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Jamecia Almarie Estes
An Exploratory Study on the
Role that Christian
Spirituality and the Black
Church Play in the Healing
Process of Adults of
Childhood Sexual Abuse

ABSTRACT

This qualitative research study was designed to explore the route toward healing from childhood sexual abuse. It focuses on adults who employ Christian spirituality and seek counseling from the Black church. The objective of this study was to investigate perceptions of how the Black church implements services for this abused population. This study interviewed pastors- of a Black church- and counselors (N=6), exploring their beliefs about healing, and analyzing interventions implemented within the therapeutic relationship with a survivor of childhood sexual abuse (CSA). Through personal narratives participants expressed their opinions about Black church, as a cohort, in addressing the issues of CSA. The majority of participants (n=5) believed that the Black church should do more work in confronting the issue of CSA, although they themselves have made strides to bring more awareness to this topic. Many believed (n=6) that making referrals to professional resources outside of the church (i.e. talk therapist, medical doctors, ect.) could be a crucial part of the healing survivors experience. Other elements of healing included the survivor forgiving their abuser, implementing prayer, scripture reading, and the use of cognitive behavioral therapy techniques. There was great difficulty in getting participants for availability reasons and fear of breaching confidentiality. The results of this study serve to benefit the field of clinical social work by way of educating clinicians on the experiences CSA survivors have in pursuing help

from the Black church. It also serves to give insight as to how individuals utilize their spirituality to usher them into healing.

AN EXPLORATORY STUDY ON THE ROLE THAT CHRISTIAN SPIRITUALITY
AND THE BLACK CHURCH PLAY IN THE HEALING PROCESS OF ADULTS OF
CHILDHOOD SEXUAL ABUSE

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

Jamecia Almarie Estes

Smith College School for Social Work
Northampton, Massachusetts 01063

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CHAPTER I

INTRODUCTION

The focus of this study is to explore the healing process of adults who were victims of childhood sexual abuse. This topic has been widely studied and researched by many professionals of varying areas of interest. The more defined purpose of this study is to explore and look specifically at the role that Christian spirituality in the Black church, will play in the healing process of adult victims of childhood sexual abuse from the perspective of a pastor from the Black church or counselor who has counseled a member of the Black church.

There has been published literature on childhood sexual abuse from many perspectives. Researchers have analyzed the lives and psyche of the perpetrators (Holeman, Myers, 1998; Becker, 1998) and the effects of childhood sexual abuse on adult female survivors (Romans, Martin, Mullens, 1996). Research on the issues that adult men have struggled with has been explored as well (Lew, 1990). Although the sex of a victim of childhood sexual abuse is an important fact to take note of, this study veers to direct its attention more specifically to the survivors seeking help in the Black Church. By looking at this understudied population within the Black Church, the study will focus on how the survivors spirituality enables them to find healing through the modality of counseling.

The Black church has always been the central force in the lives of many Black people (Boyd- Franklin, 1989) since the end of slavery; and has also served as a home-base to provide its members with resources that range from the bare necessities one needs

for survival to the physical, mental, and spiritual health. Traditionally, within the Black church, the pastor(s) has been sought out, by members, as the primary source to assist them in finding resolutions to the many personal issues that they may encounter. Young, Griffith, & Williams (2003) when researching Black Churches, state:

African- American churches place a high priority on the healing of psychological ills. Much of this healing takes place at liturgical rituals through which participants identify psychological symptoms that are erased or are replaced by positive feelings. However, very little is known about the quieter healing ministry of pastoral counseling work conducted by African- American Clergy (p. 688).

More pointedly when it comes to African- American community seeking out mental health services, due to the stigma and mistrust associated with mental health agencies (Boyd- Franklin, 1989; Cook, 1993; Wiley, 1991 as cited in Cook & Wiley, 2000), the respected and trusted Pastor has been consulted instead, being seen as wise in giving counsel, whose words are of great influence to the congregant or individual seeking help. This is why the clergy in the Black church will be the primary source for information during the course of this study. However, when discussing the many forms that sexual abuse may take, African- American churches tend to neglect confronting this issue (Cook & Wiley, 2000). In the event that the avoidance of this issue by the Black Church also stands true for this study, this topic of research beckons the attention of secular therapist when sought out by this population. At the conclusion of this study, there is an expectation that the Social Work profession will be better educated about how the survivor employs this form of Christian spirituality from the Black Church to aid them in healing from sexual abuse experienced in childhood. Also along with this education, professionals can become better equipped in working with survivors by understanding the nature of previous counseling relationships; the growth or healing that occurred, or the

lack thereof; and formulate some sort of template or either better assess where a survivor is presently in their quest for renewal.

The following research will, at the beginning, will look at childhood sexual abuse and its general affect on its victims and their spirituality. Then there will be an in depth look at formulation and history of the Black church and its beginnings in the exercise of Christian spirituality as well as their current position in addressing the issue of childhood sexual abuse. Other issues will be questioned and explored in hopes to add to the current knowledge base of the social work profession about the experiences in which potential future clients- who have previously sought help from the Black church- have experienced.

CHAPER II
LITERATURE REVIEW

Introduction

The United States has exclusively been the birthplace of the unique cohort labeled as, the Black Church. The Black church has historically been a population where many Black Americans have looked to for support economically, emotionally- and more pertinent to this study- spiritually (Adksion-Bradley, Johnson, Sanders, Duncan, Holcomb- McKoy, 2005). Over the lifespan of the African- American church, its expression of spirituality is one of the chief characteristics that make them stand out. Attention will be given to the ways in which the Black Church helps adult survivors of childhood sexual abuse recover through the individual counseling modality.

Survivors of childhood sexual abuse suffer much. In addition to mental distress, psychological functioning, inter-relational skills, religion and spirituality all bear bruises when sexual abuse is experienced. Out of the aforementioned faculties listed, the use of spirituality to help heal from the abuse acts as a protective factor (Gall, Basque, et al., 2007) enabling the victim to recovery. This study will look at the use of spirituality in Christian religion, which is properly referred to as, Christian Spirituality, and how the African- American Church assists adult survivors in their pursuit towards healing by employing their spirituality.

This chapter will first examine the affects of childhood sexual abuse on its victims. There will be a glance at the role and effect of spirituality in the survivors' life and a short history of Christian spirituality followed by the history and role of the Black church in the lives of its congregants.

Childhood Sexual Abuse

For the purposes of this study, childhood sexual abuse will be defined as sexual contact with a child that occurs as a result of force or in a relationship where it is exploitive because of an age difference or caretaking responsibility (Finkelhor, 1991). Anyone who was sexually abuse under the age of eighteen, the abuse will be considered as child sex abuse for this study. There are many important factors involved in recovering from childhood sexual abuse. Childhood sexual abuse (CSA) is a major clinical issue in the United States (Morrow and Smith, 1995; Runyon, 1998; Ganje-Fling, McCarthy Kuang, and Houg, 2000). In fact, there are approximately 39 million survivors of childhood sexual abuse living in America today (Abel, Becker, Mittelman, Cunningham-Rathner, Rouleau and Murphy, 1987). With a statistic like the aforementioned, there is much wondering about the affects of such violations against so many individuals on a culture, at the macro level. There also lies the curiosity of the how individuals' interpersonal relationships, way of living and interacting with society, and worldview, affects- not only those around them- but how they view themselves and their place in the world. More introspectively, one would wonder about the mental status of such victims. How do they function in society? What kinds of coping skills are developed/nurtured in order for the survivor to function well? How do they deal with the multiple injuries (i.e. psychological, spiritual, physical, and emotional) that they have incurred from sexual abuse experienced in childhood? How are intangibles like trust, feelings, and thoughts- and more importantly for this study- spirituality, approached, orchestrated, and integrated

into ones' life for someone who experienced childhood sexual abuse? All of these questions are worth pondering and are aim of exploration for this research.

Victims and Common Themes

There is a natural assumption that victims of childhood sexual abuse are female (Ganzevoort, 2002) possibly due to the fact that abusers are predominately male (Finkelhor, 1991). Studies reveal that women who are sexually abused as children have rates of mental health impairment almost twice as high as non-abused women (Finkelhor, 1991; Bifulco et al, 1991; Fergusson & Mullen, 1999 as cited in Spataro et al, 2004). However, the negative impact on the psychological, physical, and spiritual health of both men and women are pervasive (Murray- Swank and Paragament, 2005). There is an uneven balance of literature published about men and women survivors of childhood sexual abuse. There seems to be more studies researching the affects of childhood sexual abuse on adult women, than there is about adult male survivors of childhood sexual abuse.

Literatures on survivors of childhood sexual abuse, despite race, ethnicity, religious/spiritual affiliation, or sexual orientation, share certain themes. These themes being: feelings of anger and rage, a feeling of specialness from their abuser, confusion around the role of responsibility in the abuse, sexual disturbance and ambivalence, and feelings/ reactions of loss and hope (Alaggia and Millington, 2008). Other researchers report themes of distance or proximity to God (i.e. feelings of being close or far away), in the narratives of victims, when retelling stories of their relationship or view of God, feelings of power/ powerlessness, and feelings of guilt/innocence around current sexual behavior (Ganzevoort, 2002). Ambivalent feelings of trust and mistrust (Reinhart and

Smith, 1997; Ganzevoort, 2002) have been noted as a theme that may occur amongst survivors. This notion is very plausible seeing that many people who are victims of childhood sexual abuse are abused by someone they know- be it a family member or a friend of the family (Doxey, Jensen, & Jensen, 1997), individuals who hold the initial deposits of trust in a child's life.

Overcoming shame is another major component in the pursuit of full recovery (Frazier, 2000). Usually, shame and feelings of guilt accompany one another with childhood sexual abuse. Childhood sexual abuse can produce intense feelings of shame (Feiring & Taska, 2005). This shame the victim feels can manufacture self-loathing feelings (Kim, Talbot, & Cicchetti, 2009), which also could cause low self-esteem. In its attempt to veer from affect-producing experiences, shame causes the individual to hide or shrink from view, create flat affect, or become angry and defensive even to the point of violence (Tangney, et al. 1996 as cited in Kim, Talbot, & Cicchetti, 2009). The shame that victims of childhood sexual abuse feel is often a byproduct of projective identification from the aggressor (Frazier, 2000).

