Cognitive Behavioral Therapy for Incest “Case Study”

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Abstract
The aim of the study was to apply the cognitive behavioral therapy to the incest case, to identify the characteristics of the victims of incest, and the characteristics of the perpetrator. There is no real percentage of prevalence for several reasons, including social stigma, fear of loss of breadwinner, family disintegration, and disbelief of the victim... etc. The perpetrator is mostly a father or brother who may suffer from: psychological disorders, drug and alcohol abusers, sexual problems, organic deterioration of the brain cells or hardening of the cerebral arteries, or misinterpretation of stimuli issued by the victim, some think that he has the right to act as he pleases, and the act of abuse will not harm the victim. The victim is often a daughter or a sister in adolescence age, feelings of hatred, feelings of guilt, and problems with sex in adulthood are manifest. The extreme aversion of men leads to non-marriage, prostitution, multiple psychological and psychopathic crimes, depression and post-traumatic stress disorder which may lead to suicide. The victims in most cases are forced to silence the crime for several reasons including: fear of family disintegration, loss of the breadwinner, fear of loss of love and gifts from the offender, fear of the negative social outlook of the family... etc.

Keywords: Case Study, Incest, Victim, perpetrator, Cognitive Behavioral Therapy.

Introduction
Adultery is one of the problems that have emerged in societies throughout the ages, and since ancient times, and in most cultures adulterers must be punished whether male or female, to return to the right. But there is another form of adultery, which is incest, which is adultery with a person originally forbidden to marry each other, and is considered one of the ugliest forms of adultery, and tremble when hearing, knowing that all forms of adultery are ugly and rejected. (Balan, 2016) says that family and parents are the cause of children, and the family seeks to stabilize them, but when the family becomes a place of pain, violence and deprivation rather than a place of rest and safety, the child will suffer from unrest and conflict.

Children who are exposed to sexual abuse in the family in particular often suffer from many negative emotions, such as: feeling angry, feeling helpless, feeling ashamed and guilt, and sexual problems in adulthood, where sexual abuse at home works to stop the strategies of positive and effective confrontation in children and prevent them from appearing, which increases their negative emotions (Hussein, 2008). Sexual abuse is one of the most important reasons for the unhealthy growth of mental health, as it increases the risk of mood disorders, anxiety, alcohol and drug abuse, disruptive behavior, antisocial behavior, and psychosis (Keyes et al., 2012).

According to Abu Bakr (2006), because of the tremendous psychological and physical pain caused by sexual abuse, the age difference, and the physical, sensory and mental abilities between the perpetrator and the victim, many victims believe that the offender has supernatural abilities and that he can read and prosecute the victim's thoughts and impose what he wants on them. These ideas lead to the absolute surrender of the victim, a renunciation of an attempt to extricate herself from the authority of the offender whom she considers to be "legendary" in the size of his intimidation to her.

It is difficult to determine the real size of the phenomenon of sexual abuse for a number of reasons, including: the aggressor threatens the victim with beating or killing, confidentiality and secrecy, shame and disgrace, maintaining the reputation of the family, the relationship between the aggressor and the victim, especially if the aggressor is the father, the victim lives in a state of emotional contradiction towards the abusive father, in one hand she is willing to take revenge on him and in the other wants to protect him from prosecution or scandal. Studies have shown that the proportion of those exposed to sexual abuse ranges from 20% to 30% of females. In Canada, studies revealed that the prevalence of sexual abuse ranged from 22% and 34%. Studies also revealed that, about 80% of cases of sexual abuse occur within the family of parents and relatives (Hussein, 2008).

A report by the White House Council on Women and Girls (2014) shows that 1 in 5 women in the United States are raped, nearly 22 million females. The report adds that women who have been raped show many health, physical and psychological problems such as depression, chronic pain, diabetes, anxiety, eating disorders, post-traumatic stress disorder and suicide. Some American studies estimate the economic cost of each rape case ranged from $ 87,000-240,000, including medical services, loss of victim productivity, and law enforcement. Some scholars may use the term sexual harassment, sexual abuse, rape or incest to denote one concept, while some may distinguish between these terms as shown below:

Sexual Abuse: Is the participation with a child or adolescent in sexual activity that is not suitable for his or
her age and is unable to understand it, whether by coercion, violence or seduction, which affects his or her psychological and sexual development by an old person for his pleasure (Balan, 2016).

