

HEALING EXPERIENCES OF WOMEN SURVIVORS OF
CHILDHOOD SEXUAL ABUSE

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THESIS SUBMITTED IN FULLFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF DOCTORS OF PHILOSOPHY

FACULTY OF EDUCATION
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KUALA LUMPUR

2012

Synopsis

This study aimed to explore and gain an in-depth understanding of the healing experiences encountered by Malaysian women survivors who had gone through childhood sexual abuse. A qualitative research using transcendental-phenomenological research design was used to explore the healing experiences encountered by 7 women survivors with a history of childhood sexual abuse. The process of collecting data involved 3 stages of in-depth interview sessions with each of the survivors. A total of 21 in-depth interview sessions were carried out with each session ranging from 40 to 100 minutes. The method of data analysis was based on Moustakas's (1994) phenomenology data analysis. Outcome of this study unveiled 9 themes of healing experiences encountered by the 7 women survivors. Among the 9 themes of healing, 5 themes were the healing processes the women survivors had gone through in their healing journey. They were: "confronted with struggles," "channels to express and reflect," "forgiveness," "acceptance," and "let go and move on." The other 4 themes were the healing contributors: "receive social support," "helping self (resiliencies)," "helping other," and "spirituality." The study revealed women survivors had gone through several healing processes in the journey of recovering from childhood sexual abuse. A smooth healing process required the presence of the healing contributors, which played a significant role in facilitating the healing processes. Healing processes and healing contributors are interconnected and both worked hand in hand to assist women survivors to obtain healing from childhood sexual abuse. Research outcomes provide additional insights into understanding healing from childhood sexual abuse, in particular from the women survivors' perspective. Implications of the study to helping professionals and future researchers are discussed.

Pengalaman Wanita Pulih dari Pengalaman Penderaan Seksual Kanak-kanak

Sinopsis

Kajian ini dijalankan bertujuan meneroka dan memahami secara mendalam tentang pengalaman wanita Malaysia yang pulih dari penderaan seksual kanak-kanak. Kajian kualitatif yang menggunakan reka bentuk transendental-fenomenologi telah digunakan untuk meneroka pengalaman tujuh orang wanita yang mengalami pemulihan dari penderaan seksual kanak-kanak. Kajian ini menggunakan tiga tahap temu bual bagi setiap wanita mangsa penderaan seksual kanak-kanak. Sebanyak dua puluh satu sesi temu bual dijalankan dan setiap sesi temu bual mengambil masa selama 40 hingga 100 minit. Data kajian dianalisis dengan menggunakan kaedah fenomenologi data analisis Mostakas (1994).

Hasil kajian menunjukkan terdapat sembilan tema pengalaman pemulihan wanita yang pulih dari penderaan seksual kanak-kanak. Kesemua sembilan tema pengalaman pemulihan dibahagikan kepada proses pemulihan dan penyumbang kepada pemulihan. Lima tema proses pemulihan termasuk 'berhadapan dengan kesukaran', 'saluran meluahkan dan refleksi', 'pemaafan', 'penerimaan' dan 'melepaskan pengalaman lalu dan meneruskan kehidupan'. Seterusnya, empat tema penyumbang kepada pemulihan merupakan 'menerima sokongan sosial', 'membantu diri', 'membantu orang lain' dan 'kerohanian'.

Hasil kajian menunjukkan wanita melalui beberapa proses pemulihan. Hasil kajian juga menunjukkan bahawa kehadiran penyumbang pemulihan melancarkan proses pemulihan dari pengalaman penderaan seksual kanak-kanak. Wanita melihat penyumbang pemulihan memainkan peranan penting dalam memudahkan proses pemulihan. Kedua-dua proses pemulihan dan penyumbang pemulihan adalah saling berkait dan saling bergantung di antara satu sama lain dalam membantu wanita pulih dari pengalaman penderaan seksual kanak-kanak.

Hasil kajian menambah pemahaman yang lebih mendalam mengenai pengalaman wanita pulih penderaan seksual kanak-kanak terutama dari perspektif mangsa wanita. Implikasi kajian untuk para profesional dan pengkaji masa depan dibincangkan dengan lebih mendalam.

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CHAPTER 1

INTRODUCTION

Background of the Study

In 2001, the Child Act of 2001 was implemented in Malaysia with the aim to protect children under the age of 18 years from any form of child abuse. According to the Act, punishments are not only given to the child abuser but also apply to the guardian or caretaker who had failed in reporting the abuse to the authorities (Lembaga Penyelidikan Undang-undang, 2009). However implementation of the Act has not successfully reduced the number of child sexual abuse cases as every year the cases of child sexual abuse continue to increase.

In Malaysia, statistics reported by the Social Welfare Department indicate a significant increase in cases of child sexual abuse over a period of 6 years (Pekwan, 2009). Based on statistics from the Social Welfare Department, in 2003, a total of 461 cases of child sexual abuse were reported. In 2008, 733 cases were reported, roughly equivalent to two children being sexually victimized daily. This is a distressing phenomenon for society (Pekwan, 2009).

The above mentioned statistics on child sexual abuse only represent the cases successfully reported to the Social Welfare Department, whereas the actual number of unreported cases remains unknown. Sadly, the number of cases reported above may just reflect the tip of the iceberg of actual child sexual abuse cases in Malaysia.

Statistics also indicated that girls are more likely targeted to be the victims of child sexual abuse. From 2003 until 2008, more than 90% of the victims of child sexual abuse were girls under 18 years old (Pekwan, 2009). This statistic reflects an alarming trend of child sexual abuse in society especially for the female child. More studies are

needed to provide a bigger picture of the phenomenon of child sexual abuse in this society, focusing especially on female survivors.

Whether reported or not, female survivors of childhood sexual abuse are impacted by the abuse. One of the greatest impacts is the jeopardization of the development of the sense of self that may cause survivors to continue to self-blame and get involved in violent relationships. As reported by Jenny and Roesler (2003), child abuse victims tend to blame themselves. Arriole, Loude, Dolren, and Fortenberry (2005) reported a significant connection between previous sexual abuse experiences with current adult sexual victimization. Further, childhood sexual abuse in the long term may also result in serious adult psychopathology for the survivors. One study has revealed a connection of childhood sexual abuse with depression, posttraumatic stress disorder, and suicidal intention (Paolucci, Genuis, & Violato, 2001). Women survivors may encounter many more psychological effects related to childhood sexual abuse.

Based on the literature, there was diversity in the experiences of adult survivors, many of whom faced great difficulties in coping with the impact of childhood sexual abuse, and yet, there is another group of survivors who encountered fewer difficulties in coping with their abuse experience. A study by Bogar and Hulse-Killacky (2006) revealed that the higher the resiliency in women survivors, the higher their self-regard, with improvements in interpersonal relationships, increased spirituality, and having helpful life experiences. Yet, some women survivors face difficulties in coping, may experience severe posttraumatic stress disorder, depression, suicidal intention, early involvement in sexual activities, and learning impairment (Paolucci et al., 2001). However, research on women survivors' healing from childhood sexual abuse based on their own perspective has definite research value and is needed. The present study seeks to provide such data to researchers and practitioners regarding the healing experiences of female survivors and the importance it derived from their perspective.

Statement of the Problem

In Malaysia, cases of child sexual abuse continue to increase every year from an average of one case reported daily in 2003 to two cases daily in 2008 (Pekwan, 2009). This also means that every year the number of women survivors will continue to increase. There is a clear and present need to reach out to this group of people in order to minimize the survivors who are trapped in the severe consequences of childhood sexual abuse.

Though statistics of child sexual abuse cases show an increase every year, very few studies related to child sexual abuse have been done in the Malaysian context. Few studies mostly conducted by Malaysian investigators were found (Dunne, Chen, & Choo, 2007; Kassim, 1995; Lukman, 2009; Nor Shafrin, 2007; Nor Shafrin & Rohany, 2009; Singh, Wong, & Khatijah Nurani, 1996; Sonamuthu, 1993). Out of these seven studies conducted by Malaysian researchers, one study focused on adult survivors and used a survey methodology (Singh et al., 1996). One study focused on the Chinese community perception of child maltreatment (Dunne et al., 2007). Of the five remaining studies, all were conducted with child survivors.

The development of child sexual abuse studies in Malaysia is still at an infant stage in comparison with most of the developed countries. According to Merrill, Thomsen, Sinclair, Gold, and Milner (2001), studies related to childhood sexual abuse have been expanded and can be categorized into three generations of research findings. The first generation of research findings addressed the negative impact of child sexual abuse (Freshwater, Leach, & Aldridge, 2001; Jumper, 1995; Neumann, Houskamp, Pollock, & Briere 1996). The second generation of research findings attempted to address the elements that facilitate the differences of experiences among the survivors (Fassler, Amodeo, Griffin, Clay, & Ellis, 2005; Murthi & Espelage, 2005, Merrill et al.,

2001). Finally, the third and the latest generation of research findings addressed the processes interplayed by the factors that were identified in the second generation research findings (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006).

Though Merrill and colleagues have proposed that the latest generation of research should focus on understanding the processes interplayed by the mediating factors, however there are still many current studies (Adams & Bukowski, 2007; Filipas & Ullman, 2006; Murthi & Espelage, 2005) that focus on the factors influencing the survivors' experience of childhood sexual abuse. In this study, I hope to contribute to, and expand, the second and third generations' studies on childhood sexual abuse.

There is another noticeable trend in studies of childhood sexual abuse, which shows up as a significant lack of studies based on women survivors of childhood sexual abuse in Malaysia and other developed countries. Out of the seven studies conducted in the Malaysian context, only one study focused on adult survivors using the survey approach (Singh et al., 1996), and even this was not purely based on the survivor's perspective. A similar situation exists in other developed countries where a deficit exists in studies on childhood sexual abuse based on the adult survivors' perspective (Glaister & Abel, 2001; McGregor, 2001; Walsh, Fortier, & DiLillo, 2010). This may result in researchers facing limitations in understanding the actual phenomena encountered by the women survivors. Such limitation in understanding might be caused by the researchers' use of predetermined categorizing systems (instruments), as this may have restricted information received from the research participants (Elliot & James, 1989; Llewelyn, Elliot, Shapiro, Hardy, & Firth-Cozens, 1988; Wilcox-Matthew, Ottens, & Minor, 1997). Future researchers need to integrate participants' perspective and carry out more qualitative investigations (Elliot & James, 1989; Paulson, Turcott, & Stuart, 1999). Thus, a qualitative approach based on women survivors' perspective was considered the most suitable for this study.

Lack of studies based on women survivors' perspective might have contributed to the knowledge gap among helping professionals (e.g., counselors, psychologists, therapists, psychiatrists and social workers) in understanding the phenomenon of childhood sexual abuse. Perspectives from both the helping professions and survivors are next discussed in order to understand this gap.

Several studies were conducted to examine helping professionals' perspective on their competency in dealing with survivors of childhood sexual abuse, and reveal that therapists face difficulties in dealing with cases of childhood sexual abuse because they lack adequate training (Day, Thurlow, & Woolliscroft, 2003; Janikowski & Glover-Graf, 2003). Inadequate training had caused the survivors to continue being trapped in suffering rather than recovering. Indeed, several studies conducted with reference to women survivors' perspectives have highlighted the unhelpful experience they received from their therapists (Armsworth, 1989; Josephson & Fong-Beyette, 1987; McGregor, Thomas & Read, 2006; Stenius & Veysey, 2005). For instance, the therapists blamed and expressed anger toward the survivors (Josephson & Fong-Beyette, 1987; McGregor et al., 2006). Lack of studies based on the survivors' perspective may contribute to such unhelpful experience encountered by survivors, caused by the knowledge gap among helping professionals.

Despite much intensive research and many clinical studies conducted to confront issues of childhood sexual abuse, many survivors have not received sufficient support and help (Glaister & Abel, 2001). In reviews of related studies, in 1987 one study had revealed that women survivors received unhelpful experience from their therapists (Josephson & Fong-Beyette, 1987). After a gap of many years, recent studies reveal women survivors still continue to encounter unhelpful therapy experiences (Koehn, 2007; McGregor et al., 2006; Stenius & Veysey, 2005). Hence, it is important to have more studies aimed at promoting a deeper understanding of the experiences of

healing from childhood sexual abuse based on the women survivors' perspective. The outcome of this study provides a channel for understanding women survivors of childhood sexual abuse and promotes quality services that women survivors deserve to receive from the helping professions.

Significance of the Study

This study aimed to understand women survivors' healing experiences of childhood sexual abuse. The outcome of the study contributes in three areas. The first area was aimed at creating awareness and understanding among the helping professions regarding the essence of the healing experience encountered by women survivors with the intention of enhancing the quality of the clinical work. The second area was aimed at contributing to educational training, especially for the new generation of helping professionals. Finally, the third area was aimed at contributing to psychotherapy theories in understanding women survivors healing from childhood sexual abuse.

In the first area, this study was intended to provide an in-depth understanding of the healing experience encountered by women survivors among helping professionals in order to enhance quality services for them. In Harper and Steadman's (2003) study, they reported that survivors who have a history of childhood sexual abuse are a unique group of clients considered challenging for the therapists because as survivors they require sensitive attention to ensure their well-being. In contrast, studies revealed women survivors came across poor quality services from therapists they have called upon for professional help (Armsworth, 1989; Koehn, 2007; McGregor et al., 2006; Stenius & Veysey, 2005).

Encounters with insensitive, passive, negative, and angry therapists continue to haunt and limit women survivors from attaining their deserved recovery from childhood sexual abuse. Thus, there is significant need to enhance helping professionals'

understanding of issues of childhood sexual abuse in particular based on the women survivors' perspective. Therefore, the outcome of this study was aimed at improving awareness and understanding among helping professionals in providing their services to this unique group of survivors.

In the second area, this study was aimed at contributing to education and training for the helping professions. Weaknesses in providing quality services among practitioners are significantly related to what and how much training the practitioners have received. Several studies reported therapists' inadequate training and knowledge in issues of childhood sexual abuse (Day, Thurlow, & Woolliscroft, 2003; Glaister & Abel, 2001; Janikowski & Glover-Graf, 2003).

In evaluating the therapists' competency in dealing with survivors of childhood sexual abuse, several studies recommended re-examination of current training programs for the helping professions (Campbell & Carlson, 1995; Koehn, 2007; Winkelspecht & Singg, 1998). Studies also recommended more specialized training on incest and child sexual abuse issues in counseling training programs (Hines, 1996; Koehn, 2007).

In the third area, this study was aimed at contributing to current psychotherapy theories in understanding women survivors healing from childhood sexual abuse. In this study, three psychotherapy theories were identified to provide understanding of healing experience encountered by the women survivors of childhood sexual abuse. These were existential theory, feminist theory and creative model therapy. All the identified models had their own strengths in describing healing experience of childhood sexual abuse. Existential theory and feminist theory are able to present the inner and outer resources that assist women in healing from childhood sexual abuse. Creative model therapy is able to present the processes that the survivors encountered in healing from childhood sexual abuse. Each theory successfully presented certain important aspects of healing; however each mentioned theory is unable to stand alone to describe

the resources and processes involved in healing from childhood sexual abuse. The outcome of this study is expected to be used by the theorists as a framework to enhance the current theories or generate new healing theories.

Outcomes of this study provide new knowledge about healing from childhood sexual abuse based on the women survivors' perspective. This can be used as a stepping stone to create awareness of the importance of the program related to child sexual abuse in both academic and practical fields in providing effective training for current and future helping professionals.

Purpose of the Study

The identified aim of this research was to obtain an in-depth understanding of the healing experience encountered by women survivors who had gone through or are going through the healing process from childhood sexual abuse. Outcomes of this study came from the sharing from the women survivors of childhood sexual abuse on their perspective of their own healing experience. Findings of this study provided new knowledge of healing from childhood sexual abuse, which may bolster helping professionals' intervention skills in providing psychotherapy services to women survivors as well as enhance education and training for helping professionals.

Conceptual Framework

The conceptual framework in a study is aimed at providing a tentative theory of the phenomenon that the researcher plans to investigate (Maxwell, 2005). Further, the conceptual framework is also perceived as a visual or descriptive product that aims to address the important things (keys factors, constructs, and variables) to be investigated in a study and to address the connection between the important things (Miles & Huberman, 1994). This section provides an overview of the healing constructs or

healing elements connected to healing childhood sexual abuse reported by women survivors.

In the proposal stage of this study, through literature review a total of six healing elements were identified and a conceptual framework based on the six healing elements was constructed. Figure 1 presents a visual picture of the initial conceptual framework of women healing from childhood sexual abuse.

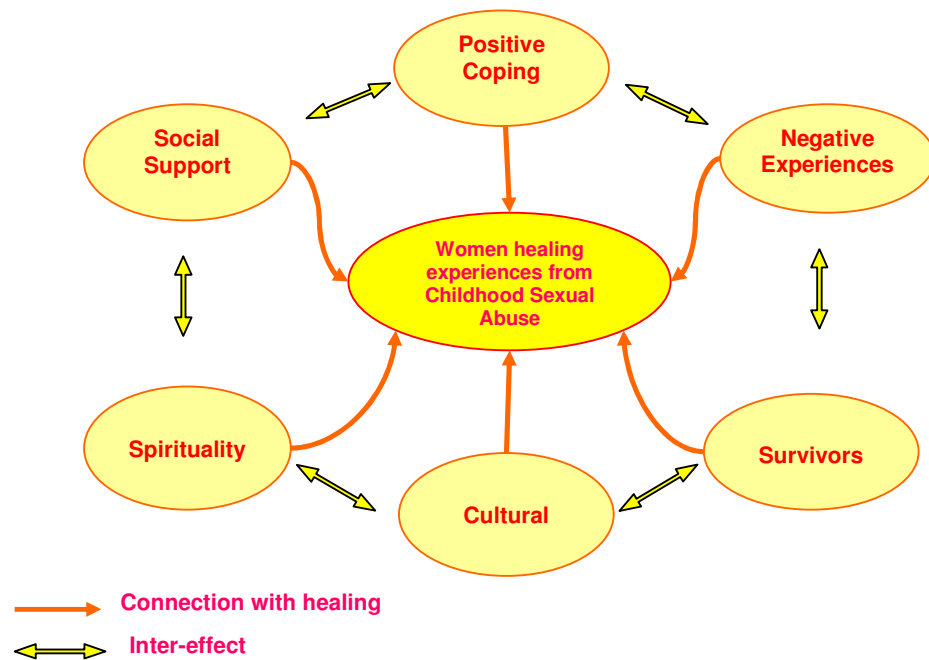


Figure 1. Proposed conceptual framework of women's healing experiences.

The healing elements were: positive coping, negative experiences, survivors' resiliencies, cultural support, social support, and spirituality. I used this conceptual framework as a guide throughout the study.

One of the healing elements associated with the aspect of reaching out to help oneself is termed survivors' resiliency. A numbers of studies discovered the connection between the survivors' resiliencies with healing from childhood sexual abuse (Bogar & Hulse-Killacky, 2006; Fopma-Loy & Fischer, 2005; Glaister & Abel, 2001; Hyman & Williams, 2001; Lam, 1994; Wright, Valentine, & Feinauer, 1993).

