



**National Council of
Churches in Australia**
Safe as Churches

**Journey to healing and wholeness:
Communities of Faith responding justly**

**Session 1: Responding to impact of Sexual abuse
Begins at 7:30pm**

Lighting the Safe Place Candle

This is the Safe Place candle.

**We light this candle
to signify our desire
that our community
always be a place of safety**

Lighting the Safe Place Candle

**This is the Christ candle
We light this candle
to remind us
that Jesus
is the Light of the world**

(candle is lit)

Responding to the psychological and emotional impact of sexual abuse: transforming the current response and reaction culture

Sue Foley B.Soc Stud., M.A., M.S.W., M.Ed
The Department of Psychological Medicine the
Children's Hospital at Westmead
The SAFE Program Hillsong Church Sydney NSW

KEY ISSUES

- SAFETY: all types
- REMEMBERING AND REWRITING THE EVENT / TRAUMA NARRATIVE
- RECONNECTION
- PREVENTING

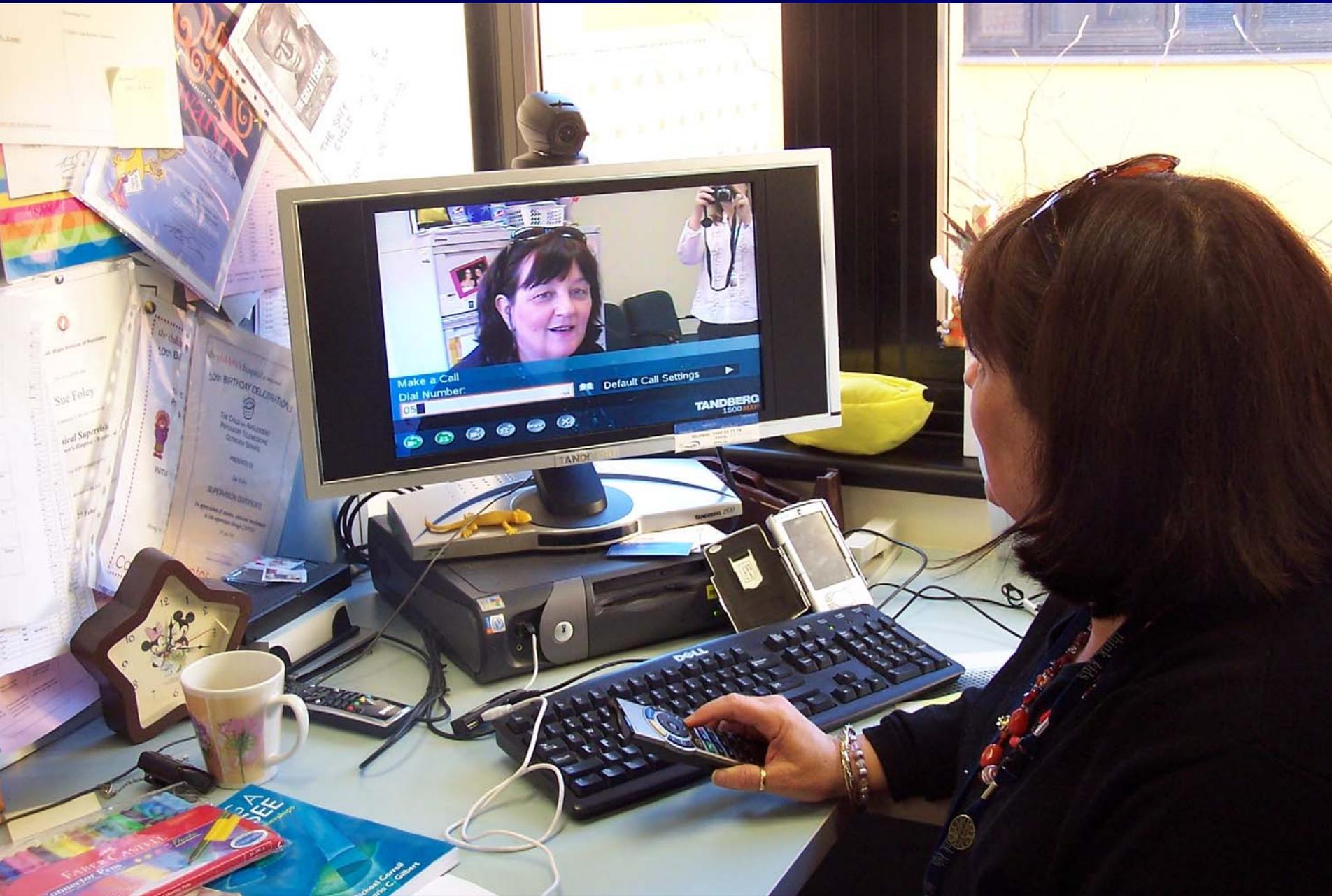
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- Permanent Student and learner
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*The
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FISHBURN

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Panasonic

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ELGAS



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- Tried to access support from church:
“things like that don’t happen in families like yours”... abuse continued.....
- Eventually left home but fear continued
- At 19 was helping others who had been abused – my forehead message!

