

Female Childhood Sexual Abuse Survivors: An Existential Exploration and Implications for Therapists

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Abstract

In the United States, annual prevalence factors indicate that 25% of women are reported survivors of childhood sexual abuse (CSA). Existential concerns and basic purposes within the physical, social, personal and spiritual dimensions of female CSA survivors' worldviews are explored. The recognition and meanings of existential purposes and concerns for CSA survivors are described. Following, implications of these explorations for CSA therapists are identified.

An Existential Exploration and Implications for Therapists

Sexual abuse comprises inherent variations depending upon the age of children, the specific act committed by an adult, and the type of relationship between an adult and child (Lowenthal, 1996; Scannapieco & Connell-Carrick, 2005). Physical contact sexual abuse includes perpetrator behaviors such as fondling and forced intercourse or penetration. Further, non-contact sexual abuse includes perpetrator behaviors such promoting sexual activity of children as well as permitting children to watch pornography or witness sexual intercourse (The Norma J. Morris Center, 1995). Scannapieco and Connell-Carrick (2005) provide three differing definitions of sexual abuse and generally conclude that sexual abuse involves any sexual activity with a child where consent is not or cannot be given" (p. 12). Individuals who have endured these experiences are referred to as survivors of childhood sexual abuse (CSA) survivors (Wilken, 2009).

Although accurate childhood sexual abuse rates are difficult to obtain, Pereda, Guilera, Forns, and Gomez-Benito (2009) concluded that approximately 25% of women in the United States are survivors of childhood sexual abuse. In their meta-analysis of the prevalence of childhood sexual abuse across an international sample of 22 countries, the researchers projected that 19.7% of women experience sexual abuse before the age of 18. Africa was reported as having the highest prevalence rate (34%) and Europe was reported as having the lowest prevalence rate (9%). In a similar study of an Australian sample (Dunne, Purdie, Cook, Boyle, & Najman, 2003), 34% of women reported non-penetrative sexual abuse (e.g., inappropriate touch behaviors such as fondling) during childhood while 12% reported penetrative sexual abuse (e.g., rape).

Sexual abuse occurs across all communities, regardless of gender, race, religion, cultural heritage, or socioeconomic status (Bass & Davis, 2008; Pereda et al., 2009). For example, Dunne et al. (2003) reported significant rates of males that experience non-penetrative sexual abuse (16%) as well as unwanted sexual penetration (4%). The circumstances

surrounding the sexual abuse may be a reflection of cultural differences, a child's social world, and/or the family environment. Certain family characteristics have been associated with a higher prevalence of abuse: An insecure parenting attachment, a lack of parental supervision, and a family history of sexual abuse have been common factors associated with victimization (Fieldman & Crespi, 2002).

For many individuals, the process of coping with traumatic histories may continue well into adulthood. Researchers have found that women who report having a history of sexual abuse are more likely to participate in unwanted sexual experiences as adults than those without histories (Walsh, Blaustein, Knight, Spinazzola, & Van der Kolk, 2007). As individuals struggle to overcome trauma and advance to a place of healing, they may experience shame (Bass & Davis, 2008). Additionally, victims may deny and distort their recollections of the unwanted sexual experience. In a recent study of sexual abuse survivors, women frequently reported feeling confused and paralyzed by their experiences (Rahm, Renck, & Ringsberg, 2006). The authors proposed that such feelings may later lead to repressed memories, thereby preventing the ability to process confusing and paralyzing emotions.

A CSA survivor who enters counseling may initially experience a feeling of disengagement with the ability to accept one's self and to understand her world (Phillips & Daniluk, 2004). The sense of disengagement is a primary focus of therapeutic interventions. Grossman, Sorsolie, and Kia-Keating (2006) exemplified the focus on disengagement of an effective therapist for sexual abuse survivors to enhance physical and mental wellbeing: "One crucial dimension of survivors' recovery is finding a way to "make sense" of what happened to them in the past, and to make some kind of meaning of the place the abuse has in their current lives" (p. 434). A therapist's responsibility is to provide a safe environment for which a sexually abused client can explore her traumatic history as well as ways to reintegrate into society.

