Using a feminist and subversive perspective, a study examined the testimonies of five adult females each having experienced childhood sexual abuse. All the subjects—participants in a multi-medium art show sponsored by an urban mental health center—contacted the researcher voluntarily. Participants ranged in age from 39 to 54; sexual orientation and marital status were not deemed relevant. All were of western European descent; education ranged from high school diploma to Master's degree. Separate discussions were carried out over a period of 4 weeks in the homes of the participants. The study's original intent was to examine the significance and meaning of art in the women's lives, but it was transformed into an examination of a process of self-healing which they described in detail. The term "participant" also gradually changed to "Expert I-witness." Data is essentially the discourse of the subjects. The participants provided an expanded view of what the "experts" discuss rather than simply affirming the testimony of experts. Statistics may lead to a general acceptance that women are the victims, but the possibility should be entertained that child male victims are also out there. Until social science and society acknowledge this, child and adult male victims will continue to be left unhealed. Future studies should expand the role of expert and search for identifiable patterns of healing rather than focus on the negative effects of child sexual abuse. (Contains 30 references.) (NKA)
Expert I-witness Accounts of Childhood Sexual Abuse:
The Abused as Expert
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Abstract
Utilizing a feminist and subversive perspective, this paper examines and reports five women's descriptions of the processes by which they transformed themselves from victims, both literally, and as defined by dominant perspectives, into Expert I-witnesses, a state of consciousness comprised of the combination of personal experience and subsequent exploration.

The scriptural version of Sodom and Gomorra reveals how the townspeople of Sodom gathered around the house of Lot and said, "Where are the men that came to you tonight? Bring them out that we may be intimate with them," and Lot, a pious and God-fearing man, replied, "I beg you my friends, do not commit such a wrong. Look, I have two daughters who have not known a man. Let me bring them out to you, and you may do to them as you please..." (The Torah, 1962, p. 36).

Sexual molestation and abuse of children is not a new phenomenon. What is new to the topic of sexual abuse is the manner in which it is discussed. Childhood sexual abuse has become the topic of the nineties. The sexual abuse of children has been sensationalized by talk shows and news reports, analyzed by so-called "experts," and the survivors of the abuse are "reduced to victims, represented as pathetic objects who can only recount their experiences as if these are transparent, and who offer pitiful instantiations of the universal truths the experts reveal" (Alcoff and Gray 1993, p. 27). During her discussion at the Meese Commission regarding victims' testimonies, Palczewski (1992) states:

The 'victims' are only given the power to (at best) report what happened to them or (at worst) merely to report that something happened. 'Victims' are not allowed to attach intersubjective meaning to their experiences. 'Victims' were powerless to name their abuse. Each spoke only for herself [sic] and was not allowed to voice the rage and anger of those women [sic] still silenced. (p. 35)

The role of the "expert," be it in the form of psychiatric specialist, criminologist, or news reporter, is to translate the victims' raw experience into some meaningful form, where "meaningfulness" is determined by the experts for the abused individuals themselves. The focus of childhood sexual abuse has become that of a voyeuristic, revictimizing, and dominating stance toward the object of the childhood sexual abuse, where the abused, rather than the abusers, are put in the position of explaining and defending their own actions (Alcoff and Gray, 1993).

This paper seeks to disrupt the dominant discourse surrounding childhood sexual abuse and molestation by presenting the eyewitness perspective (that of the abused individual) as expert and offering the experts' dialectical discourse regarding the effects and healing process of their own childhood sexual abuses. The paper will proceed, respectively, with a discussion surrounding sampling and data collection, an examination of the participants' expertise, and a report of the healing process defined by the participants. Quotes from the actual participants are italicized for identification. All participant verbiage remains essentially as spoken except to correct grammar or to eliminate extraneous verbalized pauses. Lines of asterisks separate different participant responses. Researcher questions and comments are within parentheses.
Method

Participants

The present research focuses on the testimonies of 5 adult females who have each experienced childhood sexual abuse and who participated in a multi-medium art show sponsored by a prominent mental health center in a medium-sized western city. Eight women voluntarily contacted the researcher as a result of the cooperation of one of the organizers of the art show. All identified themselves as having been contacted by the organizer. Only five were selected for inclusion. One did not fit the listed criteria as she did not express confidence that participating was a healthy choice for her. Rather, she expressed hesitation and an expectation that participating in this study could help her to "heal." Two additional women contacted the researcher after the interview period had lapsed. The participants selected for inclusion were originally chosen because 1) they participated in a formal public dialectic (in the form of the art show) about childhood sexual abuse, and 2) they (and their therapists) expressed confidence that they had sufficiently "healed" to participate without further emotional or physical disruption to their lives.