Resilience – from the church community

- Church life was good for me – music, friends, mentors, alternative models
- But no trust – didn't tell anyone again until I was 21; told former minister
- Personal strength – perhaps misinterpreted
- Personal vulnerability – also misinterpreted
- Christian counseling in the context of other losses and traumas – age 40 - 45
- Still find managing bullies difficult

Key Faith Issues for me

- God has not given us a spirit of fear but of power love and sound mind?
(Ref 2. Timothy 1:7)
- I have come that you may have life and have it more abundantly
- Personal relationship with Jesus
- Being free
- My calling: Isaiah 61: The Spirit of the Lord is Upon Me

The aims of this presentation

Using a constructivist approach, I hope this presentation will:

- Provide you with some ideas to consider a new understanding of abuse and its effects
- Help you develop your own suggestions for action within your own context
- Invite you to accept the challenge of transforming the cultural aspects of abuse:



Umbrella concepts

People affected by various types of sexual abuse

- Children and young people, usually over the age of about 2 both within families, and less commonly from strangers, people known to them such as teachers, youth leaders
- Adults : male and female, within families, from strangers and from professionals and helping personnel
- People known to those who have been abuse
- People who have abused and their family and colleagues

One Definition

What is sexual assault?

Sexual assault is any behaviour of a sexual nature that makes someone feel uncomfortable, frightened, intimidated or threatened. It is sexual behaviour that someone has not agreed to, where another person uses physical or emotional force against them. It can include anything from sexual harassment through to life threatening rape. Some of these acts are serious indictable crimes. Sexual assault is an abuse of power. Sexual assault is never the fault or responsibility of the victim/survivor (CASA ref:

http://www.samhsa.gov/SAMHSA_News/VolumeXIII_6/article23.htm

Gender issues in effects

- Men exhibited more externalising symptoms than women (Briere 1996)
- Men exhibited more symptoms than women in relation to their normative samples
- Men tend to be under-represented and possibly under-identified in clinical populations (Goh 199)

A TRANSACTIONAL
PROCESS OF
RESPONDING

A need, signal,
cue, request,
emotional /
psychological
effect

Evaluating : do
responses
match needs
appropriately

Reading and
hearing the
expressed need /
psychological
effect and
sensitively
interpreting the
need

Choosing to
respond from a
repertoire of
available
responses

Enacting the
responses in a
timely and
appropriate
manner;



Important psychological processes that are part of both sides of the transactions

- *Attachment (Crittendon)*
- *Systemic traumatogenic processes (Bentovim)*
- *The power of abuse and trauma (Herman)*
- *Treatment research (Cohen and Herman)*

Attachment

- Function: Protection from danger
- The goal of attachment strategies: to “stay alive” (Ref Patricia Crittenden)
- Various strategies are used by all of us in different situations
- Attachment strategies impact of the effects of all trauma / abuse / danger (for all people associated)