Considering the prevalence of CSA as well as the detrimental effects of CSA on development and later life experiences, therapists will likely counsel survivors of sexual abuse. Much of the research conducted in the area of CSA has incorporated the use of cognitive-behavioral theory and practical approaches in ways to address client needs. Using the cognitive-behavioral framework, therapists teach clients how to identify cognitive distortions and skills that will alleviate presenting symptoms (Chard, 2005; Owens & Chard, 2001). Previous research regarding existential therapy has primarily focused on the general area of trauma as opposed to the more specific topic of sexual abuse (Jenmorri, 2006 & Tedeschi & Calhoun, 2004). Therefore, this article will address CSA from an existential perspective specifically focused on basic purposes and concerns within the physical, social, personal and spiritual dimensions of female CSA survivors' worldviews. Recognition of the purposes and concerns will be described and the implications of existential explorations for CSA therapists will be identified.

Existential Nature, Purposes, and Concerns for Female CSA Survivors

Emmy van Deurzen's (2002) existential perspective outlined the basic principles that depict the relationship between persons and the world. In brief, humans live within four universal dimensions in relationship to the world including (a) Umwelt, (b) Mitwelt, (c) Eigenwelt, and (d) Uberwelt. The authors of this article will refer to each, respectively, as the physical, social, personal, and spiritual dimensions. Existentialism believes the dimensions subjectively exist for all people. The four dimensions are interconnected and continually

condition each other (May, 1983). Physical consists of the natural world; this is our biological dimension. Vontress (1979) suggested that the physical dimension is the “life support system” (p. 118). The social dimension is the public world sphere, where interactions and relationships with other human beings exist. Personal is the psychological dimension in which a person develops or experiences a sense of identity and ownership. Lastly, the spiritual dimension is where an individual searches for value beyond the self. Believing in purpose as well as inferring meaning of existence constitutes psychological awareness in the spiritual dimension.

Within each dimension, individuals engage the process of insightful interaction with the world. The physical dimension reminds individuals that their surroundings are in a constant state of change. Persons can choose to develop life goals and implement actions to attain their goals or to remain inflexible and refuse to change (Kasser & Sheldon, 2004). Our social dimension refers to interactions among humans. Individuals infer meaning from feedback they receive from others regarding social interaction. Such feedback influences individual behavior. In the personal dimension of an existential perspective, individuals develop the capacity for self-awareness and self-relatedness. They are able to reflect on their reality within the world (May, 1983). Lastly, within the spiritual dimension individuals create a significant relationship with a higher being. Persons may develop commitment and dedication to remain obedient to an authority figure (Vande Kamp, 2009).

Emmy van Duerzen (2002) suggested our human existence is paradoxical by nature in regard to the existential dimensions. That is, people are often hindered by concerns for living although they strive to meet the basic purposes within each dimension. A basic purpose, as defined by van Duerzen (2002) is an “ideal value that a person knowingly or unknowingly strives for” (p. 139) relevant to each dimension. She implies that individuals will settle for less than desirable goals, as a way to dodge unwanted circumstances that compromise their aspirations for existence. This paradox is particularly important for survivors of sexual abuse. Potential life concerns experienced by CSA survivors relevant to each dimension will be discussed in the following sections.

Physical Dimension Purposes and Concerns

The physical world is the most foundational of the dimensions. A purpose in the physical world is to create harmony with the environment. Emmy van Duerzen (2002) suggested health, strength, happiness and life as basic purposes a person strives for in her physical world. Cole reported that a loss of control over an environment is often contributed to a survivors’ loss of body integrity and safety (as cited in Kearney-Cooke & Striegel-Moore, 1996). Shattered assumptions about the world and self are in need of repair for CSA survivors. It is difficult and often inconceivable for survivors to find meaning through attempts to comprehend “why” she was abused (O’Dougherty-Wright, Crawford, & Sebastian, 2007).

Emmy van Duerzen (2002) stressed the importance of exploring the structural relationship between a client’s understanding of how she interacts in environments and how she perceives the natural world. This exploration provides therapists insight in how a client interprets her existence. Parts of a client’s natural world, as indicated by van Duerzen (2002), include: “body image, ability to stave off illness, fitness or weakness, attitudes towards food, sex and procreation” (p. 63). CSA survivors who do not recover from their trauma may experience existential concerns within the physical world.