A number of quantitative studies also investigated aspects of coping. These studies revealed that positive coping promoted healing for women survivors of childhood sexual abuse (Frazier, Tashiro, Berman, Steger, & Long; 2004; Gall, 2006; Gibson & Leitenberg, 2001; Oaksford & Frude, 2003; Walsh, Blaustein, Grant Knight, Spinazzola, & van der Kolk, 2007; Wright, Crawford, & Sebastian, 2007).

Regarding the aspect of spirituality, women survivors reported spirituality played a significant role in helping them on the healing journey from childhood sexual abuse (Bogar & Hulse-Killacky, 2006; Valentine & Feinauer, 1993; Walker, 2007). Moreover, studies also found that the element of social support plays a significant role in helping survivors on their healing journey (Banyard & Williams, 2007; Glaister & Abel, 2001; Godbey & Hutchinson, 1996; Valentine & Feinauer, 1993).

Several studies reported women survivors of childhood sexual abuse encountered challenges and struggles in their healing journey from childhood sexual abuse (Glaister & Abel, 2001; Herman, 1992). Cultural factors have also been identified by feminist researchers as playing a significant role in lessening or increasing the negative impact of child sexual abuse (Gil, 1995; Kenny & McEachern, 2000).

All the healing elements are interconnected because each of the elements influences the others in the process of healing from childhood sexual abuse. Studies have reported that positive coping used by women survivors through their spirituality had led survivors to receive positive spiritual support, experience religious forgiveness, and adopt active surrendering to God (Gall, 2006). There is a strong link between support systems and survivors' resiliencies (Banyard, 1999; Hyman & Williams, 2001; Wright et al., 2005). One study revealed that social support received by the women survivors appeared to be a significant factor contributing to their resiliency (Hyman & William, 2001).

Outcomes of this study revealed additional healing constructs were involved in assisting women survivors in healing from childhood sexual abuse. There were a total of nine healing constructs reported: (a) Confronted with struggles, (b) Channels to express and reflect, (c) Acceptance, (d) Forgiveness, (e), Letting go and moving on, (f) Support from others, (g) Spirituality, (h) Helping self (resiliencies), and (i) Helping others. Figure 2 provides a visual picture of the healing constructs that were reported by women survivors of the study.

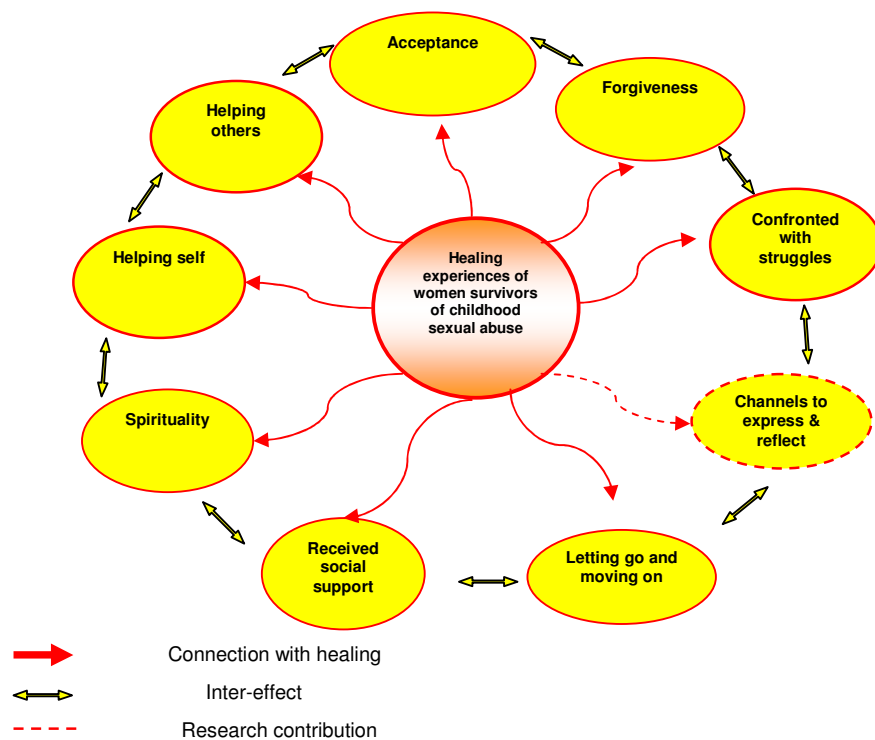


Figure 2. Women’s healing experiences from childhood sexual abuse.

Outcomes of this study reflect positively on the literature of women healing from childhood sexual abuse. Positive coping strategies were often reported as an important healing element in assisting women to recover from childhood sexual abuse, such as spiritual coping, forgiveness, acceptance, helping oneself and others, and letting go and moving on. Negative experiences such as encountering struggles in their healing

journey and positive experiences such as received social support were both addressed by women survivors as playing important parts in their healing from childhood sexual abuse.

Past and current literatures were weak in addressing the connection between the channels to express and reflect the healing from childhood sexual abuse. Most of the literature which addressed this element was often connected to trauma survivors (Bennett, Sullivan, & Lewis, 2005; King, 2002; King & Miner, 2000) but were not specifically focused on sexual trauma, particularly childhood sexual abuse. Thus, the healing element of “channels to express and reflect” was perceived as a valuable discovery of the study, and especially for those who are working with women survivors of childhood sexual abuse.

This study aimed at obtaining the essence of the healing of childhood sexual abuse experience by women survivors. Many studies have investigated elements connected to healing from childhood sexual abuse (Bogar & Hulse-Killacky, 2006; Glaister & Abel, 2001; Hyman & Williams, 2001; Lam, 1994; Valentine & Feinauer, 1993; Wright et al., 2005). However, most were conducted in Western settings. This study provided a channel for women survivors in an Asian setting to speak out and share their healing experiences.

Research Questions

In this study, the central question of, “How do women survivors experience healing from childhood sexual abuse?” was used to ensure an in-depth discovery. The essence of the healing experience of women survivors of childhood sexual abuse was sought.

Operational Definitions

For the purposes of this study, five important terms are here further clarified. They are woman survivor, child sexual abuse, childhood sexual abuse, healing experiences, and women survivors. The operational definition for each term is listed below.

Woman survivor. Defined as an adult woman above the age of 18 who experienced sexual exploitation before the age of 18 years old by another person or persons (Glaister, 2001).

Child sexual abuse. Defined by National Center on Child Abuse and Neglect (NCCAN) as

Contact or interactions between a child and adult when the child is being used for sexual stimulation of the perpetrator or another person. Sexual abuse may also be committed by a person under age of 18 when the person is significantly older than the victim or when the perpetrator is in a position of power or control over another child.

Finkelhor (1997), one of the pioneer researchers on issues related to child sexual abuse, stated that the definition formulated by NCCAN is the most reliable research definition of child sexual abuse.

Childhood sexual abuse. Defined as past experiences of sexual exploitation encountered by a woman survivor when she was still a child.

Healing experiences. Defined as personal experiences which enable oneself to move on from the suffering. The person can go to the extent of transcending the suffering, in which he or she goes beyond the limit or goes beyond the original experience (Egnew, 2005).

Women survivors. Defined as women who acknowledged they have gone through childhood sexual abuse and have declared they are in the stage of healing from childhood sexual abuse.

Limitation of the Study

The aim of this study was to gain in-depth understanding of women survivors of childhood sexual abuse. A total of 7 women survivors were identified through purposeful sampling. The outcome of the study findings cannot be generalized to all the women survivors of childhood sexual abuse in Malaysia.

Chapter Summary

Every year the statistics show a continued increase of reported cases of child sexual abuse (Pekwan, 2009). This is an unhealthy trend in the country and it requires immediate attention and action. In addressing this unhealthy trend in the country, the Malaysian government has implemented the Child Act 2001 to protect children from maltreatment. Since the Child Act was implemented, many child abuse survivors are served with justice by putting the sex offenders into jail. However, it is unable to erase the hurt and pain that survivors experienced.

An effective intervention is required to assist the survivors in overcoming their pain and hurt. In order to develop such an effective intervention, it needs women survivors' perspective on healing from childhood sexual abuse. One of the effective channels for women survivors to speak out their healing experience is through research studies based on their voices. Therefore, this study provided a channel for women survivors of childhood sexual abuse to voice out their healing experiences from childhood sexual abuse.

CHAPTER 2

LITERATURE REVIEW

This chapter is organized into five sections. They are: definitions of child sexual abuse, history of childhood sexual abuse, impact of childhood sexual abuse on women, research findings on healing from childhood sexual abuse, and deficiencies of findings of studies on healing experiences of women survivors of childhood sexual abuse.

Definition of Child Sexual Abuse

It has been a challenge for both researchers and clinicians to define childhood sexual abuse (Draucker & Martsof, 2006). There are no universally accepted definitions of what constitutes child sexual abuse, because there is no form of definition that includes all ranges of abuse and potentially abusive experiences (Glasser & Frosh, 1993). Therefore, different definitions of child sexual abuse from previous work are discussed (Browne & Finkelhor, 1986; National Center on Child Sexual Abuse and Neglect, 1978; Protect and Save the Children Association of Selangor and Kuala Lumpur, 2002; Schechter & Roberge, 1976; Webster & Hall, 2004;).

In early work done in the 1970s and 1980s, child sexual abuse was defined as a sexual activity that involved dependent, immature, mentally undeveloped children and adolescents who did not really understand the concept of sexual activity. Therefore, they were unable to give informed consent (Schechter & Roberge, 1976). Child sexual abuse was perceived as a sexual activity that occurred between a child with an older person, where the sexual activity was imposed either forcefully or coarsely (Browne & Finkelhor, 1986). In addition, child sexual abuse was also defined as

An interaction between a child and an adult when the child is being used for sexual stimulation of the perpetrator or another person. Sexual abuse may also be committed by a person under the age of 18 when that person is significantly older than the victim

or when the perpetrator is in a position of power or control over another child.

(National Center on Child Sexual Abuse and Neglect [NCCAN], 1978)

In the late 20th century, definitions of child sexual abuse were more detailed. In Webster and Hall (2004), child sexual abuse occurred when the child engaged in physical or nonphysical interaction with an adult in which the child was subjected to sexual exploitation, humiliation, or degradation. Protect and Save the Children Association (2002) uses a similar definition to Webster and Hall, by defining child sexual abuse as any form of sexual activity with a child that is performed by an adult or an older child which employed physical or nonphysical contact.

All the above definitions emphasized one important element: child sexual abuse involves a child and an adult or an older person engaging in sexual activity. There are no universally accepted definitions for child sexual abuse (Glasser & Frosh, 1993). However Finkelhor (1997), one of the pioneer researchers in child sexual abuse, suggested that the NCCAN definition seems to be the most consistent from the legal and research standpoint, and is thus the most appropriate definition used in the research context.

History of Childhood Sexual Abuse

Few studies have explored the history of childhood sexual abuse. Most of these studies consistently agreed that the early disclosure of the issues of child sexual abuse started with the introduction of the seduction theory by Sigmund Freud (Enns, McNeilly, Corkery, & Gilbert, 1995; Masson, 1984; McCullough, 2001).

Seduction theory was first introduced by Freud in 1896 based on his studies on hysteria patients (McCullough, 2001). According to McCullough (2001), seduction theory claimed that the suppression of sexual abuse memories had led the individual to

develop hysteria and obsession neuroses. Since the introduction of the theory, the issue of child sexual abuse surfaced for a few years. However, the theory was later abandoned by Freud and his desertion of the theory caused the issue to sink again.

In Freud's letter to his friend Fliess in 1897, he expressed suspicion of the validity of his study (Masson, 1985). In discussing his abandonment of seduction theory, Freud explained four reasons for his action (Ahbel-Rappe, 2006; McCullough, 2001). The first pertained to the therapeutic failure he experienced in dealing with his hysteria patients. Second, Freud reported that the great controversy of issues around incest in 1896 failed to be received as a welcome discovery. Third, Freud stated that he was unable to differentiate the truth and untruth of his clinical results. The final reason Freud decided to abandon the theory was because it was debatable and arguable.

There are concerns whether Freud really did abandon seduction theory or otherwise. There is a perspective that identified Freud's abandonment of the theory as a big mistake (McCullough, 2001). On the contrary, one viewpoint holds that Freud did not abandon the theory but instead decided to change his focus from seduction theory to fantasy theory (Ahbel-Rappe, 2006).

McCullough (2001) reported that after Freud had discovered the immense secret of child sexual abuse, he decided to detach himself from seduction theory and he worsened the situation when he replaced seduction theory with fantasy theory to cover up the connection between adult abnormality and childhood sexual abuse. McCullough wrote that Freud's action not only deceived his own patients but had the effect that most victims of childhood sexual abuse were not believed by people for many years.

Another group of researchers do not believe Freud abandoned seduction theory due to his discovery of child sexual abuse. Israels and Schatzman (1993) argued that Freud decided to give up seduction theory because he was unable to obtain the results that the theory predicted. Further, Ahbel-Rappe (2006) proposed that Freud may have

discovered a new understanding of fantasy through seduction theory that led him to further focus on and investigate that new discovery.

Both perspectives have their own view on Freud's action. However, Freud's action of replacing seduction theory with fantasy theory did leave a negative impact on victims of child sexual abuse, though Freud might have no intention to do so. Ever since fantasy theory was introduced by Freud, many children and women who claimed to have been sexually abused were treated as having a childhood fantasy by most of the medical and psychiatric professionals (Courtois, 1988; Herman, 1997). Subsequent work on fantasy theory had also generated the debate on the current charge of "false memory" of child sexual abuse (Enns et al., 1995). The discussion of "false memory" of childhood sexual abuse is addressed in detail in the next section of this review.

After many years of suppression of the child sexual abuse issues since the abandonment of seduction theory, the issues of childhood sexual abuse re-emerged in the early 1970s. The political and women's movement in the early 1960s and 1970s had a great contribution in bringing back awareness of sexual violence. As reported by Sisco, Becker, and Beck (2008), the political movements in the early 1960s had successfully raised the awareness of gender and racial discrimination toward women and minorities and this fight was continued by the women's movement that highlighted the issue of sexuality in the early 1970s. As a result, concern of both men and women on gender inequality and sexuality brought into focus the sexual violence that occurred in society (Sisco et al., 2008). In 1975, the National Institute for the Prevention and Control of Rape was set up and became the first government organization in the United States that made support and funding for research available to investigate sexual victimization (Koss, 2005). In addition, more funding was available for studies when the National Center on Child Abuse and Neglect (NCCAN) was started through the Child Abuse Prevention and Treatment Act of 1974 and it was assigned to provide

prevention, identification, and treatment for child abuse and neglect survivors (Wang, 2004).

The available funding and support on research had encouraged more studies on sexual violence on women and children. In the 1970s revolutionary feminist researchers such as Brownmiller (1975), Burgess and Holmstrom (1974), and Russell (1974) revealed the prevalence of violence against women and girls. The awareness that was created of sexual violence against women and girls then changed the direction of the studies from focusing on the characteristics of the abuser into improving the psychological well-being of the survivors (Donat & D'Emilio, 1992; Neville & Heppner, 1999). This change also shed light on other forms of violence against women such as childhood sexual abuse (Courtois, 1988).

In the 1970s, the advocacy for the awareness of childhood sexual abuse was a success. In the 1980s, the women's movement had successfully brought more public figures to step forward and bravely disclose their experience of childhood sexual abuse such as Oprah Winfrey, Maya Angelou, former US Senator Paula Hawkins and former Miss America Marilyn Van Derbur (Miller, 2003). Miller also addressed that public awareness from the disclosures led to implementation of sexual awareness programs in the school system. By the end of the 1980s, recognition of child sexual abuse as a legal concern in the United States was no longer just addressed to female survivors but also to male survivors (Sisco et al., 2008).

Although there was positive progress in creating awareness of childhood sexual abuse in the 1970s and 1980s, there was a setback and uncertainty in the 1990s when the False Memory Syndrome Foundation (FMSF) was first established in 1992 to confront and protest the action of professional licensed therapists breaking up families by imposing false memories into victims of sexual abuse (Miller, 2003). According to False Memory Syndrome Foundation (1992), "False Memory Syndrome" involved "a

condition in which a person's identity and interpersonal relationships are centered around a memory of traumatic experience which is objectively false but in which the person strongly believes." The advocacy of FMSF had an impact on the media by changing the attention from increasing awareness of child sexual abuse into doubting the effectiveness of psychotherapy and subsequently causing the survivors of sexual abuse to be perceived pessimistically (Enns et al., 1995).

The women's and children's movements both have contributed greatly in creating awareness of child sexual abuse in society as a whole. The issue of child sexual abuse went through an up and down cycle since the introduction of seduction theory by Freud. The journey to break the silence of childhood sexual abuse has been challenging not only for the survivors but for the women and children groups' activists as well.

Impact of Childhood Sexual Abuse on Women

Childhood sexual abuse leaves an impact on women survivors. Some survivors manage to move on from the traumatic experience but there are also survivors who are still struggling everyday to move on from the past. This section discusses the effects of childhood sexual abuse on women. The long term impact on survivors is the focus of discussion because long term impact studies concentrate on the effects of childhood sexual abuse on women.

The discussion on long term impact is divided into two categories; the first looks into effects on the survivor's intrapersonal self and the second category explores the effects on the survivor's interpersonal relationships. Both categories are interconnected because the way women survivors deal with themselves affects the way they deal with others.

Impact on Survivors' Intrapersonal Self

The impact on intrapersonal self in this section focused on the effect of childhood sexual abuse on the survivor's self. Discovering a sense of self is an important element for any person especially for survivors of childhood sexual abuse. Several studies were conducted to investigate the effects of child sexual abuse on a child's developing sense of self (Crowley, 2000; Matsakis, 1996; Roche, Runtz, & Hunter, 1999). Most of the studies investigated the survivor's construction of self which was connected with aspects of self-esteem, self concept, high-risk behaviors, and psychopathological illness.

One of the long-term effects of being a child abuse victim was the tendency to blame oneself which subsequently contributed to the development of low self-esteem (Ainscough & Toon, 2000; Cahill, Llewelyn, & Pearson, 1991; Jenny & Roesler, 2003). In related studies connected to the development of self-concept, one of the studies reported that women who had experienced childhood sexual abuse tended to have lower physical self-concept compared to nonabused women (Brayden, Deitrich-Maclean, Dietrich, & Altemeier, 1995). A more recent and comprehensive study on self-concept was conducted by Murthi, Servaty-Seib, and Elliott (2006) which showed female survivors with a history of childhood sexual abuse had lower self-concept in areas of family, affect, competence, and physical. The effect of lower self-concept and self-esteem might have led survivors to be drawn into high-risk behaviors.

A numbers of studies have investigated the high-risk behaviors indulged by women survivors of childhood sexual abuse. The element of high-risk behaviors is discussed in this section as risky behaviors are used by women survivors as a coping mechanism of childhood sexual abuse. Only three types of high-risk behaviors are identified for this discussion because these high-risk behaviors have received attention

by most of the researchers in this field. These are self-injury, high-risk sexual behaviors, and re-victimization.

