

# *Childhood Sexual Abuse... and BEING*

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By Susan Samila, RPP

I have lived in Perth, Ontario for almost a year. This is a land of Precambrian bedrock and glacier-formed lakes. Moving here from Toronto felt like I was coming home.

This sense was substantiated when, two days after my arrival, I was offered a 7-month contract working for the local county mental health service. In my 20 years as a front-line social worker it seemed like I had dealt with every kind of problem, with the exception of the client population of my new job: survivors of childhood sexual abuse. However, I had worked with Holocaust survivors in Toronto for 10 years and was able to quickly locate and read most recent theory on working with sexual abuse survivors. More importantly, in terms of my insights and skills, I approached the work as a Polarity Practitioner, in spite of being prevented by the regulations of the agency to touch a client or to have a client lie down.

My four-month intensive RPP training with John and Anna Chitty at Polarity Centre Colorado in 1997 introduced me to the trauma work of Peter Levine, which in turn I recognized as related to the Focusing theory and techniques of Eugene Gendlin. THE BODY HOLDS THE MEMORY, THE TRAUMA... AND THE DYNAMIC FOR HEALING.

Sexual abuse of a child is generally preceded by a range of other abuses by the same individual and/or others: neglect, emotional and physical - by parents, siblings, relatives, neighbours, or people who were authority figures or caretakers to the children. Before coming to this job I could not have imagined the pain inflicted by "ordinary people" on children, nor could I have imagined the now grown person's capacity to care and to love - and to have the will to heal.

Without exception, the survivor of severe childhood abuse feels shame, guilt, worthlessness, helplessness, anger, and without exception, the natural consequences of these are to flee from the self, finding it almost impossible to trust self and others, and to RARELY FEEL SAFE. Life patterns related to this prevailing sense of powerlessness are established. In women, re-victimization often occurs. In men, experiences of powerlessness impacts on their male identity and leads, not infrequently, to a need to compensate in some way.

Historically, in mental health facilities and prisons, persons were not asked (in history taking) if they had been abused, and more specifically if sexually abused as children. However, this question is now starting to be incorporated into information gathering, and a high correlation is being found between having been sexually abused as a child, and the retreat into mental illness or criminal behaviour.

It is important to emphasize, however, that the majority of survivors of childhood sexual abuse do live productive lives, albeit while struggling with confusion, anxiety, very low self-esteem, all of which impede initiative and frequently make for difficult relationships, recurring severe depression, and issues around trust, touch and sexuality. Indeed, as I continued my work I began to see their lives as HEROIC in the face of the history they each carried with them, the emotional struggles that they dealt with every day, their heightened sense of purpose, and desire to be loving fathers, mothers and responsible members of the community.

While every person who has been abused is an individual and must always be sensitively honoured as such in any communication and therapeutic work, it is possible to say that the two most frequent impediments to therapeutic work are the client's prevailing sense of unsafety and lack of trust in self and others. In my experience, the big hurdle in helping is bringing feelings of safety to the client. Though, this is usually accomplished fairly readily!

Following, I will describe a non-touch approach that I have used to assist clients in experiencing safety and grounding, enough to be able to connect and appreciate self, including their body, as a positive resource for healing. It will be obvious to the reader that my Polarity and non-denominational based spiritual orientation inform both me and the process (a process which is paced and shaped according to the individual client).

∞ First, I let clients know that I recognize that they have already done a great deal of healing work on their own just by coming to the decision to actively enter therapeutic work. Often, they have not recognized this or given themselves credit, so this is a beginning in raising their self-appreciation.

∞ I tell the client of “my” philosophy. That is, that each person, the client included, has profound inner resources for healing and that our job is to, together, unleash them. Many come feeling helpless and therefore, such a statement represents the beginning of their empowerment.

∞ I also share with them my understanding of energy, which I first gained from Polarity work. Just by talking about energy, I usually sense their often unconscious but palpable movement towards grounding, and a nod or gesture of recognition follows.

∞ At this point I generally focus with the client on some education around the effects of physical, emotional and/or sexual abuse on a developing infant and child. It allows the client to experience me as someone who has some knowledge, empathy, compassion and certainly no-judgement (victims of childhood abuse are typically harsh judges of themselves). The client is generally unaware of the many ways and extent that the abuse has affected them; their development, their approach to problem-solving, their relationships, and/or their work life.

∞ For most, their body has been both the betrayed and the betrayer....resulting in at the minimum dissociation from the body, and in fact frequently ongoing neglect or abuse of the body through over-eating or addictions, or in extreme situations self-mutilating actions. Women survivors often feel betrayed by their bodies because of various and very complicated physical health problems; the back and knees are frequently involved, as well as problems with digestion, reproductive organs, heart and lungs. (*All of this may make sense to a Polarity practitioner!*) Therefore, it is necessary to introduce a radical idea, that being, that the body is the reservoir for relief from physical and emotional pain, and is a source for healing.

∞ I begin to ask the client, as we sit together, an energy question that I will ask over and over until, in later sessions, the client tells me without having to be asked: “What are you noticing in your body?” Initially I have to explain this: “What sensations are you noticing; in your head, torso, etc.” *Generally in the beginning, there is no awareness of sensation below the neck unless it is pain.* Also, “Are there any feelings or thoughts or images that you are aware of?” To check in with the body is hugely challenging for some clients, like jumping off of a cliff. It is understandable and acceptable that they may not be ready to do that until greater trust has been established in me, in the process and in themselves.