The environments in which the abuse occurred may lead to safety concerns. The relationship between sexual abuse and safety is exemplified by Fisher (2005) when she described how a home or an interpersonal relationship that was thought to be safe and secure transpires as a haven for “secrecy and terror” (p. 11). The need to maintain silence regarding abuse or the fear of repercussions due to disclosure may allow CSA to never resurface in a survivor’s life (Lundqvist, Svedin, & Hansson, 2004). Keeping secrets is often a way for a survivor to elude exposure. That is, a CSA survivor can attempt to avoid any further danger or eradication in the world (Fisher, 2005); however, survivors are at an increased risk for revictimization. Specifically, researchers Messer and Long as well as Beitchman, Zuker, Hood, DaCosta, Akman, and Cassavia reported that CSA survivors are at a higher risk for sexual and physical assaults from spouses or romantic partners than nonsurvivors (as cited in Whiffen, Judd & Aube, 1999). Janoff-Bulman and Frantz suggest that such revictimizing events may result in a survivor losing her sense of purpose and meaning in life as she develops a lack of trust regarding her safety in the world (as cited in O’Dougherty-Wright et al., 2007).

Females may develop poor body images and suffer other adverse effects from sexual abuse. It is not uncommon for a survivor to imagine her body as a source of “vulnerability, shame and betrayal” (Kearney-Cooke & Striegel-Moore, 1996, p. 306). The ability to regain control, which was once denied by an abusive experience, of one’s body may lead to the development of eating disorders such as anorexia and/or bulimia (Fisher, 2005). In contrast, Kearney-Cooke and Striegel-Moore (1996) stated that the survivors who see themselves as too attractive may intentionally gain weight to avoid re-victimization. Eating too little or too much is an emotional coping strategy victims employ to reconnect to themselves (Fisher, 2005) as well as to redeem control (Kearney-Cooke & Striegel-Moore, 1996). Another behavioral consequence related to sexual abuse regards sexual interactions. There is abundant research regarding sexual difficulties and enduring effects for adult survivors of CSA. According to Sprei and Courtois (as cited in Cobia, Sobansky & Ingram, 2004), approximately 50% of females who experienced CSA report sexual dysfunction in their adult lives. Durlak suggests that sexual dysfunction may include sexual desire disorders and inhibited female orgasms (as cited in Cobia et al., 2004). Finkelhor and Browne (1985) reported additional difficulties from CSA survivors that included “aversion to sex, flashbacks to the molestation experience, difficulty with arousal and orgasms, and vaginismus, as well as negative attitudes toward their sexuality and their bodies” (p. 534). Lastly, Herman (as cited in Feinauer, Callahan, & Hilton, 1996) stated that victims may experience re-traumatization with intimate partners due to sexual difficulties when relationships are initiated.

Social Dimension Purposes and Concerns

The social dimension describes the interaction between an individual and the environment. Emmy van Duerzen (2002) suggested the social world will serve the purpose of success, power, belonging, and love. People encounter various groups and social situations on a daily basis, including cultural and societal affiliations. How an individual experiences her presence in social interactions will determine her view of the social world. The experience of a social dimension lacks isolation. That is, individuals do not act in isolation. Persons are constantly responding to societal demands, which sometimes involve evaluating the actions and ideas of others. A major dilemma facing individuals in this dimension is that the world does not represent a static existence of peace. When faced with this realization, an individual may also experience disillusionment.

For CSA survivors, trauma represents the ultimate experience of disenchantment. Women who endured CSA will encounter a wide variety of emotions that impact their relationship with the world. Finkelhor and Browne (1985) described the distress involved in child victimization through a unique framework. The authors propose a model, which describes four trauma-producing factors associated with CSA including: (1) *Traumatic sexualization* refers to the experience of developmentally inappropriate sexual contact; (2) *betrayal* occurs in children when their trust in others is violated; (3) perpetrators of sexual abuse also invoke a sense of *stigmatization* in the child through blaming, demeaning, and threatening behaviors; and (4) *powerlessness* refers to the feeling of helplessness and the inability of the child to protect herself. Each factor may result in various interpretations for survivors; however, generally, the CSA survivor will experience confusion and distorted self-concepts from the presence of one or multiple factors. Self-concept and self-worth is a differentiating characteristic between individuals that experience sexual abuse and individuals that do not experience sexual abuse. In a sample of college students, Murthi, Servaty-Seib, and Elliott (2006) found that women with a history of childhood sexual abuse scored lower on measures of self-concept than women with no history of abuse.