Firstly, self-injury in this context is perceived as behaviors that cause physical harm to the survivors. A number of studies have been conducted to investigate the effect of child sexual abuse on women survivor's self-injury behaviors. One recent study reported that there was a significant relationship between childhood sexual abuse and self-injurious behaviors (Klonsky & Moyer, 2008). The result of this study is consistent with a previous study conducted by Neumann et al. (1996) in their assessment on the effect of childhood sexual abuse on women survivors which was related with depression, self-mutilation and suicidal thoughts or behaviors. Moreover, the study had also found a significant relationship between self-mutilation with childhood sexual abuse (Glassman, Weierich, Hooley, & Nock, 2007).

Secondly, the high-risk sexual behaviors are connected with the involvement of survivors in unhealthy sexual activities. Several studies have reported that women who are sexually abused in their childhood have a high risk of compulsive sexual behaviors (Browne & Finkelhor, 1986; Green, 1993; Polsuny & Follette, 1995). As reported by Finkelhor and Browne (1985), childhood sexual abuse experiences may have misled the child to connect sexual behaviors with reward, attention, and affection. Therefore, women survivors of childhood sexual abuse may use sex to meet nonsexual needs, for example, seeking love through sex, sexualizing nonsexual relationships, or using sex to manipulate others. A similar outcome of a study as reported by Arriola et al. (2005) showed that having a history of child sexual abuse was linked with high-risk sexual behaviors such as being involved in unsafe sex, engaging in sexual activities with different partners and being involved in the sex trade. Moreover, one of the studies conducted by Lukman (2009) with a group of Malaysian female adolescents involved

in prostitution revealed that fifty percent of these female adolescents had experienced childhood sexual abuse.

Thirdly, high risk behaviors are associated with the cycle of survivors continuously being victimized and are considered as one of the major long-term impacts of childhood sexual abuse. Re-victimization is described as the unwanted re-experiencing of an abusive experience (abusive experience or abusive behavior) which had happened in childhood (Clarke & Llewelyn, 1994). Studies have reported that women survivors of child sexual abuse tended to choose partners similar to their childhood abuser and compulsively attached themselves in the relationship (Fromuth, 1986; Russell, 1986). Results of the above study mirrored those conducted by Roodman and Clum (2001) and Arriola et al. (2005), wherein the outcome of the studies reported a significant connection between childhood sexual abuse with later adult sexual victimization. For example, women survivors who had experienced sexual abuse were twice as likely to refuse to report domestic violence in their marriage (Russell, 1986). Moreover, as reported by Schuetza and Eiden (2005), it was found that the survivors were at high risk for partner violence. An overview of the studies has shown that female survivors of childhood sexual abuse may continue to be trapped in a cycle of violence.

In addition to the three high risk behaviors, female survivors also risk suffering from psychopathological mental illnesses. As reported by McCullough (2001), seduction theory proclaims that the symptoms of hysteria and obsession neuroses were interrelated with the repression of the memories of childhood sexual abuse. In a study conducted by Smolak and Murnen (2002), having a childhood sexual abuse history had a significant relationship with developing an eating disorder. Paolucci et al. (2001) reviewed studies on child sexual abuse and found that it was connected with posttraumatic stress disorder, depression, suicidal intention, and early involvement in

sexual activities. Kaplow, Dodge, Amaya-Jackson, and Saxe (2005) also found connections between posttraumatic stress disorder with survivors of childhood sexual abuse.

Impact on Survivors' Interpersonal Relationships

Childhood sexual abuse impacts on survivors' interpersonal relationships. Several studies have examined the impacts in the domains of parenting and in relationship with others.

Survivors are reported to have weak parenting skills due to the negative impact of childhood sexual abuse. Several studies report that childhood sexual abuse survivors lack confidence in parenting, have negative perspectives of themselves as parents, use a hard approach in disciplining children and have weak emotional control (Banyard, 1997; Cole, Woolger, Power, & Smith, 1992).

Cohen (1995) found that incest survivors lack motherly skills for their children. DiLillo, Tremblay, and Peterson (2001) found that women survivors with a history of childhood sexual abuse were linked with a higher risk of physically abusing their own children. Another study based on the male partner's point of view found that the male partner reported that the children tended to become the secondary victim of the survivors (Barcus, 1997). Overall, these studies indicated that women survivors were weak in their maternal skills.

Several studies have examined the impact of survivors' dealing with relationships and consistently reported a negative impact related to their difficulties in coping with heterosexual relationships. One study found that survivors lack trust in men and indicated a fear of closeness with men (Romans, Martin, Anderson, O'Shea, & Mullen, 1995). This parallels research conducted by McNew and Abell (1995) who

reported that women survivors encountered a high level of conflict in dealing with others.

Women survivors who have difficulties in dealing with interpersonal relationships gave the following reasons: not being able to trust, not satisfied with the partner, and having a poor expression of self to the male partner (DiLillo & Long, 1999). Difficulties in dealing with men are understandable for them, as generally the sex offender is a male perpetrator.

In summary, almost all the studies agreed that a history of childhood sexual abuse is strongly linked with seriously retarded development in the intrapersonal and interpersonal relationships of women survivors. Therefore, it is important for therapists to understand the dynamics of the long-term impact on women so that they can provide the best suitable treatment for each survivor encountered. As reported by Harper and Steadman (2003), survivors of childhood sexual abuse form a unique group which requires sensitive care from the therapist to ensure their well-being.

Models of Healing

In searching for a model of healing from childhood sexual abuse, previous literature guided the researcher. Three healing models were identified for discussion and review: these are the Existential model, Feminist model, and Creative model. The following section describes each theory selected for discussion and offers description of healing from childhood sexual abuse based on each of them.

Existential Model

Previous literature indicated that suffering was an aspect of the healing women experienced in their journey of recovery from childhood sexual abuse. Although many theories describe healing from childhood sexual abuse, most of them are unable to

describe the aspect of suffering in detail. Thus, existential theory was chosen because it is able to describe the element of suffering as part of healing descriptively.

Conceptually, the existential theory was born from the phenomenological philosophy of “humanness.” This theory believes humans are driven by searching for meaning in the subjective world that they are living in (Corey, 2008). Existential psychotherapists perceived human life as having four fundamental issues of death, meaning, freedom, and isolation (Frankl, 1984; May, 1983; Yalom, 1980).

The existential theory perceives that childhood sexual abuse caused much damage to a person’s sense of being. Fisher (2005) states, “when a child grows up in a home marred with sexual abuse, her world is turned inside out: What is true becomes hidden and a lie becomes reality” (p. 16). This suppression of an intuitive self in survivors caused their inability to connect with their internal guide and consequently they are unable to develop trusting relationships which will affect their sense of being in the world (Fisher, 2005).

The existential model believed childhood trauma leaves an impact on the person’s being in the world. As reported by Fisher (2005), the lens of existential psychology in understanding human trauma in childhood abuse emphasizes the survivors “being” in the world. As stated by two existential philosophers Schneider and May (1995),

Trauma originates, not in relation to parents, peers . . . but in relation to being, to the groundlessness that is our condition. Hence, it is not so much the specific content of the abuse or pain that unnerves us so, but the implications of that content for our being in the world. (p. 145)

Survivors living a life constricted by lies have limited themselves to obtain a sense of connection with their own truth and as a result the ability to search for meaning was jeopardized (Fisher, 2005). As mentioned by Schneider and May (1995) “meaning comes from intentionality or inward realization” (p. 171). Therefore, when

the survivors keep denying the inward realization of the childhood sexual abuse, this action is equal to taking away the meaning of their lives (Fisher, 2005).

In existential theory, the self of being and the searching of meaning both play a significant role in an individual's journey to recovery. The essential of self of being was addressed by Bugental (1981), and the important search of meaning was addressed in detail by Frankl (1984). Both perspectives are further described.

Bugental (1981) believed the aim of existential therapy is assisting survivors to attain the most "authentic personhood" (p. 72). Authenticity was defined by Bugental (1981) as awareness of "a way of being in the world in which one being is in harmony with the being of world itself" (p. 33). This awareness has four main qualities (Bugental, 1981) and it can be used to describe healing one's sense of being from childhood sexual abuse. The four main qualities of healing of self are: (a) finiteness; the survivors learn to accept the limitation of their own awareness; (b) the survivor recognized her own potential to act and decided to be responsible or take control of her own life; (c) the survivors recognized they have choices and autonomy; and (d) separateness; the survivors obtain awareness of humans as "separate yet related to each other" (Bugental, 1981, p. 57).

In searching for meaning, Frankl (1984) states, "each man is questioned by life, and he can only answer to life by answering for his own life; to life he can respond by being responsible" (p. 131). In existential theory there are three ways for survivors to find meaning in life. They are: (a) through creating a work or doing a deed, (b) by experiencing something or encountering someone, and (c) by the attitude we take toward unavoidable suffering (Frankl, 1984). Healing from childhood sexual abuse starts taking place when women survivors found the way to search for meaning.

First, the meaning can be discovered by forming a work or doing a deed. This way of finding meaning is very connected to a person's accomplishment and

achievement in life (Frankl, 1984). One study on a woman survivor of childhood sexual abuse revealed the woman survivor found her meaning in life by volunteering herself in the Rape Crisis Centre (Lantz, 1991). The study revealed the survivor obtained sense of meaning in life by reaching out to other survivors of sexual violence.

Second, searching for meaning through experiencing something or encountering someone was addressed as “the meaning of love” (Frankl, 1984, p. 134). In Frankl’s perception, an individual is able to understand the essence in a person by loving them. He believes when a person decided to love another person, it would allow the individual to see the character and potentials in the beloved person. Moreover, this action of love enabled the beloved person to discover their own potential and actualized their potentialities. Several studies revealed that love and support from the support system are significant and important for many survivors in their healing journey of childhood sexual abuse (Banyard & Williams, 2007; Glaister & Abel, 2001; Godbey & Hutchinson, 1996; Valentine & Feinauer, 1993). Thus, love is given and received from the support system and assists survivors in searching for meaning in life.

Third is to accept that suffering is part of life. In existential theory, the belief is that suffering is unavoidable (Frankl, 1984). There are many circumstances where individuals are unable to change a situation such as experienced trauma caused by war, child sexual abuse, loss of a loved one, and others. However, Frankl (1984) stressed, “For what then matters is to bear witness to uniquely human potential at its best, which is to transform a personal tragedy into a triumph, to turn one’s predicament into human achievement” (p. 135). This perspective is parallel with several studies on women survivors’ healing experiences that revealed survivors encountered some form of negative experience such as sadness throughout the healing process (Glaister & Abel, 2001; Phillips & Daniluk, 2004).

The existential theory is focused on oneself in overcoming the childhood sexual abuse experience. Thus, for a person to gain ultimate healing, it required acknowledging one's limitations and recognizing one's potential. Existential theory emphasized the importance of acknowledging that suffering is part of healing, learning to accept oneself and one's past, and learning to be responsible for one's recovery.

In sum, the existential theory's description of healing is parallel with the research outcome. All of the women survivors faced struggles in their journey of recovery. It required them to accept and forgive themselves in the process of recovery from childhood sexual abuse. Women survivors expressed they were actively making the decision to let go and move on. Existential theory describes well how women survivors are able to build and use their inner resources in assisting them to experience healing. However, the theory was weak in addressing outer resources which can provide powerful assistance to women survivors to recover from childhood sexual abuse.

Feminist Model

Feminist researchers have made a major contribution to the literature related to child sexual abuse especially from the aspect of understanding it from the cultural perspective. The Feminist model is considered as one of the key models that highlighted the element of social support in assisting women survivors healing from childhood sexual abuse. This model helps to understand ways in which society plays a significant role in helping women recover from childhood sexual abuse.

Purvis and Ward (2006) describe three feminist models which included Radical Feminism, Postmodern Feminism, and Sociological Feminist theory. Each of the theories emerged through evolution in time which corresponded with the development of the women's movement in society, and particularly in America.

From the perspective of Radical Feminism, sexual violence happened due to the patriarchy system which had caused all the men to have power over all women and children (McLeod & Sarage, 1988). On the other hand, Postmodern Feminism has a broader perspective, based on the belief that child sexual abuse happens because of the power placement on men (Purvis & Ward, 2006). Finally, the Sociological Feminist theory (Cossins' power or powerless theory) perceives child sexual abuse behaviors as occurring because the man experienced a sense of powerlessness (Cossins, 2000).

The feminist theories have emphasized the importance for the therapist to highlight the survivor's resilience, strengths, and capacity to achieve her life goals (Cohen, 2008). Thus, feminist theorists believe healing starts taking place when the survivors are able to recognize their inner strengths and inner resources. This is consistent with outcomes of several studies revealing that survivors' resiliencies play a significant role in the healing process (Hyman & Williams, 2001; Lam, 1994; Wright et al., 2005).

Feminist theorists argue that cultural factors play an important role in facilitating the impact of child sexual abuse (Gil, 1995). Thus, it is important for the survivors to be aware of how sexual violence behaviors are connected with social constructed power imbalance. From the feminist perspective, the person with less power is more vulnerable to betrayal compared with the person who has the power (Brownmiller, 1975). Hence, they believe in encouraging healing for women survivors of childhood sexual abuse through education of their rights, advocate changes in the law and creating awareness of gender inequality due to power. Based on that above principles feminists successfully created much awareness in public issues pertaining to sexual violence in the early 1970s and 1980s (Sisco et al., 2008).

Feminists also asserted the importance of the survivors' involvement in activities for social change in contributing to survivors' healing (Cohen, 2008). Enns

and colleagues (1995) asserted that a woman being involved in social change is an intervention on behalf of the survivors' rights and other women's rights. Cohen (2008) proposed activities such as providing support to other survivors, involvement in political, educational, and legal reform, and raising awareness with peers. Feminist theory believed that social awareness of power imbalance and reinforcement of the survivor's resiliencies are great contributions to healing for women survivors of childhood sexual abuse.

In sum, the feminist theory has a wider perspective on healing from childhood sexual abuse compared with the existential model. Feminist theory emphasizes the importance for women survivors to use their inner resources (oneself) as well the outer resources (social factors). Feminist theory also highlighted the aspect of resiliencies (Cohen, 2008), social cultural factors (Gil, 1995), and reaching out to help other survivors (Cohen, 2008).

Creative Model

The Creative model was proposed by Meekums (1999). It provides comprehensive description of the healing process of childhood sexual abuse (Meekums, 1999) encountered by women survivors rather than sources that contribute to survivors' healing.

This model of creative recovery consists of four phases. The first is identified as "Striving." In this phase, women survivors encounter despair and struggle to continue to survive from childhood sexual abuse. The second phase is identified as "Incubation," where women survivors will search for outlets to express the unexpressed. The third phase is named "Illumination," where women survivors gain a new perspective after undergoing the process of expressing the unexpressed. Finally, the last phase is termed "Evaluation," where women survivors decide to let go of the past and move on for a better future.

The creative recovery model showed a very strong similarity to the healing processes gone through by the women survivors of this study. The “Striving” phase paralleled the outcome of the study, in that women survivors revealed that they were confronted with many struggles and challenges in their healing journey. The “Incubation” phase matched with the outcome of the study in which women survivors used different channels to express and reflect particularly their intense emotion. The third “Illumination” phase matched with the outcome of the study which described women survivors’ experience of forgiveness and acceptance. In this phase, women survivors reconciled with their past by accepting their past. The final “Evaluation” phase was similar with the outcome of the study which described women survivors after having gone through forgiveness and acceptance, then being led to the stage of letting go and moving on from the past. This theory was able to effectively present the healing processes encountered by women survivors; however it lacks an emphasis on the inner and outer resources in assisting the women survivors of childhood sexual abuse.

In conclusion, both the existential theory and feminist theory highlighted the resources used by the women survivors. The creative model emphasized the healing processes that women survivors have gone through in their healing journey. Outcome of the study revealed experiences of women survivors healing from childhood sexual abuse consist of healing processes and healing resources to assist them in their recovery journey. Thus, to understand women healing from childhood sexual abuse required integration of both aspects which consist of resources as well as process of the healing in order to provide a holistic perspective on healing. Based on the outcome of the study, each model has its own limitation in describing healing, thus it required integration of all the three models to provide a deeper understanding of the healing experience encountered by women survivors. Thus, one outcome of the study is the

recommendation to further explore in order to generate a more comprehensive theory on women survivors healing from childhood sexual abuse.

Quantitative Research on Women Survivors' Healing Experiences

In the following discussion, research findings on women survivors' healing experiences from childhood sexual abuse have the focus. Several studies have contributed to the research findings on healing experiences from childhood sexual abuse (Fassler et al., 2005; Gall, 2006; Hyman & Williams, 2001; Merrill, Thomsen, Sinclair, Gold & Milner, 2001; Murthi & Espelage, 2005; Wright et al., 2005). Identified elements such as the survivors' resiliency, coping, social support and culture are highlighted for discussion.

Survivors' Resiliencies

Resiliency has been defined as an interaction between biological factors, psychological factors, and social factors with the aim of protecting an individual from harmful effects, and it leads an individual to a thriving adjustment (Barnard, 1994; Luthar & Zigler, 1991; O'Connell-Higgins, 1994). Thus, resiliency can be considered as an internal force in an individual's response to stress and threat, and this internal force promotes good adjustment.

Several studies have investigated the elements of resiliency that contribute to healing from childhood sexual abuse (Hyman & Williams, 2001; Lam, 1994; Wright et al., 2005). One of the early studies on women survivors of childhood sexual abuse revealed a positive relationship between resiliency and adult adaptation (Lam, 1994). In Lam's (1994) study, it was shown that the higher the level of resiliency in women survivors, the higher the adult adaptation. In her study, she concluded the need for clinicians to facilitate resiliencies in the survivors by identifying and developing the strengths in women survivors.

The experience of revictimization during adulthood may be significantly linked with resiliency in women survivors. A study by Wright et al. (2005) revealed that women who were resilient had less experience of continued battering in adulthood in comparison with nonresilient survivors. The study outcome indicated a similar finding in a previous study conducted by Liem, James, O'Toole, and Boudewyn (1997) in which the survivors with resilience had lower self-destructiveness in their personal characteristics. Therefore, the chances of being revictimized are lower for survivors who have higher resiliency.

The resiliency factor in women survivors triggered great interest among researchers. It led many researchers to investigate factors that promoted resiliencies in survivors of childhood sexual abuse (Banyard, 1999; Brand & Alexander, 2003; Hyman & Williams, 2001; Johnson & Kenkel, 1991; Leitenberg, Greenwald, & Cado, 1992; Steel, Sanna, Hammond, Whipple, & Cross, 2004; Wright et al., 2005). Three factors are identified and highlighted for discussion, namely, coping, social support system, and culture.

Coping

Coping is conceptualized as a range of thoughts and behaviors used to deal with inner and outer stress and threat (Folkman & Lazarus, 1980; Lazarus & Folkman, 1984). A number of studies investigated the element of coping in promoting healing for women survivors of childhood sexual abuse (Frazier et al., 2004; Gall, 2006; Gibson & Leitenberg, 2001; Oaksford & Frude, 2003; Walsh et al., 2007; Wright et al., 2007).