Traumatogenic Processes

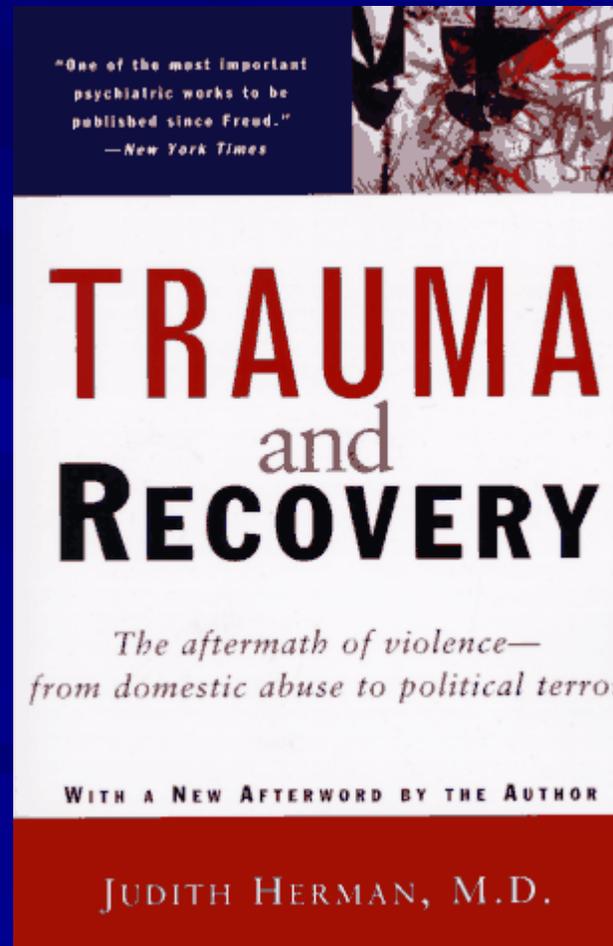
Arnon Bentovim

- A systemic approach to understanding family violence and violence in communities
- The victimizing process in sexual abuse:
 - substituting normal affection for sexual responses
 - Use of sexual victimising responses to assert power and control over the other; the “sexualisation of subordination”.
- The traumatic sexualisation of sexual abuse plus the powerlessness of of sexual, physical and emotional abuse have profound effects on the identity and meaning system of the individual

Arnon Bentovim

- “ the way an abusive experience can organise a family or professional system so that changes are very difficult to achieve”
- The perpetrator of the abuse organises the child’s or the adult’s reality by blaming the child for triggering a response

Judith Herman, Trauma and Recovery



Judith Herman: Abuse, War and Rape

- The author believes that just as "traumatic syndromes have basic features in common, the recovery process also follows a common pathway."
- Her model has three major stages:
 - Establishing Safety,
 - Remembrance and Mourning,
 - Reconnection.

Judith Herman: Abuse, War and Rape

- She believes that the effect of trauma is:
 - To dis-empower and
 - To disconnect the survivor from others
- Trauma creates overwhelming fear and leaves in its wake a feeling that the world is not a safe place

The trauma process

- A forgotten history
 - Silencing promoted by the abuser:
 - Discredits the story by saying the allegations are untrue or exaggerated, or asked for, or too long ago – time to forget and move on
- Terror : a biological process
- Disconnection from those who can support or give comfort
 - Shame and guilt increases disconnection

Trauma Process

- Captivity: immobilised
 - The greater the power of the perpetrator
 - The greater the prerogative define reality
- Childhood abuse in particular: double think
- Imprinted memories
- PTSD

What does a helpful response look like?

- For individuals and family
- For churches and related organisations
- For associated people – congregations communities etc
- Key issues:
 - Safety
 - Hearing the story
 - Promoting re-integration
 - Not rejecting but connecting

Herman: Recovery

- Recovery can be measured by the extent to which the survivor can be made to feel empowered and able to form new attachments.
- Therefore recovery requires establishing a safe space for healing to begin.

Herman - Healing

- Healing Relationship
 - Empowerment – intellectual and relational
 - Comfort - empathy
- Safety
 - Physical and emotional
 - Re-establishing control
- Remembrance and Mourning
- Reconnection with ordinary life; reconciling with oneself

Therapy

- Whilst trauma impairs integration across many domains and interferes with learning at several levels,
- Psychotherapy has the potential in time and when conducted in a balanced way, to create neural integration
 - Balancing stress and arousal
 - Connection the narrative memory and the sensory and emotional memory
 - Adding in skills that have been impaired by the effect of trauma

Neurobiology and psychotherapy (Cozolino 2002)

- Trauma produces a wide variety of homeostatic disregulation that interfere with all realms of personal and interpersonal functioning
- Physical and sexual abuse by parents not only traumatises children but also deprives them of healing interactions
- Trauma effects the brain which creates interpersonal problems and increases stress creating more neurobiological difficulties

Why is counselling so hard?

- Links to primitive needs of individuals
- The disconnection from others
- Beliefs about themselves
- The need to balance symptom management and dealing with the abuse story

Evaluating : do responses match needs appropriately? Adequately?

- Provide comfort?
- Promote reconnection
- Offer choices and therefore a sense of power?
Avoid revictimisation
- Timely
- Look like they meet the needs of individuals rather than just the needs of the organisation
- Loyalty vs integrity

Why do people take so long to disclose or report

- Trust betrayed
- Fear of Rejection
- Immobilised by being held captive
- Sworn to secrecy or trying to hope it didn't really happen – dissociation – especially to help maintain a belief that this person would not harm them
- Processing are too difficult

Hearing and interpreting the signal

- Organisations (including health, welfare and pastoral care / churches / school), are essentially “amoral”.
- Organisations have their own self management needs to address
- Even services designed to respond struggle to “be sensitive” to the signals.

