

YOUTH VICTIMS, COMPETENT AGENTS: A SECOND OPINION ON SEXUAL VICTIMIZATION TRAUMA

Anne-Marie Grondin

Abstract: Michel Dorais' (2009) *Don't tell: The sexual abuse of boys* showcases the testimonials of 30 males who experienced sexual abuse in their youth. Though insightful in its challenge to normative readings of child sexual abuse (CSA), Dorais' compilation remains limiting in that victims' experiences are continually (re)framed through the medicalized lenses of trauma and pathology, while young victims are represented as having been developmentally "damaged" as a result of their experiences. Using a poststructural/discursive approach to ground my analyses, I argue that Dorais' work parallels dominant CSA discourses, which pathologize already heavily stigmatized individuals, efface counter-narratives, essentialize trauma as an inherent and immovable attribute, and constrain the ability of former victims to transcend their victimization. This maintains these victims "in" trauma through the discourse of the trauma "in" them. Finally, I offer an alternative reading of the claims put forward by Dorais and his research participants to highlight young people's own positions of power contra adult sexual aggressors and thereby draw out youth resistance. I do so in an effort to sketch out the beginnings of a framework that does more than pay lip service to the recognition of young people's agency.

Keywords: child sexual abuse, trauma, medicalized discourses, subjectivities, power, resistance

Anne-Marie Grondin is a Ph.D. Candidate in the Department of Sociology, Queen's University, D431 Mackintosh-Corry Hall, Kingston, Ontario, Canada, K7L 3N6.
Email: 6ag25@queensu.ca

Certainly, our recollection of the past is made up of so many choices, avoidances, short-cuts, and imaginings that the story we each make of our life is necessarily subjective and adapted, more or less consciously, to the individual's subsequent evolution. No one escapes this process: in recalling our past, we select and we reinterpret.
(Dorais, 2009, p. 178)

In many respects reminiscent of James Messerschmidt's (2000) seminal research on the complex and gendered dynamics of sexual victimization, Michel Dorais' (2009) *Don't tell: The sexual abuse of boys* is focused on the experiences of 30 Canadian males who were sexually victimized as children and/or adolescents, some of whom later went on to perpetrate sexually coercive acts¹. The nuanced and intricate stories presented in Dorais' work complicate the lump-all category of "sexual abuse". They also underscore that sexually coercive acts need seldom be physically violent to be considered nonetheless forced. Furthermore, *Don't tell* disputes dichotomized oppositions of "pure victim" and "depraved perpetrator" by citing the cases of several young victims who later reproduced their experiences through fantasy or forcible sexual encounter. By focusing on the experiences of young males, Dorais, like Messerschmidt, demystifies the idea that sexual violence is a "women's problem" and further documents linkages between sexual identity formation and understandings of gender.

Dorais' contribution to research on young people's sexual victimization is valuable, particularly by virtue of his challenge to normative understandings of sexual abuse. As he contends, one such challenge offers the possibility of a more "comprehensive and complex awareness of [a] phenomenon [that] is still embryonic" (2009, p. 4). However, Dorais' compilation remains limiting in that victims' past and present experiences are continually (re)framed through the medicalized lenses of "trauma" and "pathology", while victims are represented as having been developmentally "damaged" as a result of their experiences.

In this paper, via a discursive approach (Potter, 1996; Potter & Hepburn, 2008), I examine Dorais' work as representative of the dominant sexual victimization trauma narrative circulated and reinforced through the medical paradigm. Using poststructuralism to ground my analysis, I demonstrate that these same discourses can have totalizing effects, in that they often constrict how we understand child sexual abuse (CSA), its victims, and its repercussions. Throughout, I consider the extent to which the medical paradigm, and particularly the concept of trauma, is helpful for victims.

To be very clear about my aims, I do not intend to single out and disparage Dorais' work, nor am I inclined to do away with the concept of trauma entirely, to deny that CSA can engender

¹ Of the 30 participants interviewed for Dorais' research, 15 of them were between the ages of 16 and 25 at the time of the interview, and 15 were aged 25 to 44, an average of 24.5 years of age for the group. All the testimonials cited in Dorais' research thus consist of participants' recollections of the past. Dorais includes sexual touching, removal of clothing, and sexual relations between people of different ages and power in his definition of CSA. All participants were younger than 15 years old when first victimized. The majority (2/3) were victims of a relative, and 1/3 were abused by people who were known to the victim and/or his family. All were victimized by male offenders, most of whom were adults, and some of whom were adolescents older than the victim (2009, p. 6). All participants' names were modified by the author to preserve their anonymity (p. x).

harmful effects, or to argue that conceptualizing CSA as a medical issue is entirely problematic. The medicalized trauma model was, after all, of signal importance in drawing public attention to the harmful effects of sexual victimization during the 1970s, when CSA was still a fairly unexposed problem (Davis, 2005). I employed this same model to facilitate therapy for CSA victims and offenders when I worked as a clinical practitioner a few years ago. It was at this time that the nascent beginnings of my critique took shape. Though the inventory of symptoms associated with trauma often helped my clients make sense of the experiences they described, at other times, my clients resisted being described as traumatized, or even as victims. These latter instances left me with doubts as to the value of the services I was providing, and with the feeling that by reworking young people's narratives into the framework of victimization trauma, I was in fact doing my clients a disservice.

As I later discuss, a recent personal encounter with the trauma narrative led me to further weigh the pros and cons of the medicalized approach. Again, while I found it was a helpful organizational framework, I also felt that the trauma diagnosis I was handed hampered my ability to (re)consider past experiences through another lens than that of pathology. Accordingly, though the objective of this paper is to contemplate the "dark side" of discourses typically accepted as categorically helpful for former youth victims, I neither deny the material reality of child sexual abuse nor believe CSA discourses to be, inversely, conclusively unhelpful. I will argue, however, that dominant CSA discourses can also pathologize already heavily stigmatized individuals, efface counter-narratives, essentialize trauma as an inherent and permanent attribute of the subject, and reinforce anachronistic understandings of children as incomplete. In these subtle ways, CSA discourses, and the medicalized model they buttress, constrain the ability of former victims to transcend their victimization, maintaining them "in" trauma through the discourse of the trauma "in" them.

Diagnosing "The Problem"

Haslam (2005) describes "medicalizing" as the process through which something somatic is pathologized (deemed abnormal) and essentialized (assumed to be an intrinsic property). Similarly, to "psychologize" is to ascribe dysfunctionality to an element of the psyche. As I read it, psychologization is a subset of medicalization, in that psychological experts (those who psychologize) are often described as doctors of the soul or spirit. Furthermore, so-called psychological abnormality is often detected not only through behavioural, but also physiological, irregularity. CSA discourses can be characterized as medicalizing in that they judge victimization and its aftermath as necessarily dysfunctional, while essentializing the loci of trauma as within victims' bodies and minds. Sexual victimization is also frequently associated with medical (including psychological and psychiatric) illnesses and syndromes, and thus can be described as a problem that is "medicalized" (Conrad & Barker, 2010, p. S74).

