

Resources for the Prevention of Sexual Abuse



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"Risk Factors for Sibling Incest"

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QUESTION: What can we learn from a compressive view of risk factors for sibling incest?

RESEARCH:

The current research is the first systematic published epidemiologic study for sibling incest that is designed to identify etiologic risk factors. The authors collected retrospective data from 1821 women and 1064 men with one or more siblings from a predominantly college-age population. The factors below are etiologic – factors that predispose or protect against the occurrence of sibling incest.

The study found that the risk factors for sibling incest are consistent with the cumulative effective of four types of parental behavior:

- 1) factors that lower external barriers to sexual behaviors (e.g., co-sleeping or co-bathing);
- 2) factors that encourage nudity in the family and allow children to see parent's genitals;
- 3) factors that lead to siblings relaying on one another for affection (e.g., diminished parental affection); and
- 4) factors that eroticize young children (e.g., sexual abuse by a parent)

Of those interviewed, 137 experienced sibling incest. The risk factors identified (in decreasing predictive power) included: sharing a bed for sleeping with a sibling, parent-child incest, family nudity, low levels of maternal affection, and sharing a bath with a sibling. Of these participants, 38 identified themselves as having experienced coerced sibling incest. The risk factors, in decreasing predictive power included sharing a bed with a brother, parent-child abuse, witnessing parental fighting, and family nudity.

The authors noted that high levels of maternal affection protected against sibling incest and specifically protected daughters from becoming involved in brother-sister incest. No other protective factors were discussed.

The authors also acknowledge that sibling incest, like parent-child incest, is rarely reported to the police or child protective services. The results of this study showed that the abuse was more likely to have been reported if the sibling had touched the reporting child's genitals and less likely to have been reported if the siblings had shared a bed.

BOTTOM LINE: The study confirmed that the cumulate effective of four different factors may put a child at higher risk for sibling incest.

IMPLICATIONS FOR PROFESSIONALS:

While the field welcomes findings that help professionals understand the risk factors for sibling incest, the findings of this study should not be taken as a warning against close contact between siblings. Risk factors are not predictors of behavior and are often balanced by protective factors. While this study helps confirm the age-old maxim that “proximity can breed promiscuity” under the wrong circumstances, it also speaks to the importance of having involved and affectionate parents. For example, loving attention, guidance, and supervision when giving young siblings baths can be a part of good parenting. As welcome as these findings are, they are limited by not fully studying what protects siblings from incest, or situational factors such as family safety. Also not fully understood are the circumstances under which these risk factors may enable incest to occur. In the end, it is vital for professionals to develop a deep understanding of their client’s life experiences.

IMPLICATIONS FOR THE FIELD:

This is a well-conducted study in a complicated area involving painstaking interviewing and analysis; there have been few epidemiological studies involving random samples. It often seems that each advancement in research provokes as many questions as it answers. This study shows that some behaviors may aggravate or mimic risk, but many questions remain. In what situations might a trajectory to single-event or repeated sibling incest occur? After all, not all cases of sibling incest are the result of the same intentions, circumstances or impact. Some may develop out of curiosity or mimicry of what children have observed in their home, while other incidents may develop out of more overt acts of aggression involving callous/unemotional traits, etc. Still others may involve a combination of all of these factors. While this study provided critical new information about risk factors, this information needs to be combined with a deeper understanding of the underlying motivations for these sibling incest behaviors -- an essential element of treatment of these children.

Abstract:

Retrospective data from 1,821 women and 1,064 men with one or more siblings, provided anonymously using a computer-assisted self-interview, were used to identify

risk factors for sibling incest (SI); 137 were participants in SI. In order of decreasing predictive power, the risk factors identified by the multiple logistic regression analysis included ever having shared a bed for sleeping with a sibling, parent-child incest (PCI), family nudity, low levels of maternal affection, and ever having shared a tub bath with a sibling. The results were consistent with the idea that SI in many families was the cumulative result of four types of parental behaviors: (a) factors that lower external barriers to sexual behavior (e.g., permitting co-sleeping or co-bathing of sibling dyads), (b) factors that encourage nudity of children within the nuclear family and permit children to see the parent's genitals, (c) factors that lead to the siblings relying on one another for affection (e.g., diminished maternal affection), and (d) factors that eroticize young children (e.g., child sexual abuse [CSA] by a parent). Thirty-eight of the 137 SI participants were participants in coerced sibling incest (CSI). In order of decreasing predictive power, risk factors for CSI identified by multiple logistic regression analysis included ever having shared a bed for sleeping with a brother, PCI, witnessing parental physical fighting, and family nudity. SI was more likely to have been reported as CSI if the sibling had touched the reporting sibling's genitals, and less likely to have been reported as CSI if the siblings had shared a bed.

Citation:

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