

MARLENE

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I first met Marlene in August, 1983. It was her fifteenth birthday. I was interviewing to be a teaching parent in her group home and she was in the throes of what she thought was a birthday celebration hangover. I got the job, and Marlene discovered three months later the real reason for her "hangover" — she was pregnant.

Marlene is just one of a million kids in America but she embodies, for me, a myriad of the problems and solutions that workers face with youth. There is something of just about everything in Marlene: family sexual abuse, teenage pregnancy, prostitution, alcoholism and abandonment. How Marlene worked and continues to work through these issues is one part of the story, and how the various social workers, child care workers and therapists dealt with them is another. It is an incomplete story, fragmented and complex.

Marlene enters the juvenile social services system at the age of twelve. Today, at eighteen, she is in a treatment program for alcohol abuse. She tells me she is beginning to pull together all the treatment and life experience she has had and thinks of herself as a person with a past, a present and, possibly, a future.

The focus of Marlene's treatment, when I met her, was her running behavior. She had the uncanny ability to become invisible, to fade into walls and fade out of the house. Marlene is half American-Indian and I always believed that was partially responsible for her quiet feet and unflinching sense of direction; she was the most accomplished runner I ever met.

Marlene had run as far as Oklahoma and Mississippi in the past. Shortly following her miscarriage, which further estranged her from her father, she left the group home. She called, more than a month later, from Texas.

Why do kids run away? In *The Social Pathology of Runaways* (Brennan & Hurzinza, 1978) Brennan attributed the behavior in the 1930s to economic hardship, in the 1940s to the adventures of the war and in the 1950s to Holden Caulfield, "early prototype of the precocious adolescent who both questions and has a disdainful attitude toward middle class values." And in the 1960s the prevailing attitude of youth was to turn from the materialistic values of the "establishment" and be a "free spirit."

But adolescents in the 80s are the most materialistic group of Americans since the post-Depression group. (Calvin Klein jeans and Sony Walkmans are the principles worth demonstrating for.) The lust for adventure may be a factor for some runaways; in the case of chronic runners, the issues are protection and survival.

Traditional sources of protection for children have been based in the family: Mom and Dad. Several factors have contributed to the breakdown of the protection system: high divorce rates, single parent households in increasing numbers, and both parents working all contribute to the feeling of many children that they have no real foundation.

"Running away is an escape from misery based on the myth that there is something better to run to" (Crewdson & Crewdson, 1985). In Marlene's case, neither behavior modification programs, court reprisals, nor family and individual counseling could override her feeling there was "something better." Or anywhere's got to be better than here.

When she was in jail in Texas, Marlene kept hearing these words from a then-popular Genesis song going through her head:

". . . just as I thought it was going alright found I was wrong
when I thought I was right it's always the same, it's just a
shame and that's all . . ."

What Marlene found, through trial and error, was that a change in geographical location didn't stop the pain. But she didn't have any other choice. She was feeling vulnerable, open to contempt from her family, wounded after losing her baby. The most basic of instincts came into play, protection and survival.

Coming back was hard. Marlene's next stop was a children's psychiatric hospital for six months. Her social worker and the group home staff agreed that having Marlene in one place was the only way to assist her in facing her difficulties and getting her runaway behavior under control.

It was at this point that Marlene's mother came back into her life. She had left when Marlene was two and the details are confusing. They include allegations of abandonment and then kidnapping. For the first time in years, Marlene and her mother would have the opportunity to live together.

What happened in those intervening years? Marlene remembers no less than three stepmothers, intermittent girlfriends and a lot of stepbrothers and sisters. She was sexually abused by a stepbrother for a period of two years, starting when she was ten. She remembers losing credibility and gaining emotional distance from her father when the abuse came to light. But Marlene became the lone child between step-

mothers and stepchildren. She gradually assumed all wife/companion roles for her father: housekeeper, cook, confidante and sexual partner.