Resiliency and coping strategies in adult survivors of childhood sexual abuse are interrelated. The resiliencies in women survivors enable them to promote positive coping. However, coping strategies used by women survivors do not necessarily promote resiliencies. For example, the negative coping strategies such as avoidance and denial are connected with self-reported distress and symptomatology (Brand &

Alexander, 2003; Johnson & Kenkel, 1991; Leitenberg et al., 1992; Steel et al., 2004).

Therefore, the positive coping of women survivors is emphasized in this section in order to obtain a deeper understanding of healing from childhood sexual abuse.

Recent studies reviewed positive coping strategies such as seeking support and gaining a sense of control over recovery that enabled survivors to experience positive changes in life (Frazier et al., 2004; Walsh et al., 2007). Studies focusing on positive coping, such as finding meaning in the abusive experiences, were associated with less social isolation in the adult's life (Draucker, 1995; Wright et al., 2007). Another study also revealed that constructive coping was only weakly connected with symptomatology (Merrill et al., 2001). Similarly, Gall (2006) reported that positive spiritual coping was connected to lower depressive mood. In Gall's (2006) study, positive spiritual coping was connected with receiving spiritual support, experiencing religious forgiveness, and using active surrendering to God. Wade and Worthington (2003) reported that victims gained positive feeling through forgiving the perpetrator. In sum, positive coping strategies enabled survivors of childhood sexual abuse to discover positive opportunities (i.e., discovering the meaning of the experiences), and this led to less social isolation as well as lower level of suffering from mental illnesses.

Social Support

Social support as conceptualized by Cobb (1976) is defined as "information leading the individual to believe that he or she is cared for, loved, esteemed and valued, and is a member of a network of communication" (p. 300). There are two areas to highlight. The first area addressed social support received from individuals who are close to the recovering woman. The second area focused on social support received from the community that the survivors are living within, helping women survivors experience healing from childhood trauma.

Regarding the first area, social support received from individuals that are close to the family members consist of family members, friends, as well as partner. A number of studies have highlighted the connection between support system and high resiliency in women survivors (Banyard, 1999; Hyman & Williams, 2001; Wright et al., 2005). Receiving social support from someone special at some point in life appeared to be a significant factor in women survivors with high resiliencies (Hyman & Williams, 2001). Thus, it is not surprising that receiving social support from a spouse or a partner functions as a strong protective factor that prevents women survivors from suffering depressive symptoms (Wright et al., 2005).

In addition, Murthi and Espelage (2005) found that women survivors of child sexual abuse who had strong social support claimed to suffer less psychological loss compared to those who claimed to receive little support from their social environment. Receiving social support from family and friends was significantly connected with experiencing less sense of loss in aspects of personal development, interpersonal relationships, sexuality, and self-esteem. Bourdon and Cook (1994) found that peers have a unique position that enabled validation of the survivors' stories of childhood sexual abuse. Further, Bourdon and Cook (1994) expressed the unique position of peers who were capable of influencing how the survivors felt about themselves and their childhood. Receiving support from the mother after disclosure of the abuse had been identified as one of the facilitating factors that led to the survivors' adjustment to the abuse (Browne & Finkelhor, 1986; Everson, Hunter, Runyon, Edelsohn, & Coulter, 1989).

Several studies have reported the positive side of the social support system in promoting survivors' resiliencies and leading to healing from childhood sexual abuse. However, Merrill et al. (2001) found that the connection between social support and healing from childhood sexual abuse was weak. They reported that childhood parental

support had little impact on the women survivors' adjustment from childhood sexual abuse.

Although the Merrill et al. (2001) study indicated a weak connection between social support and women survivors' adjustment from childhood sexual abuse, nevertheless other studies (Banyard, 1999; Browne & Finkelhor, 1986; Everson et al., 1989; Hyman & Williams, 2001; Wright et al., 2005) have noted a strong connection between social support and women survivors' healing from childhood trauma. Hence, the contribution of the social support element is to be acknowledged as an important factor in facilitating healing for survivors.

The second element of social support addressed such support given by the community the survivors were living within which brought positive impact to the survivors healing from childhood sexual abuse. Feminist researchers often addressed the importance of the cultural value of a community impact of the survivors healing from childhood sexual abuse.

Cultural factors addressed in this section consist of the aspects of cultural beliefs and values held by the society (Kenny & McEachern, 2000). Cultural factors are perceived as able to facilitate the impact of the sexual abuse through management of the disclosure of abuse (Kenny & McEachern, 2000). As stated by Gil (1995):

Cultural issues are relevant to child sexual abuse in three major ways: how cultural beliefs or attitudes contribute to family climates in which children can be abused; how cultural organization prohibits or hinders disclosure; and how culture plays a role in seeking or accepting social service or mental health assistance. (p. xiii)

Despite the importance of this element, the cultural factor is often neglected by many researchers and psychologists (Kenny & McEachern, 2000; Purvis & Ward, 2006). Very few studies have examined the effect of culture and as a result, there is little knowledge about how race, ethnicity, and culture are related to sexual abuse (Kenny & McEachern, 2000). Pertaining to aspects of disclosure of the abuse, Black

and White families in the United States are generally more supportive toward the victim when compared to Hispanic and Asian-American families (Roa, Di-Clemente, & Ponton, 1992). When comparing the White and Black communities in United States in term of handling disclosure of sexual abuse, studies revealed mothers from Black communities tended to be more accepting toward the abuse information (Pierce & Pierce, 1984). Though several studies have reported the influence of cultural factors on healing of women survivors from childhood sexual abuse, the cultural factor remains uncertain due to a lack of studies from this aspect.

In conclusion, empirical studies on healing from childhood sexual abuse have successfully highlighted a few important factors that facilitate healing. They consist of the survivors' resiliencies, positive coping, and social support in assisting women in their recovery process. However, these identified factors may not be enough to obtain a holistic understanding of women survivors' healing experience from childhood sexual abuse because they were not conducted fully based on women survivors' perspective on healing. Therefore, studies based on women survivors' perspective are needed in order to provide a holistic perspective. The next section discusses and reviews findings from studies based on the perspective of women survivors of childhood sexual abuse.

Qualitative Research Based on Women Survivors' Perspective

A number of qualitative studies involve in-depth interviews with women survivors which were conducted to investigate their healing from childhood sexual abuse (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006; Glaister & Abel, 2001; Koehn, 2007; McGregor, Thomas, & Read, 2006; Parker, Fourt, Langmuir, Dalton, & Classen, 2007). Healing experiences of women survivors of childhood sexual abuse are connected to the aspects of survivors' self and resiliency, spirituality, social support, and negative experiences.

Self and Resiliency

Childhood sexual abuse has a strong impact on a child's developing sense of self, which has been well-recognized in the trauma field (Crowley, 2000; Herman, 1992; Roche, Runtz, & Hunter, 1999). Thus, one of the therapist's tasks in assisting women survivors in the recovery process is to help them develop a more positive perspective of self and challenge their defective assumptions of self (Courtois, 1988; Crowley, 2000; Dolan, 1991; Draucker, 1992; Herman, 1992; Matsakis, 1996; Roche et al., 1999; van der Kolk, van der Hart, & Burbridge, 1995).

Bogar and Hulse-Killacky's (2006) study revealed that in the healing process from childhood sexual abuse, women survivors experienced a sense of high self-regard. The outcome of the study showed that the survivors made mindful decisions to change their negative perspective of self. Valentine and Feinauer (1993) revealed that the aspect of believing in oneself enhanced the survivors' high self-regard and this was significantly important for the survivors to heal from childhood sexual abuse. In the study by Glaister and Abel (2001), women survivors expressed that the inner strength and belief in themselves had led them to a healing journey. Their inner strength and belief were sometimes discovered by the survivors themselves and at other times were discovered through a therapist or family members (Glaister, 2001).

The element of self has led many researchers to investigate this aspect of resiliency in the survivors. Resiliency in the survivors was described as an inner force that responded to stress and threat. Several studies have been conducted to investigate the connection of resiliency with healing from childhood sexual abuse. One revealed that women survivors described resiliency in them was facilitated by their having social skills, competency, having high self-regard, spirituality, and experiencing helpful life experiences (Bogar & Hulse-Killacky, 2006). A similar study was conducted by Valentine and Feinauer (1993) with the aim of identifying resiliency themes in women

survivors of childhood sexual abuse. Six themes emerged: capabilities to seek emotional support not only from the family but also outside the family, believing in self, spirituality, having an external attribution for blame and cognitive style (i.e., not blaming self for what happened and believing that a future free from abuse is possible), having an inner locus of control, and a positive perspective on life (Valentine & Feinauer, 1993).

Sandberg (1997) used an in-depth interview approach with 15 survivors with the aim of discovering the elements that contributed to survivors' recovery and resilience. Again, six themes were found: conditions of positive connection, positive view of self, acceptance, proactive approach to the world, solace, and existential perspective (meaning searching) as a platform for recovery.

Another qualitative study which involved in-depth interviews with a total of 15 women survivors of childhood sexual abuse found that women perceived that the resiliencies in them played a significant role in assisting them to not give up on healing (Glaister & Abel, 2001). The women survivors identified the two elements connected with the resiliency, namely (a) inner strengths and beliefs, and (b) understanding and accepting of what had happened (Glaister & Abel, 2001). According to this study, inner strength and beliefs in self had led the women to not give up and commit to making a decision to heal. Understanding and acceptance of what had happened has led them to forgive and accept themselves. In the same study, survivors also revealed religious beliefs as one of the supportive factors encouraging them to find acceptance of themselves.

In reviews of the studies on resiliencies, the element of positive coping consistently emerged. This consistency revealed the importance of the connection between resiliencies and positive coping of women survivors of childhood sexual abuse.

Discussion in the following section is focused on studies of the women survivors' healing connected with positive coping.

Positive Coping Strategies

Several qualitative studies revealed aspects of positive coping in assisting women survivors recover from childhood sexual abuse. There are many forms of positive coping addressed by women survivors, such as positive spiritual coping, acceptance, forgiveness, sense of direction, and reaching out to help other. Each of these is discussed in this section.

Spirituality. A study conducted by Bogar and Hulse-Killacky (2006) found that women survivors reported that spiritual beliefs have played a significant role in their recovery from childhood sexual abuse. In the Bogar and Hulse-Killacky study, women survivors revealed that they have experienced spiritual transformation in their life and several women survivors have described how their faith in God had offered them a sense of protection and acceptance. Tedeschi and Calhoun (1995) have a similar stand with Bogar and Hulse-Killacky pertaining to the connection between trauma and spirituality. They stated:

To prevent traumatic events from shaking foundations of meaning the individual's sense of purpose and value must be universal and enduring Because religion deals in universal truth and ensuring values, it can preserve meaning in the face of the violation of permanence or invulnerability. (Tedeschi & Calhoun, 1995, p. 73)

The connection between trauma and spirituality was perceived by Tedeschi and Calhoun (1995) as the element of spirituality enabling the trauma survivors to find meaning out of the traumatic event.

In a study by Valentine and Feinauer (1993), the women survivors have described how spirituality had helped them in many ways. They described receiving much support from their spiritual support network. Further, through spirituality they

found the meaning of the past; it freed themselves from blame and guilt and assured that they have worth and value. In addition, one of the studies on two women survivors (mother and daughter) from incest childhood trauma had revealed they discovered the spiritual meaning of the abuse (Walker, 2007). They both identified the sexual abuse trauma that they went through as a suffering of Jesus Christ.

The above studies had revealed how spirituality elements contributed to healing from childhood sexual abuse. The aspect of searching for meaning appeared often in the mentioned studies. Thus, the searching for meaning through spirituality may have served a significant role in helping survivors overcome their trauma.

Acceptance. Several qualitative studies looked into the aspect of acceptance. One revealed that women experienced self-acceptance in the recovery journey and it helped them to enhance their sense of self (Phillips & Daniluk, 2004). Several studies revealed that the survivors' acceptance of what had happened in the past emerged as one of the important themes of healing for women survivors of childhood sexual abuse (Banyard & Williams, 2007; Glaister & Abel, 2001; Sandberg, 1997).

Glaister and Abel (2001) revealed that women survivors experience healing through acceptance of the past. Sandberg (1997) also revealed that women survivors experience healing through acceptance and the acceptance is connected to accepting negative aspects in oneself. In another study by Banyard and Williams (2007), women survivors narrated how acceptance of what had happened had assisted them in recovery from childhood sexual abuse. Acceptance of what had happened in the past and acceptance of oneself were in turn reflected as important positive coping strategies used by women survivors.

Forgiveness. Beside acceptance, forgiveness as well was perceived as one of the important positive coping strategies that helped women survivors recover from childhood sexual abuse. Several studies revealed the aspect of forgiveness in helping

women survivors experience healing. A qualitative study conducted by Bogar and Hulse-Killacky (2006) revealed a strong connection between forgiveness and personal closure with the past and this helped the women survivors to move on from the past. This study supported Herman (1992) who described forgiveness as a way used by women survivors to allow them to overcome their past.

Most of the articles agreed that forgiveness helped women survivors experience healing. However, several researchers as well writers have a different perspective on forgiveness. They go against the perspective of imposing forceful forgiveness on the victims to forgive the perpetrators (Bass & Davis, 1994; Kennedy, 2000; Lagaree, Turner, & Lollis, 2007). They revealed unforgiveness is capable of bringing positive impacts to the survivors and stated that on the other hand in certain circumstance forgiveness may actually bring harm to the victims (Lagaree et al., 2007). As several writers perceived, actions of demanding forgiveness can cause more harm to the victims such as being blamed if they failed to forgive the perpetrator (Kennedy, 2000) or the victims' feelings were denied (Bass & Davis, 1994). In sum, there are different perspectives on forgiveness, and positive coping through forgiveness is often associated with survivors' experience of healing from childhood sexual abuse.

Sense of direction (letting go and moving on). Women survivors expressed the importance of having a sense of direction in the journey to recovery from childhood sexual abuse, as it was one of the identified positive ways of coping. Having a sense of direction was often connected to letting go and moving on from the past. In their qualitative study, Bogar and Hulse-Killacky (2006), unveiled how women survivors experienced a moving on process which had helped them to redirect their thoughts and energy away from the negative emotions that came with the childhood sexual abuse.

Considering the aspect of letting go, studies revealed women survivors experience transformation from a negative self to a positive self. Phillips and Daniluk

(2004), in their qualitative study, discovered women experienced transformation in their healing journey through letting go of the identity of the victim and embracing the identity of survivors. Parallel studies emphasized the importance of letting go of the victim identity and moving on to survivor identity (Courtois, 1988; Draucker, 1992; Herman, 1992). Bass and Davis (1994) have a similar perspective, and further, they believe the action of letting go will lead them to the point of being able to move on from the past. In the process of moving on, they believe women survivors will encounter some form of integration of body, sexuality, feelings, as well as intellectual understanding (Bass & Davis, 1994).

In sum, studies revealed the process of letting go associated with release from the negative feelings and negative thoughts. Moving on was perceived as a process that arrives after the process of letting go. Both aspects of letting go and moving on are interrelated and interconnected.

Reaching out to help each other. Another aspect of positive coping was linked with reaching out to help each other. In a qualitative study, Lantz (1991) revealed women survivors learned to appreciate life through reaching out to other survivors. Another qualitative study conducted by Bauer and McAdams (2004) reported people gained higher well-being when they were able to reach out to others and connect with the community around them. Further, Dierick and Lietaer (2008) found that the individuals' sense of self-confidence increased when they were able to assist others. Survivors expressed being able to build a sense of self when they were involved in community work (Banyard & Williams, 2007). Lantz (1991) reported that a woman survivor found meaning and appreciation of life by volunteering at the Rape Crisis Centre. Hence, helping others was perceived as having a very powerful and positive impact on women survivors of childhood sexual abuse.

Although most studies revealed that positive coping had positive impact on women survivors' healing, from another perspective it was suggested that this coping strategy may lead to negative impact on women survivors. This perspective is based on the concern women survivors are overly pushed or forced to move on from the past and this may cause women survivors to fail to go through a grief process (Knauer, 2002). Women survivors are encouraged to have sufficient time to experience grief and have a strong support system themselves before they reach out to help others (Knauer, 2002). Hence, this coping strategy is encouraged for use when women survivors are ready to reach out.

Social Support

Both researchers and women survivors consider social support as an important element in healing from childhood sexual abuse. Social support discussed in this section not only focuses on the support system from the family but includes support received from other individuals. Several studies have indicated social support as playing a significant role in helping survivors in their healing journey (Banyard, 1999; Banyard & Williams, 2007; Glaister & Abel, 2001; Hyman & Williams, 2001; Godbey & Hutchinson, 1996; Valentine & Feinauer, 1993).

In one of the early studies conducted by Valentine and Feinauer (1993), when 22 women survivors of childhood sexual abuse were asked about factors considered helpful that they had encountered in their healing journey, the women survivors expressed that one of the important elements was the ability to search for emotional support outside the family. A recent study (Banyard & Williams, 2007) illustrated the importance of family support in the survivors' recovery journey. Banyard and Williams (2007) used multiple methods which involved quantitative structured interview and qualitative interview. Twenty-one women survivors were identified to have an in-depth exploration of their recovery from childhood sexual abuse, and they cited both internal

resources and external resources of social support. Internal resources were the motivation to improve their relationship with their children and motivation to have better lives for their children. External resources of social support were receiving support from family such as family members never giving up on them.

Another qualitative study conducted by Godbey and Hutchinson (1996) with 10 incest survivors aimed at discovering helpful elements in women survivors' healing journey from childhood sexual abuse. This study's outcome revealed two elements connected with the social support system: working with the therapist and receiving emotional support from family and friends. The outcome of this study was partially similar with the outcome of the study conducted by Glaister and Abel (2001) who found that the support system identified by women survivors were therapists, partners, family members, friends, group members, and minister. This corresponds with another qualitative study which revealed receiving social support from someone special in life emerged as one of the significant factors in women survivors with high resiliency (Hyman & Williams, 2001). Moreover, Glaister and Abel (2001) have also discovered that survivors gained a sense of support through spirituality in relationships (spiritual relationship with God, church, angels, and nature).

The above studies have shown that social support based on women survivors' perspective can be divided into two aspects. First is related to outer social support received from the social support system: family members, friends, therapist, partners, group members, sponsors, church and minister (Banyard & Williams, 2007; Glaister & Abel, 2001; Godbey & Hutchinson, 1996; Hyman & Williams, 2001; Valentine & Feinauer, 1993). Second is connected to inner resources the survivors received through relationship with others: the survivors' relationship with God and children that had driven them to the healing journey (Banyard & Williams, 2007; Glaister & Abel, 2001).

Negative Experience

While most of the studies' findings show that the healing processes of women survivors are associated with positive experiences (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006; Koehn, 2007; Parker et al., 2007; McGregor et al., 2006), several studies revealed negative experiences encountered by women survivors throughout their healing journeys (Glaister & Abel, 2001; Phillips & Daniluk, 2004). One qualitative study reported by Phillips and Daniluk (2004) was aimed at exploring how women survivors framed their own identity after the process of counseling. In their study, 7 women survivors from childhood sexual abuse were identified and the survivors shared their recovery experience through therapy. One of the themes that emerged and was shared by women survivors was the sense of sadness they encountered as well as loss of energy spent in coping and surviving from the trauma. In the Phillips and Daniluk (2004) study, the women survivors described the healing process as an extremely long and difficult journey.