As a search of the key words "child sexual abuse" on *Scholars Portal* reveals, CSA is indeed associated with a broad range of somatic, psychological, and behavioural conditions: depression, suicide, and anxiety (Kimonis et al., 2010; Paolucci, Genuis, & Violato, 2001), drug use and other addictions (Cohen et al., 2010; Wilson & Widom, 2010), as well as a host of disorders (Becker, Stuewig, & McCloskey, 2010; Silberman, 2010; Vrabel, Hoffart, Ro, Martinsen, & Rosenvinge, 2010) and psychopathologies (Cutajar et al. 2010; Shenk, Noll,

Putnam, & Trickett, 2010), amongst other symptoms, deficits and illnesses². CSA victims are said to experience such repercussions to varying degrees (Yancey & Hansen, 2010), but all victims are considered traumatized in some way (Davis, 2005).

The unequivocal equation of CSA with trauma has a lot to do with the framework through which young people are conceptualized. Historically, and following the work of such pioneers as Freud, Erikson, and Piaget, the dominant approach to theorizing childhood and adolescence has been that of developmental psychology (Albanese, 2009). Within this approach, young people are “in becoming”: over time and through biological stages, they gain increasing cognitive, emotional, and physical capacities. Prout and James (2008) describe developmental psychology as “an evolutionary model [wherein] the child developing into an adult represents a progression from simplicity to complexity of thought, from irrational to rational behaviour” (p. 10). Later developmental theorists have built on this body of work to theorize that young people learn from their surroundings, integrating lessons from their experiences as they progress through developmental stages (for instance Bandura, 1977).

According to these tenets, compared to adults young people’s ability to process information is limited, both in quantity and quality (Qvortrup, 2004). As not yet fully matured beings, they have neither developed themselves sexually, nor acquired the capacity to understand sex (Finkelhor, 1979). The idea that CSA “corrupts” young people’s development follows logically. When young people are exposed to sex, they are precociously exposed to “adult” knowledge, and their “normal” development is interrupted as a consequence. Moreover, as the logic goes, young people – children especially – are too cognitively, emotionally, and physically immature to engage in adult sex because they have not developed the necessary competencies or faculties. Consequently, CSA is always considered both damaging and traumatic (Grondin, in press).

The range of conventional avenues for redress, compared to the scope of possible aftershocks, is much more restrictive. Though there exist several types of CSA therapies and interventions, each falls within the realm of medical expertise (Deblinger, Heflin, & Clark, 1997; Gertie & Natascha, 2010; Taylor & Harvey, 2010), including the “‘psy’ disciplines” (Snider, 2003). Of course, not all CSA victims seek professional help. Nevertheless, even outside therapy post-victimization behaviour is often medicalized. That is, heedless of its character, how a young person behaves after having been abused – withdrawing or seeking support, blaming oneself or the perpetrator, characterizing the incident as positive or negative, expressing oneself through anger or sublimation – is invariably designated within dominant discourses as “coping” (Canton-Cortez & Canton, 2010), a term coined by “psy” experts in the 1960s to describe reactions to distress (Snyder, 1999, p. 6). To sum up, the dominant CSA “story” is infused, at various levels, with determinations of dysfunctionality and irregularity or abnormality typical of the knowledges produced within the medical realm³, including the “psy” disciplines (Foucault, 2003).

² For a more comprehensive review, see Kendall-Tackett, Williams, & Finkelhor, 1993; see also Schultz, 2001.

³ I use “medical”, here and in discussions of CSA discourses throughout, in the broadest, most indiscriminate sense to refer to frameworks where the knowledge claims of medical experts – that CSA unequivocally causes physical and/or psychological unwellness, for instance – tend to be treated as self-evident. I use this category as an ideal type to bring into relief its most acute discursive effects, but also recognize that it is not uniform. In point of fact, foremost amongst its critics are theorists who, following Lacan, employ psychoanalysis to flip the logic of medical

Discourses of Help, Discourses of Harm

The knowledge claims mentioned above have doubtless been useful. For one thing, by drawing attention to the breadth of possible consequences of CSA and the implications for young people, the urgency of these discourses sensitized various publics to a problem that, as previously mentioned, had traditionally been socially concealed. What is more, these discourses have proliferated to the extent that, today, professionals can rely on a growing field of research to help alleviate the suffering of CSA victims. As Snider (2003) argues, however:

knowledge claims and expertise always work to the advantage of some and the detriment of others, strengthening some parties and interests while weakening others. Those with power to set institutional agendas, with superior economic, political, social and moral capital, are therefore able to reinforce and promote certain sets of knowledges, while ignoring, ridiculing or attacking others. (p. 355)

As I will later discuss, power, in the poststructuralist sense, does not only reside with those *in* power; rather, it reaches “each point of the social body” in multifaceted ways (Foucault, as cited in Lotringer, 1996, p. 210). All the same, as the quote illustrates, particular interests keep dominant discourses in circulation, and these engender both positive and negative outcomes at all times.

Whose interests are served by and who benefits from dominant CSA discourses are perhaps more complex questions than might initially be apparent. Many would undoubtedly agree that these discourses side with victims and their plight, in that they reflect a desire to help victims name what afflicts them, and propose strategies for redress. However, victims and their needs are not homogenous, and the medicalized framework can also work against certain victims, for instance by disregarding narratives which are inconsistent with favoured medical explanations. Bearing the cloak of expertise, the claims advanced through such explanations (the threat of permanent damage, for instance) render any challenge to dominant discourses difficult. The challenge is even greater for young people, as they tend to lack the social and material capital to legitimate their own claims (Prout & Hallett, 2003). Thus, while medicalized CSA discourses can be understood, on the one hand, as a set of progressive insights which promote the well-being of some youths, on the other hand, they might also be understood as detrimental to those youths whose knowledge claims conflict with said insights, and who are consequently dismissed.

The metaphor of the double-edged sword aptly encapsulates the poststructural paradox of progress: “Empowerment and disempowerment, liberation and subjection, are two sides of the same coin. No discourse ought to be so complacent as to assume its immunity from producing both positive and negative, constraining and enabling, effects” (Angelides, 2004, p. 162). Setting aside, for analytical purposes, the well-recognized utility of medicalized CSA discourses, I will,

claims on its head (Campbell, 2004; Kristeva, 1995). Moreover, critical social scholarship including feminism and poststructuralism permeates several modern-day therapeutic and psychological approaches (Etherington, 2005; Seu & Heenan, 1998; White & Epston, 1990) seeking to counteract the challenges addressed in this paper.

in what follows, take up the challenge of deliberating the constraining effects of these same discourses.

Several Foucault enthusiasts have discussed the individualizing and at times pathologizing effects of modernist “expert” sciences, including medicine and the “psy” disciplines (Garland, 2001; Rose, 1990, 2010; Snider, 2002). Individualizing effects are those which situate the genesis of a problem and accompanying solutions within the individual. Of course, pundits would be quick to point out that contemporary CSA discourses work to blame the offender, not the victim. At the same time, however, prevention efforts are increasingly geared towards discerning patterns in victimization to help experts identify those who are most “at-risk” (Lalor & McElvaney, 2010), thus situating the source of the problem, at least in part, with at-risk youths. As evidenced in the previous section, having suffered trauma CSA victims are also considered at risk for a variety of other troubles: relational, emotional, developmental, sexual, psychological, and social. These new problems are believed to emanate from the trauma, and more precisely, from the traumatized at-risk self, which becomes the primary site of future monitoring, discipline, and governance (Ericson & Haggerty, 1997). Thus, one constraining effect of dominant CSA discourses is that they open up possibilities for intrusive intervention and regulation.