Participant ages ranged from thirty-nine to fifty-four years of age with most in their early to mid forties. Sexual orientation and marital status were neither deemed relevant nor specifically requested for two reasons: 1) sexual abuse is equally prevalent and does not distinguish between social class or lifestyle (Bass & Davis, 1988; Hultcr, 1978; Finkelhor, 1986); and 2) the researcher wanted to eliminate the possibility of the temptation to make attributions of causality based on a profile of the abuser, rather than the abuser. All were of Western European descent. Minimum education was a high school diploma, maximum education was a Master's level education. Paid employment history varied. One was a self-employed seamstress, another a clinical social worker with an independent practice, another a retired schoolteacher, and another a part-time motivational speaker and full-time office staff, the final worked inside the home supported by pension.

Non-representative Sample

The notion of female as victim. Childhood sexual abuse prevalence rates vary widely but are reported to be as high as 62% for females and 31% for males (Finkelhor, 1986). Salter (1988) reports that "all existing studies find more female children abused than male and more offenders to be male than female (p. 24). If true, these reports suggest an imbalance that may be at work in many women's lives significantly influencing their sense of self and consequently their interpersonal interactions. While this researcher questions such high prevalence rates, but if indeed, as much as 62%, or approximately 6 out of 10, of the adult females with whom we interact on a daily basis are experiencing "subsequent problems" (Finkelhor, 1986, p.163) and the disruption of normal life as described by Finkelhor and others (Bass & Davis, 1988; Best, 1990; Salter, 1988) then a large portion of the adult female population would have the potential to be communicating through filters created by the trauma of childhood sexual abuse.

Even though each of the participants in this study are female, this researcher hesitates to contribute to the concept of female as victim (and male as abuser) and, as such, believes a critical look at the concept is required. Discussing the prevalence of the adult male as abuser and the child female as abused (Finkelhor, 1986) maintains, gender, as a variable, appears to interact with virtually every other variable proposed by every other theory. Every theory of pedophilia needs to explain not just why adults become sexually interested in children, but why that explanation applies primarily to males and not females. If being the victim of sexual abuse increases the risk of becoming an abuser, then there should be more female sexual abusers than there are. (p. 126, 127)

Some explanations reported for why females are the abused and not the abusers include the following: women are socialized to accept lower power orientations (Finkelhor, 1986), men have a greater interest in and focus more on sexual interactions (Gagnon, 1977; Person, 1980; Symonds, 1978) women are socialized to more aware of other's needs and offer protection to others (Finkelhor, 1986); women are socialized to be more aware of other's social orientation and are less offensive, reasons for the reported prevalence rates of childhood sexual abuse in regard to females and males. (Rush, 1980; Symonds, 1978) women are socialized to be more aware of other's needs and offer protection to others (Finkelhor, 1986); and sexual touch with children is more condoned by male culture than by female culture (Rush, 1980). Other feminist writers might agree that it is the "socially sanctioned authority" (Finkelhor, 1986; Palczewski, 1992) of males that creates an environment ripe for exploitation of both women and children. These explanations for females as the abused might also be construed as justifications for females as the abused. This researcher rejects insinuations that makes are little more than socially sanctioned sexual power mongers and offers other, less offensive, reasons for the reported prevalence rates of childhood sexual abuse in regard to females and males.

Scholarly biases. First, sexual abuse literature admits to a negative bias toward even examining sexual abuse prevalence rates in boys (Bass & Davis, 1988; Finkelhor, 1986; Salter 1988). In what is considered a comprehensive examination of over 300 pages of the treatment of child sex offenders and their victims, Salter (1988) dismisses the validity of male victims by page 24 in asserting that, since prevalence of adult male against child female is more the case, only female pronouns (as this reflects the majority) will be used to describe sexually abused children. This pattern is followed in much of the sexual abuse literature (Alcoff & Gray, 1993; Bass & Davis, 1988; Finkelhor, 1988). The sexual abuse research admits to a focus upon females as significant in much the same way as many other types of studies, medical studies for instance, focus upon males as significant. The question is, if only females are looked at, would it not stand to reason that female prevalence rates would seem disproportionately higher?

Reporting of sexual abuse. Another possible reason for the disproportionate differences in prevalence rates between females and males is the strong social pressure not to report sexual abuse in the first place. Most cases of sexual abuse do not come to the attention of any child welfare agency or any professional. The nature of the problem - its secrecy and shame, the criminal sanctions against it, and the young age and dependent status of its victims - inhibits discovery and discourages reporting (Finkelhor, 1986, p. 18). Reporting sexual abuse for either sex is greatly discouraged. However, if one must report sexual abuse, society seems to prefer that it is the female, rather than the male. Alcoff and Gray (1993) discuss the additional discouragement males (both adult and child) receive by society at large in regards to the reporting of or admitting to childhood sexual abuse.