Similarly, the outcome of the study by Glaister and Abel (2001) shows that women survivors describe their healing journey as very difficult and painful, however manageable. They expressed how it was a difficult process for them because they needed to undergo changes to reach the stage of acceptance and well-being (Glaister, 2000).

The element of negative experience or suffering is consistent with work done by Herman (1992), who found that most of the women survivors she had encountered expressed that they had gone through a tough process to enable them to move out from the "contaminated identity" (p. 93). Women described that when they were outside the therapy room they felt a sense of self-loathing, shame, and invisibility (Herman, 1992). Thus, for women survivors to move out from their contaminated identity, it required them to continue to struggle with a sense of self-loathing, shame, and invisibility.

Consistent with another study conducted by Phillips and Daniluk (2001), women survivors experienced a sense of sadness and loss of their energies, due to tremendous effort used to cope with the past trauma.

There are not many previous studies that investigated the negative aspects of the experience of women survivors in their healing journey from childhood sexual abuse. However, the outcome of the studies presented above is sufficient to show value in the element of negative experience, considered as one part of the healing of women survivors. Thus, this healing element should not be denied but rather, should continue to be evaluated in the research work involved with the survivors of childhood sexual abuse.

Outlets to Express and Reflect

The aspect of outlets to express and reflect was reported in several studies connected to women survivors from childhood sexual abuse. Outlets to express are connected to outlets to express intense emotion. Outlets to reflect are connected to having outlets for the survivors to reflect their thoughts.

In studies on outlets to express, these studies revealed positive influence on women survivors who were enabled to express their intense emotion (Gupta, Bonanno, Putnam, Keltner, & Trickett, 2011; Farber, Khurgin, & Feldman, 2009). Gupta and colleagues (2011) reported expression of angry emotion assisted women survivors to have better social adjustment (Gupta et al., 2011). Moreover, another group of researchers believes women survivors experience catharsis by expressing their emotions through self-disclosure (Farber et al., 2009). Several studies were skeptical on this aspect due to concern that it may bring negative impacts on the trauma survivors. One of the studies reported greater externalizing of the symptoms (Bennett, Sullivan, & Lewis, 2005) and greater interpersonal struggles (Luterek, Harb, Heimberg, & Marx, 2004) were encountered by the survivors when they expressed anger, which parallels

Marx and Sloan (2002), who revealed that emotion expression from trauma survivors led to greater psychological distress.

Pertaining to the outlets to reflect, several studies have investigated the connection between the outlets to reflect and healing (King, 2002; King & Miner, 2000; Paez, Velasco, & Gonzalez, 1999; Pennebaker, Mayne, & Francis, 1997). Studies revealed the positive as well negative impacts to have outlets to reflect thoughts for the trauma survivors (Paez et al., 1999; Pennebaker et al., 1997). Pennebaker et al. (1997) reported research participants discovered new perspectives through “writing” about the grief they had gone through. Paez et al. (1999) revealed that “writing” had assisted trauma survivors in discovering an outlet to think about the trauma and eventually helped them to reduce the impact of the trauma.

Some studies also revealed the negative impacts of having outlets to reflect back on the trauma incident (Lyubomirsky, Sousa, & Dickerhoof, 2006; Paez et al., 1999). Lyubomirsky et al. (2006) unveiled the negative impact on the trauma survivors through talking and writing about the trauma. Another study addressed the research participants who found difficulty in expressing their emotions and thoughts through writing, and reported that the survivors have negative perception toward the trauma event (Paez et al., 1999).

In sum, previous studies have a different stance on the outlets to express and reflect as healing elements for trauma survivors. Studies revealed the positive impacts as well the negative impacts, thus the role of this element as healing element is debatable. Hence, more research on this element is required to enable further understanding of its value in assisting women survivors recovering from childhood sexual abuse.

As a conclusion, healing from childhood sexual abuse based on women’s perspective consists of elements such as self resiliency, positive coping strategies,

social support, negative experience, and outlets to express and reflect. The review on the above qualitative studies shows that all of the healing elements are interrelated. Each element is able to influence other elements to promote healing experience in the women survivors of childhood sexual abuse.

The elements of healing reported in studies in the previous section and studies based on women survivors' perspective in the current section revealed both similarities and differences. The similarities in healing elements consist of resiliency, social support, and positive coping strategies. On the other hand, the differences in healing elements consist of outlets to express and reflect negative experience. The similarities and the differences in the studies might have caused the deficiencies in existing literature on understanding healing experience. Hence, the next section is aimed at addressing the gap and the deficiencies that occurred in the literature on healing from childhood sexual abuse.

Deficiencies in Literature on Healing Experience of Women Survivors

This section is aimed at addressing two important deficiencies in the current literature on understanding healing experience of women survivors of childhood sexual abuse. The first identified deficiency is that the current existing literature indicates a significant lack of studies from women survivors' perspective on healing from childhood sexual abuse. The second identified deficiency is related to the existing gap in understanding the women survivors' healing experiences from childhood sexual abuse among the researchers and therapists. Both deficiencies are interrelated, wherein the first deficiency might have led to the second deficiency in literature on healing from childhood sexual abuse. In other words, the lack of studies from women survivors' perspective might have caused the gap in understanding on healing from childhood sexual abuse existing among the therapists and researchers.

Lack of Studies Based on Women Survivors' Perspective

The first identified deficiency is associated with the lack of studies on women survivors' perspective on healing from childhood sexual abuse. This phenomenon is noted not only in Malaysia but in developed countries as well. To further understand the first deficiency, studies connected to childhood sexual abuse in both Malaysia and developed countries were reviewed.

In Malaysia every year the statistics on child sexual abuse reported by the Social Welfare Department show there has been a tremendous increase (Pekwan, 2009). Despite the statistics showing a significant increase in the number of reported cases of child sexual abuse, studies related to child sexual abuse in this country are rare. After an intensive search on literature related to child sexual abuse in the Malaysian context, several studies were found and reviewed. A total of seven local studies investigated the issue related to child sexual abuse (Dunne et al., 2008; Lukman, 2009; Kassim, 1995; Nor Shafrin, 2007; Nor Shafrin & Rohany, 2009; Singh et al., 1996; Sonamuthu, 1993).

The first two early studies were conducted by Sonamuthu (1993) followed by Kassim (1995) to investigate the demographics of the child victim of sexual abuse reported to government hospitals in Malaysia. The third study conducted by Singh et al. (1996) investigated the prevalence of childhood sexual abuse in Malaysia with the Malaysian paramedical students. The fourth study was conducted by Dunne et al. (2007) and it aimed at understanding the Asian Chinese community perception on child maltreatment including child sexual abuse. The fifth study carried out by Nor Shafrin (2007) investigated the level of depression and behaviors indicative of child victims of sexual abuse. The sixth study was conducted by Nor Shafrin and Rohany (2009) and was aimed at investigating cognitive distortion and coping style used by the sexual abused child in Malaysia. Finally the last study related with child sexual abuse was

investigated by Lukman (2009) to explore the connection between childhood abuse with the childrens' involvement in prostitution.

Out of these seven studies, only one study conducted by Singh and colleagues focused on adult survivors and used a survey methodology. The aim of the study was to investigate the prevalence of childhood sexual abuse in a group of trainee doctors (Singh et al., 1996). Another study examined the Asian community's perspective on child maltreatment which included child sexual abuse (Dunne et al., 2008). Of the five remaining studies, all were conducted on child survivors (Kassim, 1995; Lukman, 2009; Nor Shafrin, 2007; Nor Shafrin & Rohany, 2009; Sonamuthu, 1993). The above studies conducted in Malaysia indicate a significant lack of focus on adult survivors especially women survivors. The development of child sexual abuse studies in Malaysia is still at an infancy stage in comparison with most of the developed countries. Therefore, there is a significant need to initiate more studies related with childhood sexual abuse in Malaysia, and especially with a focus on women survivors.

In developed countries, research related with childhood sexual abuse can be categorized into three generations of research findings (Merrill et al., 2001; Wang, 2004). The first generation research findings addressed the negative impact on child sexual abuse (Freshwater, Leach, & Aldridge, 2001; Jumper, 1995; Neumann et al., 1996). The second generation research findings attempted to address the elements that facilitated the different experiences between the survivors (Fassler et al., 2005; Merrill et al., 2001; Murthi & Espelage, 2004). Finally, the third and latest generation of research findings addressed the recovery process interplayed by the factors identified in the second generation research findings (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006).

A similar phenomenon of lack of studies based on women survivors' perspective on healing from childhood sexual abuse in developed countries was noted.

Glaister and Abel (2001) had explored hundreds of journal articles related to issues of childhood sexual abuse and they found only eight studies that emphasized the perspective of women survivors and, of these, only four were based on voices from women survivors. A recent study by Walsh et al. (2009) reviewed studies related to adult coping with childhood sexual abuse. A total of 38 studies were identified and out of these only 11 studies were conducted using descriptive qualitative methodology based on women survivors' perspective on coping with childhood sexual abuse.

The above review shows the limited number of qualitative studies based on women survivors being conducted in order to understand the healing experience from childhood sexual abuse. The phenomenon of limited qualitative involved in-depth enquiries may have created a gap in understanding of women healing from childhood sexual abuse.

The Gap in Understanding Healing From Childhood Sexual Abuse

The second deficiency reflected in the existing literature pertains to the gap in understanding healing from childhood sexual abuse that occurred among therapists, researchers, and survivors. The gap of understanding is further explained in detail based on the discussion in the two groups of studies, addressed in the previous section. The first group involved review of quantitative studies on healing from childhood sexual abuse (Fassler et al., 2005; Gall, 2006; Hyman & Williams, 2001; Merrill et al., 2001; Murthi & Espelage, 2005; Wright et al., 2005). The second group consisted of qualitative studies based on women survivors' perspective of healing from childhood sexual abuse (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006; Glaister & Abel, 2001; Koehn, 2007; McGregor et al., 2006; Parker, Fourt, Langmuir, Dalton, & Classen, 2007). Review of the two groups of studies revealed similarity and differences in understanding healing experiences from childhood sexual abuse.

Similarities appearing in the healing elements are survivors' resiliencies and social support given. Differences reflected in the healing elements are positive coping, spirituality, and negative experiences. Both quantitative and qualitative studies agreed on the importance of these two elements in assisting women survivors in their healing journey from childhood abuse. However, the elements of spirituality and negative experiences were not successfully highlighted in the quantitative studies. The qualitative studies based on women survivors' perspectives enabled explanation of the elements of negative experience and spirituality related to their healing from childhood sexual abuse in detail. Pertaining to the element of positive coping, it was not directly highlighted in the qualitative studies. However in these qualitative studies the elements of support system and spirituality were both reported by the women survivors in their healing journey from childhood sexual abuse. Hence, the qualitative studies seemed able to provide a more comprehensive perspective on healing compared to the first quantitative group of studies.

This suggests that there is a significant gap of understanding of healing that occurred between researchers and women survivors. This existing gap is believed to have created some negative impact on clinical work as well as inadequacy in the training of helping professions such as psychiatrists, psychologists, counsellors, social workers, and therapists. The first negative impact is associated with therapist training in dealing with women survivors of childhood sexual abuse. The second negative impact is connected to women survivors experiencing unpleasant and unhelpful services from their therapists. These negative impacts are both being evaluated to provide further understanding of the gap mentioned above.

This first subsection is aimed at addressing the negative impact in therapists' training. Since the report of the Division Task Force was first introduced by the American Psychology Association (APA), all psychologists need to identify, teach, and

practice based on empirically supported treatments (EST) (Deegear & Lawson, 2003). Therefore, it can be concluded that most of the helping profession training and clinical works are based on empirically supported treatment. Thus, impact of the gap that occurred in empirical studies on healing of childhood sexual abuse has affected interaction between the therapists and women survivors, and this caused concern in the helping profession field. The next section addresses several studies and reports on therapists' experiences of inefficacy in assisting women survivors of child sexual abuse due to inadequate training.

A number of studies have revealed that therapists faced challenges and difficulties in providing quality services to women survivors of childhood sexual abuse. One of the studies conducted by Day, Thurlow, and Woolliscroft, (2003) revealed that therapists feel uncomfortable in dealing with cases related to survivors of childhood sexual abuse. The same study also revealed the therapists' capability in working with women survivors was connected with the training and supervision that they received. These parallel the findings of another study which unveiled that therapists encountered difficulties in serving the survivors of childhood sexual abuse due to inadequate training (Janikowski & Glover-Graf, 2003).

In another study based on the women survivors' perspective carried out by Glaister and Abel (2001), it was found that the survivors expressed that the therapists they encountered were lacking in training and that they had yet to work out their own recovery. The phenomenon reported in the above studies (Day et al., 2003; Glaister & Abel, 2001; Janikowki & Glover-Graf, 2003) is supported by a previous study conducted by Campbell and Carlson (1995), which showed that less than 40% of the helping professionals had received training on issues of child sexual abuse.

The above studies revealed evidence that lack of adequate training and knowledge among helping professionals affects their competency in serving women

survivors of childhood sexual abuse. Consequently, appropriate education, training, and knowledge pertaining to childhood sexual abuse is important to be made available to helping professionals for incorporation in their academic and practical training (Campbell & Carlson, 1995). Campbell and colleagues had also recommended that courses related to child sexual abuse be offered in graduate degree programs and also in the continuous learning programs.

This second subsection is aimed at addressing the studies that reveal how women survivors received unpleasant and unhelpful therapy experiences from their therapists. Lacking studies based on women survivors' perspective of childhood sexual abuse may have narrowed the opportunity for therapists to obtain deeper and comprehensive understanding of healing from childhood sexual abuse. Hence, it created occurrence of therapists over generalizing the childhood trauma which can lead to therapy errors (Dale, 1999; Herman, 1992; Kluft, 1992; McGregor, 2001; Pearlman & Saakvitne, 1995; Wilson & Lindy, 1994). The errors that occurred in the therapy have resulted in unpleasant experiences for the women survivors.

Several early studies and the current studies based on women survivors' perspective on unpleasant and unhelpful experience are both discussed in this section. One of the early studies was conducted by Armsworth (1989); the study examined the hindering events experienced by 30 female survivors of childhood incest. He had discovered a total of four hindering impacts: lack of validation of the survivors' experience, blame the survivors, unconstructive responses from the therapist, and maltreatment of the survivors. Another study involving 37 incest survivors had unveiled the unhelpful experiences encountered by them in the counselling process: therapists minimizing the significance of the abuse, feeling uncomfortable, ignoring the disclosure, rushing survivors, being extremely interested in the sexual details, and expressing anger toward the survivors (Josephson & Fong-Beyette, 1987).

Several current studies revealed that women survivors continue to encounter similar unhelpful experiences with their therapists. Women survivors revealed that their unpleasant experiences were caused by the therapists such as being passive, overstating the objectivity, misunderstanding the meaning expressed by the survivors, and the therapists expressing anger toward them (McGregor et al., 2006).

Women survivors have also revealed that the therapists lacked trauma sensitivity and had poor attitudes that resulted in an unpleasant therapy experience for them (Stenius & Veysey, 2005). In addition, one of the qualitative studies based on 51 women survivors of childhood sexual abuse identified eight hindering behaviors: (a) counsellor pushing agenda to the survivor, (b) counsellor did not offer choices, (c) poor response to criticism, (d) response to client unequal and not respectful, (e) sexual interest, (f) dismiss client's suggestion, (g) expectations regarding forgiveness, and (h) not consulting with an alter identity (Koehn, 2007).

Moreover, it was also disclosed that women survivors expressed that their healing process was interfered with due to not being listened to, not being understood, and not being empowered in a way conducive to growth (Glaister & Abel, 2001). Despite undergoing an unpleasant therapy experience, some of the survivors disclosed that they were not willing to confront the therapists when the therapy sessions were not going well (Dale, 1999).

The studies on unhelpful therapy experiences of the women survivors have triggered interest in researchers since the 1980s. After many years of neglect this phenomenon continues to receive attention from many researchers (Koehn, 2007; McGregor et al., 2006; Stenius & Veysey, 2005). Thus, it created questions for therapists and researchers such as, "What does healing from childhood sexual abuse mean to women survivors?" and "What do women survivors really want in healing from childhood sexual abuse?" Unfortunately, the existing literature reflected therapists

and researchers' lack of understanding of healing from childhood sexual abuse based on the women survivors' perspective.

Existing literature indicated a significant gap in understanding of healing from childhood sexual abuse. Therefore this study hoped to provide further knowledge and understanding of healing from childhood sexual abuse based on women survivors' experiences of childhood sexual abuse. The new knowledge is expected to enhance the quality of counselling work with survivors, and the ultimate aim is to provide a deserved recovery process for women survivors of childhood sexual abuse.

Chapter Summary

The area of women survivors healing from childhood sexual abuse has been receiving remarkable attention from many researchers in the field. However, research outcomes based on the experience of women survivors of childhood sexual abuse is still limited. Lack of studies based on women survivors' perspective had created a gap in understanding healing from childhood sexual abuse between researchers and women survivors, reflecting an imbalance in current studies in this area. Thus, more studies based on the women survivors' perspective are encouraged because it enables provision of a more holistic perspective on women survivors' healing from childhood sexual abuse.

CHAPTER 3

METHODOLOGY

This chapter describes the chosen research method for this study in detail. Description of the research method is expected to provide deeper understanding of the phenomenological approach and procedures involved in the process of collecting data from women survivors of childhood sexual abuse. This chapter consists of descriptions of the phenomenological research design, the researcher, data collection, data analysis, the potential risks and benefits, the trustworthiness of the study, and chapter summary.

Phenomenological Research Design

The study aimed at providing an in-depth exploration of women survivors' healing experience which allowed the researcher to obtain rich descriptions from the women survivors. Of all the qualitative designs, the phenomenological approach was considered to be the best fit for this study because it allowed the researcher to obtain an in-depth understanding of the women survivors' healing experience. Phenomenological research design enabled the researcher to conduct an in-depth inquiry and obtain understanding on a phenomenon based on the personal experiences and meaning constructed by an individual (Colaizzi, 1973; Osborne, 1994; Moustakas, 1994). In other words, the phenomenological approach enables researchers to understand what specific experiences mean to a person and provides a complete description of the experience (Moustakas, 1994).

Thus, the aim of this section is to provide a deeper understanding of the phenomenological approach. There are two subsections. The first subsection explains what the phenomenology approach is and types of phenomenology approaches, whereas the second subsection provides a better understanding of which

phenomenological approach best suits the study and gives reasons for its choice for this study. Two phenomenological approaches were identified for discussion; transcendental phenomenology (Moustakas, 1994) and hermeneutic phenomenology (van Manen, 1990).