In cases of family sexual abuse "the very fragmenting of the family aggravates the problem, since parents in a broken family are far more needy of affection, comfort and nurture than parents in an intact family" (Winn, 1983, p. 170). In recent years, since sexual abuse, its symptoms, manifestations and treatments have come to the forefront, theories about it continue to be introduced. In "Exploring Intrafamilial Child Sexual Abuse," Tierney and Corwin (1985) identify several contributing factors:

1. Socioecological factors — including geographic or social isolation, individual household density. These are conditions that reduce normative constraints or increase opportunities for illicit sexual contact.
2. Family Structure — the changes in America's "traditional" family structure. Reconstituted or stepparent families appear to be more prone to incidents of family sexual abuse.
3. Role disturbance — this is manifested in Marlene's family in several ways. One is the "absence of an affectionate mother-child relationship." Another is the lack of appropriate relationships on her father's part which led to Marlene's "elevation" to the role of confidante and sexual partner. This demonstrates a breakdown of appropriate child/parent boundaries, the reduction of normative constraints and increased opportunities for sexual contact.

There are many facets to child sexual abuse and as many ways of defining them. Abusers are identified as "fixated" or "regressed," "rapists" or "molesters." Predispositional traits can be identified. The recent interest, both by the fields of social work and child protection, and by the general public, will surely give rise to more and more theories. Just how many children experience sexual abuse? No one knows for sure, but "between 1976 and 1979 official reports of sexual abuse more than tripled." (Finkelhor, 1985) For youth like Marlene, although sexual abuse was never officially disclosed nor charges brought, the abuse was clear to all who worked with her. Of the twenty Behavioral Indicators of Sexual Abuse listed below, Marlene displayed no less than thirteen (Ingibritson, 1985).

1. Overly compliant behavior
2. Acting-out, aggressive behavior

3. Pseudomature behavior
4. Hints about sexual activity
5. Persistent and inappropriate sexual play
6. Age-inappropriate understanding of sexual behavior
7. Arriving at school early and leaving late
8. Poor peer relationships
9. Lack of trust, particularly with significant others
10. Nonparticipation in school and social activities
11. Inability to concentrate in school
12. Extraordinary fear of males (female victims)
13. Seductive behavior with males (female victims)
14. Sudden drop in school performance
15. Running away from home
16. Sleep disturbances
17. Regressive/immature behaviors
18. Withdrawn, social isolation
19. Clinical depression
20. Suicidal feelings

Although these behaviors may indicate other disturbances, the number of them that are specifically sexual leave little or no doubt that sexual abuse has occurred. For Marlene, the subject was one she refused to deal with when in the community. When it came up or came too close, she would run. After three months of treatment, she would address it only in vague, third-person terms. And treatment was cut short when the insurance money ran out.

Marlene was released to her mother. Mom was remarried, with two more stepsiblings to add to the already extensive list. "I got three As and two Bs," Marlene was excited to tell me after her first report card in two years. I was happy for her. I ignored the references she made to using, to an abusive relationship with a new boyfriend, and to the difficulty she was having with mom's rules. Since being in placement, Marlene has never been able to stay for any period of time in "another woman's" house.

After three or four months, Marlene was on the run again. This time I thought she was dead. Then I heard through the constant but not always accurate grapevine that she was alive and working the streets in Milwaukee. Finally, during the third collect phone call, Marlene told me she was prostituting. "But it's not so bad," she said. "Joe loves me, he doesn't let me do drugs, makes me eat right and doesn't let me swear." I bit my tongue before observing that her pimp sounded remarkably like her father and Joe was also sleeping with her.

Along with the behavioral indicators listed earlier, Nicholas Groth identifies as a symptom "early prostitution in midadolescence or before" (Groth, Burgess, Nalbert, Holmstrom, Lytel, Sgroi, 1985). Cities like Minneapolis and New York have been on network news programs profiling their large juvenile prostitute population. However, there is difficulty in assessing their actual numbers in the United States. The General Accounting Office estimates 112,500, the FBI estimates 600,000 and Odyssey Institute, a child-rights group, 1.2 million (Crewdson & Crewdson, 1985). Whatever the actual number, it is at least 112,499 more than most of us would like to see.

I think Marlene is well aware she is a statistic. But in describing "the life" to me (I was morbidly fascinated and admit to more than a touch of voyeurism) she showed me the streets she worked, the apartment where she warmed herself (unbeknownst to Joe), the first place she was arrested and the building where she lived with Joe. She was matter-of-fact, a little sentimental and more than a little regretful. It is not a job she freely discusses with family, friends and especially boyfriends. In words other than Marlene's, "individual prostitutes are further victimized through the stigmatizing social reactions their activities and their mere presence evokes (Schur, 1983).