**Rape**: Is an unlawful breach by a person against the will of the victim, with the use or threat of force or verbal threat, and includes psychological rape coercion, physical force and sexual intercourse forced through (vagina, anus or mouth, or a foreign object like a bottle) by the offender (Sinozich & Langton, 2014).

**Incest**: Is a sexual relationship between members of the same family: father/daughter, father/son, mother/daughter, mother/son, brother/sister..., or any person with parental authority over the child: The stepfather, stepmother..., represented in the contact or sexual penetration (vagina, anal) by a sexual organ, fingers or anything else, a devastating and continuous if not announced, disrupts sexual growth, affects self-esteem and leads to depression (Hayat, 2001).

Bulut (2016) defines incest as sexual activity or abuse between family members or relatives who are prohibited from marrying them socially and culturally, such as between the grandfather and grandson or between the father's daughter or between the uncle and the daughter of his brothers or between the uncle and his sister's daughter, such abuses range from 20% - 25% of the sexual abuse of children, although the percentage is not known for sure, for several reasons, including fear of the blame of the society, and the forbidden of such relationships in religions.

Incest is a subcategory of childhood love disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), which refers to sexual relations between closest relatives whose marriages are prohibited or forbidden, which is common between brother and sister; and the second form in terms of common and is more illnesses, which is between the father and daughter. The prohibition of incest is acceptable and reasonable according to the scientific knowledge currently reached, as there is a high probability that they may carry two recessive genes with one gene each Parents, and recessive genes have negative biological effects such as serious birth defects, incest represents an evolutionary risk (Johnson, 2015).

In many cases sexual abuse is not reported, and Whetsell-Mitchell (1995) has identified several reasons for not reporting abuse:

- Fear of not believing, fear of being blamed, fear of the relationship with abuser, fear of loss of gifts and money, fear of losing the abuser's feelings, fear of family disintegration, fear of being separated from the family, Fear that the aggressor will display pictures to the other family members showing his involvement in sexual behavior, lack of knowledge of inappropriate child abuse, lack of verbal skills necessary for child to report abuse, feelings of shame and embarrassment in the child preventing him from reporting, child's full conviction that he is wrong, receiving messages from the family preventing him from discussing sexual matters at home.

This type of adultery comes by coercion or consensual, and there are many cases resulting from deterioration in the levels of moral and intellectual, or mental sensory, and psychological delusions. The spread of modern media has contributed to the prevalence of such crimes by either stimulating the instincts of the sexes, or by announcing, disclosing or weakening it in one form or another. A father who forces his daughter may be mentally ill or abused with alcohol or drugs. He is often between 30 and 40 years of age. The psychological effects of this kind of adultery are cruel and devastating to the girl's psyche, where she creates a mixture of feelings of hatred and guilt toward the active person, community or sex itself. Such act may strike the girl to be very averse to men leads to non-marriage, or to practice prostitution, or leads to multiple crimes and psychological and psychopathic problems. It has been found that even if the girl is negligent or has actually participated in these crimes, it will be about the ignorance of her; even when a girl realizes what she has done it will be about the ignorance of her; even when a girl realizes what she has done, she would have negative feelings, a mixture of self-contempt, anxiety, depression and illness fears. Many studies have shown that these special relationships between father and daughter are caused by an organic deterioration of the brain cells or by a disorder in the mind of the father due to a mental illness, or due to premature aging or injury to stiffness in the brain arteries. Some studies also suggest that the perpetrators of this act are adults who suffer from disorders even if their appearance appears to be socially compatible; they may have some manifestations of mental retardation or are under the influence of alcohol or drug addiction, or those who have doctrines that are characterized by religious and intellectual extremism. It has been found that girls and women who abuse their male children have schizophrenia or severe mental retardation (Qutb, retrieved in 2017/1/3).

The perpetrators of the incest are characterized by their own motives and misconceptions, they have misinterpretations of the behavioral stimuli of the other person, because they have sexual intentions towards victim, have planning skills, and ability of self-organization (Hussein, 2008).