Transcendental phenomenology was first introduced by philosopher Edmund Husserl (1859–1938) who was also considered the founder of phenomenology (Khatijah, 2007). Husserl expressed his concern about human science research in search of fact and essence of knowledge (Moustakas, 1994). He asserted there is a big gap between facts and essences, and writes, “Essence provides on one side knowledge of the essential nature of the real, on the other, in respect of the domain left over, knowledge of the essential nature of the non-real” (Husserl, 1931, p. 45). In seeking to obtain the essence of experience, Husserl believed in the importance of the researcher putting aside all pre-interpretation and being open to all inward experiences as a new and pure experience through “epoche” or bracketing (Husserl, 1970; Khatijah, 2007).

Epoche is a Greek word, “meaning to stay away or refrain” (Moustakas, 1994, p. 85). According to Moustakas (1994), the epoche or bracketing is a condition whereby researchers need to put aside their own prejudgments, biases, and preconceived ideas about the phenomenon that they investigate. This action enables the researcher to have a clearer mind, space, and time to receive what will come out from the study (Moustakas, 1994).

Moreover, bracketing is a process that prepares the researchers to be purely open and gain new knowledge from the phenomenon they are examining (Moustakas, 1994). To achieve this stage of pure openness required courage of the researcher to be transparent to self. Moustakas expressed this transparency of self as one of the greatest challenges in the epoche process because the researcher needs to perceive the emerged phenomenon with a completely open manner. Moustakas proposed that the researcher

do reflection and self-dialogue, examine his or her own intention, and finally the researcher needs to examine his or her own attitude and frame of reference.

Hermeneutical phenomenology has a different stand on researchers' bracketing. Hermeneutical phenomenology was first introduced to the research world when Husserl's student, Heidegger (1889–1976) argued that it is impossible for human interpretation to not be influenced by ideas, values, or experience (Khatijah, 2007). Max van Manen, an educational theorist who had the same belief as Heidegger, recognized it was important to acknowledge the researcher's interpretation (Clarke, 1999; Plager, 1994). He stressed that phenomenology is not just a description but also an interpretative process that involved researchers providing interpretation to the meaning that emerges from lived experiences (Cresswell, 2007). Therefore the researcher plays a significant role to “mediate” the different meanings throughout the research process (van Manen, 1990).

Which type of phenomenological approach (transcendental or hermeneutical phenomenology) best suits the present study? The following subsection explains.

Most studies require a research approach that connects with the problem statement of the study, the objective of the study, and coming up with research questions (Cresswell, 2007). Very often all these components are integrated in a consistent manner to ensure all parts are interconnected (Morse & Richards, 2002). Hence, all the above components require separate attention in making decisions to choose a right approach for the study.

The aim of this study is to have in-depth understanding of the women survivors' perspective on their healing experience. The outcome of the study is intended to provide a clearer picture regarding the healing experience of women survivors for those in the helping professions and researchers.

As mentioned in chapters 1 and 2, many women survivors have experienced challenges in gaining understanding from the people in their environment, and especially from the therapists that they seek (Campbell & Carlson, 1995; Stenius & Veysey, 2005). There is a need for studies that provide a platform for women survivors to tell their experience of healing and provide a clearer picture of their experience. Therefore, the phenomenological design that emphasizes women survivors' interpretation rather than the researcher's was most suitable for this study. Among the two phenomenological approaches, the transcendental phenomenology approach is deemed to be the best fit for this study because it was able to highlight the women survivors' perspective on their healing from childhood sexual abuse, with minimal pre-interpretation and maximal openness to the experiences by the researcher.

Researcher

In this section, the researcher's background, role, and biases are addressed to ensure the researcher is transparent with her own prejudgment and preconceived ideas of issues of childhood sexual abuse (Moustakas, 1994). Further, this action is also intended to address a controversial issue that often happens in qualitative research, wherein the researcher is the primary instrument for the data collection and analysis (Cresswell, 2007; Merriam, 2001). Subsequently the researcher will play a significant role in describing the meaning of the data collected from the participant (Merriam, 2001). Therefore, the explanation about the researcher's background, role, and personal biases of the study are necessary to be described. As proposed by Denzin and Lincoln (2000), it is part of qualitative research methods to ensure that information that pertains to training, fieldwork, data collection procedures, and data analysis be reported.

Researcher's Background

The researcher has been working as a licensed counsellor for 10 years. Throughout this time, she has encountered adult and children survivors of childhood sexual abuse. Providing services to the survivors of childhood sexual abuse has triggered her interest in this issue. This specific interest had led her to work with women and children's groups. She has worked as a counsellor and trainer in local nongovernmental agencies, namely All Women's Action Society (AWAM) and Women's Development Society (WDC). In AWAM and WDC she has served women survivors who experienced childhood sexual abuse, domestic violence, sexual harassment, and rape. In addition, she has served as a trainer in Protect and Save the Children Association (PSC) to create awareness on the issue of childhood sexual abuse. PSC at the time was the only nonprofit organization focused on issues related to child sexual abuse. Throughout the years that she served in AWAM, WDC, and PSC, she conducted training related to the issue of child sexual abuse to adult groups who were involved in servicing survivors of child sexual abuse such as counsellors, psychologists, psychiatrists, social workers, doctors, nurses, school teachers, police officers, and other service providers. She has also been involved in providing sexual abuse prevention programs known as "personal safety" programs to children from preschool, primary, and secondary schools.

During her work as a counsellor and trainer, there were many projects or programs about violence against women and children that were carried out by AWAM, WDC and PSC. However there was not any specific project or program to assist women survivors of childhood sexual abuse. This phenomenon increased the researcher's eagerness to understand how women survivors of childhood sexual abuse manage in their daily life. The experiences above have guided the researcher to have a strong passion for issues related to women survivors of childhood sexual abuse. As a

result of this passion, the researcher initiated this study and sought to use this study as a stepping stone for her to get to know and understand the phenomenon of childhood sexual abuse.

Role of the Researcher

In this study, women survivors of childhood sexual abuse were the primary source to obtain information on their healing experiences, gathered through interviews. According to Seidman (2006), interviewing enables access to the context of people's behavior and thus it also gives a platform for researchers to understand the meanings of the behaviors. As described by Seidman (2006), "the root of in-depth interviewing is an interest in understanding the experiences of other people and the meaning they make of the experience" (p. 9). Therefore in this study, the researcher's primary role was as an interviewer.

Biases in the Researcher

As part one of the actions to ensure the trustworthiness of the data, the researcher decided to identify her own personal biases on issues of childhood sexual abuse, in order to increase her awareness and minimize the influence of personal biases to influence the study's outcomes. A total of five biases were identified: (a) childhood sexual abuse is a traumatic experience that causes negative impact to women survivors, (b) healing from childhood sexual abuse is possible for women survivors, (c) survivors require a long process to heal from childhood sexual abuse, (d) in order to understand the experience of healing from childhood sexual abuse, the perspective of women survivors who had undergone the experience is required, and (e) survivors have their own internal resources that can guide them toward healing. Throughout the process of data collection, the researcher continued to remind herself not to be influenced by her personal biases particularly in the process of interview sessions as well as in the process of analyzing data collected from the interview sessions.

Data Collection Phase 1

In data collection phase 1, the researcher reported the sampling process and selection of participants. In the sampling process procedure section, the researcher describes the two levels of sampling involved. Level one sampling is to address the avenue to access women survivors, and level two is to identify suitable sampling methods. Next, in the section on selection of participants the researcher reports the criteria for women survivors who were chosen to be part of the study.

Sampling process (level one sampling). In the first level of the sampling process, the researcher used several strategies to gain access to women survivors (e.g., approached related organizations, used media advertising, and used the researcher's social networks). In the initial phase, the researcher approached women's groups, children's groups, and counselling centers to gain access to women survivors. However, responses were negative from the women's group, children's group, and counselling centers. Two major reasons were given by the organizations for the negative responses. The first reason was connected with the unwillingness expressed by the women survivors to share their history of childhood sexual abuse. The second reason was associated with therapists' concerns that their clients may be traumatized if they participated in the study.

Next, the researcher advertised the details of the research in several newspaper publications, and again the researcher was unsuccessful to access to any women survivors to participate in the study. Finally, the researcher decided to email the details of the research to all the people she knows through several social networks. Further, the researcher also took every single opportunity to talk about the study with people she met. As a result, the researcher was able to acquire a total of 10 women survivors' contact numbers. They were given to the researcher with the consent of all the women survivors of childhood sexual abuse.

Sampling process (level two sampling). This section focuses on the methods of sampling that were used for this study. A description of purposeful sampling is followed by a discussion of selected purposeful sampling methods for this study. In a general qualitative study, the researcher uses purposeful sampling to obtain data. In purposeful sampling the selection of the research participants is based on the criteria that he or she will be the best person to assist the researcher in understanding the phenomenon under study (Cresswell, 2008). In this present study, the aim was to understand women's healing experiences from childhood sexual abuse. Therefore women survivors who had gone through such healing experience were selected as research participants.

There are a variety of purposeful sampling methods in qualitative studies. However for this study only two purposeful sampling methods were identified and used as a guide. The first method of purposeful sampling was maximal variation sampling in which the researcher selects participants with different "characteristics" (Cresswell, 2008; Miles & Huberman, 1994). The aim was to obtain research data from women survivors that come from different age groups, ethnicities, and social classes. Pertaining to age group, the researcher was able to access women survivors' age range from 20s to 50s. In terms of recruitment of participants from different ethnicities, the researcher's initial plan was to recruit Malays, Chinese, and Indians as research participants but it was not successful. However, the researcher was able to access Chinese and Malay women survivors to participate in the study. Finally, the researcher was able to gain access to a group of women survivors from different social classes. The women survivors ranged in occupation from an executive director to child caretaker.

The second method of purposeful sampling was snowball sampling. Creswell described the snowball sampling method as when the researcher requests participants to suggest another person for the study (Creswell, 2008). This method was used by the

researcher in the process of collecting data. The researcher had approached the women survivors who had been identified as study participants to recommend other survivors who they have encountered who had undergone a similar experience. However, it was not successful. This was because the women survivors perceived childhood sexual abuse as past history they reluctantly disclosed openly with others, thus they decided to keep within themselves. Hence, there was limited opportunity for women survivors to access other women survivors of childhood sexual abuse.

Selection of Participants

In this study, 7 women survivors from childhood sexual abuse were selected. The selection of the women survivors was based on a series of criteria which was set for the purpose of this study. Identified criteria were: (a) the current age of the participant, (b) the age the participant first experienced the abuse, (c) the duration of child sexual abuse encountered by the participants, and (d) the participant's declaration of healing from childhood sexual abuse.

The first criterion was related to the participant's current age. For the purposes of this study, the targeted age of the participants was 21 years old and above. This criterion was aimed to recruit women survivors who had reached an adult status in the legal perspective. The criterion was also to ensure that participants of the study were capable of understanding and provide informed consent to participate in this study.

The second criterion pertained to the age the participants first experienced the abuse. For this study, the researcher recruited female participants who had experienced sexual abuse when they were less than 18 years old. This criterion was based on the Child Act of 2001 which categorized a person below 18 years old as legally defined as still a child. In this study, the women survivors' age of experienced sexual abuse was between 6 and 17 years old.

The third criterion was connected with the duration of the participants' exposure to sexual abuse. In this study, the research was aimed to recruit women survivors who acknowledged that they experienced with minimum of twice incidences of childhood sexual abuse within a year. The aim of the criterion was to ensure there are similar dynamic between the women survivors involved in this study. In this study, it revealed women survivors had encountered at least three times sexual abuse incidences within a year. Further, study had also discovered the duration of women survivors experienced childhood sexual abuse ranged range from at least 1 year to 10 years.

Finally, the fourth criterion was that participants' declaration that they are healed or in a stage of going through healing from childhood sexual abuse. This criterion was selected to ensure participants were able to provide the essence of healing from the phenomenon of child sexual abuse. This criterion was a necessary evaluation of the participants' readiness and enabled the researcher to avoid triggering unwanted traumatic memories that might affect the well-being of the participants in the process of collecting data. As a result of this selection procedure, among the 10 women survivors of childhood sexual abuse encountered by the researcher, only 7 women survivors fit the criteria. Hence, they were invited to be part of the study.

Data Collection Phase 2

In phase 2, the researcher used 6 months for data collection. The methods of in-depth interview and documentation were used to obtain data on healing from childhood sexual abuse from the 7 women survivors of childhood sexual abuse. The following sections describe details of how the in-depth interviews were carried out as well details of the documentation that were obtained in this study.

In-Depth Interview

In this study, in-depth interviews were used as the key method to obtain the essence of healing experience encountered by women survivors. The in-depth interview seeks to understand the experience of the individual and the meaning the individual constructed from the experience (Seidman, 2006). As the aim of this study was to understand the healing experience defined by the women survivors, therefore in-depth interviews were best suited.

In-Depth Interview Procedure. Creswell (2007) has recommended a total of eight steps for in-depth interviewing. However, only six of the steps recommended were relevant to this research, and were used as guidelines for actual interview procedures. They were: (a) identify interviewee based on purposeful sampling, (b) choose type of interview considered practical for the study, (c) use an interview protocol, (d) refine interview questions through pilot test, (e) identify conducive place for interview, and (f) obtain consent for interview.

In the first step, the researcher identified the interviewee based on purposeful sampling. The maximum variation of sampling was aimed at obtaining different age groups, ethnicity, and social class. Snowball sampling method was aimed at reaching out to more survivors. However, the snowball sampling method was not effective to reach out to women survivors because most of the research participants did not disclose their past openly to others. Hence, most of them were not aware or have not encountered other women who had gone through childhood sexual abuse.

In the second step, the researcher conducted a one-on-one individual interview for this study, as it provided an effective channel for the survivors to express themselves in a less threatening manner. This type of interview assisted the researcher in being more focused and also able to obtain thick descriptions from the survivors.

Each of the women survivors who participated in this study was interviewed a minimum three times.

In the third step, an interview protocol was used to guide the researcher in the interview session. It was divided into three columns with the following headings: Guide to Interview, Researcher's Notes, and Researcher's Comments (Issues/Reflection). Interview questions had three parts: Part A (Getting started-rapport building), Part B (Probing conversation of healing experience), and Part C (Other information expressed by the participant). These divisions were aimed at gaining a rich description from the participants. When one interview session was successfully carried out by the researcher, the key messages from the participants were jotted down immediately on the interview protocol. Those key messages were again addressed by the researcher for in-depth inquiry in the following interview session.

In the fourth step, the researcher refined the research questions through a pilot study. In a qualitative study, a preliminary or pilot study is encouraged because it enables the researcher to foresee research problems encountered in the data collection process (Sampson, 2004). Thus, a preliminary study was conducted from March to April 2009 with 1 female survivor of childhood sexual abuse.

For the purpose of the pilot test, 1 woman survivor was identified, a local Chinese woman in her 40s. The interview session was carried to the stage of saturation whereby the same themes were repeated as reported by the woman survivor. A total of three interview sessions were carried out for the pilot test. The interview sessions were later developed to verbatim transcription and the verbatim transcriptions were analyzed by the researcher. The outcome of the pilot test revealed limited emerged themes shared by the woman survivor. This led the researcher to look further into the research question that led the pilot test, and to do additional consultation with qualitative researchers.

Several consultations were carried with one qualitative researcher and one phenomenological researcher. Finally, the research question was refined from, “What are the healing elements that motivated women survivors to move on?” to “How do women survivors experience healing from childhood sexual abuse?” The research question was refined to ensure the researcher was open to whatever healing experiences may be shared by the research participants.

In the fifth step, the researcher was encouraged to identify a conducive place to conduct the interview session. Pertaining to this matter, the researcher planned to conduct the interview session in a selected counselling center. The rationale was to ensure the research participant felt safe and comfortable in sharing her experience. Thus, in this study most of the interview sessions with women survivors were carried out in the counselling center. However, several interview sessions were carried out in the women survivors’ workplace and residence. This was because several women survivors encountered limitations in traveling to the counselling center due to their busy schedules.

Finally, the researcher prepared a written informed consent form. In the first part on the first page was found information on the topic of the study, the information about voluntary participation, the right to withdraw, the purpose of the study, the procedures of the study, and the right to ask questions and information about the researcher (Creswell, 2008). The second part of the informed consent form contained information on the participant who agreed to participate in the study and the participant’s release agreement for the data to be used for completing the PhD degree and future publication. In the each of the first interview sessions with women survivors, they were given this written informed consent form, it was discussed, and they were requested to sign it before any formal interview session was carried out. Most of the women survivors felt comfortable to sign the informed consent except one women

survivor who required detailed explanation of the publication aspect because she was concerned her identity would be exposed through publication. Hence, a detail explanation of the informed consent was carried out and all the research participants were assured their identities would remain confidential. After the detailed explanation and the assurance, all the women survivors gave their consent and signed the informed consent form.

Three stages of In-Depth Phenomenological interview. In this study, the researcher used the Dolbeare-Schuman-Seidman In-Depth Phenomenology Interview Model as a guide in the process of collecting data. Schuman (1982) have designed a series of three interviews for an in-depth phenomenological interview (Seidman, 2006; Wengraf, 2001). These are: (a) first interview “focused on life history” (p. 17), (b) second interview focused on the “detail of experience” (p. 18), and (3) third interview emphasizing “reflection on the meaning” (p. 18). In the first interview session, the research participant was given a written informed consent form, it was discussed, and then signed by all.

In the first interview, the aim was to obtain information connected to the participant’s life history (Seidman, 2006; Wengraf, 2001). At this stage, the researcher had encouraged the women survivors to share as much as possible about their life experience as survivors of childhood sexual abuse. Thus, questions were: “How was your life before and after the abuse?” and “What made you decide to be part of this study?” and “How long did you take to move on from trauma to healing?” The first stage of interview was intended to provide a channel for the researcher to get to know the women survivors better and for the survivors to be more comfortable with the researcher through a more general sharing.

The second interview was focused upon the solid detail of the participant’s present experience as related to the topic area of the study (Seidman, 2006; Wengraf,

2001). Prior, the researcher had queried, “How is your experience of healing from childhood sexual abuse?” or “What is your healing experience from childhood sexual abuse?” In this stage, the researcher used a lot of probes and clarification to find out the aspects of “what” and “how” from the women survivors.

In the third interview, the participant was requested to reflect upon the meaning of the experience they encountered (Seidman, 2006; Wengraf, 2001). The researcher used questions such as, “What does this healing experience from childhood sexual abuse mean to you?” and “What sense does it make to you?” and “Now you are in the healing stage, where do you see yourself going in future?” This third interview was expected to provide the researcher with a deeper understanding of the essence of healing from childhood sexual abuse.

Most of women survivors were quite expressive in their first interview session, and many started to share about the past abuse as well sharing about experiences of how they overcome it in the first interview session. Several themes emerged in the first interview session, thus in the second interview session, the emerged themes were explored further to obtain deeper understanding. By the third interview session, all the survivors repeated similar themes to those expressed in the first and second interview sessions. Hence, the researcher decided to end the process of collecting data through interviews due to believing the stage of data saturation had been reached.

Documentation

The second method of data collection used in this study was documentation. Documentation is defined as “Standardised artefacts, in so far as they typically occur in particular formats: as notes, case reports, contracts, drafts, death certificates, remarks, diaries, statistics, annual reports, certificates, judgments, letter or expert opinions”

(Wolff, 2004, p. 284). Among all the types of documentation, the researcher used the survivor's diaries as part of the documentation.

