and fail to recognize indicators of ritualistic abuse in histories of victims of child sexual abuse. Also, since children are usually too terrified to disclose the ritualistic abuse, most cases go undetected and unreported. Even when cases are reported, child protective agencies do not categorize them according to whether or not there was ritualistic involvement. A nationwide study of sexual abuse of children in day care centers, however, found that 13% of the cases involved allegations of ritualistic abuse (Finkelhor, Williams, and Burns, 1988).

Because ritualistic abuse has only recently been recognized as a serious problem, there is a void in the professional literature on this multidimensional form of abuse. Only one study to date has systematically examined the impact of ritualistic abuse on child victims (Kelley, 1988). Most of the information available on ritualistic abuse consists, unfortunately, of sensationalized reports in the popular media. This paper reviews the limited information currently available in scholarly publications and describes the nature, dynamics, and impact of ritualistic abuse of children.

Background

Although devil worship has existed as long as Christianity, modern satanism began as an occult revival in the last century. According to Crewdson (1988) satanism and the occult have always been entwined with sexuality, with the fundamental tenet that followers have a right to abundant and guilt-free sex of every description. Moreover, because Christianity believes that children are special to God, satanism, which negates Christianity, considers the desecration of children to be a way of gaining victory over God (Gould, 1987).

Typology of Ritualistic Abuse

Inconsistent use of the term "ritualistic abuse" has created confusion in the field. Finkelhor, Williams, and Burns (1988) have proposed a three-fold typology of ritualistic abuse which clarifies different uses for the term.

Type I, "cult-based ritualistic abuse," involves an elaborate belief system and an attempt to create a particular spiritual or social system. The sexual abuse is not the ultimate goal of the perpetrator but rather is a vehicle for inducing a religious or mystical experience in the adult perpetrators. Satanic and other cultic groups that practice sexual abuse fall into this category.

In Type II, "pseudo-ritualistic abuse," the ritualistic practices are not part of a developed belief system. The primary motivation is not spiritual but rather the sexual exploitation of the child. Rituals, such as the use of costumes and the killing of animals, are used primarily to intimidate children and are not part of an elaborate ideology.

Type III, "psychopathological ritualism," includes ritualistic abuse of children as part of an obsessive or delusional system of an individual or small group, rather than a developed ideology. In such cases the abuse may simply involve sexual preoccupations or sexual compulsions.

This paper focuses on Type I, cult-based ritualistic abuse of children.

Nature and Dynamics of Ritualistic Abuse

As noted earlier, ritualistic abuse can be intrafamilial or extrafamilial. Intrafamilial ritualistic abuse typically involves nuclear and extended family members, and is often multigenerational. Children born into families that engage in ritualistic abuse are at risk for abuse from as early as infancy. Most reported cases of extrafamilial ritualistic abuse have involved day care centers, family day care providers, and babysitters. Although the majority of perpetrators of child sexual abuse are male, one study (Kelley, 1988) found that more females (64%) were perpetrators in cases involving ritualistic abuse.

Cases of intrafamilial and extrafamilial ritualistic abuse have common characteristics: group cult ceremonies in which children engage in sexual acts with adults and other children; the sacrifice and mutilation of animals; threats related to magical or supernatural powers; ingestion of drugs, "magic potions," blood, and human excrement; and distortion of traditional belief systems (Kelley, 1988; Gould, 1987). The child victims are deliberately and systematically terrorized to ensure compliance and silence. Cases of such abuse typically involve multiple victims and multiple offenders (Kelley, 1988; Finkelhor, 1988). As a result of this extreme, multifaceted type of maltreatment, the child victims experience severe, persistent psychological disturbances (Kelley, 1988).

According to Kaye and Klein (1987), satanic cult victims are subjected to formal induction and brainwashing techniques. Moreover, the philosophy of ritualistic cult worship negates and reverses traditional Western values. Good is defined as evil and evil is defined as good and

powerful. As a result, victims come to believe that they are to blame and deserving of punishment.

Children are told that the pain inflicted during physical and sexual rituals is actually an expression of love intended to purify them (Kaye and Klein, 1987). Convinced that they are evil, ritually abused children are persuaded to physically and sexually victimize other children. They consequently will see themselves as perpetrators rather than victims, a perception which elicits intense guilt feelings, since it is easier to view oneself as a victim than a victimizer.