Projective identification is one of the most- if not the most complex defense to understand. Unlike other defense mechanisms, projective identification is a phenomenon that occurs between two people: the projector and a recipient (Ogden, 1982 as cited in Frazier, 2000). The projector- or in this case the abuser, aims to get rid of something unacceptable or uncomfortable within himself but does not want to lose this part of himself completely, which is where the role of the recipient becomes important (Berzoff, Flanagan, & Hertz, 2008). The recipient- who is the victim- feels pressure to think, feel, and behave in a way that matches that of the abuser (Ogden, 1982). Once the abuser

recognizes the process of his feelings, thoughts, and behavior that is mirrored by the victim- a re-internalizing of shame takes place completing the process of projective identification. This pendulum of transference initiated by the abuser leaves the victim imprinted with the traces of shame. The emotional and physical violation of the autonomy of the victim; leaves the victim acting as a container for the shame of the abuser due to the fact that the victim kept their bodies to themselves. The unacknowledged dignity of the body, from the aggressor, for the victims' body engenders internalized shame for the victim. This shame is precipitated in the victim due to their believed failure to recognize, or not acknowledge, that the aggressor carried an internal desire for the body of the victim (Herman, 1992 as cited in Frazier, 2000). After the aggressor experiences the shame that is felt by breaching the physical boundaries of the victims body, the victim then takes in that shame that is projected from the aggressor.

Other long- term affects that are most clearly associated with childhood sexual abuse are depression, alcohol and drug abuse, suicidal ideation, and repeated victimization (Finkelhor, 1991). These affects seem to be the most common. Alcoholism and suicidal thoughts are twice as more likely to plague those abused in childhood than those who were not (Briere & Runtz, 1986). Anxiety was also found to be an emotional problem among adult survivors (Briere & Elliott, 1994; Spataro et al, 2004). Most of these problems emerge later when the victim becomes an adult, and not necessarily in childhood; but this does not mean that it nullifies the chance of them occurring during the year(s) of abuse (Doxey, Jensen & Jensen, 1997).

Given the tabulation of CSA's after effects listed above, it is important to note that not every survivor suffers serious long- term affects, and the results of the abuse vary

from person to person (Valentine & Feinauer, 1993). About 40% of survivors have after effects that are serious enough to require therapy in adulthood (Browne & Finkelhor, 1986), which leaves millions of survivors leading successful lives with few negative affects (Valentine & Feinauer, 1993; Feinauer, 1989). As found in the Kinsey study conducted by Gagnon, reports show that some women cope well after the abuse, and do not seem to suffer as traumatically as others (Gagnon, 1965 as cited in Valentine & Feinauer, 1993). The explanation in these findings may be attributed to the role that religion has in the lives of survivors (Doxey, Jensen & Jensen, 1997). Doxey, Jensen, & Jensen proposed that religion was used as a venue to assist victims in forgiving their perpetrator to show that they were at fault for the abuse, rather than themselves (1997). Through simple observation, Doxey, Jensen, & Jensen saw that there was not much research produced about the role that religion played in helping victims of childhood sexual abuse cope with the traumatic event(s) at a later time in their lives. This knowledge served as the impetus for exploring if a victim of sexual abuse denominational membership and religiosity are associated with better mental health indicators later in life (1997).

Spirituality and Its Impact

In addressing, or even acknowledging spirituality when working with individuals, Carl Jung proposes that a universal concept of spirituality exists that, when explored, can enable a person to see beyond differences in religious beliefs and philosophical viewpoints (Jung, 1933, 1958, & 1959 as cited in Sermabeikian, 1994). When it comes to ethics in the field of Social Work, spirituality is an important feature to consider seeking further education in (Sermabeikian, 1994) because it may be an area of importance for

clientele. A client's use of spirituality as a weapon in their coping arsenal is precisely why spirituality must be acknowledged (Sermabeikian, 1994).

One part of a person that is affected after a sexually abusive incident is their spirit and how they relate to spiritual matters. Spirituality can be seriously damaged by sexual trauma (Ganje- Fling and McCarthy, 1996). Reestablishing hopefulness and trust in one's spiritual source, and regaining self-confidence and spiritual worthiness are just a few examples of ways in which spirituality could be repaired (Ganje-Fling, McCarthy Kuang, and Houg, 2000). One's spirituality is used as an aid or support in helping the victim make some meaning out of the abuse they suffered (Gall, 2006).

Ganje- Fling and McCarthy (1996) defines spirituality as “a complex, multi-faceted construct that involves ultimate and personal truths that individuals hold as inviolable in their lives” (Ganje- Fling & McCarthy, 1996, p. 253). Individuals- particularly women- who have been sexually abused show a lower level of religious and spiritual functioning than those who have not been sexually abused in childhood (Hall, 1995 as cited in Reinhart & Smith, 1997). This means a decreased level of involvement in religious activities is experienced, along with a break down in normal functioning of that individuals' spirituality. Many challenges such as low self- esteem, despair, and mistrust hinder spiritual development in (Reinhart & Smith, 1997) these survivors.

In their research, Reinhart and Smith found that victims with a higher level of education are more receptive to spiritual openness and acceptance. Spiritual openness refers to an individual who gives special attention and interest to the unseen forces that attend to their spiritual needs and development; and acceptance of these forces with no

specific ties or preference of a certain religion. The emotional abuse experienced, by victims of childhood sexual abuse, positively correlates with spiritual openness and acceptance (Reinhart and Smith, 1997). This means, the more emotional abuse a victim of childhood sex abuse suffered, the more likely that individual would be open to trying different forms of spirituality to seek healing.

However, generalizability was a limitation of the aforementioned research study. The results were not representative of most survivors who are sexually abused in childhood due to many factors. For example, the educational level and race of the participants of the study did not match that of the general population. Out of 266 participants, 96% of them were White, 84% were college graduates, and 51% were married. Similarly, other studies that have been conducted on survivors of childhood sexual abuse, involved mostly adult, White female participants (Bogar and Hulse-Killacky, 2006; Gall, 2006; Wade, Worthington, and Vogel, 2005). A representative sample would include an even amount male and female victims, as well as, individuals from all socioeconomic statuses, educational and racial backgrounds. This study will attempt to gather information from a population that understudied, and attempt to provide a broader view of how childhood sexual abuse affects others not so aligned with mainstream culture.

Spirituality and Religion

For the most part, when entertaining discussions on spirituality, the subject of religion seems to loom in the atmosphere; and visa versa when speaking of religion. Distinguishing the difference between religion and spirituality is important for this study.

Spirituality and religion seem to go hand in hand. Clearly categorizing the two is important in measuring and discerning exactly how much each contributed to enabling the survivor to cope with life after the abuse. Religion is usually defined broadly as having a sense of community; but spirituality, seemingly focuses on the individual (Ganje-Fling, McCarthy Kuang, & Houg, 2000) connecting with God, a higher power, or unseen forces. Those who seek counseling- whether they seek counseling as an aid to help heal or cope with being sexually abused in childhood or not- have a clear distinction between religion and spirituality (Ganje-Fling, McCarthy Kuang, & Houg, 2000) for the most part. This study will focus more on the role of spirituality, rather than that of religion. However, due to the fact that spirituality is commonly expressed through religious activities (Boyd-Franklin, 1989; Cook & Wiley, 2000), religion cannot be fully ignored.

Spirituality, for the survivor, can provide a safe context for those healing from sexual abuse, and serve as a protective factor against the subsequent development of depression, shame, and interpersonal difficulties (Reinhart & Smith, 1997; Gall, Basque, Damasceno- Scott, & Vardy, 2007; Valentine & Feinauer, 1993). The active involvement within their personal spiritual community is deemed as a crucial turning point in the lives for some survivors and was influential in their view of themselves as being worthy and valuable individuals (Valentine & Feinauer, 1993).

In taking one step back and simply looking at the task of defining spirituality, we see that spirituality is everything that pertains to the human spirit (Moody, 2005). This comprises the psychological and emotional components of a human. Seeing that ones spirit is so interconnected with the body, it is not a stretch to note that mental and

spiritual health can directly impact the physical body, as manifested by psychosomatic symptoms. Religion can be seen as a template, a set of rules or system of beliefs for expressing ones spirituality. Involvement in religious practices such as individual and group prayer, reading passages from the Holy Bible- again individually or with a group- or attending a religious meeting can be measuring tools for spiritual involvement for this study. However, participation is not a guarantee for one to develop spiritually. By spiritual development, it is meant that one would experience a growth in their ability to gain spiritual resilience and strength from their spirit that would enable that person to function better psychically and emotionally. Some adults' spiritual development may be influenced by developmental failures. Adults who progress to higher psycho-spiritual stages have found internal resources enabling them to develop a more mature spiritual commitment (Genia, 1991). Undertaking the task of measuring something intangible like spirituality can be nearly impossible due to its existential nature. Due to the fact that spirituality is not concrete material, the only valid way it can be measured is by the qualitative measures (Daaleman & Frey, 2004) via the reported change it produces in the person and the change observed by others. The influence that spirituality has needs to be assessed on an individual basis, not to be compared with others, for many reasons; but one obvious reason is due to the fact that each person begins at a different level in terms of involvement and connectivity with their spirit.

Christian Spirituality

For focus and clarification about the purpose of this study, “Christian Spirituality” will be defined as, “the experience of transformation in the Divine- human relationship as modeled by Jesus Christ and inspired by the Holy Spirit” (Perrin, 2007, p.32). Christian Spirituality is the quest for a fulfilled and authentic life that involves taking the beliefs and values of Christian religion and weaving them into the fabric of ones’ life (McGrath, 1999). The Holy Spirit in the Christian religion is the Spirit or Presence of God Himself dwelling within the soul or body of humanity.

Since the inception of the Christian religion, the definition that believers have ascribed to the word “spirituality” has undergone several meanings and transformations having both negative and positive connotations (Perrin, 2007). For a foundational purpose, throughout the Christian tradition, spirituality has referred to the relationship of God’s Spirit with the human spirit (Perrin, 2007). Through an examination of the Old and New testaments, which make up the Holy Bible (the main text in Christianity) a better understanding of Christian Spirituality can be revealed.

Childhood Sexual Abuse and the Black Community

Through professional research on childhood sexual abuse, conclusions have been made that there needs to be more research that attends to gender, cultural, religious, and racial factors/influences (Lovett, 2004). As far as race is involved, researchers have reported that sexual abuse of African- American women- in a unique study- results in severe psychological effects, and challenges in establishing and maintaining intimacy (Oubre, 2005). A range of sources and support from their religious communities and

church, have aided them in recovery (Lovett, 2004; Oubre, 2005). One study done involving the healing and recovery process of African- American women, revealed a communal uprising against silence on the subject of childhood sexual abuse. This effort was being birthed and supported by the church that these women were actively involved in (Andrews, 1999).

