

# Vocational Evaluations of Adults Who Have Experienced Childhood Sexual Abuse

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# Today's Presentation Will Cover...

- Emergence of Clergy CSA
- Psychiatric comorbidity and chemical dependency
- Establishing rapport and obtaining critical information
- Conceptual framework for pre and post abuse trajectory earning
- Self-care
- Suicide risk

# *Clergy Childhood Sexual Abuse*

## Why Are These Cases Emerging Now?

- Most cases are from 40 to 50 years ago
- Knowledge and treatment of pedophilia was lacking
- Church response: Treat, reassign, and return to priestly duties → tragic mistake
- Litigation began in 90's, breakthrough cases in 2002 in Boston
- More and more victims are coming forward

# Incidence of Clergy Abuse in U.S.

Thomas Plante, PhD – Santa Clara University, 2010

- Estimates 4% of priests have sexually abused minors during past half of century
- 60,000 active and inactive priests - 1,000 to 3,000 priests who have sexually abused minors

# United States Conference of Bishops Report 1950 – June, 2016

116,900	Priests in U.S.
6,721	Priests have been accused of abusing children (5.8%)
18,565	Victims

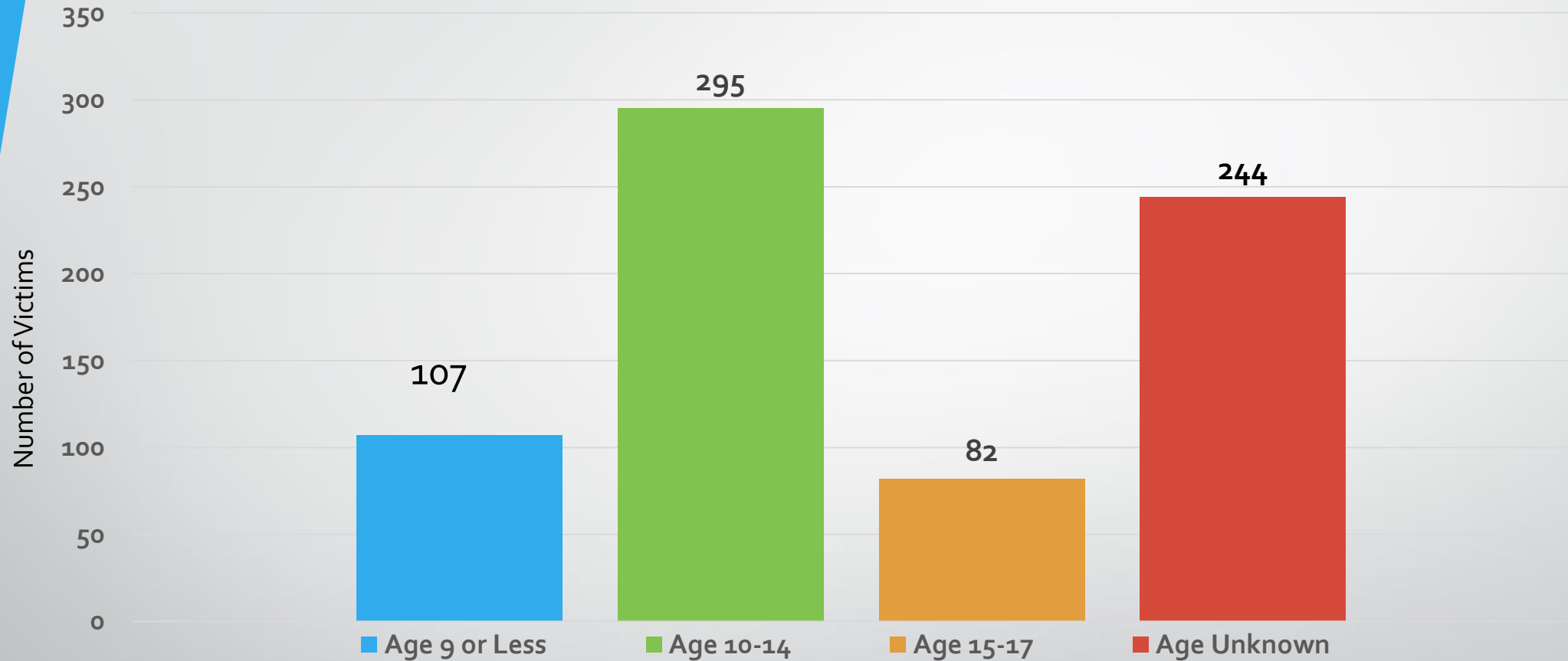
Source: [BishopAccountability.org](http://BishopAccountability.org)

