

Prevention of Sexual Abuse in the Youth Athlete

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Goals:

- Present summary of threats to children in sport
- Introduce a framework defining & categorizing threats
- Provide safeguarding recommendations for sport organizations & team physicians
- Discuss AOASM participation in STEMM Consortium to change culture of sexual abuse

Safeguarding Recommendations for Sport Organizations

- IOC 2016 Consensus Statement
- All athletes right to engage in safe sport, respectful environment, equitable & free from NAV
- Moral, ethical & legal duty to adopt programs & protect the child's health & well being in sport
- Clearly defining inappropriate & violent behaviors can overcome barriers
- Essential for sports medicine specialists to be educated on the issues of abuse, harassment & bullying in sport
- Be equipped with strategies to intervene when potential cases arise

Defining Violence in Sport

- WHO child maltreatment in sport
- IOC Statement on Youth Athletic Development
 - Harm to child's health, survival, development & dignity
 - Unwanted or forced attention / conduct
 - Consent: coerced, manipulated, cannot be given
 - Exploitation of responsibility, trust & power:
 - Blurred lines training & relationships
 - Abuse of power
- WHO 2014 child sexual abuse: 1:4 adults 1:5 ♀ 1:13 ♂
- 2-22% child athletes are victims Brackenridge 2011
- 98% actions performed by individual in power IOC 2016
- Retrospective surveys, after retirement or as adults

Defining Sexual Violence: Forms

- Highly correlated, psychological at the core
 - Physical: Excessive training despite exhaustion / injury
Pressure to return to sport prior to recovery
 - Emotional / Psychological:
Acts of harm child's mental health, safety & development
 - Sexual: Inappropriate behaviors w/in coach-athlete relationship
Unwanted rubdowns, sexual adv, domination of body
 - Neglect & Negligence: Failure to obtain medical treatment
Ignoring & isolating athlete
- Direct: Clearly unacceptable behavior that harms the athlete
- Indirect: Children who witness abuse of others in spor

Defining Sexual Violence: Forms

- Continuum of exploitation



- Suggestive:
 - Voyeurism
 - Masturbation
 - Exhibitionism
 - Pornography
- Harassment:
 - Unwanted attention
 - Comments
 - Invitations
 - Jokes
 - Verbal/written threats
 - Innuendos
- Abuse:
 - Forced physical contact
 - Sexual acts

Normalization of Violence in Sport

- Prevention strategies are challenged due to culture
- Culture of resilience in sports:
 - Physical demands of training
 - Demands of emotional toughness mask sufferings
 - Youth train under pressure before mental capacity to decide
 - Abuse unrecognized & unreported Brackenridge, Bringer, Bishop 2005
- Culture of harassment rooted in discrimination
 - Hierarchy of power
- Culture of silence & lack of awareness
 - #safesport YOG 2018: survey 1254 athletes Mountjoy
 - Lack of agreement in terminology: 71.8% fair play 10% SH & SAT
 - Lack of awareness: 47.5% no/likely 46% surprised
 - Unknown rights: 26% not comfortable reporting

Barriers to Report

- Belief system: Code of silence
 - Most reporting occurs after retirement from sport
 - Fear of reporting: Inherent power dynamics
 - Victim athlete: Display emotional toughness
- “Bystander Effect”
 - Lack of procedure of reporting
 - Lack of physician response
 - Unsure whom to report / trust
 - Abuse viewed as problem of the individual, not organization
- Blaming the victim
 - Public perception blaming aggressor inversely related to degree relationship with victim Hartill 2009

Barriers to Change: Research

- Studies needed to better qualify & quantify prevalence SAT
 - Prevalence & extent of impact on child athlete unknown
 - Retrospective data
 - Coaches fail to distribute questionnaires
 - Failure to disclose, desire for anonymity
 - IRB approval with minors:
 - Parental consent & Athlete assent
 - Sensitive topic

Who is Involved: Lower Level

- Peer athletes / teammates
- Peers: Bullying & hazing vs team building
 - Perpetrator: Express dominance, promote hierarchy
 - Victim: Gain acceptance, create identity
 - Endorsed by parents, coaches, administrators, peers
 - Code of Silence unifies ritual
 - Action: illegal 30% self-mutilating & sexual 43% substance abuse
 - Negative consequences 71% Marks End justifies means 86% Hoover
 - Psychological harm: depression, anxiety, PTSD, eating disorder, SI, loss of confidence & self-esteem Marks 2012
- US HS students: athletes 47% ROTC 46% Band 34%
 - Lack of awareness: 8% labeled action as hazing
 - 25% reported first before age 13 yrs Allen & Madden 2008
- 30 College student deaths 2000-2009 Fields 2010