Sexual abuse goes through several stages:

1. Frozen Fright: This fear occurs at the beginning of the abuse, the victim feels negative and helplessness, perpetrator provides the victim love, gifts and money, and offers loveable activities; some resort to violence, threat and force subjugation of the victim to his sexual desires. After the abuse, the victim resorted to a defensive trick, which is the denial and refusing to recognize the abuse, so as to minimize the harm and psychological damage caused by guilt.

2. Fear and anger: When denial fails to achieve its goal, the victim suffers fear, anger, agitation, hatred and
resentment, as starts to recognize the consequences of the abuse and it is acceptableness, and will be renounced and expelled; the victim feels afraid and anger as a result of the threats of the offender, which makes the victim submissive to the control of the aggressor, and thus, the abuse continues.

3. Positive attitude and integration: The desire to survive and live, the victim leads to the building of methods and relationships that support, trying to be self-convincing that, the perpetrator was not as bad as it appears, especially that the aggressor shows affectionate behavior towards the victim.

4. Depression and despair: Here the victim turns the anger feel towards the self, rather than directing it towards others. The victim feel depressed, despair and self-blame for the abuse, because the victim believes that others know about this abuse and not recognized in a way that is not appreciated.

5. Acceptance and integration: This is the last stage where the victim accepts sexual abuse, but this acceptance prevents the victim from growing straight emotionally, socially and behaviorally, and suffers from negative and behavioral consequences (Doyie, 1994).

The Cognitive Behavioral Model indicates that perverse sexual behavior or sexual aggression in the family is due to cognitive distortions of parents who are abusive to their children. Cognitive distortions referred to as thinking errors, which are self-talk and negative expressions used by parents or aggressors to justify the unacceptable sexual behaviors to the victim, as these cognitive distortions work to reduce the symptoms and problems and increase their sense of comfort when they sexually assault the victim and increase their self-awareness positively, and reduce the possibility of guilt as a result of their inappropriate sexual behavior.

Examples of this abusers' sexual distortions is that, the aggressor persuades himself that, sex with the victim will cause no harm or damage, and that the victim is the one who flirts and sexually stimulates the aggressor and wants to do so (Hussein, 2008).

Sinozich & Langton (2014), in their study on the prevalence rate of incest and rape, the highest rates of rape and sexual abuse at one of the U.S. universities for the period 1995-2013 were for females aged 18-24 compared to all ages; While 20% of rape cases and sexual abuse of the university students did not reach the police, the prevalence of rape and sexual abuse among female university students was found to be 7.6 per 1,000, and 80% of the perpetrators had known the victims before. The study showed that 38% of the female students were at home at the time of the rape, rape time has been between 6 pm to 6 am. The study also found that 40% of the female students suffered injuries (wounds, bruises, internal injuries, fractures of the bones, gunshot wounds or injuries caused by rape) during the rape. 34% of female students were raped by close relatives (father or brother).

95% of respondents said they were raped by one perpetrator. The study also said that the reasons for not reporting the incident to the security authorities were that the police would not do anything, that the incident was a personal matter, and the fear of retaliation.

In the study of Jibril and Al-Harasses (2012), The impact of a preventive program in raising the awareness of first-grade female students of sexual abuse and enable them to acquire self-protection. The study sample consisted of (18) first grade students at Laila Al-Ghafariyah-Amman. They applied the personal safety questionnaire and the "What if" measure from the localization of the researchers. The sample was divided into two groups: experimental sample (9) female students, and control sample (9) female students. The experimental group received a preventive counseling program to increase their awareness of sexual abuse and to increase their self-protection and personal safety concepts for 7 weeks. The study found that there are statistically significant differences between the experimental group that received the preventive counseling program and the control group, in favor of the experimental group, in increasing the awareness of sexual abuse and in acquiring the concepts of personal safety.

In a study conducted by KAFA (Enough) Violence and Exploitation in Lebanon (2008), the study aimed at identifying the prevalence of child sexual abuse in the house; the sample of the study was of 1025 children in Lebanon. The study found that the prevalence of sexual abuse among children aged 8-14 Year was 16.1%. The study also showed that, the greater the number of rooms in the house than the six rooms increased the rate of sexual abuse (17.5%), and fewer if the number of rooms are less than two rooms (9.1%). Child sexual abuse was also associated with family disintegration (separation or death of parents). The mother's work also played a role in increasing child sexual abuse. The study also found that 2% of cases of sexual abuse were incest by the father.