A subsidiary effect is that by constituting all victims as traumatized individuals, CSA discourses ascribe abnormality as an inherent characteristic of these individuals, which – much like a “label” or “master status” (Becker, 1966) – becomes as much an identity as an explanation of everything. The traumatized individual is reinscribed, *in essence*, as pathological or damaged. In poststructural parlance, CSA trauma discourses shape subjectivities, and in turn, these subjectivities shape how we speak of and experience the self (Butler, 1990; Foucault, 1973). Though the damage can be mitigated (through therapy or by developing adequate “coping mechanisms”, for example), it can never be completely repaired as it lies, dormant or active, within. As such, the pathological essence of the victim is imputed to all future conduct, choices, and misfortunes.

This is problematic for two main reasons. Most obviously, the assignment of a pathological identity adds to the stigma already found in being a victim of CSA. Additionally, constituting the subjectivity of the victim in one such way imposes a pernicious constraint on young people’s ability to transcend experiences of victimization, sentencing them to perpetual victimhood. Constituting young people as traumatized victims both affixes to them a new identity and naturalizes the discursive process through which they are constituted (Foucault, 1981). As a result, it conceals possibilities for the creation of new narratives and of alternative more empowering subjectivities by underscoring the weaknesses of the damaged self rather than its strengths. Left with few alternatives, CSA victims are susceptible to a re-evaluation of their lives through the lens of trauma, further entrenching their newly constituted identity in the process. As such, the formation of the trauma identity can be understood as “interactionally constituted” (Holstein & Miller, 1990, p. 104).

Method

Implicit in the concept of interactional constitution is the idea that identities are formed through the meanings derived from situations, interactions, or events, rather than stemming from the situations, interactions, or events themselves. For the purpose of this discussion, the

distinction lies in viewing sexual trauma identities as outcomes of socio-cultural, historical, and relational interpretations of victimization, and not, as contended in dominant CSA discourses, as the direct and indisputable products of victimizing incidents. To study interactionally constituted identities thus invites researching how meaning – or, for Foucault (1978), knowledge – is produced, an approach firmly rooted in the long-standing interpretivist/constructionist tradition (Berger & Luckmann, 1966; Denzin, 2001; Garfinkel, 1967; Goffman, 1983; Sartre, 1963) and its derivatives (Barthes, 1994; Derrida, 1967; Edwards, 1997; Fairclough, 1989; Potter, 1996).

Accordingly, poststructuralists study discourse, or the sets of “practices that are composed of ideas, ideologies, and referents that systematically construct both the subject and objects of which they speak” (Hesse-Biber & Leavy, 2011, p. 238). More specifically, discourse analysis involves observing how texts and talk create and reproduce culturally-embedded meanings to position subject identities in particular ways (Edley & Wetherell, 1997; Nikander, 2008). Discourse analysis comprises an array of techniques and methods, some more sophisticated than others. In conducting research for this paper, mine was to read text – Dorais’ (2009) *Don’t tell: The sexual abuse of boys* – to “try to pin down [its] key themes and, thereby, to draw a picture of the presuppositions and meanings that constitute the cultural world of which the textual material is a specimen” (Perakyla, 2008).

My analyses focused on two layers of text within Dorais’ work. I began with an analysis of long passages and quotes taken from Dorais’ transcripts and reprinted in *Don’t tell*, to assess how Dorais’ participants made sense of their victimization experiences and their lives in the aftermath – how they, in other words, constituted themselves using the cultural scripts that were available to them. In a meta-analysis of sorts, I then examined how the author interpreted his participants’ responses to underscore, first, that knowledge claims are subjectively assembled; and second, that these claims are reflective, but also (re)productive of dominant discourses.

In what follows, I present the results of my analyses by drawing out which discourses were used to make meaning of CSA, and how they are kept in circulation and reinforced. Borrowing from poststructural insights, I also discuss the disempowering/constraining effects of these same discourses to offer a “second opinion” on the narrative of sexual victimization trauma. Finally, I offer an alternative reading of the claims advanced by Dorais and his participants to highlight the mutability of meanings associated with CSA, and to emphasize youth resistance and agency.

Don’t Tell ...

Damned if they do, damned if they don’t

Michel Dorais’ (2009) *Don’t tell: The sexual abuse of boys* provides a working example of the interactional process through which traumatized subjects are constituted. Dorais’ aim is to answer the following questions:

How are male victims of sexual abuse affected by it? How much does the trauma affect their learning and emotional development? What are the consequences of such sexual abuse on their future behaviour, their sexual orientation, and their sexual development?
(p. 3)

Implicit in these questions are several assumptions: first, that sexual victimization necessarily engenders particular repercussions; second, that victims are invariably traumatized as a result; third, that there exist pre-ordained developmental paths which can be offset by trauma; and fourth, that the traumatic “damage”, once rooted in the individual, will rhizomatically extend its grasp to all aspects of the victims’ identity, indefinitely.

In asking these questions, Dorais aims to provide an organizational structure for the themes he surveys. However, we might think of his questions as also providing a different kind of structure, a framework through which to read CSA as a medical problem and its victims as inherently traumatized. As in the literatures reviewed above, Dorais assumes male CSA victims are suffering from a host of somatic, behavioural, and psychological forms of trauma as a result of their victimization including “fear, anxiety, negative self-image and low self-esteem, abuse of alcohol and drugs, violence” (2009, p. 4), cognitive dissonance (p. 82), insomnia (p. 94), hypervigilance, claustrophobia, and other “psychosomatic discomforts” (p. 95).

All of the above are considered undesirable, unhealthy reactions caused by CSA alone, rather than by factors preceding sexual victimization. For instance, in recounting his tumultuous past, “Pascal” describes how he was:

pushed around from one place to another when I was little. My grandmother looked after me when I was born. After I was two, I lived with different relatives for about five years, but I never stayed in one place more than about a year. Then I was in foster homes. That’s when I found out my real mother wasn’t who I thought she was. They’d always told me my aunt was my real mother. In other words, I thought my mother’s sister was my mother. I didn’t know who my father was, either. I still don’t know. I always thought it was my uncle. But no. I realized my mother and the whole family were lying to me. (2009, p. 10)

Though the passage hints at several reasons why Pascal might be distrustful of adults, his issues with trust and intimacy are described as stemming from his sexual victimization alone (p. 14). This suggests that the scars left by sexual victimization trump all prior experiences, inscribing themselves as an altered traumatized state and thus transforming the identity of the child so that the self is re-envisioned accordingly.

Illustrating this same point, “Matthew” describes how his childhood was punctured by the death of his father and of the grandmother who raised him, as well as by being abandoned by his stepfather (Dorais, 2009, p. 54). He was later abused by another father figure, his best friend’s father, whom he describes as a “role model” who betrayed him: “After that experience, I didn’t trust men at all. I lost my ability to trust” (p. 55). Matthew, like Pascal, attributes his lack of trust to his sexual victimization. Without discounting Matthew’s interpretation, we might consider the source of his distrust as stemming instead (or as well) from having been disappointed by various men in his life. This in no way nullifies Matthew’s understanding as mere fiction, but rather draws attention to the historical, cultural, and social situatedness of his account. Specifically, the examples above speak to the ubiquitousness of the framework used to make meaning of CSA. They also demonstrate how subjects incorporate CSA discourses and co-constitute their subjectivities in the process.