∞ In about the second session I will introduce a grounding exercise, usually what I call the “chair exercise”. Readers may recognize it as an entry into meditation. This exercise seems to me, to be infinite in therapeutic potential for survivors of childhood abuse. The principle object of the exercise is for clients to experience feelings of being safe and supported, feelings which they generally did not have as children and which they may not have had as adults. The process of getting to this point is specific, and brings with it skills and awareness crucial to the healing of the survivor. For some, it is a big step to follow their breathing in their mind and to sit squarely in a chair, to actually sit on the Ischia and allow themselves to feel those bones! Next, we track sensations between the seat of the chair and their body, and the back of the chair and their body, then floor and feet, all the while breathing their weight into the chair. We then explore the questions: “Is the chair really holding you?” “Is the chair going to give way.” Sometime it takes a few sessions before the client can give him or herself to the chair and begin to “feel” being supported. Sometimes I hear said, “I never felt like this before”. This is an incredible moment for the client, and for

me. We spend time here really letting these feelings “soak” into the body and consciousness. In the 40 clients I have seen over the past year, there is only one, a client who had been on heavy psychoactive medication for years, who could get past the anxiety of being with herself in a chair.

☯ Generally, each session begins with the chair exercise. Some clients incorporate it into their home and working lives. Their skill and benefit grow and deepen with practice. Just to do this is indicative of healing, of trusting self, connecting with self, taking care of self, empowering self. They sometimes will even teach family and friends. Some speak of spiritual feelings and insights.

☯ One natural outcome in doing the chair exercise is development of the capacity to listen to and talk to self, the self as body, mind, emotions and spirit. The benefits of this seem endless: to sense what is going on internally; to begin to trust being conscious and thoughtful about what is going on; and to begin to hear wisdom coming from one's own depths.

☯ With a certain settledness, consciousness, and trust evolved, clients can begin to discern the destructive words of their incessant inner critics and learn how to protect and strengthen themselves. They can also be introduced to the notion of their own inner, innocent child and to the idea that they can protect it, maybe even eventually love it.

☯ Another useful tool for the client is to develop, through visualization exercises, a place of personal safety to which they can inwardly go when feeling threatened. One client, who was abused by a succession of authority figures, successfully uses this whenever their boss approaches. Prior to having this instant, inward place of safety, they would feel panic and anger in the presence of a superior, resulting in a troubled work life. My hope, of course, is that as their healing progress, they will feel less and less threatened by authority figures.

Some therapists believe that for the client to truly heal, they must tell “their story”, detail the abuse. I am not sure that this is always true. While I presently believe that it is not always necessary to tell of abuse in great detail, I do understand why it is important for some clients. Being abused can be very isolating, at the time, and throughout the emotional development of the individual. Therefore, to have a witness to the story counters this sense of isolation, and to have a witness or witnesses listen sensitively, supports the possibility of growing trust in others. When clients do come to a session with a sense of urgency that they need to tell their story, I trust their sense of timing. It is my concern however, that they move into their story with a sense of their own strength and safety.

Peter Levine's approach, which many Polarity practitioners are familiar with, is dependent on clients having had, at some time, a period or experience of security and power. However, clients I see, frequently were neglected or abused from the earliest age, so they have no memory and accompanying body experience of security and/or of being in their power. In these cases, experiencing the “chair exercise”, and the feelings it can bring of safety and support, may provide individuals with the resources to prevent retraumatization in the telling of their stories. Of course, if they have also acquired a visualized safe place, they are further resourced to tell their story.

So, this is energy work taken into a setting where only fairly traditional counselling approaches have previously been allowed. During the time that I was with the county mental health agency, my clients became known for not missing their appointments and maintaining their commitment to their healing work. Many clients reported and demonstrated a considerable reduction in personal torment, paralleling an increased connection to self, to their own energy, and their own unique value.

If I could offer any direct words of advice to other Polarity practitioners, they are to first, in an early interview, ASK the client if they had experienced abuse as a child, and second, ask if they had been sexually abused as a child or as an adult. I have met people who said, as they cried with relief, “I have seen many doctors and therapists, and you are the first to ask.”

You may sometimes hear diminishing statements such as, “Oh well, he (or she) didn’t mean anything”, which may indicate both a dissociation from self and a diminished sense of self-importance and/or self-worth. Another statement sometimes made is, “I should have stopped it”, which may imply an underlying belief that a child should be powerful and wise enough to have halted the actions of an adult. Education about the effects of abuse on a vulnerable child is generally crucial to the client’s process of self-acceptance and becoming.

Each client, in their own way, is inspiring to me, and I am very grateful. In one of my recent groups, a man said, “I feel like I am becoming who I am, and I think I even like who I am”. Others even nodded in agreement!

While my work contract with the county mental health agency has ended, I continue to co-facilitate a weekly therapeutic group for male survivors of childhood sexual abuse. In September I will be opening a private practice in Perth, where I hope to continue some of this work, with the added potential of touch-based, Polarity and craniosacral therapy.

*Susan Samila has been a social worker for over 20 years, working in many fields - from crisis intervention in city-centre hospital to community palliative care. From 2002 to December 2008 her work was divided between private practice and counsellor for the county sexual assault and domestic violence program where again her background in Polarity and energy therapy informed the way she worked with clients. She is now retired*