Homophobic intimidation. Homophobia operates to intimidate male survivors from speaking out, although as one authority puts it, "A child molester is neither heterosexual nor homosexual. He is a child molester" (Sanford, 1982). The ideology of muders also shames male survivors to such an extent that they are less likely than females to tell
she was comfortable proceeding. Finally, the participants were informed that this was not intended to be any type of therapy and that it was crucial they have the consent of their therapist to participate in this study.

Discussion and Results

Complying with the above principles of data collection, where the participants co-create the direction of the study, came to require that the study shift its focus. The original intent of this study was to examine the significance and meaning of art in the lives of these particular individuals. The artwork ranged from poetic, fiction and non-fiction writings, to sculpture, fabric work, collages, needlework, photography, and painting, to name but a few. Just as sexual abuse is “very democratic in its social class distribution” (Finkelhor, 1986, p.18) so were the individuals (all but two were female) who participated in the art show. The artists ranged from young adults (late teens and early twenties) to mid-life and older, and came proportionately from all walks of life and all ethnic groups. The purpose of this exhibit was to bring a voice to the secrecy and shame that contribute to the “subsequent problems” referred to by clinicians. Therapeutic art was intended to help the artists to expand, understand, and express the concepts of self which had become like prison walls and through this understanding to change the outward behaviors and dysfunctional communication patterns that had become so problematic to their lives.

The original intent of this study: to examine the significance and meaning of art in the lives of these particular individuals was transformed into an examination of a process of self-healing. Just as the original purpose of this study became altered with the additions of the participants’ co-creations, so did the label “participant” begin to change. At this point in this paper, the term participant will begin to change to the term Expert I-witness. But separate discussions (each lasting from one to three and a half hours long) were carried out over a period of four weeks. The discussions were conducted in the homes of the participants. The researcher made every attempt to keep within the “Guidelines of Feminist Scholarship” (Barthel-Hackman, 1992, p. 7) supported by feminist researchers (Campbell, 1988; Daly, 1991; Foss & Foss, 1988 & 1989; F ., 1984; Langellier & Hall, 1989; Nelson, 1989; Strachan, 1991) while carrying out the discussions. Respect for participants feelings, perspectives, and human rights were conspicuously present during the interviews. The discussions were regulated and paced by the participants rather than by the researcher. Additionally, the original purpose and direction of the study were made clear at each phase of interaction. The original purpose and intents of the study were described as follows: The study looks at the artworks used in the art show and interviews the artists of the works in order to find out 1) what the art means to the artist; 2) the purpose of the art for the artist; and 3) how, if at all, the creating of the art assisted in the process of healing from childhood sexual abuse. Also shared with the participants were the perspectives used in carrying out and writing the results of the study: the study will be carried out using a feminist perspective, which means that the participant co-creates the direction of the study and is not used as a subject/object. The participant was told that she would have total say as to whether a topic/question would be pursued, that she was requested to acknowledge when she was uncomfortable with the direction of any questions, was encouraged to make any suggestions or observations regarding what should or should not be discussed, and was the deciding factor at all times as to whether or not
often, they risk re-victimization from stigmatization when they disclose their childhood experiences (Alcoff & Gray, 1984; Bass & Davis, 1988; Best, 1990; Saller, 1988).

Childhood sexual abuse shares torture's potential for lingering scars. Those who have experienced childhood sexual abuse experience similar, and often as profound, aftereffects as those who have endured what is often perceived as legitimate torture or victimization.

Effects of childhood sexual abuse

In the book, Sourcebook on childhood sexual abuse, David Finkelhor (1986) describes how childhood sexual abuse is unfailingly associated with "very disturbing subsequent problems in a significant portion of its victims" (p.163). A partial list of the subsequent problems include: feelings of anger and hostility, persistent anxiety, feelings of betrayal, depression, feelings of fear, substance abuse, higher risk for re-victimization, sexual dysfunction, feelings of guilt and shame, numerous physical symptoms, promiscuity and prostitution, poor self-esteem, and interpersonal problems. While survivors of other types of trauma are known to experience some of the same reactions as those who experienced childhood sexual abuse, childhood sexual abuse is different because it exposes the child to all the variables of "traumagenic dynamics" which incorporate traumatic sexualization, stigmatization, betrayal, and powerlessness into a conjunction, and thus, "make the trauma of sexual abuse unique" (Finkelhor, 1986, p.180).

Sexual abuse enables the presence of all these traumagenic dynamics (traumatic sexualization, stigmatization, betrayal, and powerlessness) to come together and distort the child's (and future adult's) sense of self in all the following ways: the victim's self-concept, world-view, and affective capacities are distorted; the perpetrator's inappropriate and interpersonal shaping of sexual feelings and sexual attitudes distort the victim's sense of sexuality, a lingering sense of betrayal is instilled reducing the victim's ability to trust, an enabling sense of powerlessness is created, and the child's sense of their own value and worth is distorted when stigmatization occurs by causing negative connotations such as badness, shame, and guilt to become incorporated into the self-image (Finkelhor, 1986).