This is not to say that discourses are always adopted uncritically. Importantly, the narratives of some CSA victims contradict dominant discourses. For example, “James” recalls that:

It wasn't rape. I didn't see it as rape. (...) It was when the police came to school to question me that the affair took another turn. The police told me the old man was putting young boys in touch with other men who wanted sex with them. At that point, it hadn't gotten that far with me. The police said they wouldn't let me go if I didn't talk. It took a few hours before I capitulated. (...) [I]f it happened, it just had to happen. Maybe that's why I'm no longer bothered by it. It's as though it didn't happen to me. It's passed. It's finished. That's all. I needed him, and he needed me. (Dorais, 2009, pp. 90–91)

In other words, James understands his experience as a mutual exchange or trade, rather than a top-down imposition of will. Contra the trauma model, he neither believes he has suffered an aftershock, nor does he understand the present through the lens of his past “victimization”. In acknowledging that he framed the incident as abuse under coerced police questioning, James also demonstrates that he was able to move between frameworks, to shift discourses, in accordance with the expectations that were placed on him.

As such, James' example highlights how subjectivity is discursively constituted, by *people*, and within social interactions. The example further emphasizes how dominant knowledge claims are circulated, and why – in this instance, by molding James' narrative into an account better suited to the organizational needs of an institution which relies on victim/offender and innocent/guilty binaries to exist. That the police were able to detain James until he provided them with what they considered a suitable account also underscores why it is often difficult (though not impossible) to reject dominant accounts. Ultimately, James' story will have been re-narrated and simplified through institutional tools for reporting crime as one fitting the parameters of dominant CSA discourses. His case illuminates how subject positions and accounts cannot be separated from “those assumptions and practices that exclud[e] considerations of difference” (Scott, 1991, p. 777).

Certainly, it is no secret that history is made up of the claims of a select few – the voices of those who are heard – or so the famous quote suggests. Yet James' case goes beyond exemplifying *who* is heard; it is also about *what* is heard. Indeed, Dorais reads his participants' sometimes ambivalent reactions as symptomatic of CSA trauma. For Dorais, ambivalent reactions equate to psychological mechanisms of denial or minimization which themselves are indicative of the degree of harm inflicted on victims' psyches (2009, p. 96). In other words, Dorais pathologizes narratives which are inconsistent with authoritative knowledge claims, as well as the individuals who attempt to resist the traumatized victim identity, by recasting ambivalence as a negative consequence of CSA. In this sense, former victims are damned if they do, and damned if they don't; irrespective of their personal interpretations, they are (re)construed as damaged individuals.

Beyond the abnormalization of people, the medicalization of post-abuse behaviours also pathologizes an array of actions, which otherwise could be understood if not as “healthy”, then certainly as “mundane”. For instance, Dorais reads conformity as a reaction to an abusive past.

When CSA victims conform to particular social scripts, he explains, it is either to deny having been abused (2009, p. 149), or to erase any “mark” (i.e., trait or patterned behaviour) believed to have paved the way for the abuse to occur (p. 150). Similarly, the development of certain qualities in adulthood, such as assertiveness or skepticism, is understood as “a more positive integration of past traumatic experiences” (p. 96), rather than a simple acquisition of particular traits over time. Likewise, newfound interests in art are recast and psychologized as “sublimation” (p. 96). In sum, the every action, interest, or motive of a former victim is understood as a by-product of trauma and a “coping strategy” (p. 137).

If the goal is to help young victims to move on, the present analysis suggests that, by uncritically adopting medicalized CSA discourses, we, like Dorais, may be going about it illogically. Indeed, by reading trauma into the narratives and everyday actions of former victims, we invite victimization experiences to endlessly permeate all future aspects of their lives, rather than help them to overcome it. As I demonstrate next, this is a consequence of using the trauma model as the explanation of everything, and of essentializing trauma as a blemish affixed to the individual, one which imprints a permanent scar.

Soiled forever

In her overview of the history of the concept, Leys (2000) discerns two main theories of trauma. *Mimetic* theorists, Freudian psychoanalysts among them, posit that trauma is an unconscious distressed response. Trauma, in this sense, stems not from distressing experiences, but from an internal psychological process. In contrast, *anti-mimetic* theorists depict trauma as the record of an external event dissociated, at least for some time, from memory. Thus, while the mimetic theory situates the locus of trauma within the individual, anti-mimesis traces it back to a particular event (pp. 8–10). As Leys explains, the anti-mimetic theory was founded on the critique that mimesis is an overly deterministic theory, one that depicts the subject as consciously absent from trauma, and therefore lacking sovereignty. By relocating the source of trauma in an external circumstance, anti-mimetic theorists recognized traumatized subjects instead as “passive sovereigns” at odds with a distressing ordeal (p. 10).

Though the distinctions outlined above might suggest irreconcilability between the two theories of trauma, both nonetheless inform contemporary conceptualizations of CSA aftershocks for victims. On the one hand, CSA is understood to produce psychological reactions within the individual, most notably in its association with Post-traumatic Stress Disorder (PTSD) and dissociation (for instance, Simon, Feiring & Kobielski McElroy, 2010). Dorais (2009) highlights several such forms of trauma in his discussions of cognitive dissonance (p. 81), memory suppression, and amnesia (p. 95). On the other hand, trauma is also believed to emanate from the external event or assault itself. As previously discussed, CSA in itself is considered so traumatic as to minimize antecedent distress, or even to reconstitute youths who deny having been harmed as victims.

The idea that the anti-mimetic theory offers further autonomy in its constitution of the subject is, I would argue, questionable. Whether its source is located internally or externally, the concept of trauma – though not always conceived as an unconscious dysfunction of the psyche – ascribes abnormality both to the individual and to the individual’s life. For instance, Dorais (2009) often depicts young victims as altered beings, negatively transformed at their cores by CSA, be it in the modification of “the *essential* dimension of individual stability” (p. 4, emphasis

added), the sexualization of their thoughts, affect, and behaviour (p. 45), or other hindrances to their development (p. 110). Moreover, he describes former victims as “inevitably affected” (p. 136) by adverse repercussions of CSA characterized as both transformative and long-lasting, if not permanent: “after the abuse they were never the same” (p. 137). These examples demonstrate how the application of dominant CSA discourses, which fix trauma as an inescapable and transformative consequence, shapes and pathologizes young victims’ subject identities.

The epitaph I selected was taken from Dorais’ *Don’t tell*. In it, the author suggests that we narrate our lives based on interpretations of past experiences, and these channel how we make sense of our “subsequent evolution” (2009, p. 178). In Foucauldian terms, our “ontology of ourselves,” otherwise conceptualized as our personal “histories of the present,” centres on the “condition[s] under which we, as individuals, exist and what causes us to exist in the way that we do” (Mills, 2004, p. 25). Through this process, we draw on discourses to understand how particular conditions have impacted who we are, and internalize the judgments embedded within these discourses to assess ourselves and our experiences (Foucault, 1985). How we speak of and experience ourselves in the present and future is thus heavily influenced by selective, subjective interpretations of the past and the discourses which inform them.

For CSA victims, the interactionally constitutive process of interpreting oneself via the lessons of dominant discourses entails accepting oneself as traumatized, in other words as negatively transformed or damaged. Several of the testimonials in *Don’t tell* evidence this last point. For one, “Paul” believes his sexuality to be “abnormal” as a result of his victimization, leading him to conclude: “I’m not like other people” (2009, p. 135). The transformation is sometimes perceived as deceptively furtive, its manifestation a constant, looming threat, as for “Bruno” who likens trauma to “a time bomb in your head. You never know when it’ll go off” (p. 127). Often, the transformative effects of trauma are believed to percolate to all aspects of life: “the boy’s whole life is at risk of being centered around the invading trauma” (p. 111), as per the perception of “Jimmy” that “all the problems I’ve had are due to [my abuser], to what he did to me” (p. 38). Moreover, it is believed that the damaging effects of the transformation/trauma “will continue to unfold long after the abuse has ended” (p. 168), and will “often worse[n] over time” (p. 81).