In Abu Bakr's (2006) study, it was found that sexual exploitation of the father of his daughters was a kind of emotional venting that he used to maintain his failed marriage. In order to preserve the family and its entity in front of the outside community, the mother and her victim daughters contributed to the continuation of the crime through silence and the preservation of the unspeakable secret even among themselves, the victims maintained the victim's psychology and behavior for many years after they left their parents' homes, but were emotionally and socially fragile.

**Case Study:** A report that includes an intensive survey of an individual, used as a research method, the basis for diagnosing and addressing specific problems, and used to help individuals achieve better growth. (Abu Assaad, 2015)

Balan (2016) states that a case study is a qualitative research method of clinical nature that focuses on detail
in the assessment of the individual or group and their history and the study of all relevant factors in the problem, through interviews, questionnaires, evidence and documentation.

**Description of the Case:** (X) is a student at the university, she is 21 years old, the oldest of her five sisters, lives with her father, mother and sisters in Jordan. She said: A month ago, my sister beat my father in front of the entire family (she was talking while looking round herself fearing of being heard), and the reason was that he tried to sexually assault her in the past, he is trying to sexually assault us, especially since we are five girls at home, we have no brother to complain to or protect us from him, he has tried to attack me personally over and over again, my third sister, now a student at a university, admitted that she was assaulted by him while he was taking her to the university in his own car, he stopped the car in the middle of the road, where no one saw them and assaulted her, but she is still a virgin, that his assault was only harassment and sexual movements represented by flirting. He also tried on one occasion to give me some kind of medication - I think it was hypnotized, but I did not take the medicine, and I did not sleep that night. My other sister told me that on one occasion she saw him as in a dream inside her room, without clothes and did not know what had happened; And that he tried to stick to her several times, whether in her room or after leaving the bathroom, or in front of the washbasin. We have told our mother about the subject, but she did not do anything about it, she says, "We do not want to expose ourselves to relatives, and no one will believe us. My father is in his fifties, retired from the army, and solves problems between people. He does not suffer from psychological problems and never visited a psychiatrist or take medicine or narcotic drugs he does not even smoke. He was diagnosed with diabetes a few years ago. He often enters his room and closes the door with the key on himself, to watch pornographic movies either on his phone or on video. And recently appeared to create problems for us in the family, sometimes accuses us of stealing money from his portfolio, and sometimes accuse us of sabotaging something in the house, and all this fabrication of the problems we do not know why he causes them.

These sexual movements are absent for periods of time until we feel safe and then return again with some of behaviors that make us feel threatened. We fear for ourselves and do not know what to do. But what frightens me very much, the rejection of my father to any marriage proposals for me, and I fear that if I entered and talked with him on the subject of marriage to ask me to conduct sexual intercourse with him, in exchange for agreeing to my marriage. "X" said: Now I feel a breakdown. I was diagnosed with diabetes, and I do not know what to do.

**The Therapeutic Counseling Program:**
The student received a therapeutic counseling program based on cognitive behavioral therapy, which aims to help her stop and eliminate sexual abuse by the father. The program consists of thirteen treatment sessions, each session lasted 50 minutes and lasted for eight weeks. A number of behavioral cognitive strategies have been used in the program; the program has been based on many references and studies (Balan, 2016 & Erford, at, et, 2012).

**The First, Second and Third Sessions:** Formation of a counseling relationship with the victim based on Rogers' theory of unconditional acceptance, authenticity and empathic understanding, listening to the victim and helping her emotionally discharge using the counseling session skills by reversing feelings, reversing content, clarifying, summarizing, Open and closed questions, feedback, confrontation, etc.

The strategy of disclosure and psychological cleansing has been used here: talking about the sexual abuse to relieve stress and anxiety experienced by the victim.

**The Forth Session:** Alienating stimuli and skills of escaping from the situation: The goal was to help the case to avoid sexual abuse by the father, whether to be in a place where the family meets, or wake up some family members if she felt threatened, and wear decent cloths at home in front of the offender, and try to alienate him by spraying herself with jet-fumes (onions and garlic) (Khatib, 2016).