All the women survivors who participated in the study were full-time students or full-time workers. Hence, most of them found it difficult to prepare a write up diary before and after interview sessions. However, there were 4 women survivors who managed to draw several pictures that symbolized their healing experiences.

In summary, the process of collecting data in this study involved two phases. Phase 1 aimed to access women survivors to be part of the study. Phase 2 identified the data collection methods involved in this study. In both phases of data collection, the researcher encountered setbacks (i.e., being unable to obtain survivors' diaries as part of data analysis). As a result, the journey of data collection was not a smooth journey for the researcher.

Data Analysis

In this study the Stevik-Colaizzi-Keen data analysis method was used as a guide in analyzing the data (Moustakas, 1994). This selected method is based on Moustakas's modification of three methods of data analysis proposed by Stevick (1971), Colaizzi (1973), and Keen (1975). A total of eight steps of data analysis were implemented in this study. The following is the description of these steps.

In step one, the researcher used a phenomenological approach to provide a comprehensive description of the experiences of the phenomenon under study. Next, in the second step, the researcher transformed the experiences of the phenomenon from all the obtained data into verbatim transcription. In this study, a total of 21 transcriptions were generated.

In step three, the researcher drew out a list of relevant statements from the 21 transcriptions. Hundreds of relevant statements were generated and each of the

statements was treated as being of equal value for analysis. From the identified relevant statements the researcher prepared a list of nonrepetitive and nonoverlapping statements. In step four, each of the statements was grouped into a wider category or addressed as meaning units or themes. In this step, a total of nine meaning units were generated. They were: (a) Confronted with struggles, (b) Channels to express & reflect, (c) Acceptance, (d) Forgiveness, (e), Letting go and moving on, (f) Support from others, (g) Spirituality, (h) Helping self, and (i) Helping others.

In step five, after the meaning unit had been constructed, the researcher prepared the textural description. The researcher drew out the individual textural description focused on “what” the experience of the phenomenon is from the meaning unit. In this step, verbatim examples were included to provide a better description. In step six, the researcher prepared an individual structural description. The focus of this step was to illustrate the “how” of the experience of the phenomenon as it happened.

In the step seven, a composite textural description and a composite structural description were generated. In the final step, the researcher prepared an integrative description which includes both composite textural description and composite structural description to construct the essence of the experience.

In the process of data analysis, the researcher used several computer software to assist. The first computer software was NVIVO and the second computer software was Microsoft Office Word. In step three and step four, NVIVO software was used to assist the researcher to manage, organize, and keep track of the collected data (Bazeley, 2007). In step five to final step of data analysis, the researcher used Microsoft Office Word to do a manual data analysis. Each step of data analysis with examples is reported in detail in chapter 4.

Potential Risks and Benefits

In addressing the potential risks in this study, one of the researcher's concerns was that during the process of collecting data, discomfort may occur and trigger past unpleasant memories of the women survivors of their childhood sexual abuse. Concerning this aspect, the researcher worked with a few experienced counsellors to provide counselling services for the women survivors who may emotionally be affected during data collection. In the process of data collection of this study, there were 2 participants who expressed great sadness when speaking about the past. They were recommended by the researcher to see a counsellor but both expressed they are capable to overcome it. The researcher respected their decision, and a list of counsellors' contact numbers was also given to them.

An initial screening process was administered to ensure that the women survivors selected for this study were in the healing stage. Although the researcher encountered 10 women survivors, after screening, only 7 women survivors fulfilled the four criteria and they were approached to participate in the study. The survivors were assured of their anonymity during the process of data collection and analysis, and each woman survivor was given a pseudonym to ensure their identity was protected.

Regarding the benefits of participation, the women survivors expressed they gained in-depth self-awareness about the healing journey they had gone through. They learned to appreciate both themselves and their experience of healing. Moreover, women survivors expressed gratitude at being part of the study because it provided a nonjudgmental channel for them to speak out to the community through the research findings.

Trustworthiness of the Study

In this section, the aim is to address strategies used by the researcher to ensure the trustworthiness of the study. The term trustworthiness of the study is parallel with the term qualitative rigor (Morse, Barrett, Mayan, Olson, & Spiers, 2002).

Trustworthiness is described as a criterion to test the quality of the research design. The trustworthiness criterion consists of credibility (in place of internal validity), transferability (in place of external validity), dependability (in place of reliability), and confirmability (in place of objectivity) (Lincoln & Guba, 1985).

Credibility

The criterion of credibility refers to the internal validity in a study. Among all the criteria of trustworthiness, Lincoln and Guba (1985) both perceive the factor of credibility as essential in a qualitative study. Several strategies are identified and were used to ensure the credibility of the study. Those identified were based on four strategies suggested by Lincoln and Guba (1985): (a) “activities increasing the probability that credible finding will be produced” (p. 307), (b) peer debriefing (c) referential adequacy and (d) members check

In implementation of the first strategy, “activities increasing the probability that credible finding will be produced” (p. 307), Lincoln and Guba (1985) have proposed three important techniques. They termed these as prolonged engagement, persistent observation, and triangulation. In this study, there is no method of observation involved, therefore the researcher only identified techniques of prolonged engagement and triangulation. Regarding the aspect of prolonged engagement, the researcher spent 6 months in the research field to obtain data from the women survivors. Triangulation consisted of the researcher bringing in different perspectives to understand the phenomenon being studied (Flick, 2000). Triangulation is perceived as a condition which involves the researcher’s use of different methods, different investigators, and different

sources of data (Merriam, 2001). In this study, it involved only one investigator, hence triangulation through different investigators was impossible. Rather, in this study, triangulation of different sources of data obtained from different methods was used. In this study, the researcher triangulated the varieties of perspectives from interview sources, and also triangulated the interview sources with the survivors' personal drawings on healing.

In the second technique for ensuring credibility, the researcher used peer debriefing. Peer debriefing is a process whereby the researcher exposes her findings to other people not involved in the study (Lincoln & Guba, 1985). The aim of this strategy is to disclose the researcher's blind spot, discuss working hypotheses and outcomes of the study, and also a channel for "catharsis" (Lincoln & Guba, 1985, p. 308), whereby the researcher is able to clear the emotion and feelings that might influence the outcome of the study (Lincoln & Guba, 1985). This study involved women survivors of childhood sexual abuse and the researcher had encountered intense emotional sharing from the survivors. Throughout the process of collecting data peer debriefing strategy was used to assist the researcher in sharing and clearing up the researcher's effected emotion. The aim of this strategy was to ensure the researcher can continue staying objective and have an outlet to clear the affected emotion. Thus, in this study the researcher worked with two PhD candidates in the Counselling field and who were also working as counsellors, and went through six peer debriefing meetings.

The third strategy involved "referential adequacy" (Lincoln & Guba, 1985). In this strategy the researcher is required to use appropriate terms that referred to interpretation and assessment (Lincoln & Guba, 1985). In other words, this strategy is used to continue to challenge the researcher to ensure the use of terms to address the women survivors' experience of healing from childhood sexual abuse are purely based on the women survivors' perspective. A list of the researcher's biases was prepared and

was continually referred to by the researcher in the process of collecting data and analyzing data. Bracketing was applied with the aim to minimize the influence of the researcher's biases on the outcome of the study.

Finally, member check strategy was used to ensure credibility of this study. This strategy involved going back to the study's participants to validate the obtained data and interpretation (Flick, 2006; Lincoln & Guba, 1985; Merriam, 2001). After each interview session was carried out, the researcher immediately jotted down the emerged themes shared by the women survivors, and ensured that all of the interview sessions were transcribed within 3 days. The key words and verbatim transcription were reported to the women survivors in the following interview session, in order to be validated by them. After the validation was completed, the researcher followed up with an in-depth inquiry of the emerged themes to obtain detailed descriptions. The aim of the above process was to ensure women survivors were given the opportunity to correct errors that might have occurred in transcription, and that the women survivors were able to do an overall summary of their experience of healing from childhood sexual abuse (Lincoln & Guba, 1985).

Transferability

The next criterion of trustworthiness pertains to the aspect of transferability or external validity (Lincoln & Guba, 1985). Transferability in a qualitative study is aimed at addressing to what extent the outcome of a study can be applied to other contexts (Merriam, 2001). Thick and rich description was identified as one of the strategies used by researcher to enhance the transferability of the outcome of the study to other contexts (Lincoln & Guba, 1985). Thus, in this study, the researcher prepared a rich and thick description of the fieldwork of the study. This is to ensure the practitioners and the readers are able to do an evaluation and examine whether the outcome of the study can be applied to their practice and research situation (Merriam, 2001). Parallel with

many qualitative researchers' stand, it is the responsibility of the researcher to present a sufficient description of their research to ensure the possibility of readers' transferring applications to their research situation (Lincoln & Guba, 1985; Merriam, 2001).

Dependability

The criterion of dependability in trustworthiness is aimed at addressing the issue of reliability (Lincoln & Guba, 1985; Shenton, 2004). Dependability can be examined through a process of audit trail (Flick, 200). Audit trail is a technique proposed by Sandelowski (1986) that involves “the presentation of details of all sources of data, collection techniques and experiences, assumptions made, decision taken, meaning interpreted and influences on the researcher” (Long & Johnson, 2000, p. 35). In this study, the researcher ensured that all the obtained sources through interviews and documentation were systematically coded with Nvivo software and followed up with manual analysis. Figure 3 shows an example of how sources connected with the theme of “forgiveness” obtained from the women survivors were systematically coded through NVIVO Software.

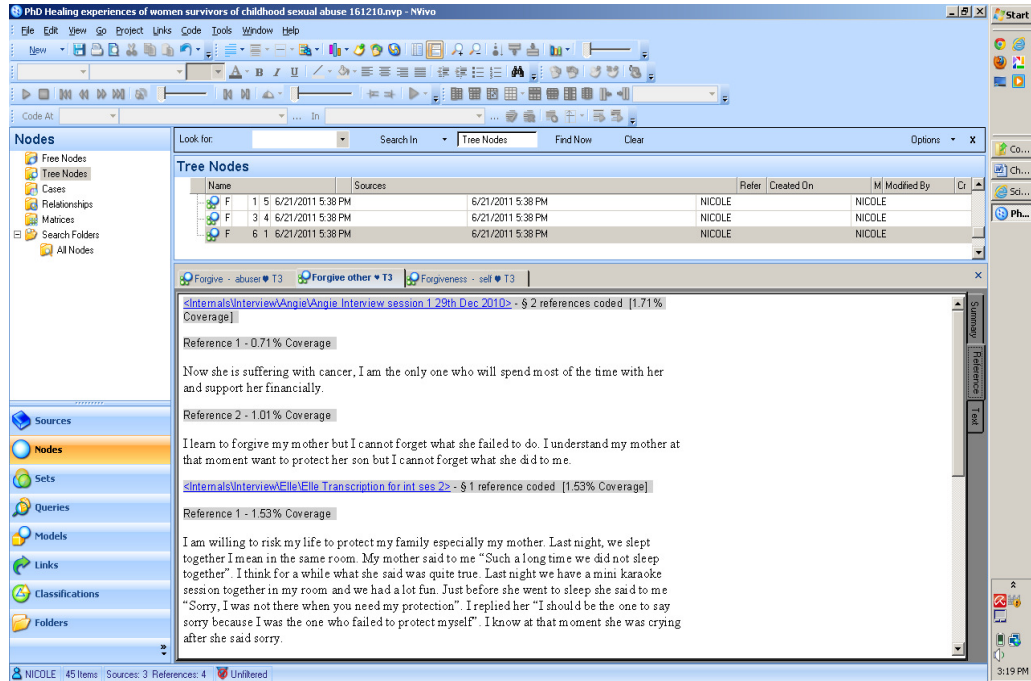


Figure 3. Data coded through NVIVO software.

Coded themes were later transferred to Microsoft Word for manual analysis. On the completed manual analysis report, significant texts were highlighted with two different colors. Texts highlighted in yellow were later used as part of individual textural description analysis and texts highlighted in pink were later used as part of individual structural description. Figure 4 shows an example of a manual analysis report on “forgiveness” using Microsoft Word. All the above detailed reports were to ensure the researcher continued remaining true to the obtained data (Long & Johnson, 2000).

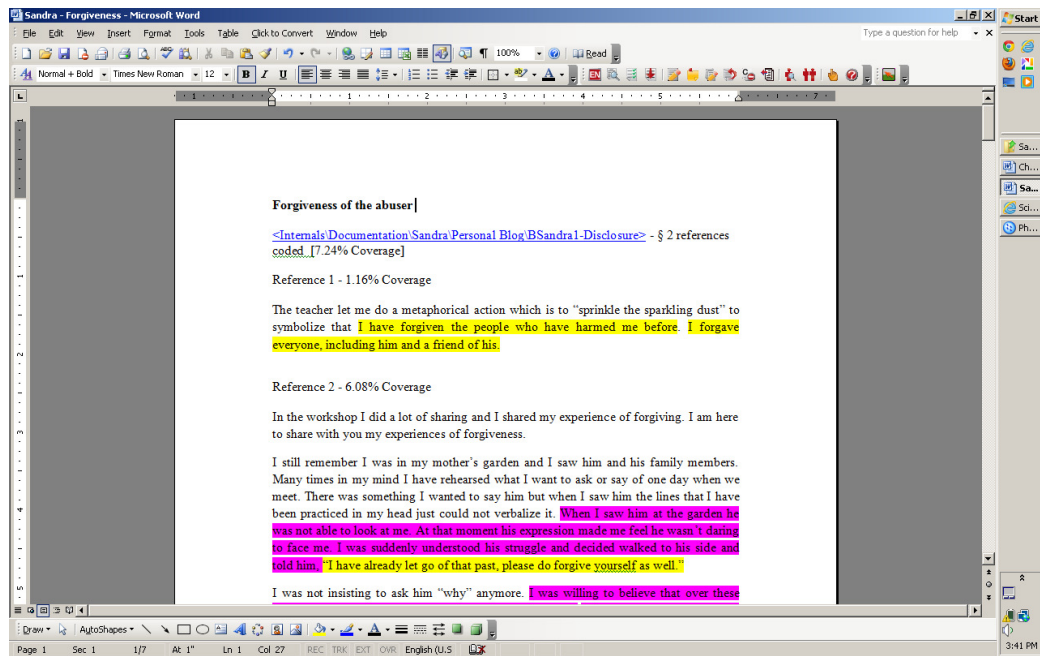


Figure 4. Manual analysis through Microsoft Word.

Confirmability

The final criterion of trustworthiness is confirmability, which, in a qualitative study, is intended to address the researcher's objectivity (Shenton, 2004). Miles and Huberman (1994) addressed the essential criteria of confirmability as pertaining to what extent the researcher recognized his or her own personal biases in the study. Thus, in this study, the researcher had identified her own biases on the issue of childhood sexual abuse, which were addressed in the previous section, Researcher. The aim is to ensure the outcome of the study is purely based on the perspective of women survivors of childhood sexual abuse.

In conclusion, the aim of this section was to provide readers with a clearer picture of research strategies involved in this study in order to increase its trustworthiness. Identified trustworthiness criterion and strategies were used throughout the process of collecting and analyzing data in this study.

Chapter Summary

Most of the qualitative research literature consistently proposed using detail orientation in presenting qualitative study methods to the reader. Detailed orientation of presentation is aimed at providing greater accountability in qualitative research. Thus, in this chapter, the researcher presented a detailed description of the research design, the researcher, the data collection, the data analysis, the potential risks and benefits, and the trustworthiness of the study. This detailed description is aimed at providing readers with a better picture of the researcher's intention and direction of the study.

CHAPTER 4

FINDINGS

This chapter presents the study's findings of women survivors healing experiences from childhood sexual abuse. Detailed description of the findings provide a deeper understanding of the 7 female participants' backgrounds and the healing experiences that they have gone through. Chapter sections present research participants' experiences, process of bracketing, steps of data analysis involved, an overview of the central research question, findings, and a chapter summary.

Research Participants

A total of 7 female survivors of childhood sexual abuse participated in the study. They were all Malaysian, though in terms of ethnicity, 4 women identified as Chinese and 3 identified as Malay. Ages ranged from 22 years old to 53 years old. This section reports the participants' background and a brief description of the experience of the women survivors with the aid of visual images, from their journals. All participant's names are pseudonyms.

Angie

Background. Angie was a 50-year-old Chinese lady. She is a single mother with two children and she works as a child caretaker, with eight children under her care. Angie chose to do this work because of her past experience, and wanting to provide a safe place for the children to grow. She struggled with her own recovery from childhood sexual abuse for more than 40 years, and only in the past few years has she learned to let go of the past and move on.

Description of the experience. Angie first experienced sexual abuse when she was 7 years old. At that time, it was a year where the country was having racial

crisis caused by political riots on 13 May 1969. The crisis caused Angie's parent to seek refuge from a relative. During the period of staying with the relative, Angie was molested by her uncle on several occasions. The bigger impact on Angie was not being molested by her uncle but raped by her own brother. Angie remembered she was only 10 years old when her brother raped her. Angie cannot remember the actual number of times that sexual abuse took place but she believed she was raped more than once.

After being raped by her brother, she decided to disclose to the family members. In the initial stage of disclosure, they refused to believe her; however after physical examination of her private parts they believed what she said. After the disclosure, Angie experienced discrimination and bullying from the family members. All the above incidences caused Angie to feel shamed and dirty about herself. At one point she kept rejecting all the good men who had shown interest in her. Angie described:

All these good gentlemen treated me so well because I was so ashamed about myself. I feel I am very dirty and they don't deserve a dirty woman. Every time, when I got to know any good gentleman interested of me I started to avoid them or stay away from them. (Angie/Suf/Int2/lines22-25)

After many years of struggles in relationship with men, Angie ended up married to an abusive man and the marriage did not last long. Divorce took place years ago and Angie became a single mother. In the journey of recovery, she encountered many challenges and often used crying to ease the pain and hurt. According to Angie, it is an ongoing task to keep reminding herself to stay in a positive direction.

Further, several aspects were perceived helpful for her and had assisted her in overcoming the childhood sexual abuse. There was support received from daughters, learned to forgive mother, seek refuge from God and reached out to help children. In the aspect seeking refuge from God hold it strongly by Angie. In her tearful eye she said:

Throughout my life journey it always seems very difficult for me. The children they were too young to understand. Throughout this journey, I have to walk alone and every

time I have to figure out what to do. I don't have any person there to support me. The only way is to depend on God. (Angie/SPI/Int2/lines 51-53)

Angie took many years to move on and into the stage of healing, and she considered herself in the early stage of healing. In the interview sessions, whenever Angie shared her past pain and suffering, it often ended with tearful eyes. The journey to recovery from childhood sexual abuse was not an easy journey for Angie. Figure 5 is a visual map that reflects experience encountered by Angie in her journey healing from childhood sexual abuse.