# More and More Victims Are Coming Forward

	2014	2015	2016	Percent Change (2015 to 2016)
Victims	291	314	728	132%
Offenders	211	227	361	59%

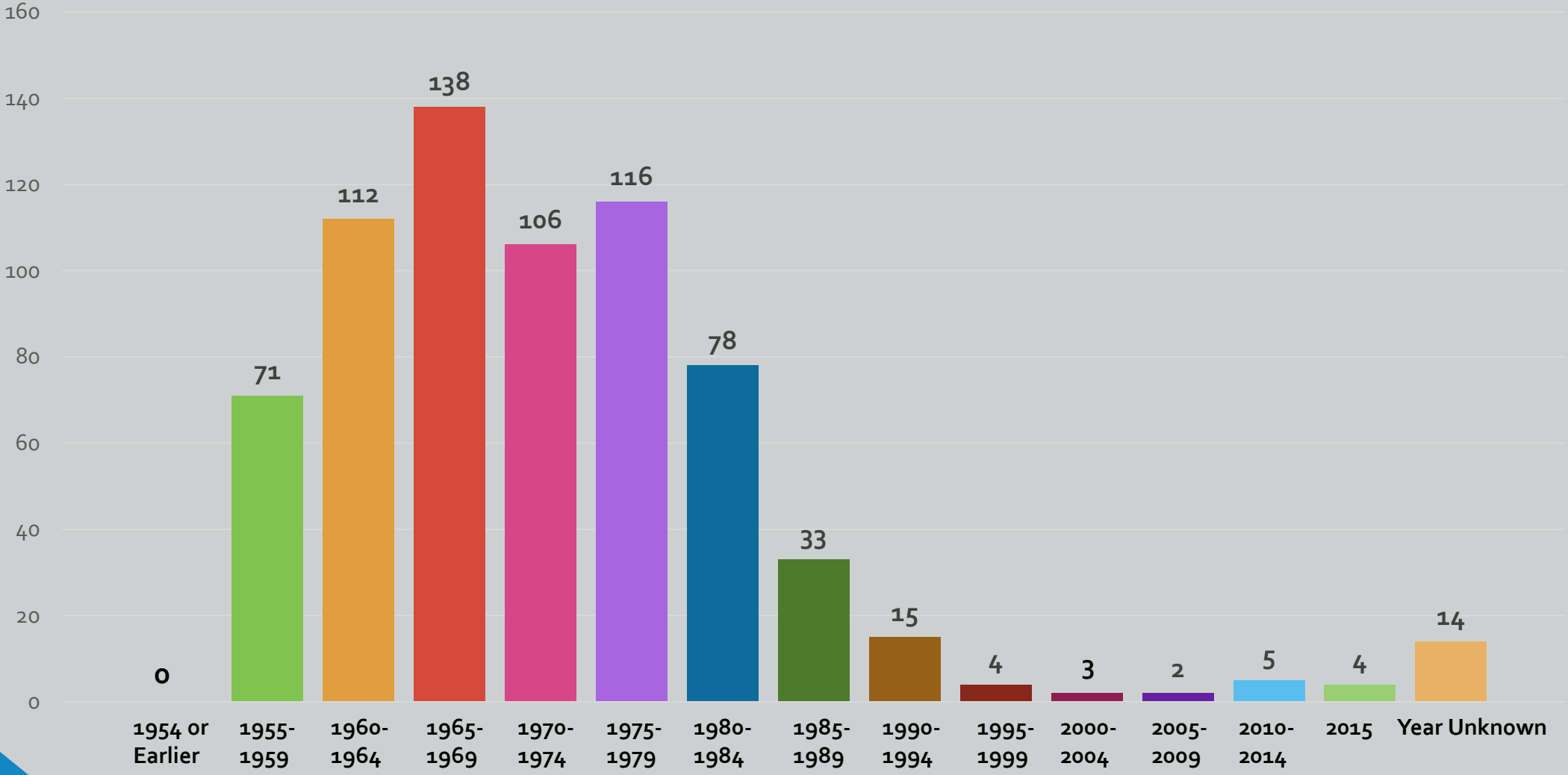
Source: 2016 Survey by CARA (Center for Applied Research in the Apostolate)