Unlike the scars or tattoos other survivors might wear, childhood sexual abuse rarely leaves any outward physical signs. Instead, the scars left from childhood sexual abuse exist deep inside within the most fragile and defining part of each of them - in that part that defines the sense of self. As such, the aftereffects of childhood sexual abuse manifest themselves "...primarily in the realm of social relationships"(Finkelhor, 1986, p. 11).

Victims

The term, "sexual abuse survivor" is but one label applied to one who has lived through the physical and emotional traumas associated with childhood sexual abuse or molestation. Another term is "victim." A victim is "one acted upon and adversely affected by a force or agent," one that is injured, destroyed or sacrificed under any of various conditions," one that is subjected to oppression, hardship or mistreatment," and "one that is tricked or duped." (Webster’s, 1981, p.1295). While these definitions would apply to a child while he or she is experiencing the abuse, the definitions may or may not apply to the adult as she or he attempts to work through the aftereffects of the attack. The participants defined being a victim as a phase in the healing process that is left behind, where one does not remain if healing is to continue.

I know, I can stay victimized and I can keep blaming, or I can move on. It's really a choice, and I didn't know that for a long time.  

We had to shove all the emotions down. To go through this cord torture or victimization.

Just as those who experience other types of traumas experience ongoing disturbances in their lives, adults of childhood sexual abuse may continue to suffer from the effects of the abuse, often, for the rest of their lives. To continue to label the adults of childhood sexual abuse as victim long after the abuse has stopped is, according to the participants in this study, erroneous unless the individual's behavior merits the label.

If the participants of this study do not qualify as survivors because, as each of them put it, "everything is not all right," and, if they have not continued to act out the victim role, then how should they be named? To answer this question, the researcher examined the function of the discourse of the participants in this study. Through the medium of the art show and within their separate discussions as part of this study they demonstrated a participation in a formal dialectic about the effects of the childhood sexual abuse and the healing process each experienced. Luebbers and Condit (1985) define the function and goal of dialectical discourse as "discovery, revelation, and presentation of truth." (p. 93)

Here, truth does not refer to absolutism, but rather . . . to recall the everyday distinction between fact and fiction. Fictions are symbolic constructions that bear no necessary relationship to the external world as experienced by humans, while facts are symbols that represent empirically verified phenomena. . . Typical of such narratives are the storied events that one finds re-presented in historical treatises, news reports, and eyewitness testimonies (italics added). (p. 93)

The function of dialectical discourse is to "provide information for human use" (Luebbers & Condit, 1985, p. 93). Courts of law traditionally place high credibility on eyewitness accounts of violent crimes such as murder. The Wigmore on Evidence, Trials at Common Law (1978) cites numerous precedent cases where eyewitness testimony for the charge of homicide, or fact of death (a.k.a.: witness of death or homicide, a.k.a.: corpus delicti) decided the outcome of the litigation (United States v Wood; Commonwealth v Gibson; United States v Washington). Eyewitness accounts of the
sexually abused, however, have historically been devalued and disregarded (Alcoff & Gray, 1993; Bass & Davis, 1988; Finkelhor, 1986; Saltar, 1988).

For the participants and artists in the art show, the function of the art was to provide a perspective of sexual abuse that served to validate and lend credibility to the expressions of those who had witnessed the crime firsthand and had lived the ongoing effects of sexual abuse.

Barbour (1993) defines "knowing about" (p. 10) as learning about something in a topical manner, something outside of our immediate experience (such as studying and researching about childhood sexual abuse but ever experiencing it) about which we may have analytic knowledge. Analytic knowledge is gained in universities, through studying, and by learning to switch from the particular to the abstract and conceptualize the particulars in different ways each time circumstances change.

"Knowing" (Barbour, 1993, p. 10) is yet another facet of learning that incorporates the experimental. Experiential learning is something one gets by doing. By doing, one learns to recognize the feelings and actions associated with the experience (such as when one learns successful coping strategies as a child that may later harm the adult). Barbour maintains there are certain things one cannot learn to do without personal experience and that more learning can happen if the analytical can be made experiential and vice-versa:

...everyone [learns] better if they could be made to participate in their learning and take some responsibility for it ... cognitive learning could be enhanced if it could be combined with experiential learning in order to create a lasting change in the person and make the learning an enduring part of them. (p. 11)

If people both "know" experientially, from experience, and "know about" from analytical training to reorganize the concept, then they are in a position to know more about the topic. No one would dispute that the former objects of sexual abuse "know" sexual abuse. The issue becomes clearer when one asks how that "knowing" can be enhanced with "knowing about" through education and training. Analytical training helps the adult to reshape the concepts with changing circumstances such as growing up or leaving the abusive situation. Just as the school-trained experts of sexual abuse may only "know about" and not "know" sexual abuse, many sexually abused only "know" without "knowing about" sexual abuse.