The History of the Black Church

The Black church plays a very important role in the mental health and well being of the African- American community (Adksion-Bradley, Johnson, Sanders, Duncan, Holcomb- McCoy, 2005). More often than naught, African- Americans (men and women) in the Black Church, turn to the church as their primary source for various forms of help, including the use of therapy (Taylor, Ellison, Chatters, Levin, & Lincoln, 2000; Adksion- Bradley, Johnson, Sanders, Duncan, Holcomb- McCoy, 2005).

In order to understand the importance of the Black Church in the African- American community and their unique use of spirituality, a look into the history of the church and its development is essential. Dating back before the enslavement of West Africans, for manual labor in the America by the new Americans, traditional African culture did not separate spirituality from one's own personal identity (Mbiti, 1969 as cited in Cook & Wiley, 2000) and it was seen to be communal as well (Nobles, 1972, as cited in Cook & Wiley, 2000). During the African slavery epoch, this use and view of spirituality did not change; however the foundation of its belief system did as Africans adapted forms of Christian worship to bring them solace through the hardships experienced (Phelps, 1990). Sustenance was found in the Presence of God at secret unity

meetings held, and through covert communication to one another by music and dance to endure the evils of slavery (Phelps, 1990). The difference in culture, and the nature of the conditions in which Africans received and engendered the Christian religion is of critical importance in understanding the present day differences between the dominant cultures' Christian church and the Black Church. This is especially important when observing expressions of worship. Mitchell & Mitchell (1989) share that the very strength of Black Spirituality is in the fact that it is so literally holistic and specifically requires the involvement of higher emotions and of the senses and limbs as well (Mitchell & Mitchell, 1989, p. 105).

The Black Church, as a societal institution, is often characterized as the only institution within the American society that is owned and solely controlled by the African- American community (Cook & Wiley, 2000). The church has also, historically, been the only place in society where African- American men could consistently and respectfully hold positions of leadership and authority. Thus, to date, leadership positions in Black church still remains the case, however there has been a gradual increase of women taking pastoral positions (Cook & Wiley, 2000).

The Role of Pastor in the Black Church

There are some very important issues that a pastoral counselor may encounter while doing work with individuals who have been sexually abused. Consideration of the individuals' personal spiritual growth, current age, and their view of God (Gall, Basque, Demasceno- Scott, and Vardy, 2007) are just a few of many factors that should be known about each individual during the course of the therapeutic relationship in order to help

foster healing. Particularly in the Black Church, the Pastor or clergy members play a very important role in the lives of their congregants (Taylor, Ellison, Chatters, Levin, & Lincoln, 2000). This is an important fact to note, because people will usually first contact the clergy in distressing situations and as a result are less likely to contact other professionals, especially if their issues was death, illness, or emotional difficulties (Taylor, Ellison, Chatters, Levin, Lincoln, 2000).

In the therapeutic healing process, some pastors are expected to employ God-given gifts (Frazier, 2000) coupled with other learned therapeutic skills. When it comes to literature and research formulated on approaches to forms of Christian counseling or psycho- spiritual therapy used by Pastors, there are two main therapeutic modalities used, biblical counseling and pastoral counseling.

Biblical counseling is a term that has yet to be clearly defined, but is known by the way in which the counselor interacts with the client. A couple of characteristics of a biblical counselor would be employing the use of devotional instructions from the Bible to treat psychological problems (Biblical Counseling), and focusing on bringing someone back in to a relationship with God (Fouque & Glachan, 2000) being conscious of the redemptive nature of the Holy Spirit to help a client spiritually excel in overcoming and intentionally confronting a struggle with sin in their lives (Fouque & Glachan, 2000). In biblical counseling, there is the belief that ultimate healing of pain and suffering come with the repentance of personal sin, in the accepting of God's forgiveness and entering a new commitment with Him (Blank, 1997, as cited in Fouque & Glachan, 2000).

In using the other commonly known approach, there is a marked difference between the aforementioned- directive biblical counseling- and non- directive pastoral

counseling (Foque and Glachan, 2000). There have been reports of negative responses to directive biblical counseling, in which the Pastor or counselor focuses on the redemptive nature of the Holy Spirit and restoring a person's relationship with God that engages in directly confronting the client's sin in the spiritual battle and seeks healing and wholeness from their current issue (Foque & Glachan, 2000). On the other hand, there is the non-directive professional Pastoral counseling approach that integrates psychological and spiritual insight for clients (Foque & Glachan, 2000) and allows the Pastor or a church counselor to enter the therapeutic relationship from a silent, compassionate, companion stance, rather than from a leader or teacher position (Avery, 1990). Directive biblical counselors have been perceived as being significantly more directive, more powerful, and controlling than non- directive professional counselors (Foque and Glachan, 2000).

Traditionally, African- American Pastors have used a narrative approach to therapy when counseling via story telling, in the pulpit, and story- listening within the therapeutic session (Wimberly, 1991). The Pastors and counselors also use empathetic understanding and cognitive reframing as psychotherapeutic tools in counseling (Wimberly, 1991). Pastors and counselors are not the only conduits for an individual to receive some essence healing. Members of the church are encouraged to help one another through personal testimonials, corporate prayer meetings, and scripture readings (Cook & Wiley, 2000).

Religion and spirituality have been shown to be very important components assisting individuals in eliminating negative affects and gaining some form of healing and resolution from past and childhood experiences of sexual abuse (Gagnon, 1965; Valentine and Feinauer, 1993; Gall, 2006); however, studies that focus on spirituality-

based recovery treatments are limited (Knapik et al., 2008). For the counselor/therapist, employing spiritually–integrated interventions for survivors of childhood sexual abuse are helpful in treatment for moving a person from a place of anger, abandonment, and spiritual disconnection to a space of increased hope, spiritual renewal and connection (Murray-Swank & Paragament, 2005). Within the context of Christian counseling this approach to treatment is commonly used.

Engendered from an exploratory study in certain religious circles- mostly Christian- that resulted in a grounded theory, appropriately titled, “Being Delivered” (Knapik, Martsof, & Draucker, 2008), this theoretical framework, which is practiced in many churches, is a sequential process of achieving healing from a divine being- God or Higher Power (Knapik, Martsof, and Draucker, 2008). The three stages of spiritual development involve, first, a spiritual connection, which then leads to a spiritual journey. During this second stage, some individuals may then encounter a spiritual transformation, which would be the epitome of a complete deliverance. Deliverance is to be interpreted as being rescued, saved, or set free from the effects of childhood sexual abuse by God, a spiritual being, or power (Knapik, Martsof, & Draucker, 2008). There is not much literature researching if Black churches actively employ this method toward achieving healing; but as an African- American woman and through my personal experience with the Black church culture, it appears to be prevalent through out many congregations. The results that Knapik, Martsof, & Druacker received from this study show that a religious dogma did not play a large role in the healing; however what was most important was the survivors’ relationship with God or a divine being, the spiritual path they took, and the possible transformative power a spiritual experience (Knapik et al., 2008). They also

suggested that this theoretical framework could be used to initiate and guide discussions of spirituality and healing in the lives of survivors. Throughout the course of this study there is an aim to explore this very relationship that each survivor had with God. In exploring the spiritual path that each survivor took one hopes to gain a deeper understanding of how the survivor employed their spirituality to catapult them on the road to recovery from childhood sexual abuse.

Some writers emphasize a need for spiritual group therapy, coupled with individual therapy conducted by professionally trained ministers and continued education and research is expected of these ministers (Amos, 1995). Commonly seen issues that the Black church counselor or Pastor would work with are: depression, addiction and addictive behaviors, grief, and sexuality and gender concerns (Cook & Wiley, 2000). When discussing sexual abuse, African- American churches tend to neglect confronting this issue (Cook & Wiley, 2000). In the event that the avoidance of this issue by the Black Church also stands true for this study, this topic of research beckons the attention of secular therapist when sought out by this population. However when it comes to the sole issue of sexual abuse (including childhood sexual abuse) and incest, the reasoning behind the reluctance to confront this problem are due to fears of disrupting the family structure. This fear stems from wounds of the family unit being torn apart during slavery (Cook & Wiley, 2000). Some other factors highlighted, that contributed to the silencing about sexual abuse experienced in childhood: the topic of incest being seen as a taboo subject, therefore being ignored; the patriarchal view of family (i.e. male- dominated families that are exploited by the male figure); and intergenerational transmission, which postulates that the child who is abused, will in turn abuse their children. This being the

perpetrators' maladaptive way of expressing anger with their parental figure (Amos, 1995).

Summary

In the literature reviewed, the experience of sexual abuse in childhood brings with it many ills that need to be attended to; particularly ailing that affects the mental and spiritual well-being of its victims. The Black church plays a semi- active role in addressing this. For the purposes of this study, the Black Church will be defined as a Christian congregation, in which at least 50% of the congregants identify as Black/African- American. This study is aimed at exploring how Christian spirituality facilitates healing through the modality of counseling received from the Black Church. The therapeutic relationship between the Pastor or a counselor and the congregant in the Black church will be explored, as well as the process of healing through the report of the counselor/Pastor.

CHAPTER III

METHODOLOGY

The purpose of this study is intended to explore the role that Christian spirituality and the Black church play in the healing process of adult survivors of childhood sexual abuse.

This research study is aimed to explore the significance of association between the Black church and various ways or routes to healing. The particular modality that I will be exploring is through individual counseling conducted by a pastor or counselor. The focus of this study is on counseling done in adulthood, after the occurrence of sexual abuse in childhood. As stated before, childhood, in this study, will be considered as the age of seventeen years old and younger.

Through exploring the counseling relationship, I intend to find out the nature of the therapeutic relationship. I also anticipate finding answers to questions such as: why the individual seeking counseling decide to receive it from the Black church? what type of spiritual interventions were implemented?; distinguishing ways in which spiritual versus non- spiritual interventions aided to bring the victim to a place of healing; a detailed description of the victims process toward healing from the beginning to the end of the counseling relationship; and a current assessment of where the Black church is as a whole in addressing the issue of childhood sexual abuse. The study will also examine the therapeutic relationship via the pastoral counselor, clergy, or lay member and the different types of interventions implemented.

Due to the fact that there is such a limited amount of knowledge on this particular area of study, this study is exploratory in nature. There will be a survey composed with

open- ended questions (see Appendix B) that will determine each potential subject's eligibility to participate in this study.