# Age of Victim When Abuse Began



Source: CARA: 2016 Survey of Allegations and Costs

# Year Alleged Offense Occurred or Began



Source: CARA: 2016 Survey of Allegations and Costs



# Typical Clergy CSA Profile

- Male (4 to 1 M/F ratio)
- Age 50 to 70
- Experienced abuse 30 to 40 years ago between ages 10 and 15
- No treatment/healing from CSA

# Clergy Sex Abuse – Not Just a U.S. Concern

- Ireland
- England / Wales
- Canada
- Germany
- Australia

# Adverse Childhood Experience (ACE) Study

- CDC – Kaiser Permanente study of 17,000 patients who completed confidential survey
- 3 types of ACEs: Abuse, neglect, household dysfunction
- 1 in 5 respondents acknowledge CSA
- Findings repeatedly reveal a graded dose response between ACE and negative health, including:
  - Alcoholism
  - Depression
  - Illicit drug use
  - Multiple sexual partners
  - Suicide attempts
  - Poor work performance

# References: CSA and Psychiatric Disorders

- Finkelhor, David and Browne, Angela (1985), The Traumatic Impact of Child Sexual Abuse: Conceptualization, *American Journal of Orthopsychiatry* 55 (4)
- ACE study: <https://www.cdc.gov/violenceprevention/acestudy/>
- Anda, R. F., Felitti, V. J., Bremner, J. D., Walker, J. D., Whitfield, C., Perry, B. D., Dube, S. R., & Giles, W. H. (2006). The enduring effects of abuse and related adverse experiences in childhood; A convergence of evidence from neurobiology and epidemiology. *European Archives of Psychiatry and Clinical Neuroscience*. 256, 174-186.
- Heim, C., Newport, D. J., Mletzko, T., Miller, A. H., & Nemeroff, C. B. (2008). The link between childhood trauma and depression: Insights from HPA axis studies in humans. *Psychoneuroendocrinology*. 33, 693-710.
- Schoedl, A. F., Costa, M. C., Mari, J. J., Mello, M. F., Tyrka, A. R., Carpenter, L. L., & Price, L.H. (2010). The clinical correlate of reported childhood sexual abuse: An association between age at trauma onset and severity of depression and PTSD in adults. *Journal of Child Sex Abuse*, 19, 275-289.
- Lanius, R., & Vermetten, E. (2009). The relationship of adverse childhood experiences to adult medical disease, psychiatric disorders, and sexual behavior: Implications for healthcare. In *The hidden epidemic: The impact of early trauma on health and disease*. Cambridge University Press.  
[http://www.acestudy.org/yahoo\\_site\\_admin/assets/docs/LaniusVermetten\\_FINAL\\_8-26-09.12892303.pdf](http://www.acestudy.org/yahoo_site_admin/assets/docs/LaniusVermetten_FINAL_8-26-09.12892303.pdf)

# CDC Study Linking CSA to Performance in the Workplace

*Anda, Fleisher and Felitti (2004)*

Subjects who identified SA in the childhood experience reported higher rate:

Job problems (14% vs 10%)