Each participant in this study proved that not only did they "know" sexual abuse because they lived it, but each had also educated themselves, both formally and informally, "about" sexual abuse. Thus, the participants become what this researcher calls Expert I-witnesses rather than simply "victims," "survivors," or "witnesses" because they have gone beyond simply experiencing, surviving, or witnessing childhood sexual abuse and molestation. In addition to traditional psychotherapy, counseling, and group therapy, these individuals have spent from 5 to 10 years studying the literature, researching and analyzing their own internal processes of healing and those of others. Each exhibited high levels of understanding and knowledge of the basic principles discussed within the literature, often citing texts and offering additional sources to the researcher. They have experiential learning about childhood sexual abuse by living the phenomena, as such, they "know" childhood sexual abuse. However these individuals, have progressed further, adding to their knowledge a "knowing about." Thus, they have released themselves from previously learned successful, abuse-centered, survival skills by adjusting and responding to continuing life with new forms of successful coping behaviors designed for non-abusive environments.

information and must learn to re-order the manner in which he or she recalls the information.

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The Healing Process

One aspect around which the content of the discussions with the Expert I-witnesses centered were the vivid descriptions surrounding their art, their motivations for the art, and the process of creating the art. A more over-riding aspect were the narratives of how each had journeyed through certain behavioral, feeling, and self-talk phases before they ever began thinking about doing art. They reported how traveling through these phases helped them reach a point where they could define clearly within themselves their former experiences and translate those experiences into visible, tangible, symbols of the effects childhood sexual abuse had upon their senses of self. Thematic and content analysis for repetition, recurrence, forcefulness, reinforcement, properties, and self-reflexivity revealed consistent evolutionary patterns of behavior, interaction, and self-talk. The Expert I-witnesses described what appeared to be five distinct behavioral and self-talk stages through which they had traveled and revealed loose time periods for each stage. The labels attached to the stages are not their words. The labels were designed by the researcher as a means to assist with the synthesis and interpretation of identified components. Neither did the participants claim expertise. Rather, the labels are indicative of the described behaviors and self-talk that took place within each stage. The stages identified have been named: 1) Victim, 2) Survivor, 3) Witness, 4) I-witness, and 5) Expert I-witness. Following are descriptions of each stage with narrative examples of the behaviors they experienced in each stage.

The victim stage. The victim stage is marked by acting without understanding. The Expert I-witnesses reported that throughout this stage their interpersonal relationships were highly dysfunctional and they experienced self-destructive behaviors.

Things just fell apart and I had a suicide attempt. I could no longer hold my job and I really didn't know what was wrong. I felt crazy all my life but I didn't know why. My husband and I separated and I was strongly urged to go to therapy for deep depression and at the time I didn't realize that I was suicidal.

I always knew something was not appropriate about the abuse. I didn't put it in the category of abuse. I didn't know what it was, so I didn't think of it as abuse. But my life was all screwed up. I drank heavily for a few years too, so my liver is [damaged].

Analysis

Four out of the five reported that they did not have conscious memories of the actual abuse during the victim stage but they knew that "something wrong" was at work in their lives. They described how, although it may have been 20, 30, 40 or more years since the actual abuse, (at that point) the abuse was still controlling their behaviors and their quality of life. There are long term effects... relationship problems. My sister's failed marriage, mine... I've had a lot of bad relationships.

I would say to myself "God, you're crazy, what are you doing thinking things like that?" Or, "God, you're crazy, you don't... like other people..." everything I thought and did I thought was crazy because I was told growing up, "Oh, you're crazy," or "You dummy, you can't do that."

The victim stage was reported to be a period of constant insecurity and doubt of every action and thought. Confidence levels were practically non-existent. According to Bass & Davis (1988) these statements are representative of times when a seemingly insignificant interaction may serve to set off "an avalanche of self-doubt and uncertainty" (p. 179).

The end of the victim stage... many sought therapy for damaged relationships, such as marital counseling or individual psychotherapy. The end of this stage was signaled by a conscious admission of having been sexually abused. When the admission occurred they engaged in what one defined as, "Really getting into being victimized" often by falling into deep depressions, acting out in self-damaging ways or perhaps feeling suicidal or actually attempting suicide.

The hardest thing for me was to feel all this pain and emotion connected with realizing you're a victim of sexual abuse. Remembering all the things that they used to do. And even connecting with the fact that emotionally that is abuse. You know, that they really were cruel and that I'm really OK. I really didn't do anything to deserve that. I felt like I was so bad and that's why they did that to me, because I deserved it.