While, on the one hand, the narratives highlighted above may be understood as helpful in that they provide former victims with a means of ordering their storied experiences, they are, on the other hand, unconstructive in their prospective pessimism. Indeed, extending Dorais’ contention that CSA victimization generates in many youths feelings of having been “soiled forever” (2009, p. 92), I would argue, based on the above narratives, that CSA trauma discourses can foster identical effects. Without discounting the idea that “[CSA] trauma can leave scars that cannot be erased” (p. 33), this is to suggest that discourses of trauma are themselves permanent scars, working in tandem with the traumatic event and/or distressed responses to keep victims “in” trauma through the trope of the trauma “in” them.

Setting aside the discussion of possible disciplinary effects which trauma discourses, like any other so-called expert discourse (Foucault, 1977), might incite, my focus is instead to underscore, as per poststructuralist tradition, the productive effects of such discourses, those which create and reinforce “traumatized” subject identities and how these are embodied. Thus, while the trauma narrative may have emerged out of a desire to explain and address the

repercussions of CSA, the conceptualization of trauma as inescapable, inherently transformative, permanent, and all-encompassing entrenches, rather than suppresses, trauma for young victims. Of course, this critique of the trauma model can be extended beyond my own application to cases involving adults. As I argue next, however, pathologizing CSA discourses have particularly pernicious effects for young people. Specifically, the fated ruin associated with CSA trauma reinforces perceptions of passive helplessness, a condition already problematically associated with being young.

Just another word for “incomplete”

Sociologists of Childhood call attention to the problematic partition of constructed adult/child and related binaries: complete/incomplete; experienced/innocent; active/passive, and so on (Danby & Farrell, 2004; Qvortrup, 2004; Wyness, 2006). Prout and James (2008) argue such binary understandings impose on youths comparative deficits, wherein they “are regarded as immature, irrational, incompetent, asocial and acultural with adults being mature, rational, competent, social and autonomous” (p. 13). This deficiency model takes root in developmental psychology (Burman & Stacey, 2010). As earlier discussed, developmental psychologists use as their foundational premise the idea that youths develop emotional, cognitive, and physical capacities as they “progress” through particular, age-based stages. Before reaching adulthood, youths are thus considered “in progress”, but lacking. Their developmental shortfalls are used in a variety of domains either to proscribe activities considered too complex for their limited capacities, for instance voting or driving a licensed vehicle, or to enforce activities believed to help them along their development, such as going to school.

For youths, the deficiency model imposes on them a state of postponement. They are, as Qvortrup (2004) argues, fated to wait “to become adults; to mature; to become competent; to get capabilities; to acquire rights; to become useful; to have a say in societal matters; to share resources,” (p. 267). In the meantime, their development relies on an array of factors mostly beyond their control, or stimuli to which they are exposed but which they cannot govern, again because they are construed as incompetent to do so.

Like other Sociologists of Childhood, James and Prout (2008) argue that structural conditions, and not innate limitations, are what render youths more vulnerable. Powerlessness, vulnerability, dependency, and helplessness are not, as popularly conceived, in-built, but are instead resulting consequences of the widespread and institutionalized treatment of youths as such. In other words, the constitution of young people as limited or deficient in discourse ensures in practice that constraints will be placed on their actions, limiting in turn their ability to acquire knowledge and experience autonomously, and abnormalizing the knowledge and experiences to which they are “prematurely” exposed (Angelides, 2004).

If CSA discourses work to keep victims passive and fated to succumb to the effects of their traumatized state, so do developmental “youth” frameworks, in that these constrain our ability to recognize youths – and youths’ ability to recognize themselves – as socially competent agents. Instead, young people are conceptualized as passive recipients of things done “to” them, biologically or through social interaction (Albanese, 2009, p. 27). CSA and trauma are fitting examples. Far from proposing a reactionary reversion to seeing young people as willing initiators of sex with adults, I mean only to argue that, by situating youths “outside” of power and agency, predominant discourses of CSA, trauma, and youth reaffirm regulatory determinations of

incompetence and resulting feelings of helplessness. For, in combination, these sets of discourses equate sexual victimization with developmental impairment, young people with incompetence, and trauma with devastation, leaving former victims to face very daunting prospects.

In pursuit of more enabling discursive constitutions, Sociologists of Childhood have privileged viewing young people as competent and autonomous agents, valuable for who they are in the present, as opposed to who they are to become (Freeman & Mathison, 2009, p. 7). Their approach is consistent with poststructuralist, and particularly queer, deconstructions of age categories, through which “concepts such as knowledge, consent, and power as they have been articulated through the linear and sequential logic of age stratification” are re-examined (Angelides, 2004, p. 167). Key to this project, of course, are Foucauldian theorizing on power.

Reframing the Paradigm: Seven Tales of Resistance

Strategic games

Prior to Foucault’s work, power was by and large conceptualized as that which differentiates the “haves” from the “have-nots”. Read in this way, power is “repressive” in that it seeks to impose a degree of coercion from the top-down; one obtains power by successfully repressing one’s opponent in a zero-sum game. Consider, for instance, how CSA has been framed as a problem of power imbalance. Adults – the haves – are seen in these cases as imposing their wills and desires onto youths – the have-nots – suppressing young people’s own volition in the process (Grondin, 2010, p. 136). According to Foucault (as cited in Faubion & Rabinow, 1984), viewing power in this way is problematic, not because it is entirely inaccurate, but because it is incomplete in its explanation of how power operates:

In defining the effects of power as repression, one adopts a purely juridical conception of such power, one identifies power with a law that says no – power is taken, above all, as carrying the force of a prohibition. Now, I believe that this is a wholly negative, narrow skeletal conception of power, one that has been curiously widespread. If power were never anything but repressive, if it never did anything but to say no, do you really think one would be brought to obey it? What makes power hold good, what makes it accepted, is simply the fact that it doesn’t only weigh on us as a force that says no; it also traverses and produces things, it induces pleasure, forms knowledge, produces discourse. It needs to be considered as a productive network that runs through the whole social body. (p. 120)

In the context of the present discussion, what is important to retain from this passage is the idea that power is productive of knowledge, discourse, and as Foucault argues elsewhere (1977, 1978, 2003), subjectivities; for, if individuals are able to reconceptualize themselves as particular kinds of subjects through discursive assemblages, if their identities are in fact interactionally constituted, then they are able, in this sense, to exert power in the same way as do “experts” driving the process of discursive formation. For victims of CSA, the difference between productive and repressive conceptualizations of power lies in recognizing that they, too, possess certain resources and strengths, and that they are able to wield certain degrees of power, irrespective of their age stratification.

Moreover, the idea that subject identities are produced through discursive power, and particularly the notion that those “subjected” to discourses are co-conspirators in the constitutive

process, intimates that subjectivities are fluid, and emphasizes the agential capacities of subjects to choose a referential framework. Without denying that some frameworks hold more currency at particular times and in certain contexts than others, as does the CSA trauma model in the West at the moment, such an anti-essentialist reading of the subject reminds us that discursive constructions are mutable, that there are myriad subject varieties, and that these are constantly in flux. In other words, we can never be “finished” products, products of a single experience, or products of any one kind. Accordingly, former CSA victims are much more than the by-products of their victimization/trauma, much more, in fact, than simply victims. In light of this, a more empowering support for former victims might entail emphasizing the sum of their experiences as having shaped them in multifaceted ways, as well as their ability to move between and through their own assortment of subject identities.