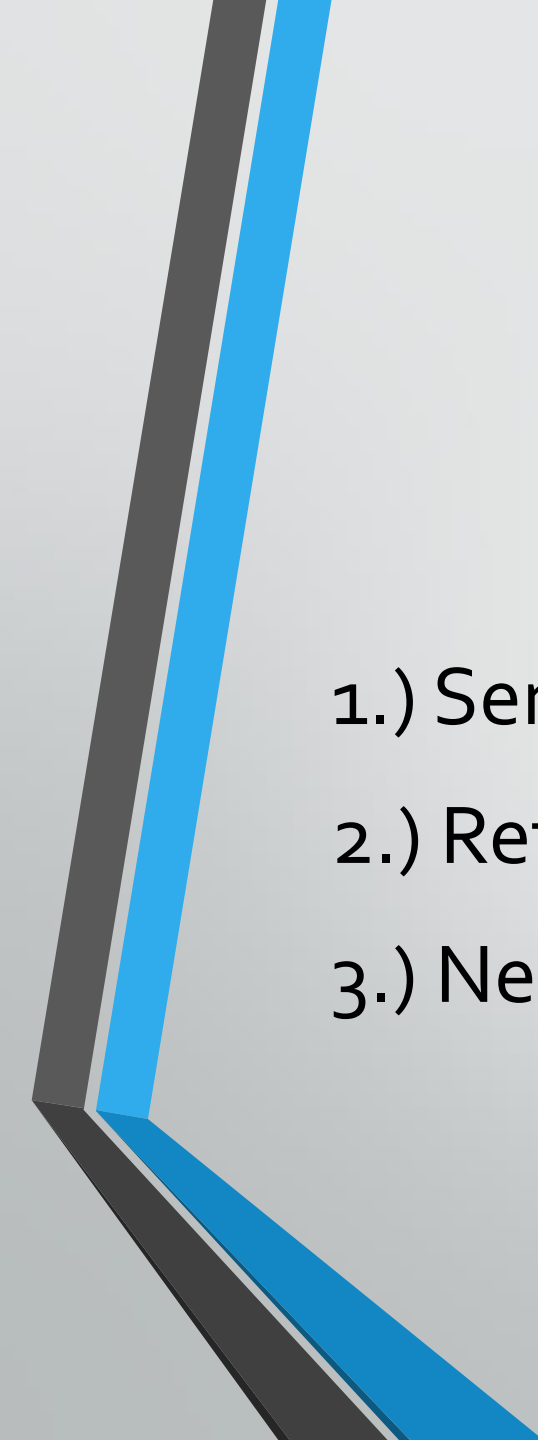
Financial Problems (20% vs 14%)

Absenteeism on the Job (11% vs 8%)

Recs: Move from a Disease Oriented Biomedical Approach to a Biopsychosocial Approach

# References: CSA and Alcohol/ Drug Abuse

- Fergusson, Horwood and Lynskey (1996). Childhood Sexual Abuse and Psychiatric Disorders in Young Adults: *Journal of the American Academy of Child and Adolescent Psychiatry*, 34, 1365-1374
- Mullen, et al. (1993). Childhood Sexual Abuse and Mental Health in Adult Life. *British Journal of Psychiatry*, 163, 721-732
- Stein, et al. (1988). Long-term Psychological Sequelae of Childhood Abuse. In *Lasting Effects of Childhood Sexual Abuse* (pages 135 to 154). Wyatt and Powell
- Liebshutz, J., et al. (2002). The relationship between sexual and physical abuse and substance abuse consequences. *Journal of Substance Abuse Treatment*, 22(3), 121-128
- Dube, S.R., et al. (2002) Adverse Childhood Experiences in Personal Alcohol Abuse as an Adult. *Journal of Addictive Behavior*, 27 (5:713-25)



# CSA Evaluations – What is Different?

- 1.) Sensitivity about CSA
- 2.) Retrospective Analysis
- 3.) Need to Screen for Complicating Variables

# What You Need from the Attorney

- Answer to interrogatories
- School records, including school testing/grade report
- Parent/sibling education/work history
- Psychiatrist records/psychotherapy progress notes
- Medical records, if medical issues are relevant
- Tax records/earnings



# Establishing Rapport

- Gender of evaluator may be important
- Comfort is key to getting accurate information
- Allow plenty of time
- Tears will likely flow
- Acknowledge up front the difficulty of the evaluation experience

# Garnering Information

- Assess readiness to talk about event
- If anxious, start with generic topics – family, work, medical status
- Look for opening to ask question about sexual abuse
- Express regret for having experienced sexual abuse



# How Much Detail Do You Need?

It depends.....on:

Your Comfort/Style in asking about CSA

Degree of Healing of Evaluee

## Focus on the Evaluee's Adjustment to CSA

- How far down the road to recovery is this person?
- What impact does CSA have on their functioning now?
- What impact has CSA had on their relationships at work?
- What impact has CSA had on ability to work with authority figures?

