

BENTOVIM, ARNON: publications

(Source: EBSCOhost Research Databases, search terms: AU Bentovim, accessed on 11/27/2006)

Salter, D., D. McMillan, et al. (2003). "Development of sexually abusive behaviour in sexually victimised males: a longitudinal study." Lancet **361**(9356): 471.

Presents a study that aims to identify risk factors for sexually abusive behavior by adults by assessing childhood experiences and personal characteristics of male child sexual abuse victims who became abusers in later life. Study methods and participants; Results; Conclusion that most male victims of sexual abuse do not become pedophiles, but particular experiences and patterns of childhood behavior are associated with an increased risk of victims becoming abusers in later life; Opinion that the findings have implications for the design of selective interventions with a vulnerable subgroup of male victims, aimed at reducing the risk of pedophilic behavior in later life. ABSTRACT FROM AUTHOR

Summary: Background: Sexual maltreatment is one of the most common forms of child abuse. To identify risk factors for sexually abusive behaviour by adults, we prospectively assessed childhood experiences and personal characteristics of male child victims who became abusers in later life. Methods: In a longitudinal study (7-19 years duration), we included 224 former male victims of sexual abuse. Risk factors contemporaneous with the abuse, and putative protective influences, were identified from social service and clinical records. Evidence of later criminal acts was obtained from a nationwide search of official records. Findings: Of the 224 former victims, 26 had subsequently committed sexual offences (victim-abusers), in almost all cases with children, mainly outside their families. Risk factors during childhood for later offending included material neglect (odds ratio 3.4, 95% CI 1.2-9.7), lack of supervision (3.0, 1.1-8.3), and sexual abuse by a female person (3.0, 1.1-8.7). Victim-abusers had more frequently witnessed serious intrafamilial violence (3.1, 1.0-10.0). Six (29%) of 21 victim-abusers on whom we had relevant data had been cruel to animals (7.9, 2.0-31.4). No single putative protective factor, nor a composite protective index, significantly reduced the risk of paedophilic behaviour. Interpretation: Most male victims of child sexual abuse do not become paedophiles, but particular experiences and patterns of childhood behaviour are associated with an increased risk of victims becoming abusers in later life. Our findings have implications for the design of selective interventions with a vulnerable subgroup of male victims, aimed at reducing the risk of paedophilic behaviour in later life. ABSTRACT FROM AUTHOR

Bentovim, A. (2002). "Preventing sexually abused young people from becoming abusers, and treating the victimization experiences of young people who offend sexually." Child Abuse & Neglect **26**(6/7): 661.

Focuses on a study which determined the possibility of preventing sexually abused boys from being abusers and the treatment of offending behavior. Review of research on factors which influence victims of sexual abuse to become perpetrators; Details on a longitudinal exploration of the factors which led to the onset of abusive behavior in males who were sexually abused in childhood.

Bentovim, A. (1999). "Castaway's Corner." Clinical Child Psychology & Psychiatry **4**(4): 597.

Shares the author's notion of being a castaway. Interest in jazz music; Collection of books and papers which have played a role in the development of the author's practice in child and family consultation service.

Skuse, D., A. Bentovim, et al. (1998). "Risk factors for development of sexually abusive behaviour in sexually victimised adolescent boys." BMJ: British Medical Journal **317**(7152): 175.

Looks at a study which identified the risk factors which could increase the sexually abusive behavior in sexually victimised adolescent boys. Comparison of sexually victimised boys who abused other children with sexually abused victimized boys who had not abused other children; Discussion on childhood abuse; Methodology used to conduct the study; Results of the study.

Bentovim, A. (1998). "A full circle: psycho-dynamic understanding and systems theory." Journal of Family Therapy **20**(2): 113-122.

Reviews two articles published in the 1979 issue of the 'Journal of Family Therapy' concerning family psychotherapy. Theories of family interaction and techniques of intervention; Role of therapists; Brief focal family therapy; Abuse field and family systems thinking. ABSTRACT FROM AUTHOR

Two papers published in 1979 are reviewed, one which looked at theories of family interaction and techniques of intervention, and the other at developments of the focal approach to family therapy which has its base in a dynamic understanding of the nature of relationships, but uses a variety of systemic interventions to create change. The development of the approach is described, along with its application to work in the abuse field. A recent case where two daughters were sexually abused by the grandfather who had abused their mother is used as an illustration. ABSTRACT FROM AUTHOR

Gray, J. and A. Bentovim (1996). "ILLNESS INDUCTION SYNDROME: PAPER I--A SERIES OF 41 CHILDREN FROM 37 FAMILIES IDENTIFIED AT THE GREAT ORMOND STREET HOSPITAL FOR CHILDREN NHS TRUST." Child Abuse & Neglect **20**(8): 655-673.

Presents a study which identifies cases of child abuse in Munchausen Syndrome by proxy wherein a child's illness is induced or fabricated by a parent Four patterns of illness induction syndrome; Causes of the syndrome; Process of identifying the syndrome; Process of understanding the syndrome; Prevention. ABSTRACT FROM AUTHOR

At the hospital 41 children from 37 families were identified as having had illness induced by a parent who in all but three cases was the mother. Their case records were reviewed. Four patterns of presentation occurred: failure-to-thrive through the active withholding of food; allegation of allergy and withholding of food; allegation and fabrication of medical symptoms; and active interference by poisoning or disrupting medical treatment. Four of the children died, two as a result of the illness induction. In 35% of the families a sibling had been previously subjected to some type of abuse. All the children had been presented with potentially serious symptoms, but post-identification only five were found to have serious medical problems requiring ongoing treatment. There were no specific characteristics of either the child or family associated with each type of presentation. Seventeen children had previously presented with failure-to-thrive, feeding problems or food allergies. All the mothers had suffered at least one of the following: Privation, child abuse, psychiatric illness, or significant

loss or bereavement, whereas only half the fathers had grown up in a deprived family situation and/or had earlier or current health difficulties. Forty percent of the parents had serious marital problems. A combined medical/psychosocial team identified the abuse and attempted to understand the family's belief system regarding the illness. The process of Illness Induction was conceptualized as being initiated by the parents perceiving the child to be ill and using this focus on illness as a way of solving major personal, marital, and/or family difficulties. (English)ABSTRACT FROM AUTHOR