Sample

The people I will interview have to meet a certain criteria. They do not necessarily have to be African- American, but the sample for this study will be composed of experienced members of the clergy, counselors/ therapists, and interns in the Black church, who identify as Christian and offer individual counseling services for a particular Black church congregation. Historically, due to the informalities of the Black church to not seek out secular forms of counseling for reasons such as mistrust and wanting to sustain a form of community and church family (Cook, 1993; Wiley, 1991 as cited in Cook & Wiley, 2000), this sample will also include experienced lay members and those in training (i.e. interns), who are informally serving as church counselors for their congregation. Experience, for laity, would be defined as having at least six months or more of individual counseling work within the Black church with a survivor of childhood sexual abuse. As for the pastoral staff and other members of clergy, and licensed counseling professional the same amount of experience is required, six months of counseling an adult of childhood sexual abuse. The next and final requirement necessitates each participant to have experience in counseling congregants, or others who seek services from the Black church, that have a history of childhood sexual abuse and this topic would have needed to be discussed or worked with in the therapeutic relationship.

Since I will use the snowball design, I will fully rely on fliers (see Appendix D) that I post in public spaces, word of mouth, calls made directly to churches, and advertisement via email. I will also fax fliers directly to different churches. All of my recruitment materials will be sent to Black churches in the Los Angeles County, California and counseling centers that offer counseling services that are marketed to the congregants of predominantly Black congregations. The initial phone call to the church or counseling center will act as a filter to determine whether potential participants meet the inclusion criteria. The number of interviews conducted will be a minimum of twelve to a maximum of fifteen. Each subject interviewed will be a member of or service a different congregation.

The Black church as a whole is comprised of many different denominations with differing theological perspectives. Due to the fact that data will be collected with a snowball method it unpredictable whether the will be gender, racial, or denominational equality will be represented within the sample.

Data Collection

The primary method of collecting data for this qualitative study was through face-to-face interviews. There was a possibility that phone interviews would be conducted, however that case never arose. Prior to recruitment of participants, the Human Research board at Smith College School for Social Work approved this study as having very low risk for participants. (see Appendix C for approval letter). Each interview- lasting no longer than 50 minutes each- was structured and executed by asking nineteen open-ended questions (see Appendix B) divided into three sub- sections pertaining to the topic

of healing after childhood sexual abuse in adulthood by seeking individual counseling services with a pastor or counselor from the Black church. The process of developing questions was supported by research and personal experience of the researcher. The headings for the subdivided questions were labeled: 1.) about the counselor, 2.) about the client/ survivor, and 3.) about the relationship.

Every participant was given/ emailed an informed consent letter (see Appendix A) to sign prior to the actual interview. At the moment of the interview, every participant was offered the opportunity to ask questions of clarification about the informed consent. There were a total of six participants in this study, which meet the inclusion criteria. To ensure confidentiality, each interview was conducted in the privacy of an office or a secluded area to ensure that issues of confidentiality are not breached. In the gathering of data, there were two voice recorders that were used to collect data and a note pad to take minimal notes. All data was collected and transcribed by researcher. The transcribed data collected was typed out, verbatim, on to a word document. After the data was transcribed, it was reviewed and common themes across the multiple interviews where noted.

Data Analysis

After the gathering of information and transcription of data, thematic data coding was done for each question asked within the interview. Through reading and rereading transcriptions, a process of highlighting similar responses of amongst all participants was employed. The narrative analysis method analyzing data was also performed in contrasting unique and dissimilar responses shared by the participants. Themes were noted during the gathering of data and written on a notepad- after its' gathering-

according to like phrases, concepts, and frameworks that participants had referred to. After being noted, content analysis was utilized displaying the most commonly shared responses through overt and latent content amongst participants. Similar responses were tally marked.

Expected Findings

Since this study is purely exploratory in nature, there is no certain expectation of data collected will show. Concerning Christian spirituality, and its diverse affect on those seeking counseling from the Black church as a modality for healing, it is hard to prefigure ways in which their spirituality helped. With that said, stating exactly how to measure the impact of ones spirituality, is a variable that is nearly impossible to measure without imposing some generalized/ preconceived standard as to how one should heal. The form of sexual abuse experienced by the individual seeking counseling, as well as, the severity of violation, the number of times the individual experienced sexual abuse, the number of abusers the victim had, the relationship between the victim and the abuser(s), and other people who assisted in helping the victim in getting healing are just a few factors that need to be considered in formulating the extent to which the victims spirituality helped in their healing process.

CHAPTER IV

FINDINGS

Introduction

Within this chapter the findings from the data collected via face- to- face interviews are reported. Those who were interviewed are pastors or counselors, with at least six months of counseling experience, who have counseled an adult survivor of childhood sexual abuse on an individual counseling basis. There was great difficulty in finding professionals who were willing to participate in this study. The survivors that each participant counseled sought help or were from the Black church. Clarification as to what exactly the Black Church is was provided. During the extension of this chapter and the following, the pastor/ counselor(s) will be interchangeably referred to as *participant(s)*. The survivor of childhood sexual abuse- who was discussed during the course of the interview with the participant- will be referred to as the *survivor, client, subject* or *victim*. These terms will be used interchangeably as well.

Interview questions used in this study were created with the goal of producing information about the survivors' experience in receiving assistance toward healing from the Black church and the Black churches response to this particular population. In order to gain better insight towards the nature/ quality of the help these individuals received, three sets of questions were asked in the order as follows: questions about the counselor/ pastor, questions about the client/ survivor, and questions about the relationship and work done with the survivor. For a comprehensive study, information about the professional background and personal opinion of the pastor(s)/ counselors' belief about how healing

occurs was gathered. Additionally, demographic information about the survivor and their counseling experience was collected.

During the recruitment process I received many declinations from congregations and counseling centers. Many did not call back or were not available. One potential participant that I was scheduled to interview gave the report of not servicing this population, but instead focused more on drug addicts and alcoholics. This, along with several other possible reasons resulted in the low number of participants, and will be elaborated on in the Discussion chapter.

Demographic Data

Participant Demographics

A few questions were asked of the participants in the study regarding their education and experience. This information was gathered initially to ensure that each participant met the inclusion criteria. Knowing the pastor/ counselor education and experience was important to the researcher for the study. Since the participants would work(ed) with such a vulnerable population, a certain level of training could qualify them to be responsible for working with one's psyche. Questions such as the race, age, and socioeconomic status were not asked, seeing that such information was not the primary focus of this study.

With this aim, participants hailed from different denominations within the Christian religion, See Table 1 below for denominational demographic breakdown. Participants from Baptist, Lutheran, Religious Science, and Non- Denominational congregations were represented in this sample along with another unknown Christian denomination.

Among the six participants reported on in this study, 100% had obtained at least one graduate level degree. See Table 2 below for educational demographics.

Denominational Demographics

Christian Denomination	No. of Participants
Baptist	1
Non-Denominational	1
Lutheran	2
Other (unknown)	1
Non- Christian	
Religious Science (New Thought)	1
Total	6

Educational Demographics

Table 2 Type of Masters Degree Received	No. of Degrees	No. of Licensed Therapists
Masters in Theology (Divinity)	2	
Masters in Family Therapy	3	
Counseling Psychology	1	
Masters in Education	1	
Masters in Metaphysics	1	
Type of Doctoral Degree		
Doctorate in Philosophy of Holistic Healing	1	
Doctorate in Ministry	1	
Licensed Therapists		2
Total Degrees	10	

* Some participants hold more than one degree*

The degrees received begin at the Masters level of education. Two participants held more than one Masters degree, and one participant had two doctorate degrees. The sample also included ordained ministers (n= 5). Fifty percent of the sample was both practicing marriage and family therapists and pastors. Each participant currently practiced his or her profession in the county of Los Angeles in California.

The experience in counseling among participants ranged from 3 to 36 years. The majority of participants got their start in counseling while undergoing graduate school internships (n= 4). One participant carries the belief that she had an innate gift to counsel, stating, “I’ve always counseled, but I wasn’t a marriage and family therapist, but I was- I was born a counselor. I’ve always counseled people”. Among the types of internships were a sexual assault center, church counseling and referral center, and a chaplain at a hospital. One pastor who received a Masters in theology with a focus in Divinity took a graduate level interdisciplinary course on child abuse and neglect, and continues to facilitate presentations on the role of a pastor in attending to these issues.

Survivor Demographics

A slightly more detailed analysis of the subject’s demographic information was gathered during the course of the interview- with the participant-, which was tailored with the topic of the study in mind. A few similar trends were found within the demographics of the subjects. Out of all the subjects discussed, only one was identified as a male. The rest were female (n= 5). The majority of the subjects reported on were Black/ African-American (n= 5), and one victim was Caucasian. When asked if the subject identified as a

Christian the majority- with a few responding emphatically- said yes (n= 4), the remainder replied no (n= 2).

Pertinent to the study, was the age in which the survivor began to be sexually abused. The average age was 10. 3. Some participants reported subjects being sexually abused as young as six years of age, and a couple starting as old as sixteen. The average age the subjects sought out help from the pastor/ counselor was 43. 16. The youngest being 19 and the oldest being 70 years of age. The trend noticed as information was gathered showed that those who were abused at a younger age waited longer to seek out help. As opposed to those who were abuse at an older age made the move to receive mental/ spiritual help sooner (See Table 3 below).

Survivor Demographics

Table 3

		n= 6			
Age Range (At the start counseling)		18- 36	37- 50	51- 65	65+
		n= 2	n= 1	n= 2	n= 1
Race	African- American	1	1	2	1
	Caucasian	1			
	Other	-	-	-	-
Gender	Female	2	1	2	-
	Male	-	-	-	1
Religion	Christianity	1	1	1	1
	Other	1	1	-	-
Age (At the time of abuse)		0-9	10- 14	15- 17	
	Male	1	-	-	
	Female	2	2	1	

In this section two main questions will be addressed regarding the participants personal opinion on the issue of childhood sexual abuse. Responses varied, but common themes were found. The following sections are categorized by the questions asked.

Healing and Childhood Sexual Abuse

Each participant was asked to share his or her personal opinion on the definition of *healing* in the case of childhood sexual abuse. The question brought forth many responses, of which will be addressed, but there were four common themes that will be elaborated on in the following sections.

Due the fact that pastors and counselors naturally hold a authoritative position of power within the counseling relationship (i.e. in terms of navigating the processes of therapy) with those who come to see them, it then becomes important to know the beliefs, opinions, and images of the pastor/ counselor about healing and what it looks like to them. These beliefs and thoughts become important because of the intimate relationship engaged between the survivors' psyche and the counselors' convictions. They may easily involve issues of countertransference, which in turn could greatly impact the outcome of the counseling done. Therefore, the participant's thoughts about healing on this issue of CSA are important due to the fact that the participants are usually the ones assisting, navigating, and helping the victim reach this place of healing. So, knowledge about what it would look like bears importance in navigating the victim to this area.