# Diving into the Details of CSA

- Frequency
- Duration
- Intensity
- Response to CSA: at onset and presently
- Disclosure about CSA: at onset and presently

## What Information Is Needed

- Family education/work history
- School performance before/after CSA
- Drug/ETOH use, pre and post
- Treatment efforts / results
- If there are career misfires, get details on why

# Testing Instruments

- IQ, Aptitude, Interest
- Personality testing: MMPI-2-RF / MMPI-2
- Trauma Symptom Inventory (TSI)
- Detailed Assessment of Post Trauma Stress (DAPS)
- Beck Depression Inventory / Beck Anxiety Inventory
- Validity testing

# Establishing Causality

- Start with family constellation
- Is the evaluatee an outlier?
- Are there other intervening variables unrelated to the sexual abuse, which has contributed to their underachievement/ dysfunction?
- When did evaluatee realize this experience was sexual abuse?



# Weak Causality

## Case Example: Andrea

- 52-year-old female
- Occupation: Casino Slot Specialist
- Education: High school graduate
- Mother: High school graduate – Bar Maid
- Father: High school graduate – Retired Air Force Sargent
- 6 Siblings: All high school graduates: one sister has college degree – Teacher, Paralegal, Secretary

# Weak Causality

## Case Example: Andrea

- Sexually abused by parish priest: “Robe Treatment” – started at age 7
- Confusion, disillusionment, outrage – dropped out of church
- Sexual abuse by stepfather at age 9
  - 1<sup>st</sup> intercourse experience at age 10 – continued on weekly basis
  - Gave birth to first child at 15, second child at age 16

# Weak Causality

## Case Example: Andrea

- Has not worked since 2009
- Cardiac history with HA in 2005, 2007, 2008 and 2014
- Diabetes, kidney failure, below-knee amputation in 2013
- Conclusion: Complicating variables impact clear causality and projection on earning capacity

# Strong Causality

## Case Example: Terry

- 50-year-old male
- Occupation: Bus Driver
- Education: High school dropout - GED
- Father: Master's Degree in Engineering/ Mathematical Engineer
- Mother: Master's Degree in Anthropology
- Sister: Master's Degree – CPA, now a CFO
- Half-brother: Bachelor's Degree in Architecture - Architect

# Strong Causality

## Case Example: Terry

- Diagnosed with ADHD
- Sent to Catholic Prep School at age 14 – Sexual/physical abuse occurred in first semester
- Left prep school after one semester; dropped out of public high school - 10<sup>th</sup> grade
- Sold drugs
- Developed meth addiction – incarcerated for 3 years

# Strong Causality

## Case Example: Terry

- Bus driver since 2007: \$19.70 per hour
- Concluded: Pre-abuse trajectory was Bachelor's Degree, possibly Master's Degree

Pre-Abuse Trajectory      \$57,616 (median earning of Bachelor's Degree)

Post-Abuse Trajectory      \$33,800 (median earning of high school graduate)

Total Loss of Earnings: \$950,000

# Relevant Studies

## *Long-Term Consequences of Child Abuse & Neglect on Adult Economic Well-Being*

*Currie & Windom (2002)*

Results indicated that adults with documented histories of childhood abuse and/or neglect have lower levels of education, employment, earnings, and fewer assets as adults, compared to matched control children.

# Relevant Studies

## *Childhood Sexual Abuse and Later Life Economic Consequences*

*Barrett & Kamiya (2012)*

Found that childhood sexual abuse victims were living in households with incomes that are 40% lower than comparable households.



