Does grooming by child abusers lead to Stockholm syndrome?
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Dr Shiirley Jülich believes grooming techniques used by child sex abusers facilitates the development of Stockholm syndrome, which often protects the abuser for decades. Credit: Massey University

New research from Massey University's School of Social Work identifies how grooming allows Stockholm syndrome to become established in child sexual abuse cases.

Dr Shirley Jülich and Dr Eileen Oak recently co-authored a paper published in Aotearoa New Zealand Social Work. The article, titled "Does grooming facilitate the development of Stockholm syndrome? The social work practice implications," explores the relationship between the process of grooming and the condition known as Stockholm syndrome.

The phenomenon is named after the 1973 robbery of a bank in Stockholm, Sweden. Several employees were held hostage for six days, while their captors negotiated with police. During this time the hostages developed an emotional bond to the hostage takers, forming the basis of a survival strategy. They believed if the robbers liked them, they would not hurt them.

The emotional bond became so powerful, they came to view the police as the enemy. Their relationship did not stop once the siege was over. One female staff member began an intimate relationship with one of the hostage takers.

Dr Jülich and Dr Oak believe grooming techniques used by child sex abusers facilitates the development of Stockholm syndrome, which often protects the abuser for decades.

"Offenders groom the wider environment such as parents, carers, teachers, social workers and the like, by integrating themselves into places and community networks where they are likely to have contact with children, often assuming a position of trust. They often target one-parent families to gain status, or they may target children or young people who have absent parents, and less protection," Dr Jülich says.

"A person under threat perceives kindness differently than a person who has not been threatened, as is the case for instance, in the cessation of violence experience by battered women. Emotional abuse or the threat of harm is a threat to physical survival. Adult survivors of child abuse often reported threats in various ways – physical, sexual, the withdrawal of love, and threats that people they loved, or their pets, might be harmed," she says.

Dr Jülich says Stockholm syndrome is a useful concept as it can provide an over-arching understanding of why victim-survivors of child sexual abuse act and respond as they do. Much research has been done on victimised groups such as concentration camp prisoners, cult members, incest victims and prisoners of war. In all groups, bonding between an offender and a victim occurred, when four conditions co-existed.

These conditions include:
Perceived threat to survival and the belief that one's captor is willing to execute that threat
The captive's perception of some small kindness from the captor within a context of terror
Isolation from perspectives other than those of the captor
Perceived inability to escape

"Advocates of Stockholm syndrome theory would argue that given these precursors Stockholm syndrome can develop. However, we argue that grooming can also facilitate the development of Stockholm syndrome," Dr Jülich says.

"While most of us don't think of children and young people as hostages, they can be victims and held captive in chronic abusive relationships. They are particularly vulnerable to the forces of Stockholm syndrome which can be understood as a survival technique for children in this situation. Victims of child sexual abuse are more likely to develop Stockholm syndrome."

Powerless to stop the abuse

Dr Jülich says victim-survivors in the research said they tried to stop the abuse but were unable to.

"Other adults or bystanders who should or could have known what was happening did nothing. All too often when reports or disclosures were made, the abuse didn't stop. Some mothers were unable to protect their children because they were being subjected to abuse as well. This was interpreted by the victim-survivors as proof they were unable to escape."

Dr Jülich says the complex captive-captor relationship central to Stockholm syndrome could still be very strong, depending on where the victim-survivor is on their journey of recovery.

"The relationships do break down over time, but victim-survivors, when they are prepared to disclose, can appear to practitioners as ambivalent and even contradictory. They may tell their story then recant parts of it. It can be frustrating to work with victims of child abuse as they seem to change their minds often, and practitioners may start to doubt them.

"Those who work in the field of child sexual abuse need to be mindful that support persons can be subjected to the same forces as the abused child was and that they too could be subjected to the influence of Stockholm syndrome and grooming."

Dr Eileen Oak, who carried out the research with Dr Jülich before leaving Massey University for a position at University College Dublin in Ireland, is concerned about the risks posed by instrumentalist approaches in child protection social work.

"This article was an attempt to redress this imbalance by identifying frameworks to conceptualise the types of behaviours social workers observe among survivors of child sexual abuse, in order to develop effective support strategies to inform social work practice," Dr Oak says.

Dr Jülich was one of the founding members of Project Restore, inspired by RESTORE, the research of Dr Jülich and counsellors from Auckland Sexual Abuse Help who help victims to experience justice in other ways, such as civil cases and face-to-face facilitated meetings.


Provided by Massey University