**The Fifth Session:** The skill of muscle relaxation: Relaxation is required in itself in the face of psychological stress which leads to anxiety or fear and dispersion and contention of ideas; rather the result of these stresses is psychological disorders (Physiological), such as gastric ulcers and heart disease. Therefore, the mentor needs to use the relaxation strategy with the person at a very early stage of working with him; because he works to calm the person down.

The American psychologist Jacobsen is one of the first scientists to study relaxation exercises and their applications in the field of psychotherapy. He found that the state of relaxation is an experience against anxiety and acute emotions. The basic idea of the relaxation strategy is that the body is in a state of anxiety and intense emotions are exposed to two processes: muscle tension and psychological tension, and all muscles of the body tight in a degree equivalent to the psychological stress that a person in the case of anxiety. If the state of tension and muscle tension of the human body is stopped or turned into a state of relaxation, the psychological tension cannot continue in the same situation, but becomes a state of relaxation, which reduces the degree of anxiety in humans. Thus, a person is not physically tense and psychologically relaxed at the same time (Zu’bi, 2010).

**The Sixth Session:** Role Play Strategy: Role Play is one of the techniques used with the emotional component in cognitive behavioral therapy. This strategy provides the opportunity for emotional venting and unloading of apparent and overwhelmed desires, playing role means training to withstand frustration, control unwanted behavior and treats aspects of shortcomings in social behavior. Role play is also used to help
individuals to practice the behaviors they wish to grow, so that they become more aware of their emotions and their interaction with others methods. Playing role is one of the ways that helps the growth of social skills (Zoubi, 2010). This strategy has been used to teach the girl how to confront her father's position with dialogue and discussion, and then to conduct reprehensible acts to avoid abuse.

**The Seventh Session to The Twelfth Session:** The Strategy for Reducing Eye Movement Desensitization and Reprocessing (EMDR) in addition to the role playing strategy: This strategy was introduced in the United States by Shapiro in 1985, where the individual is required to imagine a traumatic event, focusing on the thoughts and emotional responses, and at the same time follow the quick movements of the fingers of the therapist from right to left or vice versa by two movements every second, and at the end of each part or scene accurately describes the individual ideas and emotional reactions. The scene repeats until the individual stops feeling anxious and is able to adopt positive thoughts at the same time that the person continues to imagine the traumatic events. The mechanism in which this method works is still uncertain in scientific research. However, the goal of this method is to break the memory of emotion through the movements of the eyes following the movements of the fingers of the therapist (Masouda, 2012).

**The Thirteenth session:** the final session, review the previous sessions, and answer the questions asked by the victim.

**The Discussion**
The crime of incest is one of the worst crimes committed in all societies; however, this crime has not been studied and adequately researched to try to address it and to minimize the effects it has on the victim, the family and even the society if it becomes a phenomenon.

As a result of psychological pressure, anxiety and tension, the victim suffers a lot of psychological and health problems, the victim begins with a sense of anticipation and caution from everyone, questioning the others and their behavior and starting to generalize it to everyone, therefore, they suffer from psychological disorders such as post-traumatic stress, anxiety and depression and may try to suicide, diabetes and high blood pressure, as a result of constant and high concern. The victim may become psychopathic and lead to illegal and forbidden sexual activities, as a result of sexual abuse by incest and thus, become more complex problem than it was, as referred to by (Keyes, et al., 2012).

Women must learn how to face such a crime if they encounter it one day by playing the role and modeling, so that they can defend themselves, or how to escape such situations as shouting, escaping to a place where others exist, putting unpleasant odors on themselves if one tries to approach sexual abuse, do not show their charms to relatives. The use of cognitive behavioral therapy is effective in mitigating the effects of this crime instead the victim developing a psychological disorder and thus, losing ability to continue its life, we can help it overcome these effects and continue its normal life.

**Recommendations**
1. Conduct further studies on the subject that appeared to be spreading.
2. Working to educate young men and women on ways to prevent this crime, through confrontation or escape, whether in schools or in universities.
3. Activating the role of family protection, and establishing deterrent laws for such crimes, while ensuring the confidentiality and dignified life of the victim and the family alike.
4. The establishment of specialized psychological counseling centers for the victims of incest in particular and sexual abuse in general.

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