



“Innocence Lost” Helping Victims of Childhood Sexual Abuse

By: Marnie C. Ferree

The young mother who sat across from Pastor Stephens nervously smoothed her slacks and looked everywhere in the room except at him. She twisted the tissue in her hands to shreds. She and her husband, who seemed equally ill at ease, appeared exhausted. The pastor wondered what crisis they might be facing. A sick child? Marital problems? Addiction? Whatever the issue, it was taking an obvious toll.

The pastor gently encouraged them to share when they were ready. Huge, silent tears slid down the wife’s cheeks for a few minutes until she took a deep breath. Slowly, she shared the secret she had promised never to reveal: she had experienced childhood sexual abuse at the hands of someone she had trusted. By the time she was finished she looked frail and small, as if she had somehow physically regressed to her age at the time this person had violated her.

Pastor Stephens realized he was hearing similar stories with increasing frequency. And with good reason: statistically, at least one out of four females and one out of six males will experience some form of sexual abuse by the time she or he is 18. Someone will sexually solicit one in five minors while they are surfing the Internet. Almost 40 million people in America are survivors of childhood sexual abuse.¹

Definition of Sexual Abuse

According to mental health professionals who treat sexual abuse victims, sexual abuse is one of the most crippling experiences a child can endure. This violation occurs when a child of any age (including adolescents) is exploited by an older or more powerful person for his own satisfaction while ignoring the victim’s immaturity or inability to fully understand the situation. Despite a persistent myth, strangers harm only a small number of children. Family members abuse 30 to 40 percent of victims, and another 50 percent have been abused by someone outside the family whom they know and trust — a family friend, church member, teacher, or coach.

Sexual abuse takes many forms and does not necessarily involve penetration or physical harm. Overt forms include sexual kissing, fondling, other inappropriate touching, oral sex, or penetration with body parts or objects. Sometimes the adult performs sexual activity on the child; sometimes the adult asks the child to perform sex acts on the adult; and sometimes both parties engage in sexual activity with each other. Statistics about sexual abuse cover all these behaviors (usually without discriminating about the specific abusive activity).

Many victims discount their experiences because it was “just one time” or “I wasn’t hurt or anything like that.” Older victims, especially teens, tend to assume responsibility for the abuse, particularly when they know the perpetrator, which is usually the case. Unless forcible intercourse was involved, adolescents sometimes believe the sexual activity was consensual, or that they did something to invite it at the very least.

Nothing could be further from the truth. No matter how provocative or seductive the child or adolescent, it is always the adult’s responsibility to maintain proper boundaries. The imbalance of power between an adult and a child or teenager — even an older teen 16-18 years old — is simply too great for the younger person to truly consent to sexual activity.

Sexual abuse may also be physically pleasurable, which is enormously confusing for the victim. “How can it be abuse when it felt good and my body responded?” survivors often ask, especially post-puberty abuse victims who are aware of sexual responses. God created the body to respond automatically to sexual stimuli, and the reaction does not discriminate between healthy touch and exploitive touch. Sexual response, no matter how pleasurable at the moment, does not negate the reality of abuse.

Family Environment Where Sexual Abuse Occurs

Sadly, childhood sexual abuse does not happen in a vacuum. Often, the experience has its roots in a family that is beset with multiple problems — problems that both cause the abuse and then contribute to its coverup. In situations of incest, when the perpetrator is a relative, the family harbors a terrible secret. Mental health professionals consider familial abuse particularly damaging because of the breach of relationship and the complicated family dynamics in which incest occurs.

Further, most non-offending parents fail to protect the child because their own problems distract them. Often one or both parents struggle with alcoholism or another addiction. Sometimes there is domestic violence. Perhaps infidelity or some other marital issue preoccupies the parents and keeps them from focusing on the children’s safety.

Even when the perpetrator is outside the family, such as a youth leader, coach, or family friend, sexual abuse victims still may not find their family a safe haven where they can report the abuse. Often dysfunctional families operate according to unspoken rules such as not talking about real issues, not dealing with feelings, or creating a closed system where children are isolated from outside influences. Parents may simply be too overwhelmed with their own issues to be emotionally available for their children, which leaves the victim to cope alone. It’s hard for a child in this kind of environment to share that someone has sexually abused her.

Experts believe that the family response to abuse is more important than the abuse itself in terms of the long-term effects. Survivors who disclose their abuse and then their families do not believe them or help them are at greater risk for psychological, emotional, social, and physical problems often lasting into adulthood. Victims often feel the family’s failure to support and provide healing resources is an additional, usually deeper, betrayal than the abuse itself.

Effects of Sexual Abuse

Survivors often say that sexual abuse creates “a hole in the soul.” Sexual abuse is a deep violation of all that ought to be safe, and it affects every aspect of a person’s being: physical, mental, emotional, relational, and spiritual. Most survivors do not realize their problems stem from their sexual abuse. Many suffer from undiagnosed mental health issues or physical problems like gastrointestinal distress or unexplained body pain.

Survivors of childhood sexual abuse share certain characteristics in common. The most crippling is an overwhelming sense of shame. Victims do not believe something bad happened to them; they think they are bad personally and that is what caused the abuse. The debilitating shame perpetuates the secret and keeps victims silent. Over 30 percent of survivors never disclose the abuse to anyone. Of those who do disclose, approximately 75 percent disclose accidentally. Almost 80 percent initially deny abuse or are tentative in disclosing. Additionally, more than 20 percent of those who disclose eventually recant even though the abuse occurred.

Sexually abused people have problems with trust. Victims expect to be hurt, and they can be extremely critical, demanding, and easily disappointed in an effort to protect themselves. Because the vast majority of perpetrators are people the child trusted, experience has shown them people are not trustworthy. Survivors have difficulty believing someone, including a pastor, is safe and willing to help. A pastor must earn the victim’s trust and be patient while the victim regularly tests that trust.