Clinicians report that ritually abused children describe participation in group cult ceremonies that often coincide with the satanic ritual calendar. Children have reported ceremonies in which adults dress in black robes, wear masks, hold candles, chant, sacrifice animals, and participate in group sex. Children also describe occult symbols and implements, such as inverted crucifixes, pentagrams, and goat heads.

Perpetrators of ritualistic abuse terrorize children psychologically by using "supernatural" threats, such as "Satan always knows where you are and what you are doing" or "we can always hear what you are thinking". Children often describe animal sacrifices after which they are told, "this is what will happen to you if you tell". They are told that their parents and siblings will also be killed if the activities are ever revealed. They are often threatened with dismemberment and other forms of extreme violence. They are told that cult members, not their biological parents, are their "real" parents. They are sometimes "programmed" to kill themselves if they ever reveal anything about their participation (Sachs & Braun, 1987). Not surprisingly, ritually abused children have extreme fears and phobias, even years after the abuse has ended.

Perpetrators often convince their victims that they have performed "magic surgery" on them. In one case, a child was told that Satan and demons were implanted in him during surgery performed while he slept. In another case, children were told "a bomb was placed inside of your stomach during an operation and it will explode inside of you if anyone finds out what we do." Such terrifying threats effectively silence young children. Indeed, ritually abused children eventually come to believe that they are no longer capable of controlling their own thoughts, feelings, and actions.

Physical abuse in ritualism cases may include beatings, forced ingestion of human excrement, blood, and semen, ingestion of drugs or medications that alter consciousness, physical restraint, and confinement in small, dark spaces such as closets. Victims often report being forced to lie in coffins or graves while cult members pretend they are dead.

Important differences between ritualistic abuse and nonritualistic sexual abuse were identified in a study of abuse occurring in day care centers (Kelley, 1988). Ritualistic abuse was associated with significantly more victims per day care center and significantly more offenders per child than sexual abuse without rituals. A larger percentage of abusers in the ritualistic cases were female. Children in the ritualistic abuse group were sexually abused more frequently and extensively than children who were nonritually abused. The majority of ritually abused children were subjected to one or more forms of vaginal and rectal penetration and reported having

pornographic pictures taken. In addition, the ritually abused children experienced more severe physical and psychological abuse.

Obstacles to Case Identification

Cases of ritualistic abuse may come to light when a child is being evaluated or treated for sexual abuse. Unfortunately, investigators and therapists, lacking knowledge of the clinical indicators of cult-based ritualistic abuse, often fail to recognize that the sexual abuse being described has occurred within the context of satanic cult worship.

Failure to acknowledge ritualistic abuse may also be related to the skepticism which often greets reports of ritualistic abuse: the more horrible and bizarre the child's allegations, the less likely that he will be believed. Perpetrators of ritualistic abuse are aware of this skepticism and are often successful in convincing child victims that nobody will believe them if they disclose the abuse. Adult abusers will purposefully distort the child's perception of what has occurred so that, in the event the child divulges the ritualistic activities, the allegations will seem so incredulous as to be dismissed. For instance, cult members may simulate the murder of an infant in front of a child victim. When the child reports the "murder" and the alleged murder victim is found to be alive or no body is found, investigators often conclude that the child has fantasized or deliberately fabricated all of the allegations. Such events reinforce what the offenders have previously told the child: "no one will ever believe you".

Impact of Ritualistic Abuse

Since sexual abuse is a significant component of ritualistic activities, the negative effects of sexual abuse of children are important to understand. The available empirical literature indicates that sexually abused children display disturbances in their general levels of functioning following the abuse. In addition, several studies have identified specific effects of sexual abuse, including increased fear (DeFrancis, 1969; Gomes-Schwartz, Horowitz, and Sauzier, 1984; Conte and Schuerman, 1987); anger and hostility (DeFrancis, 1969; Gomes-Schwartz, Horowitz, and Sauzier, 1984), and decreased self-esteem in females (Tong, Oates, and McDowell, 1987). Sexual victimization has also been associated with inappropriate sexual behaviors (Friedrich, Urquiza, and Beilke, 1986; Tong, Oates, and McDowell, 1987; Gomes-Schwartz, Horowitz, and Sauzier, 1984).