As children, CSA survivors were unprotected by some adults and manipulated by others. Because personal rights were violated, these women are often more vulnerable than non-CSA persons and prone to be targets of poor treatment by others. This realization greatly affects how sexual abuse survivors interact and respond to the world. Woldsdorf and Zlotnick (2001) noted that sexual abuse survivors are likely to develop insecure attachment styles in which they exhibit avoidance and anxiety in interpersonal relationships.

Later life experiences are often impacted by the negative experience of CSA. In a sample of college women, researchers found that individuals with more severe abuse histories were more likely to rely on an avoidant coping style. The women that employed an avoidant coping style also increased levels of trauma symptomatology and were more likely to report sexually coercive experiences as adults (Fortier, DiLillo, Messman-Moore, Peugh, DeNardi, & Gaffey, 2009). An inability to cope with reality may lead individuals to participate in destructive behaviors. In addition, overall mental health is greatly affected in individuals with sexual abuse histories related, but not limited, to an increased likelihood of psychological diagnoses and substance abuse (see Polusny & Follette, 1995, for a review). Specifically, Koltz-Flitter, Elhai, and Gold (2003) identified scale elevations in the Minnesota Multiphasic Personality Inventory among sexual abuse survivors in the areas of posttraumatic stress disorder, dissociation, and depression. Callahan, Price, and Hilsenroth (2003) found that adult survivors of sexual abuse reported higher psychological distress, including elevated depression and anxiety scores, and declined interpersonal functioning than nonvictims. To support Callahan et al. (2003), Feerick and Snow (2005) found that social anxiety and posttraumatic stress disorder were more common among women with sexual abuse histories. In an investigation of adult survivors, Barker-Collo (2001) found that self-blaming and suicide attempts were a common experience for adult women with CSA histories.

Personal Dimension Purposes and Concerns

In the personal dimension, individuals discover the capacity to relate to themselves and others in an intimate manner. Emmy van Duerzen (2002) stated a personal world gives purpose to integrity, freedom, authenticity, and certainty. This process must begin at the individual level. Each person creates an identity by defining what is important to her

through consideration of thoughts, feelings, and ideas. In doing so, she creates a feeling of stability and comfort. The ability to accept oneself may at times be compromised by how others view the individual. Essential to acceptance is the incorporation of personal assets and weaknesses with one's self-definition. When individuals develop self-acceptance and become confident in their ability to stand alone, they can create beneficial and meaningful relationships with others. One of the primary challenges of the sexual abuse survivor is developing confidence to form a secure relationship with another.

Phillips and Daniluk (2004) described some of the struggles involved in the identity development of these women. The commonalities included feelings of disconnection and isolation as well as feeling defined by the sexual abuse experience. Further, the women reported feeling as if they needed to portray a facade for the public world. Such feelings and beliefs may influence a survivor to conceal identity and portray an inauthentic image for friends or family members as well as in public. A rupture in interpersonal relationships is not uncommon for CSA survivors. In a longitudinal exploration of female survivors, Liang, Williams, and Siegel (2006) found that more severe sexual trauma in childhood was correlated with greater marital dissatisfaction. Similarly, in studying the impact of sexual abuse on survivor's partners, Oz (2001) found that spouses reported feeling frustrated with the slow-paced healing process. Dennerstein, Guthrie, and Alford (2004) reported that sexually abused women were more likely to have fewer children and fewer intimate relationships as compared to non-abused women.

Spiritual Dimension Purposes and Concerns

Emmy van Duerzen (2002) identified the basic intentions of the spiritual dimension as truth, perfection, wisdom, and goodness. Gilcrest (as cited in Ganje-Fling & McCarthy, 1996) defined spirituality as "what individuals hold sacred in their lives, what is most important to them at the essence of their being" (p. 253). Spirituality is a multifaceted construct that embraces religious, existential, and unstructured orientations (Ganje-Fling & McCarthy, 1996). Further, spirituality provides a method for understanding personal environments and is not limited to one faith (Ganje-Fling & McCarthy, 1996). Emmy van Duerzen (2002) identified the spiritual world in existential terms as the "domain of experience where people create meaning for them and make sense of things" (p. 87).