The number one initial response to this question unanimously was that healing comes through a process over a span of time. Within this process, the participants answered the question in the context of referring to their previous experience with

survivors, and recalling the hallmark symptoms they noticed that needed attending to. A couple of the participants believed that the first step toward healing was acknowledging/ accepting that the abuse happened to them. One participant put it this way:

With some individuals it's being able to acknowledge that it actually did happen, and that it wasn't their fault... This was something that somebody perpetrated against me. Really as an individual act of terrorism. And so, I think defining healing for me, is a person- in each individual case- is coming to the realization that something happened, I wasn't in control of it, I couldn't stop it, and I didn't know how to react to it except for the way adults told me to react; and usually the adult that tells you how to react is the adult perpetrating the sin against you.

In this particular case it was assumed that the 'perpetrator' was actually an adult. While this belief held some truth to those participants, others believed that disclosure of the sexual abuse was actually the first step toward healing for former victims. One pastor replied, "In terms of healing, uh, I mean, I think healing really begins with divulging what's going on, the abuse, the molestation. Um, until that comes out there really can't be any healing". While the first response connotes intrapersonal action on behalf of the survivor, the latter response relies on/ carries the belief that an external response from the victim is the catalyst toward healing. Both could be of equal importance.

Forgiveness

Continuing on the overarching theme that healing is a process, another phase comes into view. Along with acknowledging the abuse experienced and disclosure, curtailing the beginning of this process- for many participants- is often followed up with forgiveness. This forgiveness comes in many forms. "Forgiveness of self. Forgiveness of the person who basically was the violator" would sum it up for one counselor. Another

participant emphasizes the importance of forgiveness, connecting forgiveness with affecting the entire person saying:

Well first of all it comes with forgiveness. That's the first step of healing. Acknowledging that it happened, not being in denial of it, and then when that happens the next step is forgiveness because without forgiveness you cannot function properly, and cannot, um, be the person that you should be. Because holding grudges can cause you to get sick, cause you not to be able to focus. So forgiveness is the first step.

In this situation it was implied that the failure of the survivor to forgive their abuser is one in the same as "holding a grudge". For the survivor, this can be fatal, resulting in sickness.

In one unique case reported, the subject that was abused had become an abuser. A pastor described this scene by reporting:

...obviously for this man it was very important that I be there when he confessed this to God. And so together we went into the sanctuary, and we knelt down at the altar, and as we did he just broke down, and just, you know, began weeping, and sobbing, and as he did he just blurted out that he, uh, um, had been molested as a child and that he, uh, had in turned around and had molested his younger sister and she had since then died and he could never ask her forgiveness... and we prayed, asking God forgiveness, and knowing the assurance of God's forgiveness, an uh, that was the beginning of his healing. He, uh, went back to his doctor, and he, uh, then he got better.

In this case the use of prayer consoled and brought relief to the survivor. The need to ask God for forgiveness came hand in hand with asking the one the survivor sexually violated for forgiveness. In both of the aforementioned images, an act of forgiveness- be it to God or to the abuser- seemingly results in the physical well being for the survivor along with eradicating mental unrest.

Processing

Within this long- term journey to recovering from the trauma of childhood sexual abuse, there arises a different type of “process” that- according to the majority of the sample- needs to occur for healing (n= 4). This is the processing of multiple apparatus of the individual. A counselor explains, “It’s processing the behaviors associated with what’s been experienced in the past, and the, uh, past hurt essentially. Being able to function in a balanced manner not being in emotional pain, or consistently in emotional pain”. In this statement, the working through with a client’s affect and behavior was key. Another counselor includes working with the clients’ cognition, asserting:

Recognize it. Recognize the triggers and the different things you’re reminded of as you walk out life cause it’s not you forget it and it’s never gonna come up again, but you’ve learned the skills to learn how to deal with it and process through it; and I think that’s healing.

In this phase of working with affect, behaviors, and cognition, it was implied that while undergoing the process the survivor might begin to gain some sense of healing. The use of spirituality was mentioned by one participant, encouraging, “if its someone who is Christian, truly relying on their strength and their source and faith in God” to assist them.

Other Healing Options

On the road to healing, the theme of helping the victim find a balance, so that the trauma of the abuse does not hinder their relationships or daily interactions was prevalent. The following are just a couple of methods used as conduits to better functioning. Given that all but one of the participants were active members of the clergy, there was a need that all participants alluded to, and that was the use of therapy. Within the confines of therapy, different therapeutic skills are used.

A distinctive tactic used in the process of healing for one participant, was the suggestion of directly approaching the abuser, stating,

I believe that person should go to the person who did the offence and talk to them about it; and let them know that they have forgiven them- but let them know that it happened. If, if they don't want to do that, then they should at least write a letter to that person. If they don't mail it, then at least write the letter and then tear it up. But they should contact the person. Get the catharsis, a release.

Using this therapeutic tool could bode useful for some. Half of the sample thought it important to attend to the shame and the guilt that comes as a result of childhood sexual abuse. One pastor placed emphasis on this recalling, "I've found that the biggest problem is dealing with the shame and the guilt".

Many of the participants did not have a preconceived recipe for working with this population. I can recall one participant speaking in a very methodical manner, yet still relying on the working knowledge they retained of what it means to gain healing from childhood sexual abuse.

The Black Church and Childhood Sexual Abuse

In this section the question was asked of the participants where they saw the Black Church, as a whole, in addressing the issue of childhood sexual abuse (CSA). There were three major thematic responses from the pastors/ counselors. One pastor,

while interviewing, opted to speak about his personal congregation. Withholding his opinion about others. A lack of discussion, recognition of the Black churches' impact, and lack of trained pastors will be the themes addressed.

Many participants acknowledged that there needs to be more work done within Black churches to confront this issue (n=5). One counselor stated "I don't think we address the issue. I think we need more dialogue in it". Another bluntly retorted, "They don't address it. They may talk about it from the pulpit and throw some stuff around, but as far as working at it- especially with women- uh, it's, it's, it's very minute". However, the two participants interviewed who solely held a masters' degree in divinity, did report that they took action toward issue of CSA, informing, "We take steps to do that, as a congregation here. As I said, ...she has connected us with agencies and resources out of the community, so that they can get counseling, so they can get the support they need in such times".

Others shared that the Black church is vital in confronting this issue due to the trusting relationship carried between the congregants and the pastor. The Black church could play an important part in addressing CSA by simply referring parishioners to, and "working in concert" with professionals. This was of primary importance to all participants. One participant supported this noting:

A lot of times, from a therapist- cause I get to work on both sides- as a therapist by herself, people don't trust therapists; but if a pastor or somebody refers or says something it's ok. They'll get help. So, I think first of all, churches are an integral part in connecting people, to people who can help them walk through serious abuses...and I think a pastor can provide spiritual direction, but when they're not trained in the different theories and the art of therapy they can't usually bring about healing.

While at the time the pastor holds this prominent position, he or she carries the influence the sway the beliefs of the parishioners to either seek help outside of the church or not.

At the end of the previous quote, the participant alluded to another commonality found amongst the sample regarding the how the Black church handles- or mishandles- the issues that come along with CSA. The particular belief that pastors lacked the proper educational training needed in working with survivors of CSA was a concern held by some participants. The conviction that pastors are ill equipped, as far as training goes, to work this population stood. The thought that “pastors, under most circumstances, unless they’re pastoral counseling and had extensive coursework in sexual abuse- they’re not qualified” was held by one counselor. A couple of counselors were of the mind that pastors should be trained “to know what red flags there are” so that they could discern “how much it is spiritual and where’s the fine line when you know to pass somebody on” to a clinician trained in talk therapy.

Many pastors and counselors from this sample are aware of the devastating affects of childhood sexual abuse. They all, in their own right, have developed some sort of strategy to either prevent, educate, or attend to the trauma in order for a sense of healing to occur; and seem to be prepared as to what to do when someone from or within the Black Church seeks help. Ideas about what the Black church was doing was not just merely expressed by participants, but was followed up with suggestions about how to further develop a foundation to support this sexually abused population.

About the Survivor

This next section will focus more on the survivor who sought out help, and getting to know a little bit more about them from the eyes of their pastor/ counselor.

Under review will be the pastor/ counselors' answer to the following:

- 1.) What are some possible reasons for your client seeking help from the Black Church?
2. How did receiving help from the Black church, help or harm the client?
- 3.) Initially, what were the presenting issues your client, the survivor, struggled with?
- 4.) Describe to me the ways your client used their spirituality to help them recover/ heal from the abuse they experienced. This section will be further subdivided into two sections. The first section will concentrate on the first two questions, and the second on the latter questions.

Getting the Help

For many reasons the subjects sought help from the participants. All of the participants- having a relationship with the Black church- was able to attend to the subject. The interest in this subdivision is why? What are some possible reasons for the subject seeking help from the participant that has some sort of affiliation with the Black church?

Well, nearly all of the participants had differing answers. With two participants, the survivor sought help through a counseling center, clarifying that, "It wasn't actually that she came to the Black church, she called me up because she knew that I did Christian counseling". Comfort and safety seemed to be the common ground for some survivors.

Comfort with “the philosophies taught” within one congregation; and comfort for racial reasons because “she was Black herself”, as one participant put it. In one case a subject approached the pastor. The pastor recalled:

I was doing a series... and started talking about how coveting can lead to abusive things, abusing children...at the end of that, I had several women and two men contact me about things that had happened to them, and this person was one of them.

It was not until the pastor confronted child abuse via a sermon, did one subject respond. As mentioned, safety was staple for a couple of subjects in terms of ones identity not being revealed. Going to the Black Church was “ a place where they can go because of some ambiguity- some anonymous...where they can be anonymous”. So anonymity was important. It was a place where one subject “ had a close relationship to this loving church family and his pastor. So it was that close relationship that made all the difference”. One counselor shared that the subject came to the Black church simply because of “Empathy”.

Asking if the subject was helped or harmed after reaching out for help brought forth similar answer by the most (n= 4). That answer being yes, the Black church was of help. Participants expounded, saying that essentially it provided a space for the subject to talk with someone on a consistent basis. It was a means of support spiritually, emotionally, and mentally for most. Receiving this help gave “hope” to the survivor, and provided “assurance of forgiveness” and the feeling of being “loved”.

But this was not the case with another subject. A counselor reported her client’s unpleasant experience in going to the Black church before seeking counseling with her. This counselor seemed to have gotten a very detailed description of how unhelpful in seeking the church was for her subject.