Foucault’s work on power is helpful in yet another regard. In the first volume of *The history of sexuality* (1978), he argues resistance is a vital dimension of, and necessary condition for power. What would prompt the need to impose repressive forms of power, or even the need to produce particular subjects, he asked, if not for the threat of resistance? For Foucault then, “resistance is ‘written-in’ to the exercise of power,” a notion which “move[s] away from viewing individuals only as passive recipients” (Mills, 2004, p. 40). Accordingly, Foucault argues power is not an entity which can be possessed, lost, or lacking, but rather an economy of relations, of “forms of resistance against different forms of power” (as cited in Dreyfus & Rabinow, 1983, p. 211). In other words, power consists of a set of “strategic games between liberties” (Foucault, as cited in Bernauer & Rasmussen, 1988, p. 19).

As Kitzinger (2008, pp. 170–173) documents, young people often deploy a wide range of tactics to resist their aggressors, including fighting back; saying no; running away; articulating threats; feigning indifference, climax, even nosebleeds; limiting physical contact; manipulating; lying; crying; and/or yelling out. To liken CSA to a mere game would unquestionably be remiss, but the point is that even sexually abusive relations can be understood as negotiated strategies blurring the line between offence and defence, as a series of multiple, overlapping, and complex exchanges between two parties. To argue that young people can resist abusive situations does not imply that they are fairly matched to their opponents. Furthermore, young people’s liberty to resist does not guarantee success in their efforts. However, by conceptualizing power in this way, we can begin to move away from framing CSA as a problem of absolute dominance, a model which reinforces the idea that young people are always dominated (and therefore helpless), and which re-enacts domination by silencing acts of resistance.

Moreover, the simple act of recognizing resistance can have empowering effects, as it allows former victims to reconstitute their subject position through a new narrative of agency. This, in turn, opens up space for stories outside dominant discourses to emerge, and for these stories to be recognized and validated as legitimate knowledge/discourses. Indeed, dominant frameworks are themselves dominating when they are imposed in a totalizing fashion. Put otherwise:

a system of constraint becomes truly intolerable when the individuals who are affected by it don’t have the means of modifying it. This can happen when such a system becomes intangible as a result of its being considered a moral or religious imperative, or a necessary consequence of medical science. (Foucault, as cited in Lotringer, 1996, p. 327)

The process of drawing out narratives of resistance, power, and agency is crucial to counter the determinism which characterizes the dominant CSA paradigm and to modify the constraining effects of establishing trauma as a necessary, devastating, and unshakeable medical/psychological aftershock. Such narratives can provide former victims with the above-mentioned “means of modifying”, or of de-sedimenting, totalizing discourses.

Seven tales of resistance

A poststructuralist approach to the question of power acknowledges the positioned expertise of various “knowers”, including young people who position themselves outside dominant discourses. A poststructuralist re-reading of James’ narrative, which I cited earlier, would require us to recognize his perception that he neither experienced victimization nor trauma at the hands of an older man with whom he engaged in sexual relations, and to validate this knowledge as a conceivable truth. One such reformulation not only enfranchises James as an agent, it also makes visible the contestability of dominant discourses, thus leaving these open for challenge.

Privileging young people’s interpretations also allows us to unpack how identities are socially and interactionally constituted. For instance, “Dennis” states:

didn’t so much see what had happened to me as an abuse. I considered it to be a homosexual relationship between an adult and a child. It’s only recently that I’ve come to see it as abusive (...). I bear him a grudge now. That probably signifies that it really was abuse. (...) However, it’s maybe less the abuse part of it than the homosexual part of it that affected me most in the end. (in Dorais, 2009, p. 101)

Dennis’ testimonial highlights the mutability of his subjective understanding. He appears to shift between understanding himself as a victim and a non-victim who questions his sexual identity. He partly dismisses the latter understanding, which goes against dominant CSA discourses, as a faulty recollection, and finds proof of his victim status in the feelings he has towards his aggressor at present. Though the two interpretations might appear at odds with one another, together, they reflect different facets of Dennis’ construed identity, which he is free to draw on to make sense of his own experiences as he sees fit, without having to judge which one is “right” or “wrong”.

Similarly, “Bruno” and “Justin” (in Dorais, 2009, pp. 125–126 and 153–154 respectively) alternate between positioning themselves in and outside of victimization discourses. Both recount having had several sexual encounters with older men, but only consider some of these as abuse. The idea that comparable situations can be perceived so differently points to the variability of interpretations of these acts, and challenges the notion that exposure to adult-child sex necessarily results in trauma. If taken in good faith, such discrepant narratives provide hope for a future absent of permanent scarring.

Excavating storied resistance from narratives of victimization can further trouble essentializing trauma discourses. Sometimes, victims’ strengths emerge in spite of their learned passivity with aggressors, as with “Jimmy”:

I obeyed my father. (...) I didn't like him touching me but (...) I had to allow myself to be abused to be worth talking to. (...) As soon as I felt stronger, more confident, I began to be less respectful towards him to yell and scream my head off as he used to do. (...) He said: "Obey me. I'm your father". I replied: "A father doesn't behave the way you do". (in Dorais, 2009, p. 35)

As this testimonial highlights, young people can develop and yield strengths to resist their aggressors. On the one hand, these strengths can be understood as acquired despite coercive circumstances, as a sign of resiliency. On the other hand, we might think of them as by-products of the same circumstances, as resources developed specifically to combat coercion, and thus, as positive outcomes of adversity. At other times, young people's resistance can halt the victimization entirely, as it did for "Matthew":

I got away from him, I ran outside. I hid in the cabana in the garden. He negotiated with me to get me to come out (...). I asked him to drive me home and he did, trying to put things right with me the whole way home. (in Dorais, 2009, p. 55)

And also for "Pascal":

On later occasions he saw that I was resisting. He distanced himself from me. He didn't speak to me as he had done before, he didn't take me out anymore. (p. 11)

If we were to put further emphasis on accounts of resistance such as the ones exemplified above, we could begin to reframe CSA narratives as empowering discourses. Through these new discourses of agential resistance, we could begin to reclaim subjectivities of passive and traumatized victims as competent agent identities. Earlier, I suggested that trauma, as an explanation of everything, invites itself to permeate all aspects of former victims' lives. Assuming the logic of my contention makes sense, the same argument would also apply here. That is, by reading resistance into young people's narratives and actions, we can incite empowerment to trickle into various realms, including recollections of the past, understandings of the present, and future projections. We can, in other words, call on discourses of resistance to produce more enabling effects.

Conclusion

The medicalized model of CSA trauma is both widely acknowledged and generally valued as a progressive framework that brings us closer to understanding the "truth" about CSA victimization. Though this model may well do justice to the experiences of certain victims, others situate their experiences outside the dominant narrative, as secondary analyses of Michel Dorais' *Don't tell* (2009) demonstrate. What I have sought to do in this paper is to think critically about the effects of using discourses of trauma in a totalizing way. As I have argued, doing so can entrench trauma as a symbolic but permanent scar for former victims. Like other medicalized discourses, the trope of the damaged CSA victim rests on assumptions of dysfunctionality and unwellness; it essentializes trauma as an abnormality of the individual that foreshadows further dysfunction throughout and in all parts of life. Consequently, the dominant framework both impedes young people's ability to transcend their victimization and reinforces feelings of passive helplessness already embedded within "youth" and "victim" discourses.