Who is Involved? Higher Level

Perpetrator	Victim	Sport
Age varies, older Male Larger size/physique Accredited qualifications High reputation Ignored sexual abuse record Trust of parents Low code of ethics	Younger age Smaller size / physique Moderate medical problems Weak relationship w parents Low awareness sexual abuse Complete devotion to coach	Weak employment controls Lack of parent/athlete contracts Weak code of ethics

- Stage of imminent achievement Brackenridge & Kirby
- Peak athletic maturation & age of sexual maturity
- Parent uncritical trust of coach: 45% knew qualifications Brackenridge 1998
80% unaware of code of ethics
- Coach to care for child's well-being, discipline, scheduling & medical care
- Loss of parental involvement is unhealthy for psychological development
- Disabled child 4x more likely: Intellectual impairment most at risk
- LGBTQ+ athletes

Four Stages of Grooming

1. Targeting the victim

Invitations, special training sessions, rewards

2. Building trust

Creating dependency on training staff

3. Developing isolation

4. Initiation sexual abuse & securing secrecy

Preserve anonymity

= Unhealthy practices are normalized & tolerated

- Athlete reluctance to report inappropriate coaching behaviors
- Something you put up with
- Part of the game

Where Sexual Abuse Occurs

- Training & Practice: Time dependent relationship
- Locker room: Unsupervised, private changing area
- Travel: Hotel rooms, car, alcohol or drug use
 - Coach become surrogate parent/guardian
 - Isolation: time & distance from friends & family
- Social media: No break from message
 - 92% adolescents on online daily ACMA 2008
 - Inappropriate text messages, photos
 - Grooming
- All sports: Independent of type, clothing, physical touch

Consequences of Abuse

- Psychological effects:
 - Low mood, self-efficacy, anger, anxiety
 - Risk of attempted & completed SI ↑ SA exposures
- Training effects:
 - Reduced motivation, impaired focus, difficulty with skill, drop-out
 - Loss of medal, loss of sponsorship
- Reduced quality of adult life:
 - Personal & social development
 - Mental health
- Physical effects:
 - STI, urogenital & anagenital trauma, undesired pregnancy
- Opportunity cost for sport:
 - legal redress, reputational damage, undermines trust

Prevention Strategies: Safeguards

- International Safeguarding Children in Sport
 - Moves from focusing on single issues to systems approach
 - Promote supportive mechanisms, prevent abuse, exploitation & violence
- Four goals of Safeguards
 1. Help create a safe sporting environment for children wherever they participate regardless of level
 2. Provide a benchmark to assist providers & funders to make informed decisions about child safety in sport
 3. Promote best practices & challenge those that are harmful to children
 4. Provide clarity on safeguarding children to all involved in sport

<https://concussions.smart-teams.org/about-us/international-safeguards-for-children-in-sport/>

CHILDREN : 8 Safeguards

- **Cultural sensitivity:** understand acceptable behavior & social norms within community
- **Holistic:** Integrate youth into all aspect of plan
- **Incentives:** Clear reason to participate, prioritize & sustain
- **Leader support:** Needed support develop, drive & initiate change
- **Dynamic:** Continually reviewed, adapted for relevance & effectiveness
- **Resources:** Supported appropriately by personnel, volunteers
- **Engaging stockholders:** Facilitate ownership among parents, coaches, community leaders collaborative
- **Networks:** Developing relationship with related organizations in community
 - Coaches give a verbal commitment
 - Volunteers speak with the youth
 - Conversations with schools, parents support growth