Choosing to respond from a repertoire of available responses

- Goals of responses:
 - protect the organisation
 - Enact the organisations beliefs about responding (pastoral/medical care)
 - Helping those affected by abuse (child/ adult or associated support people)

One of many recommendations from the Morrison Report commissioned by The Anglican Church in Adelaide

- That the diocese consider how it may operate in a less hierarchical manner, keeping in mind that old male-dominated power structures are related to lack of accountability when dealing with matters of child abuse and adult sexual assault

Organisational culture

- On the basis of these findings, the report of this research ('The Morrison Report') made recommendations for change in both the practises and overall culture of the Church, many of which have now been implemented

Images of Church and Christian Community

- Family
- Unity
- Bride of Christ
- A vine

Images of Organisations (Gareth Morgan)

Organisations as:

- **Machines:**
- **Organisms:**
- **Brains**
- **Cultures**
- **Political Systems**
- **Psychic Prisons**
- **Flux and Transformation**
- **Instruments of Domination**

Changing culture

- Recognising the complexity of interactions:
 - Optimal interpersonal responses
 - Policies that are able to connect and reduce disempowering, enable the story to be told
- Promoting re-integration and reconnection
- Recognise difference
- Recognise that abuse takes place in a variety of contexts, and for a range of motives; recognise the dynamics – intention vs effects

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References

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- Cohen Judith, Mannarino A., Derblinger E., Treating Trauma and Traumatic Grief in Children and Adolescents, Guilford 2006
- Herman, Trauma and Recovery, Basic Books 1992, 1997
- Crittenden, Patricia various publications about attachment
- <http://download.ncadi.samhsa.gov/ken/pdf/SMA-3959/MassViolenceAndTerrorism.pdf>

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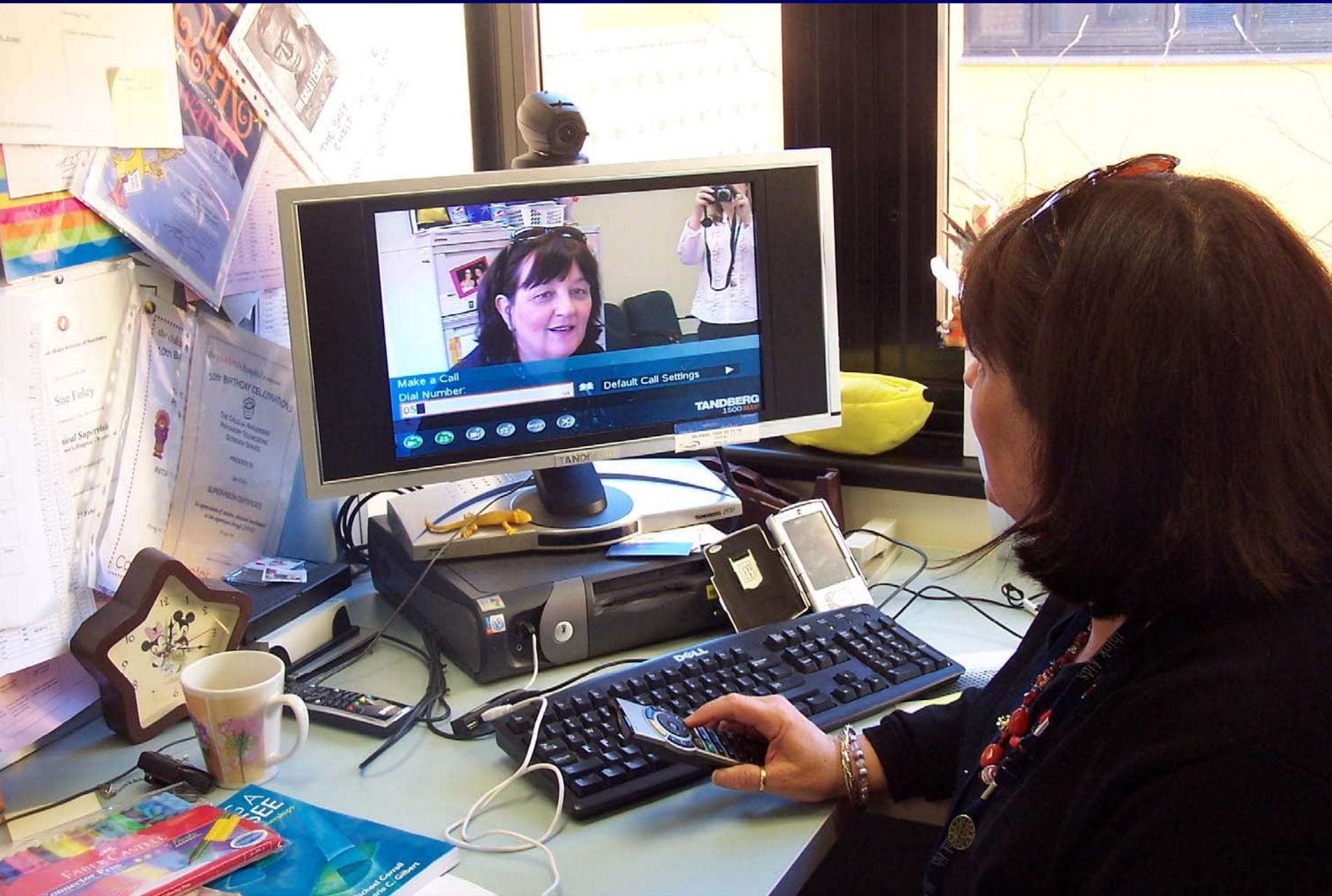
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Acknowledging Sexual Abuse