Spiritual coping may take positive and negative forms. Gall (2006) observed that survivors of CSA who utilized positive spiritual coping strategies reported feeling as if the strategies aided them in the process of inference and provided inner strength. In contrast, CSA survivors may experience negative perceptions within their spiritual world, leaving them with feelings of personal discontentment. A tendency for CSA survivors is to cling to more negative views of God resulting in decreased spiritual well-being (Murray-Swank & Pargament, 2005). Murray-Swank (2004) reported additional spiritual struggles of survivors that include spiritual disconnection, anger at God, isolation, and feelings of abandonment by God (as cited in Murray-Swank and Pargament, 2005).

The tension between a traumatic history and hope for better life experiences leave survivors with feelings of despair (Ganje-Fling and McCarthy, 1996). This tension in conjunction with a lack of faith may lead survivors to question their meaning and purpose in life. As a result, a survivor may view the world as evil and imperfect; thus, there is little hope for the future.

Implications for Therapists

CSA has a profound impact on survivors' lives. Existential concerns in the four dimensions may develop and linger throughout the span of their lives. The perceived severity of a sexual abuse experience a determinant of survivor perceptions and acceptance of her and the world they inhabit. Emmy van Deurzen (2002) suggested that striving for basic purposes within all dimensions must be embarked upon before the client becomes irrevocably disconnected from existential meaning in life. The dimensions are interlinked and interrelated and require working through ornate difficulties. From an existential approach, conceptualizing the survivor's concerns related to her sexual abuse experience requires a therapist to explore all dimensions of a survivor's worldview to effectively address individual needs.

Existentialism sees opportunities for new developments in the midst of a crisis (Jacobsen, 2006). Fisher (2005) described how new developments may arise from a crisis through a therapist: "Existential work can help the survivor acknowledge and embrace her autonomy by allowing her to reconnect with her inner knowing and begin to trust her perceptions of the world" (p. 26). Yalom (1980) suggested that the client's level of awareness leads to increased insight of how contributing factors may lead to later life difficulties. *Focusing* is a tool a therapist can utilize in promoting awareness of the disharmony in the CSA survivor's physical dimension. Gendlin (as cited in Fisher, 2005) defined focusing as "an internal aura that encompasses everything you know about the given subject at a given time – encompasses it and communicates it to you all at once, rather than detail by detail" (p. 30). He formed six steps that guide a therapist in focusing. The steps involve clearing, sensing, finding, resonating, questioning, and receiving (see Fisher, 2005, for a review).

From the social dimension perspective, the therapist wants to produce an environment that allows clients to incorporate opposing views of the self. The counselor will assist the client in expressing her subjective view of the world as well as identify areas in which she may hold unrealistic views. Encouraging clients to accept limitations and understand motivations for particular behaviors is another goal in the social dimension. Lastly, the counselor will help the client explore interactional patterns with others and encourage her to be flexible in alter and adopt interpersonal behaviors (van Deurzen, 2002).

For CSA survivors, past trauma is incorporated into the self in such a way that victims define their identities by their abuse histories. Existential therapy provides an opportunity for survivors to reclaim their identities in a way that is meaningful to them. The therapist who utilizes this framework must understand how each client perceives her existence. The formation of the I-Thou relationship utilizes a present-centered focus in which the client interacts intimately with the counselor. Yalom (1989) described this dynamic as a reflective experience in which the client is held accountable in observing the interactions during therapy. The survivor eventually realizes that the way she responds to the therapist is similar to the way she responds to others in her social world. In forming this relationship the counselor gains insight into the client's world, thereby being more able to understand her subjective view (Corey, 2001). Many CSA survivors are plagued by external forces related to their sexual abuse experience. When this occurs, the counselor must encourage the client to identify ways in which she continues to maintain her identity as a survivor. Through establishment of the here-and-now focus, the client is able to take responsibility for her behavior (Yalom, 1989).

Day (2009) explored the integration of both narrative and existential therapies in applying treatment interventions to survivors. The author proposed the idea that therapy is enriched when clients are able to share the content of their experiences through storytelling followed by processing story themes through underlying meaning. The therapist offers a supportive relationship by engaging in genuine interactions that promotes co-exploration in working with the client. The existential therapist is one who empowers the client and instills hope by offering empathic and accepting responses. Therapy is a safe place where the client is able to connect with emotions and develop new congruent perspectives about her self-identity. Ultimately, the survivor is able to re-establish her sense of self and create new purpose and meaning in life.