She felt like she did not get the empathy or compassion from the persons that counseled her, so she was quite disappointed in the counseling she received from the pastoral staff. She felt like it was not helpful. She felt like they did not really know what they were doing; and she felt- she was hurt. She felt like she was just about rejected because they did not- from her perspective- give her what she needed. Now the pastors were trained to give the Word; and she needed a connection first. Empathy. She needed to know they felt her pain...she felt they just started saying, 'Well you got to forgive, blah, blah, blah, and 'Well Jesus said this, and Jesus said that' and she didn't get the connection between person to person that she needed before she got...biblical advice. So she didn't feel connected. She felt like it was a disservice.

This impersonal encounter experienced by this particular subject seems to be the antithesis of what others experienced.

Presenting Issues and Use of Spirituality

More often than not- in the case of childhood sexual abuse- the survivor usually does not seek out counseling solely to deal with the sexual abuse alone. Many survivors suffer with distressing symptoms that stem from the traumatic experience(s) in their childhood, which prompts them to get help. The question about what the survivors presenting problems were was asked. Some of the symptoms were more severe than others, yet all equally important in the work that was done between each participant and subject.

The most common presenting problem amongst subjects was the struggle with low- self- esteem (n= 4). Subjects entered counseling for reasons such as an inability in "moving forward professionally", "physical ailments... psychological torment", and "not being able to be in a relationship" although an intimate relationship was strongly desired. Participants went further to describe the behaviors and symptoms of the subjects. Two participants described their subjects to be "sexually acting out". Others struggled with body image (n= 2). One counselor recalled:

She did not like her body type either. She thought she was too big, and sort of hid her face because she didn't want people to look at her in the eyes. She was, um, she isolated herself from people. She didn't want to talk to people. If she went to sit in church, she'd sit in the back by herself away from people. So, she was- she had a problem with eating. She was, uh, just about suffering with bulimia, just about, and uh, depression and low- self esteem.

Another, participant recounted, "Hmm, nightmares. Cutting. Uh, just low self- esteem, actually almost even hallucinations. I mean it was really severe. She had a lot of different symptoms". All subjects entered the counseling relationship with particularly rough difficulties. How they attended to them will be discovered in the following paragraphs.

Knowing that all of the subjects consulted individuals who could offer spiritual advice in some capacity, that was either from the same church or shared the same beliefs; it was asked of the participants to describe how the survivor used their spirituality to help them recover from the sexual abuse they experienced in childhood.

As the data was gathered, interestingly enough, a few participants shared a particular difficulty that subject used their spirituality to overcome. That vice being the belief that they "wasn't worth much" due to the abuse they experienced in the past. One subject blamed God retorting, "God let this happen, if God was all powerful He could have stopped this from happening" leading them to resolve that they actually deserved the abuse, and was being punished by God. In getting over this obstacle the subject underwent cognitive reconstruction. For a couple, the first step was recognizing "repetitive behaviors" and realizing- as one counselor puts it- "you're not what these tapes in your head... are". Knowing this, they would begin to reshape their identity, which was another theme that emerged. By forgiving the abuser, using "the Word of God", their faith, and prayer as spiritual mediums, they were able to move toward a place of healing. However, there was one counselor- when counseling a subject who was not

Christian- that gave a slightly different report when it came to the subject employing her own spirituality:

You know it was interesting because I'm not sure that she used her own spirituality or if she fed off my spirituality; and the fact that, of what we believed as um, being a pastor and um having some other skills as well, but I think that the way she feeds off of it is the hope... that she was worth something; and I think she feed off my positiveness, my use of scripture... she don't know scripture- but just using things to give her hope

The uncertainty in knowing the precise venue in which the subject utilized his or her spirituality, and the blurred boundary between the self and the other, is a phenomenon that begs noting when it comes to something that is as fluid as spirituality. In the next section there will be an attempt to distinguish these boundaries in exploring the relationship between the counselor and the survivor.

About the Relationship

Within this section the work done between the pastor/ counselor and the survivor will be addressed. The relationship and specific accounts of the progress toward healing will be explored through a series of six questions inquiring about spiritual interventions and a reflection on the pastors/ counselors' work.

The Relationship

Every participant was asked if they could describe the therapeutic relationship they had with the subject, the survivor, and to elaborate as far as any similarities differences, and how trust was built. Each relationship was different, but in some cases the only commonality was that there was a Black female counseling a Black female (n=3). One counselor was very sure to note that they "were not friends, so it was a very

professional relationship”. Another pastor reported having developed “a good friendship” after having it previously just consist of a “pastor to parishioner” relationship. The informal relationship between one counselor and subject was uniquely described as being a “reality check, just reality therapy. I didn’t get into a lot of therapeutic framework with her” explaining that it consisted of “cognitive behavioral stuff...this is where you are, this is what happened, ok so, you know, what do you need to get past it”. This counselor seemed to have offered methodical guidance, whereas another labeled the relationship as being “slightly parentified... and not on purpose”. She explained this dynamic adding:

Because when you have someone that’s teaching you something that you’re not familiar with and you’re, and you’re looking for someone to be that parent because you weren’t protected by your parent. I would think that she would probably feel a little bit like, what she- I probably was to her what she probably wanted her mom to be like. You know, believe in me, protect me, talk to me, teach me who I am. You know, things like that.

While many counselors did not have the same type of relationship with their subjects, or even much in common with them. One counselor shared that the subject “had a lot of similarities” revealing that she was sexually abused as well. Identifying “We had- she didn’t know this you know- but we had a lot of similarities. Where, um, we had experienced the same kind of thing. So there were some similarities that I could understand how she felt”. Pointing out the differences and giving examples, this counselor shared “ The differences in us is that I didn’t allow it to stop me, and with her she was allowing it to hinder her”.

Spiritual Intervention

An assessment of the pastor/ counselors’ usage of spirituality as it pertains to interventions with the subjects will be discussed in this section. The first question asked

was if there was any form of spiritual interventions applied while working with the subject and if so what were they? Many participants answered this question through example, by either retelling a specific moment in counseling, or recalling their work with a specific issue addressed in counseling. All of the participants responded that they had indeed used a spiritual intervention. The most common intervention amongst the participants was the “use of scripture”, in reference to the Holy Bible. The way scripture was used varied among each relationship. Some counselors used scripture as a tool of encouragement by verbal dissemination (n=4), reading scriptures with the subject was another way (n=1), and assigning the subject to look up certain passages on their own time (n= 2) was another. An example of one assignment is as follows:

... she would become fearful so I would give her assignments to look scriptures on fear, and to meditate on those. Knowing that she did not have the spirit of fear, but of power love and a sound mind. To implement that in her life, to, um, write the scriptures on cards, take them with her.

This particular assignment was tailored to the specific predicament of the subject.

A few counselors’ interventions likened to that of cognitive behavioral therapy.

One counselor- distinguishing her congregation from other Black congregations- explained her method towards spiritual intervention:

In our belief system, we believe that if you change your thinking you change your life. We believe that words are actions and that, um, so the things that we want to do is to stop dwelling on the things that we don’t have in our lives. We want to process those things that we need to process in order to move to the next stage of evolution- if I may call it that- but our next stage of what we desire doing, where we desire growing on a spiritual level.

There were a couple of counselors who opted to merge the use of scripture into the use of cognitive behavioral therapy. One counselor tabulated her interventions stating:

I like to do, um, scripture cards, to change self- talk. Um, but the main thing for me is to help clients- I do a lot of CBT, when I deal, when I deal with those

clients. Depending on where they are... But I had her journal it, and then I took those thoughts- which were very negative thoughts- and we changed them and put scripture in...that's the main spiritual intervention, getting people to change the way they see themselves through the Word of God.

Other spiritual interventions provided by pastors/ counselors appeared to be more conventional. An intervention mentioned, a little less common in this sample, was that of forgiveness (n=2). This was either initiated by the subject (as necessitated in one case) or encouraged by the pastor/ counselor. One pastor mentioned that his sermons were used as a "context, in which spiritual support could happen". So, for the subject, the sermons were tools for spiritual intervention. Only two pastors mentioned prayer as a spiritual intervention with the survivor.

Followed by the use of spiritual interventions, was a question that evaluated the pastor/ counselors' work. In remembering the survivors' presenting problems, a description of the growth each pastor/ counselor observed through employing these spiritual interventions- combined with the help of fellow church members- was asked. Due to the fact that the each subject had unique situations to work with at the beginning of counseling, responses varied. Only two counselors shared one common response, that being that each of the subjects had low self- esteem and the various interventions "helped to strengthen" self- esteem. There were reports that the interventions resulted in one client becoming "better physically". One subject benefited from spiritual inventions by overcoming the self- mutilating behavior of "cutting". Practical limitations for one subject were removed. The counselor reported that this subject "got her license" and "she ended up getting a job". Employing these spiritual interventions for one counselor was

described as having a “tremendous” effect. The counselor explained the subjects’ personal report stating:

She had just said to me not too long ago that she was ‘out of the wilderness’; and so basically what she was saying was that she was no longer holding on to those grudges of her past and the pain of her past. So definitely, the interventions even though I had to shake her- It was kind of like a shake up- I made her go see Precious, and it was after Precious that really more of the molestation came out from- by this family member. She did not want to go, and I told her we were going. So, she went, and for about two days she wouldn’t say anything, but, um, she said she was glad she went. It allowed- her vulnerability came out, and she showed it with somebody, and it was something that she had not done with anyone else.

With one special case there was not much growth observed throughout the length of the counseling relationship. The reason being is that the subject had “done a lot of work on herself” prior to counseling. The counselor described her role as “assisting her in seeing things differently, shifting her thinking”. Another case brought forth some unfortunate news. After a spurt of growth for one subject the counselor shared:

She just regressed. She just regressed one day and just went on the beach and had some, a bottle of liquor, and just started drinking and, um, had to, I had to call the police... cause it looked like she was suicidal. But, um, she did make progress, but after she made the progress I believe she sort of thought it was too much for her. She, she couldn’t handle it. She couldn’t handle the success, and she went back

As far as the pastor/ counselor answering the second part of the question, which involved the help of fellow congregants/ parishioners, there was only one response from one participant. This particular counselor shared that the subject was referred to a transition group dovetailing the individual therapy, explaining that, “if she wanted the help it was still there to just walk with her- of girls who at least experienced some level of the same abuse that she had”.

Comprehensively, there were many flavors, various outcomes of growth, and even regression after implementing the spiritual interventions.

An added evaluative question was posed to the pastor/ counselor relating to discernment. The question posed was, how might you determine whether the survivors' healing was due to the use spiritual of interventions rather than non- spiritual interventions? The majority of the replies were of a similar nature postulating that there is "no difference", no "distinction" between the spiritual and none spiritual intervention (n=4). One counselor proclaimed:

Well, I don't think there's a crossover... I don't separate my spiritual counseling from my regular counseling or my talk therapy. If I'm out in the community, I might use different words than when I'm in a church setting, but not necessarily. So, um, there's no difference for me.