- A sexual act
- A psychological act
- An act of disrespect and an abuse of power
- An act, like all types of abuse, that does not recognise or take responsibility for the impact of this action (lack of empathy)
- A violation of trust
- Usually enforcing a conspiracy of secrecy

People affected by various types of sexual abuse

- Children and young people, usually over the age of about 2 both within families, and less commonly from strangers, people known to them such as teachers, youth leaders
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Assumptions

- Abuse exists and is a significant problem for the community
- Abuse takes place in a range of contexts, with strangers, in families, with helpers, carers, pastors, older children
- It is significant in its effects
- There are appropriate and inappropriate ways of dealing with concerns about past and current abuse
- We all have responsibilities to protect (if needed); comfort and assist where possible

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The Psychological and Emotional Effects of Abuse

- These include physical and emotional symptoms, beliefs about self and events, behaviours, cognitive meanings and relationship struggles
- The signs and cues to which church leaders, counsellors, pastoral carers may respond
- Known through stories, clinical presentations, experiences and relationships

Gender issues in effects

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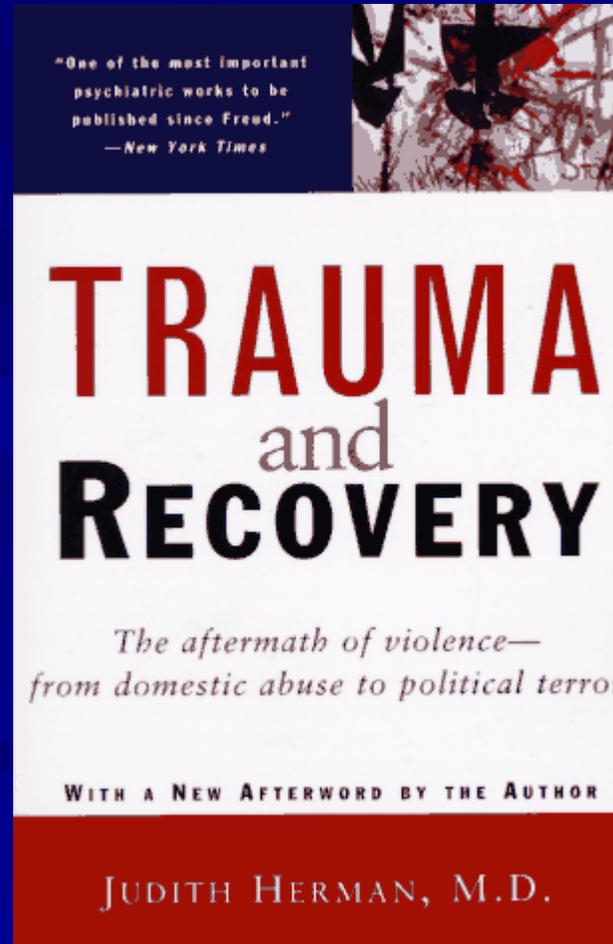
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To reduce suffering we need to
change minds, feelings and
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