According to Bass & Davis (1988), "Many survivors remember their abuse once they get sober, quit drugs, or stop eating compulsively. These and other addictions can effectively block any recollection of the abuse, but once you stop, the memories often surface" (p. 78). The longest of all the stages, the victim stage was reported to last from the time the abuse was perpetrated upon them until the individual remembered and/or consciously labeled the event as abuse. In the majority of the participants the victim stage lasted until five to seven years prior. This translates into victim stages that lasted 27 to 47 years in length.

The survivor stage. The end of the victim stage and the beginning of the survivor stage overlapped and were marked by the recognition & labeling of the experiences as abuse. The recognition often happened as a result of a sudden flashback, in some cases during a period of time when the couple was attending therapy for relationship difficulties. A flashback is described as an experience that involves the visual and possibly emotional re-experiencing of the actual abuse (Bass & Davis, 1988).
One night my husband and I were having sex. And he put my legs, trying something different, and he put my legs in a different position, and there I was... with my father. I was this little girl with this pretty little dress on. It was a red and white check with a little white ruffle. I had white leather shoes on, and my father... I could hear him, chuckling. And he was fondling me while I was trying to crawl back into this chair and get away from him. (And that's how it happened) [how you remembered?] Yeah, it was just right there, it was instantaneous and I was there. (And how old were you?) Two. I'm pretty sure I was two. [How old were you when you remembered?] Um, it was either '89 or '90 when I remembered that. I was in therapy originally, um, my marriage broke up. I began having nightmares and finally my first flashback, and because I was in therapy I was able to work through that and figure out what was going on.

For the participants of this study, the survivor stage lasted from 6 months to 3 years. During this stage, the survivor overfought validation for their feelings and their abuse experiences from outside authorities such as psychiatrists, social workers, or counselors. Many had not told anyone but their therapists about the abuse. During the survivor stage, the individual wrestled with choices about healing and had to face and make, according to, Hass & Davis, the decision to heal (p. 64). In this stage, the participants experienced many of the stages Hass and Davis discuss in their book, The Courage to Heal (1988) including such aspects as dealing with memories, believing that it actually happened, experiencing anger, and later, tentative disclosures to others and possible confrontations with the individual perceived to be responsible for either allowing the abuse to happen or those who actually committed the abuse. The survivors also relied almost entirely on outside validation for the correct way to heal, think, and express themselves.

You know, you grow up thinking everybody lives that way. It was only when I was in therapy when my therapist said to me, "You were an abused child," and I am like, "I was." I think I tried under the old guidelines that I had been taught, ...I didn't trust myself to do anything freely from expression. It had to be perfect and within the guidelines as I understood it.

What I remember her [the therapist] saying to me my first time that is so important to me. We were talking about something about my childhood and I apologized, and she said, "You don't have to apologize for who you are, for what you feel like, or what you believe." And I just remember, "Wow. Wow. That's wonderful." (And you believed her?) I believed her. I started going to counseling and then stuff started coming back... [the therapist] she wanted to say, "Now that is what you're supposed to do to get well."

The survivor stage seemed to act as a transitional phase. Soon, the validation from experts was not enough for the survivors. Many joined therapy groups where survivors came together to validate each other's experiences. This marked the beginning of the next stage of healing.

The witnesses stage. The witnesses stage is marked by an overt seeking out of and accepting validation of the sexual abuse experience from other sexual abuse survivors rather than relying solely on outside authorities. The participants in this study described this stage as, "not getting enough," or "not having the real issues" addressed by outside authorities.

When I was in therapy the first time and we [the therapist] were talking about my parents. We were talking one day about nightmares and I told her about my nightmare. And she said to me, "Do you think your father could have ever molested you?" And I thought about that and I thought, "I'mmm I'mmm, it's possible." And that's all that happened with that. We never talked about it anymore. She never pursued it, I never did... [then] I went to Group. And Group really... Again like the book I had picked up, The Courage to Heal, validated everything about me and everything in Group, when I would sit there... I bought books. I talked to people. Ah, and then during the midst of all that, the art show thing.

I changed from therapy, from the psychiatrist, to a clinical social worker. She has a different processing. In fact, I approached her, asking her if she would work with me. It was time for me to deal with the feelings. I noticed that with the previous doctor, the psychiatrist, it was more in my head and dealing with the pictures and the facts and working with that. I phrased it as "I've graduated" from that means of processing and dealing with it and it kind of took the space of not being in therapy. I liked her method of dealing with the feelings. I wanted to move from my head down into my body and be a whole person... I have been in one or two workshops [for the sexually abused] that she put on.

One participant outlines her progress from victim to witness. The bracketed words indicate evaluation of the stage by the researcher.

[Victim] I had a suicide attempt and I could no longer hold down my job and I really didn't know what was wrong. [Survivor] Then I started going to counseling and then, and then stuff started coming back, and then [Witness] I got into an incest survivors group that certainly facilitated moving forward.

They attended therapy groups or found others within their social circles who were also sexually abused as children. The sexual abuse experience was the central topic of their conversations. In this, they reported finding validation for their stories, validation of the "unbelievable reality" of the sexual abuse experience.