Having said this, the trauma model is not entirely unhelpful. As I was writing this paper, I was, somewhat ironically, diagnosed as suffering from Post-traumatic Stress Disorder (PTSD). Once I got past the initial surprise, I felt a tremendous sense of relief, as though, suddenly, so many things in my life made sense. The diagnosis provided me with a way to neatly categorize and explain my actions. It also provided me with a guide to understanding myself. I even used it to justify some of my more notorious fiascos, failures to launch, and other disappointments. Eventually, however, I began asking myself: “Is this all I am? Was I suffering from trauma-induced detachment, when all these years I thought I was being strong?” I felt foolish. I began revisiting my successes, interpreting each anew as early indications of an impending implosion. Moreover, I started to worry that the patterns I newly understood as brought on by my condition would be, at this point, so firmly established as to close off hope for a total recovery.

As I went back to the paper, struggling to mediate between my theoretical critique and my personal feelings, I realized the proverbial proof of the pudding. Though my newfound traumatized subjectivity was helpful in certain regards, it also explained away those elements of myself that I was proud of, the strengths I believed I could fall back on, as nothing more than embodied side effects of my traumatized disposition. Returning to Angelides’ (2004) contention that no discourse is immune from producing both enabling and constraining effects, I will conclude that the uncritical acceptance of any discourse as wholly beneficial flags that aspects of its productive effects have necessarily been overlooked. To suggest otherwise is to assume that individuals are both homogeneous and static. Thus, it may be more constructive to consider what we hope to achieve with particular discourses than attempt to evaluate these from a moral or ethical standpoint.

As I have argued in this paper, medicalized CSA trauma discourses provide former victims with a set of structured explanations, but these are not comprehensive, nor are they particularly apt at helping young people move beyond traumatic experiences. In contrast, conceptualizing CSA as a “strategic game” between two parties, in the poststructuralist sense, creates space to reintroduce young people into discourse as competent agents. It emphasizes resistance, leaves open the possibility for discrepant interpretations, and counters essentialist readings of young victims as invariably damaged.

References

- Albanese, P. (2009). *Children in Canada today*. Don Mills, ON: Oxford University Press.
- Angelides, S. (2004). Feminism, child sexual abuse, and the erasure of child sexuality. *GLQ: A Journal of Lesbian and Gay Studies*, 9(4), 141–177.
- Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Barthes, R. (1994). *The semiotic challenge*. Berkeley: University of California Press.
- Becker, H. S. (1966). *Outsiders: Studies in the Sociology of deviance*. New York: Free Press.
- Becker, K. D., Stuewig, J., & McCloskey, L. A. (2010). Traumatic stress symptoms of women exposed to different forms of childhood victimization and intimate partner violence. *Journal of Interpersonal Violence*, 25(9), 1699–1715.
- Berger, P. L., & Luckmann, T. (1966). *The social construction of reality: A treatise in the sociology of knowledge*. New York: Doubleday.
- Bernauer, J., & Rasmussen, D. (Eds.). (1988). *The final Foucault*. Cambridge, MA: MIT Press.
- Burman, E., & Stacey, J. (2010). The child and childhood in feminist theory. *Feminist Theory*, 11(3), 227–240.
- Butler, J. (1990). *Gender trouble: Feminism and the subversion of identity*. New York: Routledge.
- Campbell, K. (2004). *Jacques Lacan and feminist epistemology*. New York: Routledge.
- Canton-Cortez, D., & Canton, J. (2010). Coping with sexual abuse among college students and post-traumatic stress disorder: The role of continuity of abuse and relationship with the perpetrator. *Child Abuse & Neglect*, 34, 496–506.
- Cohen, L. J., Forman, H., Steinfeld, M., Fradkin, Y., Frenda, S., & Galynker, I. (2010). Comparison of childhood sexual histories in subjects with pedophilia or opiate addiction and healthy controls: Is childhood sexual abuse a risk factor for addictions? *Journal of Psychiatric Practice*, 16(6), 394–404.
- Conrad, P., & Barker, K. K. (2010). The social construction of illness: Key insights and policy implications. *Journal of Health and Social Behavior*, 51(S), S67–S79.
- Cutajar, M. C., Mullen P. E., Ogloff, J. R. P., Thomas, S. D. M., Wells, D. L., & Spartaro, J. (2010). Psychopathology in a large cohort of sexually abused children followed up to 43 years. *Child Abuse & Neglect*, 34(11), 813–822.
- Danby, S., & Farrell, A. (2004). Accounting for young people's competence in educational

- research: New perspectives on research ethics. *Australian Educational Researcher*, 31(3), 35–49.
- Davis, J. E. (2005). *Accounts of innocence: Sexual abuse, trauma, and the self*. Chicago: University of Chicago Press.
- Deblinger, E., Heflin, A. H., & Clark, M. (1997). The treatment of sexually abused children. *In session: Psychotherapy in practice*, 3(1), 69–88.
- Denzin, N. K. (2001). *Interpretive interactionism* (2nd ed.). Thousand Oaks, CA: Sage.
- Derrida, J. (1966). *Writing and difference*. London: Routledge.
- Dorais, M. (2009). *Don't tell: The sexual abuse of boys* (I. Denholm Meyer, Trans.) (2nd ed.). Kingston, ON: McGill-Queen's University Press (Original work published 1997).
- Dreyfus, H. L., & Rabinow, P. (Eds.). (1983). *Michel Foucault: Beyond structuralism and hermeneutics*. Chicago: University of Chicago Press.
- Edley, N., & Wetherell, M. (1997). Jockeying for position: The construction of masculine identities. *Discourse & Identity*, 8, 203–217.
- Edwards, D. (1997). *Discourse and cognition*. London: Sage.
- Ericson, R. V., & Haggerty, K. D. (1997). *Policing the risk society*. Toronto: University of Toronto Press.
- Etherington, K. (2005). Researching trauma, the body and transformation: A situated account of creating safety in unsafe places. *British Journal of Guidance & Counselling*, 33(3), 299–313.
- Fairclough, N. (1989). *Language and power*. London: Longman.
- Faubion, J. D., & Rabinow, P. (Eds.). (1984). *Michel Foucault: Power*. Paris: Gallimard.
- Finkelhor, D. (1979). What's wrong with sex between adults and children? Ethics and the problem of sexual abuse. *American Journal of Orthopsychiatry*, 49(4), 692–697.
- Foucault, M. (1973). *The birth of the clinic: An archaeology of medical perception*. London: Tavistock.
- Foucault, M. (1977). *Discipline and punish: The birth of the prison*. New York: Vintage Books.
- Foucault, M. (1978). *The history of sexuality, Vol. I: An introduction*. New York: Vintage.
- Foucault, M. (1981). The order of discourse. In R. Young (Ed.), *Untying the text: A post-structuralist reader* (pp. 48–79). London: Routledge, and Kegan Paul.