With another view in response to the question, a couple of pastors placed the focus on the individuals' interpretation of the healing. One vivid analogy was given:

I don't do a distinction between secular and sacred. For me it's all the same. I think that if I'm dying of thirst, and some water is presented, I would say, 'Thank you God for the water'. Somebody else would say, 'You lucky the water was there'. I don't think about it as luck, I think it is, God allows me to get what we need when we need it; and that's what I say to people who have been abused

Generalizing that the type of intervention does not matter, yet it is the how one perceives the source of healing.

There were two participants, however, who did have clear distinctions as to discerning the source of healing as it relates to the types of interventions employed. This was substantiated by the observation of how the subject reacted to the spiritual intervention(s) alone. A counselor justified this view stating:

The reason I can determine this was that she was not taking medication, number one. Number two, was that the only thing she used was the Word of God to help

her, and, um, number three she didn't have it within herself to do it, and I didn't have it either in myself to do it, so it had to come from God

The other counselor relied on the character and beliefs of the subject sharing:

Because she is a strong woman in the Lord and because how she related to her healing. It was truly focused on her relationship with God, and spiritual interventions. She never talked about any other concept or even any other framework...so it was strictly uh, a uh, it was strictly a scriptural and relationship with God experience with her and moving through that and allowing God to heal her and move her through

Regardless of the type of interventions implemented with each subject, the participants did apply some sort of intervention. For the most part, all interventions varied, and resulted in many different outcomes, most producing some long lasting growth.

Reflection on Counselors' Work

The final two questions presented to the participants carried an essence that caused one to reflect upon their work. The first question, more generalized, inquired about the work done with all survivors of childhood sexual abuse that were seen by the participant. It asked, the participant to share the areas of change noticed in the lives of all survivors that they counseled. A lengthy list of changes was noted. The "way they think about things" and "see things" stood out to one counselor. Another counselor observed a shift in a survivors' self- esteem. One counselor recalled a plethora of changes throughout her career sharing:

I think probably the biggest thing is that- I think for those who were Christian- was that they possibly- not all of them- possibly, uh, were able to move to another level in their relationship with God; but also move to another level in what they were trying to do overall in their journey to life, in life... I've seen everything range from, um, weight loss to, um, being able to maintain relationships, to, um, getting married, or getting- becoming engaged. Uh, starting new a business or it can be as simple as being able to say- I had one of my clients say 'I'm soaring for the first time in my life. I'm soaring. So I'm able to live. I'm not having

nightmares... I'm able to enjoy my friends. I'm able to get out of this house and do something

For one participant the over occurring theme noticed was the change in how one engages with their spirituality. The survivors' spirituality "gives them hope" in the words of the participant. For another participant it was forgiveness that unlocked the door that brought a healing change to the victims of childhood sexual abuse.

The second, and final question of the interview brought the focus back to the subject. The participants were asked if they could do anything differently about how they worked with the client then what would it be? Recalling the informal therapeutic relationship held with the survivor, one counselor quickly responded that referring the client to a professional therapist would be the difference, recognizing that this is what the client needed. Another counselor sharing a personal conviction had the same answer, saying:

I would probably encourage her- at the time I had not trained and received my masters in family therapy...but I, I think I was a minister, and that was one of the things that motivated me to go back to school, was that I felt that, I truly believe that ministers do not have the training to deal with complex issues that we face now. I believed that they absolutely have the spiritual training, but we need to refer people to, um, talk therapists for that other portion of it. So if I could do anything differently I would ensure that I have the resources- or knew of potential resources to refer that young lady to for talk therapy as well.

This being said with the utmost conviction, another pastors' response seemed to agree with the wish to have "...more help. More help understanding how it is affecting different persons, you know how to help them more". The desires for pastors having more training, as mentioned in an earlier section, seemed to be a recurring theme, when reflecting on ones' work already done with survivors.

Another major theme occurred amongst a couple of participants, carried a sense of minor regret. As the participants looked back on the work done with their particular subject, the urgency to “push” the client into health/ healing was a sore issue to look back on. One counselor took sides with the defense mechanism, denial. This counselor shared that denial can be a “safe place for people sometime”, explaining that “sometimes you can bring things out, and they don’t have the emotional strength to handle it... what I learned is- you know what- you have to go at their pace”.

Somberly, in deep reflection, the other participant’s first words were, “Maybe I wouldn’t have pushed her so hard”. She went on to explain the dialogue that happened between her and the client- and in her earnest innocence- how she would motivate the client saying, “‘You could do this’, and she would say, ‘It’s so hard’, and I would say, ‘But God can help you’. Excuse me”. Taking a pause, the participant became emotional to tears recalling the relationship. Finishing her response the participant slowly summarized:

So, you know, she went further than she thought she could go, but when she got there, it wasn’t a place she could see herself being, you know. So I think, I think I was really pushing her. Where she think, where she thought she couldn’t go. So, if I had it all to do over again, I would just recognize her limits (pause), and, um (pause), stay within the boundaries that she set. So that’s what I would do differently.

With the participant giving thanks for the catharsis experienced this interview was concluded.

These last two questions brought forth very insightful information, and revealed some attention- grabbing topics worthy of giving further attention to.

Summary

Throughout the course of this chapter the findings from, six face- to- face interviews with a pastor or a counselor in Los Angeles County California was reported on. All of the findings were based off of 19 questions asked to each participant about a particular client they worked with from the Black church who had been sexually abused in their childhood and sought counseling. Although the requirements to participate in the study did not necessitate a higher education beyond a Bachelors degree, all of the participants held at least one Masters degree.

Each participant in the study held their unique beliefs in defining exactly what healing is, or rather, looks like in the aftermath of childhood sexual abuse. For the survivor to acknowledge that the abuse occurred and to make possible steps to forgiving the perpetrator were the two most common indicators of the beginning of the healing process. The revelation that healing, in and of itself, is a process was commonly mentioned and alluded to amongst participants.

There was nearly a unanimous consensus that the Black church as a whole did in fact need to do more work with addressing the issue of childhood sexual abuse and how it affects members and associates of its cohort. It was also recognized that the Black church is a strong central force, and could make a considerable impact on the community of survivors of CSA if pastors were further educated, or referred victims to mental health professionals and collaborated with other community resources.

In taking a look at the sample of survivors who were counseled by the participants', one would see many similarities as well as differences. When it came to demographics there were many similarities with a few exceptions. One important theme,

for this sample, observed was that the earlier in life the survivor was abused, the later counseling was sought out in adulthood, and visa versa. The later the abuse occurred in childhood, the earlier- in adulthood- was counseling sought out. Most survivors did in fact reach out to the Black church for help for reasons of comfort and anonymity. There were a couple of survivors who reached out to a Christian counselor who was associated with a Black church instead. The majority who did seek out the Black church for help were satisfied with their choice seeing that it was helpful with the exception of one survivor who had an negative experience of the Black church not being helpful with the particular issue of CSA.

From sexual promiscuity and low self- esteem to medical issues and self- mutilation the survivors presenting issues in entering into the therapeutic relationship ran the gamut. The use of their spirituality by way of forgiveness, prayer, meditation on bible verses, and even cognitive behavioral therapy were helpful venues in helping the survivor move towards healing.

Each relationship carried its own defining characteristics be it a strictly professional, a parent- child dynamic, or simply a pastor and congregant relationship; but the basic characteristic of having a close trusting relationship existed between all of the participants and their clients. As a result of the pastors/ counselors implementing spiritual interventions with their client, various positive outcomes such as increased self- esteem, better interpersonal relationships and communication skills, the eradication of psychosomatic symptoms, psychological disturbances, and the self- mutilating behavior were all evidence of how effective was the work done within the counselor- client dyad.

With reflection upon the work done with the survivor, the majority of the counselors and pastors felt content with the work they did. Each participant shared constructive assessment while evaluating the relationship with the survivor of CSA, with only minimal regrets.

CHAPTER V

DISCUSSION

Introduction

The aim of this study was to explore the role that the Christian spirituality and the Black church play in the healing process of adults of childhood sexual abuse. The gathering of information was conducted through face- to face interviews with pastors and counselors who recalled their personal experience in working with this population. Through the course of this chapter, a comparison of the current research with the findings of this study will be done. This chapter will be broken up in to four sub- headings in the order as follows: 1.) Key findings 2.) Limitations 3.) Implications for Social Work Practice, and 4.) Conclusion.

Key Findings

In comparing the findings from this study with the current literature that has been produced, there are a few similar points that were found to be congruent with the results of this research study. Among the findings in this study, the majority of the sample concurred that one of the major steps toward healing from childhood sexual abuse often begins with forgiveness. This finding is in agreement with, and still holds true to what was postulated by Doxey, Jensen, & Jensen in their research, proposing that ones religion was used to aid the victim in forgiving the perpetrator for the purposes of the victim gaining clarity as to who was at fault for the abuse (1997). Other pieces of literature that has produced this same outcome (O' Leary, 2008; Beckenbach, 2003; & Stone, 2004).

Not once, throughout the course of gathering data, was healing referred to in the framework of “Being Delivered”- a theoretical concept discovered by Knapik, Martsof, & Drauker (2008). The common thread, however, for these two studies was the acknowledgement that healing is indeed a process comprised of various stages or phases (Knapik et. al, 2008; Drauker & Martsof, 2006). The belief that healing from childhood sexual abuse is a possibility, is true for many belief systems; however the theoretical orientation- or even something just as simple as the use in language or terminology- of what the survivor experiences is translated differently. The belief that unforgiveness toward the abuser or “holding grudges cause you to get sick”, was theme held by a couple of participants. This spiritual interpretation that psychological unrest causes physical symptoms, can also be simply viewed as having psychosomatic symptoms from the psychoanalytic point of view.

In accordance with mainstream literature, the consensus that the Black church, not only plays an important role in offering help to survivors of CSA who come to them for help, but is often times the primary source of help for the African- American community (Taylor, Ellison et. al, 2000; Adksion- Bradley et. al, 2005). A couple of subjects sought out counselors who had a background in Christian counseling, rather than going directly to a church, which is opposed to the traditional findings of African- Americans having ambivalent feelings of making use social service and welfare institutions due to a history of being misused which engendered mistrust (Boyd- Franklin, 1989).