Control is another big issue with survivors. Some become perfectionists as a way to cope. Because they are powerless during the abuse, victims often feel a desperate need to control themselves, their surroundings, and other people. This characteristic often makes interpersonal relations difficult.

Sexual abuse victims usually have trouble regulating their emotions, especially anger and fear. Sometimes survivors overreact to small transgressions with unreasonable anger. At the other end of the spectrum are those victims who are so afraid of the rage within that they shut down emotionally. Underneath the anger is deep-seated fear. For example, victims are often afraid of the dark, of their nightmares, of being alone, of being touched, of people, or of authority figures in general.

Untreated trauma survivors often struggle with addiction. Seventy to 80 percent of victims cope with a shattered sense of self by medicating their pain with alcohol or drugs. In fact, untreated sexual abuse is a main predictor of relapse in chemical dependency recovery. Other addictive behaviors include socially acceptable ones like workaholism or codependency, which is focusing on others in an unhealthy way.

Sexual abuse survivors seem to have a higher rate of two specific addictions: first, to sex (including pornography) and relationships; and second, to food. Many therapists believe a possible reason for these particular problems is that they involve core survival behaviors. We are created as sexual beings, and we must eat to sustain life. Both sex and food are also self-nurturing, which blunts the burning ache within.

Almost all survivors are confused about sex. They mistake sexual activity for love and vice versa, and so they are often promiscuous or unfaithful. They use sex or an intense relationship as a way to get love because their abuser (especially for incest victims) probably said, "I do this because I love you." Other perpetrators couch sex within an otherwise positive, loving environment. Most survivors, as a result, are unable to be truly intimate (emotionally) in a committed relationship.

Childhood sexual abuse victims suffer disproportionately from mental health issues like depression, anxiety, and post-traumatic stress disorder. In fact, one of these difficulties, along with substance abuse, is the most common presenting problem for survivors, not specifically the sexual abuse itself. Often the abuse is only revealed after the person is stabilized in regard to the psycho-behavioral problem that brought her into treatment.

Finally, sexual abuse survivors struggle with spiritual issues. If during a child's early years the significant adults in her life harm her — especially her parents or other trusted authority figures — she transfers those negatives into her view of the Heavenly Father. If the abuser was a member of the clergy, the effect is especially catastrophic. The victim loses faith in a loving, trustworthy God, and she questions His role in her life. If God did not protect her, where can she turn?

Implications for Pastors

These truths about childhood sexual abuse and its effects have enormous implications for pastors. They will keep a pastor from telling a victim, "That was such a long time ago. Why don't you just get over it and move on?" These truths will remind a pastor that survivors are often sexually promiscuous or struggle with chemical addiction, so he can address the underlying issue and not just the obvious behavior problems. They will also prevent him from shaming the survivor for her sinful actions, and thus adding to her despair.

Equally important, the informed pastor will realize he must always refer sexual abuse victims for additional help. As outlined above, survivors are deeply wounded individuals who suffer from a wide array of physical, mental, and behavioral issues that require specialized professional help. The pastor can be an important cheerleader for the healing process. Most clergy, however, lack adequate training to assist further. Unfortunately, many pastors fail to understand the limitations of their role in working with sexual trauma survivors, and with the best of intentions they end up doing more harm than good.

How Pastors Can Respond Effectively to Sexual Abuse

So how does a pastor appropriately respond to victims of childhood sexual abuse? The first and most important step is to believe the survivor's story. Adults rarely fabricate this experience. Because of the shame involved, victims do not subject themselves to the potential rejection and scrutiny of being a survivor without reason.

Next, honor the person's pain and the coping methods she is using to survive. Historically, the church has often been guilty of shooting its wounded. In their zeal to respond aggressively to sin, church members have failed to offer grace and compassion to wounded people. The wise pastor will put first things first, by clearly responding to the travesty of the sexual abuse before addressing any resulting issues.

Remember that victims have experienced spiritual wounds, and they accept their ambivalence or anger toward God. Provide a supportive environment for spiritual processing of the survivor's experiences. Avoid putting a religious bandage on a gaping wound. Allow the victims to grieve and model a different way of relating to their Heavenly Father.

Be supportive of the way she is working through recovery. Do not criticize the time and money spent on therapy or self-help groups. Do not rush the victim through the healing process or encourage her to forgive before she is ready. Recognize that the victim's relationships with family are often complicated, especially if the family did not protect the victim or does not believe the abuse occurred. Many victims are estranged from family, at least for a time. Respect the boundaries they need to feel safe.

Finally, be sure to refer the survivor for outside professional help. Assemble a list of Christian counselors in your area who are specifically equipped to treat sexual abuse victims. (For a list of qualified Christian counselors in your area, call the Office of Ministerial Enrichment, 1-417-862-2781, ext. 3014). Know about helpful books, support groups, and other resources. A number of excellent Christian books and other materials are available.

Hope for Healing

Though childhood sexual abuse is a debilitating experience with potentially lifelong effects, it is not a life sentence. The Great Physician offers healing and hope to the abused. There will always be scars, but individuals can move from victims to survivors; and what a perpetrator did for harm, God can transform into good. The experience of sexual abuse can become but one part of the survivor's history, and the person can ultimately see how those threads have blended into the overall tapestry. The educated pastor can be a first responder and one of God's healing agents in the restoration process.

© Marnie C. Ferree, M.A.

Reprinted from *Enrichment* journal Q3, 2009, used with permission.

Marnie C. Ferree, M.A., LMFT, is director, Bethesda Workshops, Nashville, Tennessee.