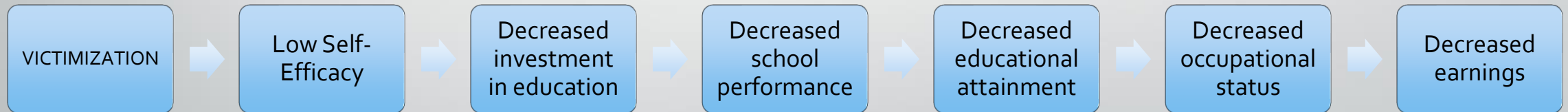
# Relevant Studies

- Smith and Smith (2010) suggest a 20% decrease in earnings in adults with history of childhood psychological conditions.
- Goodman, Joyce, and Smith (2011) found that adult family incomes were reduced by 28% by age 50.

# Relevant Studies

## *Adolescent Victimization and Income Deficits in Adulthood: Rethinking the Costs of Criminal Violence from a Life-Course Perspective*

MacMillan (2002) proposed that Victimization results in a chain of behaviors/consequences that result in diminished adulthood earnings and it is most costly when the victimization occurs in adolescence .



# Determining Economic Loss

Determine most likely vocational outcome had the abuse not occurred

- Testing results
- Educational & work history (if any)
- Family education & employment

Research typical educational timeline and career trajectory

- National Center for Educational Statistics
- Graduate Employment Outcomes
- Industry websites
- Bureau of Labor Statistics

Compare actual educational/work history to pre-CSA potential

- If possible, use wage resources for the correlating time period
- Use your professional judgment – Does this make sense? Are there circumstances outside the abuse that may have affected their vocational timeline?
- Use multiple scenarios if necessary

# Resources

## National Center for Educational Statistics – [nces.ed.gov](http://nces.ed.gov)

- Collects, analyzes, and makes available data related to education in the U.S. and other nations

## Graduate Outcome Surveys

- Available for some states (such as Minnesota and Missouri)
- Most higher education institutions also make this data available

## Industry Websites

- National Educational Association ([www.nea.org](http://www.nea.org)) - current and historical salaries for educators K-12 to college faculty
- National Association for Law Placement ([www.nalp.org](http://www.nalp.org)) - employment statistics and historical wage data for law school graduates.

# Case Study: Michelle

- 48-year-old female
- Occupation: Academic Advisor
- Education: Ph.D. in Science & Technology Studies/Fulbright Scholarship awardee
- Father: Ph.D./Faculty member at a private 4-year college
- Mother: Master's degree/Counseling
- Brother: Computer Systems Software Specialist

# Case Study: Michelle

- Sexually abused while attending a private arts school
- Educational and employment history marked by multiple transfers and self-terminations. Completed her Ph.D. 20 years after first enrolling in post-secondary
- Diagnosed with depression and has a history of alcohol abuse
- Troubled childhood prior to onset of abuse (parents divorce, questionable relationship with brother, bullying)

# Case Study: Michelle

- Concluded: Pre-abuse trajectory was a college Professor

Pre-Abuse Trajectory:      \$115,000 (median salary for tenured professor)

Post-Abuse Trajectory:    \$46,000 (current salary as Academic Advisor)

Total Loss of Earnings:    \$2,552,539

## Assumptions/Resources Used:

- Work to the age of 65
- Followed typical tenure track of Associate Professor – Assistant Professor – Professor
- Utilized historical wage data for the above positions with the corresponding timeline (NCES)
- Did NOT use delayed education completion in my calculations

# Self-Care

- These can be emotionally exhausting cases
- Be aware of counter transference
- Take steps to debrief



# CSA and Suicide

- Greater risk for depression
- 8 x greater risk of suicide attempts over normal population. **Be vigilant about impact of evaluation and lawsuit.**

Source: Brown, et al – Childhood Abuse and Neglect

# Beware: Suicide Risk Factors

1. Existence of a plan
2. Poor social support system
3. Active drug / alcohol use
4. Impulse control history / rage / recklessness
5. Past attempts

# Suicide Risk – Action Steps

- Clearly express concern and need for treatment to evaluatee
- Share recommendation with attorney following evaluation
- Identify suicide risk and treatment recommendations in report
- If appropriate, identify mental health resources in evaluatee's community



Thank you for your contribution!

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