- Foucault, M. (1985). *The history of sexuality, Vol. II: The use of pleasure*. New York: Vintage Books.
- Foucault, M. (2003). *Abnormal: Lectures at the College de France, 1974-1975*. New York: Picador.
- Freeman, M., & Mathison, S. (2009). *Researching children's experiences*. New York: Guilford Press.
- Garfinkel, H. (1967). *Studies in ethnomethodology*. Englewood Cliffs, NJ: Prentice Hall.
- Garland, D. (2001). *The culture of control: Crime and social order in contemporary society*. Chicago: University of Chicago Press.
- Gertie, P., & Natascha, P. (2010). Group art therapy with sexually abused girls. *South African Journal of Psychology*, 40(1), 63–73.
- Goffman, E. (1983). The interaction order. *American Sociological Review*, 48, 1–17.
- Grondin, A.-M. (2010). Dangerous childhood? Constructing risk and the governance of teacher-student interactions. In L. Hopkins, M. Macleod, & W. C. Turgeon (Eds.), *Negotiating Childhoods*. Retrieved from ID Press, ISBN: 978-1-84888-046-7.
- Grondin, A.-M. (in press). Thinking outside specious boxes: Constructionist and poststructuralist readings of “child sexual abuse”. *Sex Education*.
- Haslam, N. (2005). Dimensions of folk psychiatry. *Review of General Psychology*, 9(1), 35–47.
- Hesse-Biber, S. N., & Leavy, P. (2011). *The practice of qualitative research* (2nd ed.). London: Sage.
- Holstein, J. A., & Miller, G. (1990). Rethinking victimization: An interactional approach to victimology. *Symbolic Interaction*, 13(1), 103–122.
- James, A., & Prout, A. (Eds.). (2008). *Constructing and reconstructing childhood* (2nd ed.). New York: RoutledgeFalmer.
- Kendall-Tackett, K. A., Williams, L. M., & Finkelhor, D. (1993). Impact of sexual abuse on children: A review and synthesis of recent empirical studies. *Psychological Bulletin*, 113, 164–180.
- Kimonis, E. R., Shkeem, J. L., Edens, J. F., Douglas, K. S., Lilienfeld, S. O., & Poythress, N. G. (2010). Suicidal and criminal behavior among female offenders: The role of abuse and psychopathology. *Journal of Personality Disorders*, 24(5), 581–609.
- Kitzinger, J. (2008). Who are you kidding? Children, power, and the struggle against sexual

- abuse. In A. James & A. Prout (Eds.), *Constructing and reconstructing childhood* (2nd ed., pp. 165–189). New York: RoutledgeFalmer.
- Kristeva, J. (1995). *New maladies of the soul*. New York: Columbia University Press.
- Lalor, K., & McElvaney, R. (2010). Child sexual abuse, links to later sexual exploitation/high-risk sexual behavior, and prevention/treatment programs. *Trauma, Violence, & Abuse*, 11(4), 159–177.
- Leys, R. (2000). *Trauma: A genealogy*. Chicago: University of Chicago Press.
- Lotringer, S. (Ed.). (1996). *Foucault live: Collected interviews, 1961-1984*. New York: Semiotext(e).
- Messerschmidt, J. (2000). *Nine lives: Adolescent masculinities, the body, and violence*. Boulder, CO: Westview.
- Mills, S. (2004). *Michel Foucault*. New York: Routledge.
- Nikander, P. (2008). Constructionism and discourse analysis. In J. A. Holstein and J. F. Gubrium (Eds.), *Handbook of constructionist research* (pp. 413–428). New York: Guilford Press.
- Paolucci, E. O., Genuis, M. L., & Violato, C. (2001). A meta-analysis of the published research on the effects of child sexual abuse. *Journal of Psychology*, 1135, 17–35.
- Perakyla, A. (2008) Analyzing talk and text. In N. K. Denzin & Y. S. Lincoln (Eds.), *Collecting and interpreting qualitative materials* (pp. 351–374). Thousand Oaks, CA: Sage.
- Potter, J. (1996). Discourse analysis and constructionist approaches: Theoretical background. In J. T. E. Richardson (Ed.), *Handbook of qualitative research methods* (pp. 125–140). Leicester, UK: British Psychological Society.
- Potter, J., & Hepburn, A. (2008). Discursive constructionism. In J. A. Holstein & J. F. Gubrium (Eds.), *Handbook of constructionist research* (pp. 275–294). New York: Guilford Press.
- Prout, A., & Hallett, C. (2003) Introduction. In C. Hallett & A. Prout (Eds.), *Hearing the voices of children: Social policy for a new century* (1–8). London: RoutledgeFalmer.
- Prout, A., & James, A. (2008). A new paradigm for the sociology of childhood? Provenance, promise and problems. In A. James & A. Prout (Eds.), *Constructing and reconstructing childhood* (2nd ed., pp. 7–33). New York: RoutledgeFalmer.
- Qvortrup, J. (2004). The waiting child. *Childhood*, 11(3), 267–273.

Rose, N. (1990). *Governing the soul: The shaping of the private self*. London: Routledge.

Rose, N. (2010). Normality and pathology in a biomedical age. *The Sociological Review*, 57, 66–83.

Sartre, J.-P. (1963). *Search for a method*. New York: Alfred A. Knopf.

Schultz, P. D. (2001). *A critical analysis of the rhetoric of child sexual abuse*. Lampeter, UK: Edwin Mellen.

Scott, J. (1991). The evidence of experience. *Critical Inquiry*, 17(4), 773–797.

Seu, I. B., & Heenan, M. C. (Eds.). (1998). *Feminism and psychotherapy: Reflections on contemporary theories and practices*. Thousand Oaks, CA: Sage.

Shenk, C. E., Noll, J. G., Putnam, F. W., & Trickett, P. K. (2010). A prospective examination of the role of childhood sexual abuse and physiological asymmetry in the development of psychopathology. *Child Abuse & Neglect*, 34(10), 752–761.

Silberman, M. (2010). Sexual abuse in childhood and the mentally disordered female offender. *International Journal of Offender Therapy and Comparative Criminology*, 54(5), 783–802.

Simon, V. A., Feiring, C., & Kobielski McElroy, S. (2010). Making meaning of traumatic events: Youths' strategies for processing childhood sexual abuse are associated with psychosocial adjustment. *Child Maltreatment*, 15(3), 229–241.

Snider, L. (2002). Theft of time: Disciplining through science and law. *Osgood Hall Law Journal*, 40(1), 89–112.

Snider, L. (2003). Constituting the punishable woman: Atavistic man incarcerates postmodern woman. *British Journal of Criminology*, 43, 254–378.

Snyder, C. R. (1999). *Coping: The psychology of what works*. New York: Oxford University Press.

Taylor, J. E., & Harvey, S. T. (2010). A meta-analysis of the effects of psychotherapy with adults sexually abused in childhood. *Clinical Psychology Review*, 30(6), 749–767.

Vrabel, K. R., Hoffart, A., Ro, O., Martinsen, E. W., & Rosenvinge, J. H. (2010). Co-occurrence of avoidant personality disorder and child sexual abuse predicts poor outcome in long-standing eating disorder. *Journal of Abnormal Psychology*, 119(3), 623–629.

Wilson, H. W., & Widom, C. S. (2010). Predictors of drug-use in maltreated children and matched controls followed up into middle adulthood. *Journal of Studies on Alcohol and Drugs*, 71(6), 801–810.

White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. San Fransisco: W. W. Norton.

Wyness, M. (2006). *Childhood and society: An introduction to the Sociology of Childhood*. Houndsmills, UK: Palgrave MacMillan.

Yancey, C. T., & Hansen, D. J. (2010). Relationship of personal, familial, and abuse-specific factors with outcome following sexual abuse. *Aggression and Violent Behavior*, 15, 410–421.