In exploration of the personal dimension, therapists need to assist clients in finding inner fulfillment. Survivors are encouraged to regain intimacy with the self by exploring what is most meaningful to them. Clients are distracted from letting others define them through negative undertones. Instead, they are challenged to find creative ways to define themselves through personal characteristics. Group counseling offers an active approach for sexual abuse survivors to gain sense of normalcy so they may accomplish goals together in creating a meaningful life post sexual abuse (Corey, 2001). Through the process of self-exploration, the therapist and group members support each other while increasing their ability to be honest. Survivors learn to identify the things that give them meaning while expanding personal and worldviews. As clients develop more self-awareness, the therapist directs the clients to the action-oriented, freedom, phase of the therapeutic process (Yalom, 1989).

Scheidlinger (2004) described the benefits of implementing group psychotherapy with survivors of traumatic experiences. The author contends that the group process serves as a form of treatment used to ameliorate psychological issues. Specifically, Scheidlinger described the existential group as one in which clients engage in a process of self-examination simultaneously exploring meaning in their lives. This process allows the client to develop self-awareness and engage in responsible decision-making.

Individual counseling has also been found to benefit for clients dealing with traumatic life issues (Fisher, 2005). Logotherapy describes a specific existential framework that promotes faith and hope in possibilities for renewed living. Clients engage in a process of four sequential phases that enables them to develop a sense of value in their lives. During the first phase clients engage in a process of differentiation whereby they learn to avoid over identification with the trauma. The second phase entails the therapist assisting the client in attitude modification through the facilitation of a Socratic-dialogue technique in which he or she explores what gives meaning to life. Symptom reduction follows as clients learn to cope and become aware that new options are available. Finally, clients maintain their current level of functioning by engaging in constant reflection of their values and purpose in life (Schulenberg, Hutzell, Nassif, & Rogina, 2008).

The spiritual dimension can be complicated for a CSA survivor. Although some clients will adhere to negative views of spirituality due to abuse, many maintain the spiritual beliefs they held before sexual abuse occurred. Gall (2006) conducted a study assessing spiritual coping in relation to a current life event. One hundred and one adult survivors of CSA volunteered to participate in the study. The study's results showed that survivors who embraced anger with God had a tendency to display higher levels of depressive mood. In contrast, survivors who employed positive spiritual coping experienced lower levels of anger and depressive moods. The role of spirituality should not be overlooked in a

survivor's current life functioning. Survivors of sexual abuse may perceive life as worthless. When feeling worthless, an individual may consider spiritual questions regarding the value of life and the meaning of death. It is important for therapists to reframe a worthless mindset to a meaningful mindset in an effort to enhance a CSA survivors living experience (Ganje-Fling & McCarthy, 1996).

Exploring the spiritual dimension of a survivor is discovering the person's existing views on life, how she makes sense of the world, and "what it is she lives for and would be willing to die for" (van Deurzen, 2002, p. 87). Allowing exploration of circumstances, beliefs, fears, and defenses, as well as the relationship between them in how they work together to create their life experiences, will often lessen the blame survivors take for their abuse (Feinauer, 2003). This is referred to by Feinauer (2003) as allowing the client to increase "respect for the uniqueness" (p.212) or herself. Through this process, the client will become committed to change and grow as a person existing in society. Gange-Fling and McCarthy (1996) caution therapists to be aware of potential pitfalls when addressing spiritual issues which include premature spiritual interventions, blurring of boundaries, countertransference and failure to refer (see Gange-Fling & McCarthy, 1996, for a review).

Conclusion

The tenets of existential therapy may serve as a foundational base in the exploration of CSA survivors' worldview. Just as the worldviews interrelate, so do the tenets of the theory. Basic dimensions of the human condition to explore with clients may include: the capacity of self-awareness, freedom and responsibility, striving for identity and relationships to others, the search for meaning, anxiety as a condition of living, and awareness of death and nonbeing (Corey, 1996).

The importance of the inter-relatedness of existential perspective dimensions should be considered by a therapist. The neglect of one dimension makes it difficult to understand the phenomena of the survivor's world. Existentialism used as a philosophy or theory in therapy may benefit clients by helping them understand their choices to regain power and assume responsibility for their futures. The role of the therapist is to create an environment of open exchange within the counseling setting (e.g., Socratic-dialogue). Survivors should find comfort in exploring their inner-most thoughts and concerns. Regardless of the chaos in personal worlds, the therapist can be a co-explorer to empower the CSA survivors in finding clarity, purpose and meaning for their lives.

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