Why do juveniles choose prostitution? Seventy-five percent of all runaways who have no resources will become involved in "the life." A study of 200 active prostitutes conducted by Mr. Mimi Silbert over a two-year period found that 60% of these were sexually exploited as children. Two-thirds of those were exploited by their fathers or surrogate fathers. Some were abused by other relatives or acquaintances. Only 10% reported abuse by a stranger (Crewdson & Crewdson, 1985).

Fortunately, most juveniles don't make prostitution a career choice. Maturation, pregnancy or disintegration of their peer group usually ejects them from this lifestyle. Marlene, for instance, was arrested while Joe had her show on the road in Detroit. She was jailed, via a fake ID, as an adult and Joe skipped town, leaving her high and dry. Marlene was sick and finally admitted she was a minor. She was risking, with her record, a juvenile corrections sentence. However, her long-suffering social worker was able to wangle another foster care

placement for her. Marlene, being of a superstitious nature, considers him a piece of special good luck: he is her four-leaf clover. John had very sound rationales for his recommendations. Though he had, admittedly, developed an emotional affinity with Marlene over the years, as well as with other girls on his caseload (his wife tells of answering the phone at 4 a.m., hearing a crying female and handing it automatically to John — “it’s for you”), he is a conscientious social worker. John knows Marlene’s nature is not criminal and to treat her as such would be damaging. He preferred, and the judge agreed, to use available community resources instead.

Marlene was again pregnant, the fatherhood obviously uncertain. She suffered another miscarriage, once again experienced conflict with a mother figure (foster mom) and ran. But, this time, only across town. She immediately contacted John and secured placement in the independent-living program. Marlene was seventeen and on an impending crash course with adulthood.

I was invited to her eighteenth birthday celebration, held at her first apartment. I arrived early purposely, hoping to avoid the drunken orgy that was sure to occur. But Marlene was still drunk from two nights before. The next time I saw her, she was shaking and could hardly stand up. She had hallucinated the day before. An alcohol assessment indicated a “problem.”

“I’m going to do it on my own,” she said. For awhile she did, Marlene being nothing if not tenacious. Three months later she called, broke, disillusioned after a series of abusive boyfriends, physically sick, and sober for the first time in about a week. She spent a week in a shelter and then was authorized for treatment in an in-patient program for alcohol abuse.

Marlene is more than familiar with the toll alcohol abuse can take on an individual and a family: her father has abused alcohol for more than thirty years. Her brother’s marriage recently ended in divorce, his drinking given as the primary reason.

The ability to look at her own alcohol abuse and that of her family members has allowed Marlene to pull together the feelings and facts of her life. “The degree to which you aren’t attached to the past is the degree to which you aren’t whole — the degree to which you aren’t whole is the degree of your vulnerability (Bowen, 1986). Marlene is learning what the key is in her separation from issues of the past — Denial.

She calls now, half-excited, half-apprehensive, about fitting herself into the identities of enabler, co-dependent, scapegoat, lost child or hero at various stages of her life. Marlene has been able to express her anger at her mother for abandoning her and not being there to protect her.

For so many years, these are issues Marlene would either deny, rationalize, or run away from.

"In systems it is more relevant to view complex human behavior from the perspective of interactive process than it is to attempt to identify a specific cause or "reason" for behavior that can be located in a specific individual." (Sepko, 1985) This is the construct for family systems therapy. In alcoholic family systems, the factors that precipitate and perpetuate are addressed, rather than the alcoholic as an individual.

The ideal, of course, is to be able to treat the entire family. With Marlene, it is a rather painful reality that all her individualized treatment went only so far. "If people could move back to their families they would be better off than staying with an outside person" (Bowen, 1986). Marlene had to reconnect from a distance, with therapeutic help, and she has arrived at family systems theory from the route of living it.

All things considered, this presentation of Marlene is simplistic. The issues are numerous. However knowing Marlene, having lived with her, cared about her and dissected her, so to speak, have created a multi-dimensional view in my mind. She continues to struggle and, in all probability, always will.

Murray Bowen advises professionals to have "zero expectations." As human beings, that is impossible. I humanly rejoice and suffer through Marlene. I am also satisfied that, as professionals, those who have worked with her have not failed her.

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