The issue of pastors being ill- equipped- as far as educational training- was yet again another key finding in this study as well as previous research (Amos, 1995; Cheston, 1993). Many participants voiced their concerns about the ability of pastors

being able to properly handle the issues that come with CSA. This particular finding was one of special interest due to the fact that the few pastors who did participate in this research actually did take measures to educate themselves about working with survivors of CSA. This finding lead to another surprising result that being the openness carried by pastors who were willing to refer survivors to mental health professionals.

Throughout this study there were many interesting facts that were revealed. The general belief that the Black church still has work to do in addressing the issue of childhood sexual abuse, rather than avoiding it, is still very much on the table (Cook & Wiley, 2000). Each participant seemed to be open with finding new ways to help this broken population, some have even learned the skill of implementing cognitive behavioral therapy as a part of their service to survivors.

Limitations

Due to the nature of data being collected via a snowball sample method, and the type of population targeted (i.e. the Black Church), there was an innate inability to ensure that diversity within the sample would equally represented. Surprisingly, of those interviewed, participants consisted of four self- identified Black/ African- American females, one African- American male, and one White/ Caucasian male. The participants interviewed consisted of the pastors/ counselors giving a second- hand report of the healing that occurred via the counseling. This method of gathering information is a huge limitation to this study due to the fact that it leaves much room for the counselor/ pastors' personal biases, and countertransferences to be interwoven in the relaying of information whether it is consciously or unconsciously reported.

The initial aim of the study was to interview at least 12- 15 pastors, counselor, laity, or interns who had at least 6 months experience in working with a survivor of CSA from the Black church, or seeking help from the Black church. The total number of interviews conducted- as stated earlier- was 6. This study has a relatively small number of participants, imposing another limitation to the depth of this study. The study also took place in Los Angeles County, California, which limits the scope- and diversity in cultural contexts.

There are several possible reasons explaining the difficulty in recruitment, and low participant outcome. The first was lack of response. Many attempts- such as faxing fliers, emailing, and direct phone calls- to potential participants did not yield many results. This could have been to the lack of having a personal connection with a congregation or pastor, busyness in the schedule of the pastor/ counselor, lack of interest, or simply due to the fact that the pastor did not address such issues in their work. The last reason was evidenced with one particular pastor that was being scheduled for an interview. During the phone conversation in which inclusion criterion was being discussed, the pastor responded that he only really worked with individuals who were drug and alcohol abusers. One participant shared that the flier that was distributed was not really clear on the nature of the study. The same participant shared a possible hindrance of other potential participants, explaining the fear of being sued. This idea came from a recent seminar that shared a case of a institution being sued because a client recognized him/herself being presented as a case study in a piece of research.

The method of recruitment that yielded the best results was that of personal connections and referrals. This slightly more intimate form of contact may have served as

a motivating factor to participate. The least effective method of recruitment that produced nearly zero results were the faxing of recruitment fliers.

Implications for Social Work Practice

Although this study had a small number of pastors/ counselors to participate, the information gather from this small sample can serve as beneficial information for the therapist serving survivors of CSA from the Black church. The service that professionals in the field of social work would provide may be that of a second resort contingent upon a survivors' desire to seek help from outside of the Black church. Within this study there was one subject that indeed sought professional counseling from a licensed therapist after a failed attempt to get help from the Black Church.

Having the privilege of being privy to the cultural practices and habits of this group of individuals, not only those who are abused, but for most of the Black community, can serve as vital information in understanding more about potential clientele. The repeated finding that Black/ African- Americans usually seek out their religious congregation first, before contacting other outside resources, even those beyond the mental health circle, (Boyd- Franklin, 1989; Cook & Wiley, 2000) could serve as a good basis for clinicians find out more about their clients' spiritual and religious life.

This unique topic of study has yet to be thoroughly research as evidenced by the lack of previous literature produced. It is hoped that if further interest is piqued about this topic, that a more representative sample in terms of a wider geographical span to gather information, a more diverse educational/ training experience among participants, and a

first- hand report of the healing experience from the survivors themselves could be explored more.

Summary

In conclusion, the focus of this study was to discover the ways in which an adult survivor of CSA who sought help from the Christian Black church utilized their spirituality and fellow congregants to help catapult them into a space of healing. The study explored such journeys via the report of their counselor/ pastor, revealing that the use of their spirituality coupled with individual therapeutic treatment resulted in a better functioning/ healthier individual. The role of the counselor and the relationship between the two was explored showing the unique interactions between the counselor- client dyad. The purpose of this study is intended to educate clinicians on route towards healing for this special abused population in hopes to provide better services for from this community who are receiving- or going to receive help from mental health professionals outside of this cultural Christian context.

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Appendix A

Informed Consent Form

[Date]

Dear Participant,

My name is Jamecia Estes and I am a graduate student at Smith College School for Social Work. I am currently a candidate in the MSW program with a focus on clinical social work and am working on my thesis here in Los Angeles County, California. I am conducting a qualitative research study that focuses on the role that Christian spirituality and the Black church plays in the healing process of an adult survivor of childhood sexual abuse. The findings from this study will be used to complete my MSW thesis, presented and, if possible, published.

The participants in this study will be clergy members and licensed therapists, who have a master's level or doctorate level of education with at least two years of experience in counseling individuals in a Black Church. Trained laity who have at least three years of experience in counseling individuals in the Black church will also be eligible to participate in this study. All participants must have experience counseling at least one adult who experienced sexual abuse as a child. I will collect data via face-to-face/ phone interviews. The interviews should take no longer than 50 minutes and will be scheduled at a time convenient for you. Interviews will take place in a secluded office/ a closed space. The data will be collected by a tape/audio recorder and transcribed by the researcher (myself). There is a possibility that I may hire a transcriber, if this is the case, the transcriber will be bound by confidentiality by the signing of a contract before transcribing any data collected.

Potential risks for participating in this study would be a small amount of emotional discomfort while answering questions. There is also the possibility that one would feel slightly insecure in current the skill set used in working with this sexually abused population. A list of resources will be given to the participant. As a benefit of participating in this study, a participant would have the opportunity to reflect on the work they have done with clients who are in this population. A participant could also have the opportunity to gain a new perspective on how to care for and help this population recover and find healing. Participants will also have a chance to discuss, otherwise confidential information, that could bring some form of relief from carrying burdensome stories. No tangible compensation will be given to participants in this study.

My research advisor and I will only see the information you provide. Your identifying information will be removed before your information is given to my research advisor for review. Your identity will be protected. Presentations will be prepared in such a way that you will not be identified. If there is any use of direct quotes, a pseudonym will be attributed to the participant by myself. I ask that you do not disclose any identifying information or names while sharing about your clients. In compliance with Federal

guidelines, all data collected (i.e. notes, tape/audio recordings, transcripts ect...) will be kept in a secure location for a period of three years after the study is complete. All data collected will be kept secured as well. In the event that the information is no longer needed after three years, all data collected will be destroyed.

Your participation in this study is voluntary. You may withdraw from the study at any time during the data collection process and you may refuse to answer any question. If you wish to withdraw from the study, you may do so anytime before April 21st, 2010. In the event of a withdrawal, all materials pertaining to you will be immediately destroyed. Please feel free to call with questions or if you wish to withdraw at any point of the study. Should you have any concerns about your rights or about any aspect of the study, please call me at the phone number above, or contact the Chair of the Smith College School for Social Work Human Subjects Review Committee at (413) 585-7974. Please keep a copy of this Consent for your own records.

Thank you for your interest and participation in this research project!

YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

Participant's Signature: _____ **Date:** _____

Investigator's Signature: _____ **Date:** _____

Appendix B

Interview Questions for Research

I will be asking a number of questions regarding your training and specific work with clients. There are three sets of questions that I will ask in the order as follows: questions about you, the counselor; questions about the client (i.e. one client you choose to discuss who is survivor of childhood sexual abuse); and the final set of questions are a general questions about your work survivors of this abused population and spirituality.

About the Counselor

- 1.) How long have you served at this church?
- 2.) What did you receive your training/ degree(s) in?
- 3.) When did you receive your training/ degree(s)?
- 4.) When did you start counseling?
- 5.) How do you define healing in the case of childhood sexual abuse?
- 6.) Where do you see the Black Church in addressing issues of childhood sexual abuse?

About the Client

Now I want to turn your attention to your work with your clients. Think of someone you have worked with who has had issues with sexual abuse in childhood. Please answer the following questions with this person in mind.

- 7.) Does the client identify as a Christian?
- 8.) What was your clients' age at the time(s) abuse occurred?
- 9.) What was your clients' age when you began counseling him/her?
- 10.) How did your client racially identify?
- 11.) What are some possible reasons for your client seeking help from the Black church?
- 12.) How did receiving help from the Black Church help or harm the client?
- 13.) Initially, what were the presenting issues your client, the survivor, struggled with?
- 14.) Describe to me the ways your client used their spirituality to help them recover/ heal from the abuse they experienced?

This last set of question I will be asking are about your relationship with one client imparticular and other questions about your work with this population and spirituality. Please answer these questions with both you and the client in mind.

- 15.) Can you describe the therapeutic relationship you had with your client, the survivor? (e.g. differences/similarities you shared, and the building of trust)?
- 16.) Did you employ any spiritual intervention(s) with your client, the survivor? If so, what were they? (Spiritual Intervention refers to any intervention that pertains to the use of spirituality). – If “yes” continue to 16a
- 16a.) In remembering the survivor's presenting problems, describe to me the growth you observed through employing spiritual interventions combined with the help of fellow church members?

- 17.) How might you determine whether the survivor's healing was due to the use of spiritual interventions rather than non- spiritual interventions?
- 18.) Out of all of the survivors you have counseled, what are the areas in their life that you have noticed change?
- 19.) If you could do anything differently about how you worked with your client, what would it be?

Appendix C

Human Subjects Review Approval Letter

February 16, 2010

Jamecia Estes

Dear Jamecia,

Your revised materials have been reviewed. You did a good job in their amendment and we are happy to give final approval to your study. The interview guide you have developed is very focused and is much more likely to explore the questions you asking.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your project.

Sincerely,

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee

CC: Diana Fuery, Research Advisor

Counseling in the Black Church

Be a part of an insightful research study

What is it about?

This study focuses on the role that counseling and the members of the Black Church plays in the healing process of specific hurt population

Who qualifies?

Clergy members, licensed therapists, trained lay members/ interns with at least 6 months of experience of counseling individuals in or for the Black Church

What's involved?

Participation includes a one-time confidential interview with the researcher that takes no longer than 50-minutes. This study is being conducted in Los Angeles County, CA beginning late February 2010



To volunteer, or for more information, call
Jamecia Estes @xxx- xxxx