It was after I had a memory and thought, "No, that couldn't have happened. That's just so awful, it's just not possible." So when I hear stories from others of their memories and what they went through, then that helps me know, "Yes, this is possible."
he said, "Well, if that's the way you see it." I said, "Yes, that's what happened. If you believe that's how it was done, then fine. I was there."

And talking with all the other therapists and survivors...

I just wanted to spend the night there because it was like a safe haven, a place of rest and honor. Me said, "If it helps you to believe that, all right."

What happened." Me said. "If you believe that's the truth, then I'll accept it."

I feel like it's really invaded who I am as a person. And I really want for you is to get better." So, OK. I was shocked at that.

The abusers needed to silence me. That was one of the things that made me so angry. My father would say things like, "Oh, if something like that ever happened to us, oh, I'd pack my bags and leave."

At this point they began to educate themselves in regard to the literature, accepting some of the literature as true and rejecting other parts that did not fit. They also began "speaking out" and "Breaking the silence" (Alcoff & Gray, 1993) by telling their stories, confronting the abusers, and entertaining new possibilities for their futures.

For awhile I was really fearful. I don't feel "closed in," guidehnes any more. Their guidelines. I'm not in a state that's near one of his kids he tries to stay there so he doesn't have to worry about being accepted, because we were still survivors. No proof. If I'd have spoken-sec.

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I think I'd think that way now. Nevertheless. I don't need him stay even in a hotel. Well, don't know what I'd do. I told him he couldn't stay with me because I was putting a chair under the bedroom door and stuff. Even though I didn't think about it. I told him he couldn't stay with me because I was putting a chair under the bedroom door and stuff. Even though I didn't think about it.

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"You're crazy" or "No one will believe you" which causes the abused to doubt their own sense of knowing. They were no longer actively seeking validation from others, either in the form of authorities and experts or from other sexually abused individuals. "Me had nothing do to with me. So that was our way to handle it. But that was a big step. You get into a that care-taking mode and you can't do that to your own self, well...

It is toward the latter part of the witness stage when the need to speak out and local the code of silence was accompanied by a greater need for expression of one's feelings and in their words, writing, art, dance, painting, or many other forms of expression.

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Is it coming realized I could do this and tried to start doing this.

It's almost an energy that I'm ready to do. I want to create. So, I'm just listening and watching for what I can do next. I need to express myself. Any form of expression. Whether it is painting or music, or just talking. I kept things inside myself for so long that now it's like I refuse to keep anything at all inside unnecessarily.

I'm doing something I really love... Sewing was always just a hobby. Now I'm learning how to be a business woman. I never in my wildest dreams.

For each participant the art show occurred during their "I-witness" stage. They reported that the process of working through the art propelled them into the subsequent stage. The participants revealed art pieces that, without prior warning, might frighten or unsettle the unsuspecting art enthusiast. There were collages filled with faces of sad children with "empty eyes" surrounded by words such as monster, hate, agony, and power (see appendix A for collages). There were paintings that depicted eerie scenes, such as that of a disembodied, shredded, bleeding penis hanging out of the ears of a distorted male head, or a scene of a naked infant and naked women swirling in a vortex of angry dark clouds (see Appendix B for paintings).

Not all of the images were violent or disturbing, however. There were also soft, touchable pieces of art. One was a manger-like box with three weighted figures inside "for children to touch" and represented the "perfect family" that the participant had told herself for many years existed. Others included two meticulously hand-crafted wall hangings made of fine fabrics. The first was a mural depicting a lovely woman facing layer upon layer of dark storm clouds, hiding her face in her hands with her back to bright streaming sunshine and mirrored pools of rainwater. The other wall hanging was a full-height (52" - the same height as the artist), one dimensional woman, with a tight smile on her face, and on her abdomen was a small hand embroidered scene of lightning, dark clouds, and pelting rain - to represent the way the participant had attempted to hide the truth but could never quite cover it up entirely (see Appendix C for "soft" art).

Creating the art was described as a process of expressing feelings for which they had never had words. Indeed, even in their attempts to explain the feelings evoked by the actual doing of the art, they had a difficult time. However, each expressed experiencing a feeling close to joy or release at some point or realization, either at the point of inspiration, during the creation of the art, or after they had completed the artwork.

The pain of that abuse, going through the healing of that abuse, that was the hardest thing for me and my healing in this... this [wall hanging] is how I felt all my life, all this turmoil and things being tossed about... and it's like, (heavy sigh)... it's just so wonderful. It's just so wonderful to me. Um, it took me seven months to make this. It took me... The first two when I finally realized I could do this and tried to start doing this. Is it coming out okay?, and um, OK. Then I started on it. I drew it on paper and then I drew it to scale. God, it was so exciting. And I had to go find my fabric. And it took me two months to do that. It was like I was consumed by it. I couldn't eat, I couldn't sleep, I couldn't clean. I didn't want to do anything until I got that last piece of fabric on there and found that I had gone through 300 bucks trying to find fabric that was just right.