Only one study to date has utilized standardized instruments to examine the impact of cult-based ritualistic abuse. This study reported that 35 of 67 children who were sexually abused in day care centers nationwide had also been ritually abused (Kelley, 1988). Ritualistic abuse was associated with significantly greater psychological distress as measured by the Child Behavior Checklist (Achenbach and Edelbrock, 1983). A marked deviance on internalizing behaviors was also found in the ritually abused children, representing an increase in fearful, inhibited, and anxious behaviors. In another study of sexual abuse in 270 day care centers (Finkelhor, Williams, and Burns, 1988), therapists' reports indicated increased impact on children who were ritually abused. The increased impact in these cases probably results from the cumulative effect of the extreme physical and psychological abuse which accompanies sexual abuse.

Several mental health professionals have related their clinical impressions concerning cult-based ritualistic abuse of children (Kaye and Klein, 1987; Gould, 1987; Kagy, 1986). Gould reports that each aspect of ritualistic abuse results in a particular symptom cluster. The sexual acts involved in ritualistic abuse, for example, may cause the child to complain of genital pain or to act out sexually. Rituals involving excrement can lead to inappropriate toileting behaviors. Perpetrators' threats make the victims fearful. Forced participation in occult activities may cause the child to be preoccupied with the devil, magic, and supernatural powers. The defensive dissociation typically observed in victims of ritualistic abuse may, however, leave them relatively symptom free until they begin to disclose the abuse.

Therapists treating adults with multiple personality disorders have noted that a large percentage were ritualistically abused when they were children (Sachs and Braun, 1987; Lawson, 1987; Terry, Loomis, and Horowitz, 1987; Holland, 1987; Hopponen, 1987). Some therapists believe that the overwhelming trauma of ritualistic abuse fosters the growth of dissociative defenses and contributes to the development of multiple personality disorders (Sachs and Braun, 1987; Holland, 1987).

Implications for Policy, Practice, and Research

Ritualistic abuse of children has important implications for practice, policy and research. Reliable estimates of the incidence of ritualistic abuse are needed. Child protective agencies and law enforcement need to categorize child maltreatment cases according to whether ritualistic abuse was involved. Since most cases of ritualistic abuse involve multiple victims and multiple perpetrators, adequate resources must be made available to the agencies charged with investigating such allegations. A multidisciplinary team approach with cooperation among investigating agencies is imperative in preventing further trauma to child victims and their families.

The media pay much attention to, but often sensationalize, cases of ritualistic abuse. Since such attention is an additional source of stress for child victims and their families, professionals involved in cases of ritualistic abuse should attempt to shield victims from the media. In addition, professionals familiar with ritualistic abuse should teach psychologists, physicians, nurses, social workers, police officers, child protective workers, judges, and prosecutors about the nature, dynamics, clinical indicators, and sequelae of ritualistic abuse.

The skepticism that reports of ritually abused children and adult survivors elicit is similar to the disbelief and horror incest victims faced only a decade ago. Summit writes, "we are willing to concede that girls may be at risk of sexual victimization by their fathers but we fight back at claims that diffuse into more sacred domains. These forbidden sanctuaries include victimization of boys, women who are victimizers, and the unholy chimera of everything forbidden and impossible: sexual abuse of boys and girls by men and women as part of bizarre, cultic rituals." Summit further explains that the allegations made in cases of ritualistic abuse are "so outrageous that reasonable people refuse to discuss them and believers are quashed into silence" (Summit, 1988, p. 56).

Numerous treatment issues concerning ritually abused children need to be addressed. Disclosure of ritualistic abuse should occur within a highly supportive therapeutic relationship and should unfold over a period of time, at a pace that is manageable for the child. Investigators should avoid attempting to obtain too much information during an initial interview. The child who has disclosed ritualized abuse will need constant reassurance of his or her safety. The child's guilt needs to be alleviated. Dissociative defenses must be recognized and addressed. In addition, since therapists treating ritually abused clients often feel isolated and under stress, they too need support, especially from colleagues.

There is a dearth of scholarly and professional literature on ritualistic abuse. Systematic research into the problem's nature, incidence, mental health consequences, and legal implications must be conducted to improve treatment of victims. The sooner such research begins, the sooner will victims of ritualistic abuse receive appropriate assistance.

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