Rhind, Wessels 2009

Olympic Movement Medical Code

- Guide the behaviors of healthcare providers
- Child athlete:
 - Growth, maturation & psychological development
 - Distinct physical, psychologic and social health risk
 - Vulnerable to adult pressures in sport
- Relationships between athlete & healthcare provider outlined
 - Informed consent, confidentiality & privacy
- Best practices model
 - Best interest of child's health, not pressures of business, media, publicity
 - Athlete health protection: healthy level of training w regard to stage of growth & development

http://www.olympic.org/PageFiles/61597/Olympic_Movement_Medical_Code_eng.pdf

Team Physician: Duty of Care

- Focus on health of athlete: Physical, psychologic & social
- Be aware potential sexual abuse, esp younger & vulnerable
- Ensure prevention strategies & protective policy statements create & support safe & mutually respectful environment
- Code of conduct / practice: Explicit pt boundaries identified
- Clear guidelines for physician & health care team:
 - Provider's role & responsibilities
 - Appropriate professional boundaries
 - Accurate & timely records of physician/athlete encounters
- Educational & training programs:
 - Coaches, administrative staff, volunteers, parents, athletes
 - Boundaries w/in relationships
 - Acknowledge appropriate physical contact, dependent children
 - Materials made available to all involved

Team Physician: Approach to Disclosure

- Athlete shame, guilt & fear in culture of bystander effect
- Listen carefully, calmly, empathetically w psychological support
- Acknowledge courage in speaking of abuse
- Assure the athlete is not to blame, not at fault
- Do not speak poorly of the perpetrator
- Encourage disclosure w/out leading. Avoid specific questions.
- Duty to report: Legal statutes & organizational authorities
 - Mandated reporter to CPS for those <16 yr old
 - Duty exceeds confidentiality
 - US Center for SafeSport: System for reporting & investigating concerns
- Share support mechanisms
 - Make a referral to therapist, relevant health expert
 - Activate Mental Health Emergency Action Plan as indicated

Team Strategies: Coach, Athlete, Administrator

- Shared responsibility & ownership
 - Coach education & mentorship development should be a priority
 - Pivotal role: peak performance, lifelong participation & personal development
- Systematic recruitment & background screening
- Confidential entrance / exit interviews: clear guidelines & consequences
 - VERBAL handshake & signing contract
 - Swift punishment for infractions
- Antiviolence team presentations & educational programs
 - Promote team building & environment of respect
- Maintaining open lines of communication: Avoid secrecy
- Develop zero tolerance toward violence
- NCAA StepUp! Bystander Intervention Program: online training

AOASM in STEMM

- Society's consortium on sexual harassment in STEMM
Nationalacademies.org/SexualHarassmentCollaborative
 - Study committee of distinguished scientists, engineers, physicians & experts in SH research, legal studies & psychology
- Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine (2018) Consensus Study Report
 - SH results in significant & costly loss of talent in STEMM
 - SH & Silence limits career opportunities for targets & bystanders
 - System-wide changes to culture & climate in higher education are needed to prevent & address sexual harassment (SH)
 - Provide a roadmap for institutions of higher education to make changes

Action Collaborative on Preventing Sexual Harassment in Higher Education

- National Academies & 40 colleges, universities & research institutions
- Targeted collective action: ↑SH awareness & consequences
- Shared approach to address & prevent SH:
 - Evidence-based policies & strategies
 - Research agenda, gather & apply research results across institutions
 - Develop & implement efforts to reduce & prevent SH
- Promote culture of civility & respect
 - Support & protect targets of SH
 - Investigate SH events fairly & timely w due process
 - Appropriately punish those found to have committed SH
 - Regularly inform campus community policy, claims & disciplines
 - Move beyond basic legal compliance to preventative measures

Committee Roadmap to Guide Societies

- Create diverse, inclusive, and respectful environments
- Address the most common form of SH: gender harassment
- Move beyond legal compliance to address culture and climate
- Improve transparency & accountability
- Diffuse the hierarchical & dependent relationship between trainees & faculty
- Provide support for the target
- Strive for strong and diverse leadership
- Measure progress & Incentivize change
- Encourage involvement of professional societies & other organizations
- Initiate legislative action
- Address failures to enforce Title VII's prohibition on sex discrimination
- Increase federal agency action & collaboration
- Conduct necessary research
- Make entire academic community responsible for reducing & preventing SH

Summary & Questions

- Children are in a position of vulnerability & deserve to receive due protection
- Normalization of violence toward athletes is an important risk factor for victimization of sexual abuse among children
- Educational programs & networking throughout sports organizations are required to break down the wall of silence around acts of violence delivered to children in sport
- Recognition of abuse is crucial, prevention of abuse is essential
- We must practice a zero tolerance policy for child maltreatment in sport
- Prevention strategies for sexual violence in sports echo the framework of preventing sexual harassment in academia