Then I got the board and just laid them [magazine pictures] randomly, laid them on, and it came out being fantastic. It was not a conscious intention on my part so I felt like it was really a spiritual deal... they were just random as far as I know. And I just thought, "Wow! this is really (laugh)... I was just shocked, that it came out that way and that it said what I wanted to say "cause I had no plan and that's just the way it came out. And of course, you know after you look at it and you think about it, it, it changes meaning at the same time. And every time you explain it, it always comes from the point of view of where you're at, at the moment and so it is a little different every time.

They were trying to frighten me into silence. He had a steel coffin and they put me into the coffin. ... Well, before they closed the lid, they said, "This is what it feels like to be dead and that's what you'll be if you tell the secret." They closed the lid so I knew they were waiting for me to panic and to scream and I didn't do that, but I did try to close my way out. And after awhile, they opened the lid and they got across what they needed to get across. So I began thinking. [for the art show], "Well, maybe there's something I could do with this. Maybe I could get hold of a coffin from a haunted house, even maybe bury it or you know, put, put that incident to rest... for me. Put it behind me. ... I began to think I could make a coffin. ... So I approached the crafts teacher and said, "I need to make a coffin. Would you teach me, would you help me?" and he said, "Yes." Um, so I would go in mornings and after school, and do this in the wood shop and we'd discussed the style and we picked a style that's called "Boot Hill". Um, and I liked that because you could see it was a coffin. It wasn't a box, it was a coffin. You knew it was a coffin. And he had me buy the wood and cut the wood and nail the pieces together. And I just loved that feel of hammering this together; and using the hands; and the energy to you know, pound in the nails and create this coffin. Um, it just felt so good that I was making my own coffin and I wasn't gonna die. Um, that was the important part. Um, so there was a true joy in actually working with the wood and building the coffin itself. Students would come in from time to time. I kept it in a corner of the wood shop and they would, "Oh wow!"

2 There is a feminist hypothesis that presumes present man-made languages cannot express Women's perceptions (Elgan, 1991; Spender, 1980)
what's that? And I'd be answering, "Well what's it look like." Well it was really clear what it was. "Wow, it looks like a coffin!" And I would say, "No, this is for me." "Ohh, really?" and they would just kind of let go of it and I didn't have to go into explanations, and everybody was comfortable with it and it was just great.

The art was reported by all to have greatly assisted in processing feelings which they could not previously express. Whether the feelings were too deep or whether there are no words to describe their feelings cannot be distinguished at this juncture. Childhood sexual abuse traditionally trains children to put their own feelings aside, down, or to ignore feelings (Bass and Davis, 1988). Did their art have meaning for them, their art was a means of therapy for me.

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itself. There is no such thing as absolute healing. You never erase your history. But you can reach a place of resolution...the healing process will continue throughout your life. You recognize that healing has brought you more than just an alleviation of pain. [and may come] to see your healing as the beginning of lifelong growth.

(p. 166, 167)

Conclusion

The participants of this study provided testimony regarding their healing process from childhood sexual abuse. Although Palczewski (1992) asserts, “it appears that the public realm is not ready to accept and hear women [sic] as both victim and survivor” (p. 54), this paper presented the sexually abused as not only victims who know, but also as expert I-witnesses who know about (Harbour, 1993). The participants provided an expanded view of what the “experts” discuss rather than simply affirming the testimony of experts.

The concept of female as victim seems much easier to accept than does the concept of male as victim. Until the possibility is entertained that child male victims are out there in larger numbers than the experts are willing to perceive, prevalence rates will continue to show unexplainable irregularities. Statistics such as those presently seen may lead to a general acceptance and a general expectation that women are the victims, in turn confirming popular misogynistic views that women are the only ones with the problems, not men. More importantly, until social science and society at large are willing to acknowledge that males can be victims of childhood sexual abuse, sexually abused child and adult males will continue to be left unhealed and hurting and possibly acting as agents in extending the occurrence of childhood sexual abuse in their attempts to deal with their own pain and suffering.

Recommendations for future studies include, first, expanding the role of expert and, second, examining the manner in which both society and social scientists view and socialize witnesses of sexual abuse. Such studies need to 1) ask the witnesses of sexual abuse themselves what occurs in their healing processes rather than telling them what they feel or what they should feel; and 2) expand the examination of the manner in which expert I-witnesses define their healing processes, and 3) search for identifiable patterns of healing rather than focusing primarily on the negative effects of childhood sexual abuse. Five expert I-witness testimonies cannot overturn numerous studies, but they do add to the knowledge of the healing processes and point to the notion that current reported prevalence rates may require another look.
References