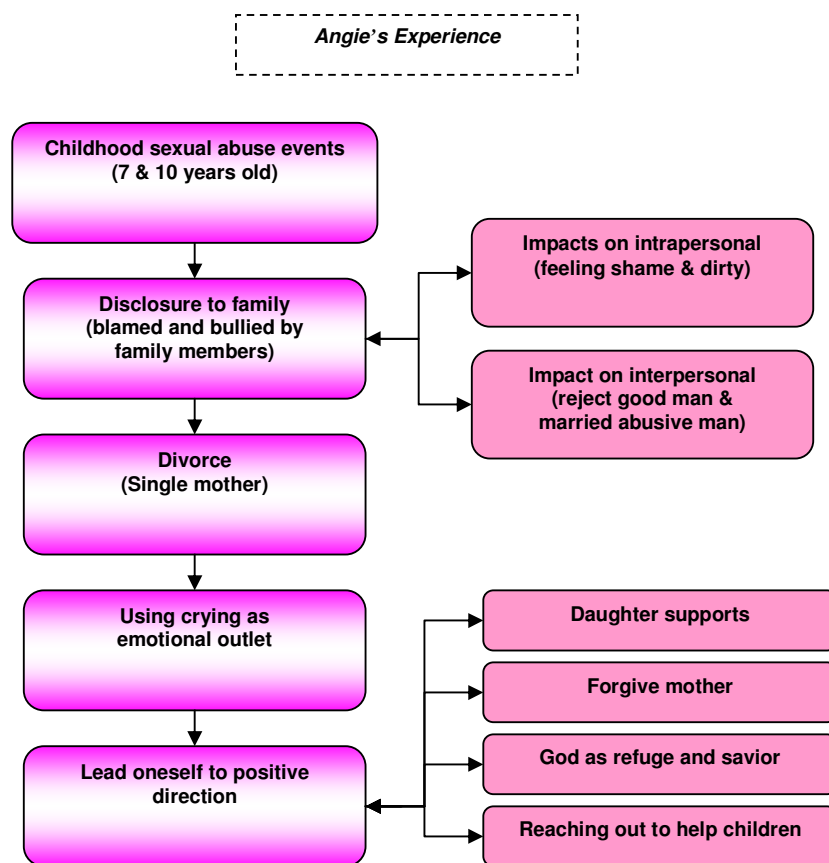


Figure 5. Visual map of Angie's experience of healing.

Elle

Background. Elle was a 26 year old Chinese lady, working as a laboratory technician in a Veterinary Centre. She had struggled with recovery from childhood sexual abuse for many years. According to Elle, healing started taking place when she first disclosed the abuse to a friend and brother when she was 16 years old. However, she believed the series of self-improvement training programs that she had attended had intensively helped her in recovering from childhood sexual abuse. Elle believed she had completed healing from childhood sexual abuse. During the time she was being interviewed, she was actively involved in community work particular reaching out to underprivileged children.

Description of the experience. Elle was sexually abused when she was 6 years old and the abuse stopped when she was 11 years old. She was raped by her cousin brother who visited her family every school holiday. The first few years of abuse, Elle was not aware the cousin brother sexually abused her because she was told it just a game. When Elle was 10 years old, she came to understand sexual abuse and learned to fight back. She threatened to harm the perpetrator if he attempted to touch her again. Since then, the perpetrator backed off and the abuse stopped.

Though she had successfully stopped the sexual abuse, the impacts haunted her for many years. Elle experienced for many years not being able to be true to herself and often put up a mask to hide her emotions. She stated

I was very good protector. Since I was in high school, I had always put up fake mask to cover up my emotion . . . I always portrayed a joyful and funny me. When I reach home, I became another person that was depressed and quite. I hide in the room and cried a lot. When I am alone in the room, I always said this to myself “No one will love me.” I was in the scenario where I keep putting down of myself and said bad things about myself. . . I always said this to myself “I am not good enough,” “I am not smart enough” and “I never good in anything.”

(Elle/Suf/Int1/lines47-53& 57-58)

In dealing with all these negative thoughts, Elle often used crying to help herself in overcoming the struggles. Elle had also used self-disclosure to help herself in overcoming the burden she had been carrying since the abuse. It took Elle more than 6 years for her to do the first disclosure of the sexual abuse. As mentioned before, healing started taking place when Elle first disclosed to one of her best friends who was a brother of the abuser. She gained a sense of relief from the burden that she had been carrying for years. Elle described her experience after disclosure of the sexual abuse to the brother:

After disclosure to him, I feel I much relief, because I no need to watch my back and fear he will find out the truth. It was feeling like someone watching me from the back but after disclosure I don't have those feelings anymore. I feel free and become more relax in the relationship with my brother.

(Elle/CHA/Int2/lines130-133)

After the disclosure, Elle learned to forgive herself and forgive the abuser. She learned to forgive herself in failing to speak up and prevent the abuse that took place. She learned to forgive the abuser for being young and making such a mistake. This forgiveness led Elle to gain acceptance of the past and be willing to let go of the past. All the above had helped foster a closer relationship with her brother. He encouraged her to join self-improvement training. Elle followed her brother's advice and she managed to complete a series of training programs, and she perceived the self-improvement training program had left a positive impact on her life.

During the training program, there was an incident that triggered Elle to disclose her childhood sexual abuse experience to the training participants. Elle's aunt, who was in her 70s, had her house broken into and she was raped by the robber. Elle described that she was feeling intensely, and she decided to disclose what had happened to her aunt as well her own past sexual abuse experience. This was her first disclosure in public and led Elle to gain more personal growth. She appreciated the training she had gone through and believed it had helped her in many ways. Elle stated:

I love this training and without this training I will not be who I am today. Before this training I was type a person who had less than 10 people that involved in my life ... After the training I have 300 people that I can talk to. In this training I have expended my social life and I gained more learning and exposure. The most important is I feel safe with these 300 people. They are like my brothers and sisters

(Elle/RES/Int1/lines 205-210)

In the training, Elle was introduced to community projects that provided her with a platform to reach out to help others. Community outreach projects had helped Elle learn to focus on others rather than to focus on herself. Moreover, reaching out to help others had helped her to gain a sense of positive energy. She believed this energy had developed a strong drive within her to learn to let go of the past and have a positive direction as a mission in life. She described her experience of reaching out to others:

Helping people allowed me to open up myself and my eye to see this world that many people need help. This form of energy I draw out from helping people ... This helps me to focus on others rather than focus of myself. Whenever I focus on myself I feel I am selfish but when I focus out I become a role model for others. Focusing out is a very powerful source of letting go the past and it will lead you to have a mission in life.

(Elle/RO/Int2/lines 38-43)

Elle perceived herself as having healed from childhood sexual abuse. She believed whatever had happened, had happened for a reason. Thus, she believed childhood sexual abuse had made her who she is today and she loved who she is today. Elle presented a positive attitude toward the past. She perceived her mission in life now is to reach out to more people who need help. Figure 6 is a visual map that reflects the experience encountered by Elle in her journey of healing from childhood sexual abuse.

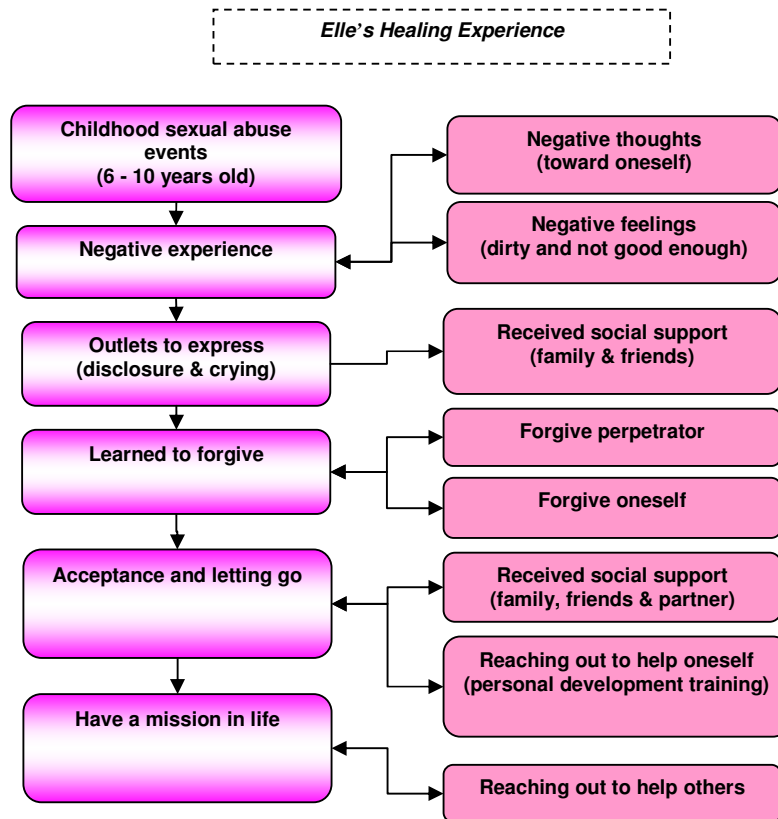


Figure 6. Visual map of Elle's experience of healing.

Intan

Background. Intan was a 33- year- old Malay lady, working as a therapist, married with two children. Intan claimed healing required a long process and she believed she is in her healing journey. Since Intan was 25 years old, she has been actively involved in community work for women and children in the area for which she was being interviewed. She was involved in a lot of community work particularly reaching to people in rural areas with the aim to create awareness about personal safety programs for children. She believed in the importance of teaching children to know about their bodies and she believed children needed guidance on how to protect themselves from sexual abusers.

Description of the experience. Intan was sexually abused when she was 7 years old and the abuse only stopped when she was 10 years old. The first few years of the abuse only involved molestation but in the final year of abuse it ended up with penetration. She was sexually abused by her family's trusted neighbor. According to Intan, she and her sister were sent to the neighbor's house to be taken care of by a nanny whenever her mother went to work. She was sexually abused by the nanny's son who was a teenager at that time. The abuse stopped when Intan refused to go to the neighbor's house because it caused a lot physical pain. Intan was not aware she had been sexually abused until she was 16 years old. The awareness only occurred when she was having a discussion on sexual relationship with her peers.

After Intan learned she had lost her virginity through the sexual abuse, she was shocked and grieved her loss. All the memories of the abuse started to haunt her and caused her to feel awful about herself. Flashbacks of the past sexual abuse tended to get stronger when she was alone. Thus, she decided to keep herself busy and active in school activities. Being an active and busy person in secondary school, she was always surrounded with friends and this had reduced her chances of being alone. When the time came for her to be alone without friends, crying was always one of the ways she coped with the negative feelings and thoughts. When the emotion was unbearable, Intan used prayers to calm and comfort herself. She experienced through prayers that she gained peace. Intan described her experience in overcoming overwhelming negative feelings through prayers:

When I was feeling not in peace or I feeling awful about myself, I prayed to God. When I pray, it reduces the tendency of recalling back all the bad memories. I feel more in peace. In Islam, we emphasized a lot in praying and worshiping to God. For me, when I was praying I felt assured by God. All the negative thoughts somehow replaced with positive thoughts

(Intan/SPI/Int2/lines 46-51)

Crying and praying have helped Intan in many ways in overcoming the childhood sexual abuse. It took many years for her to come to terms of forgiveness. She finally decided to forgive the abuser after she had a dream about him. In the dream, he was begging Intan for forgiveness. The dream was so real for Intan; thus she decided to forgive him with the aim to help herself to feel better. Forgiveness had helped lessen up the flashbacks of the past abuse. Intan described her experience after having forgiven the abuser:

When I was 16 years, I got to understand what rape is? and what penetration is? I was in shock and I started have the flashbacks of what he did to me. Almost everyday I was haunted by the flashbacks. But for now, after I had forgiven him the flashback only came back once a while.

(I/FOR/Int2/lines 79- 83)

After forgiveness took place, Intan learned to accept the past childhood sexual abuse through assurance given by her husband as well through her own spiritual coping. According to Intan, one of her greatest supports she had was her husband's acceptance of her past. She believed her husband had played a significant role in helping her in overcoming childhood sexual abuse. She was grateful that he did not question her past and was always being a very supportive husband. One of the greatest things she really appreciates about her husband in helping her overcome childhood sexual abuse was the way they have sexual intimacy. In most of their sexual intimacy sessions, Intan felt her husband always put her as the first priority. She stated:

I am very happy with the sexual intimacy with my husband. He always did it in the gentle ways. He always says this to me "Intan, you have a past that hurt you badly, I don't want to do the same way of what he did to you. I am afraid it will hurt you."

(Intan/SUP/Int3/lines 43-46)

Intan perceived that her husband was a gift from God. With tearful eyes, Intan described that the love and acceptance given by her husband had helped her in letting go of the past and moving on to a positive direction in life. Intan depended on spiritual self- reflection to help her in accepting the childhood sexual abuse, describing that it

had helped her to accept that the past abuse was faith testing from God. She learned to accept that what had happened had made her become a more mature and assertive person. Acceptance of the past had led Intan to be more positive in life. Being positive was perceived by Intan as one of the most important philosophies that had led her to become the person she wanted to be.

What had happened in the past had empowered Intan to reach out to children. Intan was actively involved in community work, particularly in projects reaching out to children. Every year she trained a group of facilitators to teach a personal safety program for young children in rural areas. In this program, the children get to know their body parts and learned assertive skills to prevent themselves from sexual abuse. Further, she reached out to poor communities and assisted them financially. In the process of assisting the poor, Intan learned to appreciate her life and her family. She described her experience in reaching out to others:

Reaching out to help others had change mine perception of the problem I encountered. There was a time I thought I was the only person having the problem but after met all these people who need help badly it had helped me to realize they are many people facing greater problem than mine. Those people that I had help, their problems were so much tougher than mine. They never turn up to become a beggar those they were very poor instead they accept of what they have.

(Intan/RO/Int2/lines 105-110)

Intan believed recovery from childhood sexual abuse needed a long period to be able to overcome the trauma experience. She felt it will be an ongoing process that all the survivors will need to go through. Thus, it required a lot of patience from the therapists who are assisting women survivors recovering from childhood sexual abuse. Figure 7 is a visual map that reflects experience encountered by Intan in her journey of recovery from childhood sexual abuse.

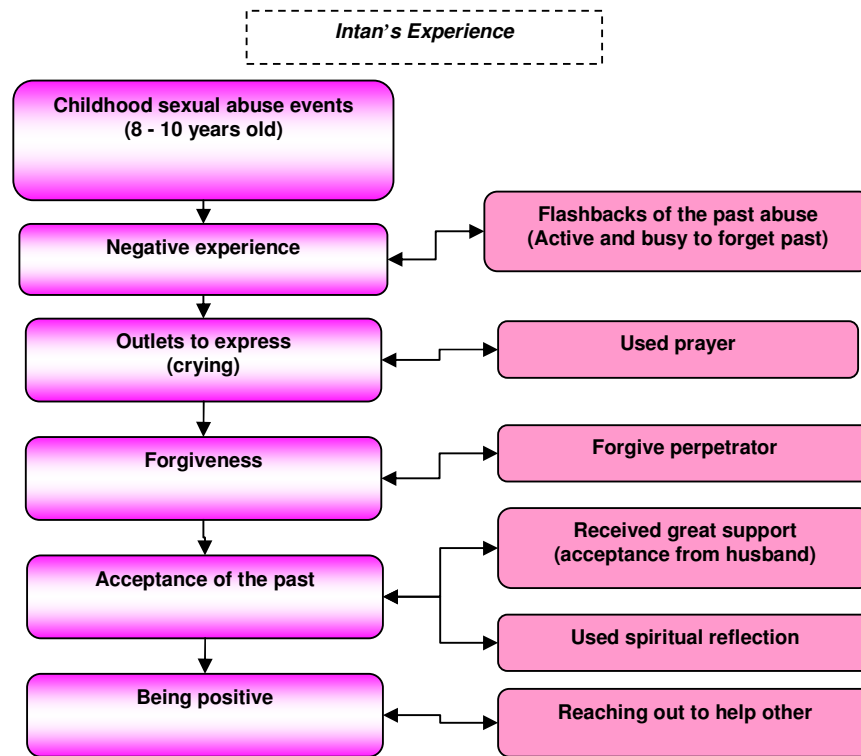


Figure 7. Visual map of Intan's experience of healing.

Joyce

Background. Joyce was a 24-year-old Chinese lady, having just completed her degree study in one of the helping professions. She admitted she did not go through a lot of struggle to come to terms with healing from childhood sexual abuse. Joyce spoke of wanting to use her helping profession skills to assist women survivors of childhood sexual abuse in future.

Description of experience. Joyce was sexually abused when she was 6 years old and it stopped when she was 7 years old. Joyce had also witnessed that her sister had experienced similar sexual abuse. However they both have never talked about this matter. The sexual abuse took place in a close relative's house and she believed the sexual abuse happened more than three times. She was molested by her cousin brother who was 16 years old at the time the abuse took place. Joyce was not aware she was sexually abused by the cousin brother until she was 21 years old.

The awareness of sexual abuse took place when Joyce shared what had happened in the past with a close friend. Joyce expressed in the past she often had flashbacks of a 6 years old her sitting on her cousin brother's lap, he shook his legs, and she could feel his penis. She remembered she did not like the feelings and she attempted to get herself out of his lap, but he held her back and insisted for her to continue sitting on his lap. She did not understand what he was doing and decided to disclose to one of her close friends with the aim to find an answer. The friend explained to Joyce his act was a form of sexual abuse, and she explained to Joyce the cousin brother was using her and her sister to satisfy his sexual need.

Joyce was shocked and angry when she got to know her cousin brother had sexually abused her and her sister. Since then Joyce experienced uncomfortable feelings toward her cousin brother as well as uneasiness with physical closeness with any male counterpart. Further Joyce experienced a lot fear to disclose to others about the sexual abuse. She fears it may jeopardize the present relationship with the family as well as her boyfriend. Thus, she often kept the hurtful feelings in her and relied a lot through prayers to help her to overcome the childhood sexual abuse. She used prayer to God to help her to overcome the past burden. Joyce described

After I got the answer of the flashback, I mean I got to understood it was sexual abuse. At that moment I was feeling shock and angry. Right after that, I prayed to God and I said to myself I should put it down because I cannot change the past but I can move on from the past.

(Joyce/Int1/FOR/lines 38 – 40)

Spiritual coping was often used by Joyce in overcoming the past childhood sexual abuse. Joyce perceived that God had helped her in many ways in overcoming the past. She connected her willingness to forgive with God's forgiveness of sinners. She believed God had given her love and strength to forgive those who hurt her. She stated:

As a Christian we have God's love. God love us, forgive our sins and lead us to a new happy life. Since he can forgive us, why not I forgive others? He was the one who gives me the strength, give me the power of love to continue my life and forgive people who

hurt me in my life.

(Joyce/FOR/Int1, lines 63 – 66)

Other than prayers to God, Joyce found significant positive impacts through disclosure of the past abuse to several close friends. As mentioned before, Joyce found difficulties in disclosure of what had happened to the family members; however it did not stop Joyce in sharing the past abuse with close friends. Joyce gained emotional relief through disclosure to other survivors of sexual abuse. Since the first disclosure of the sexual abuse, Joyce encountered several close friends who had experienced childhood sexual abuse. She decided to share the past abuse stories with them, and in return she gained relief and a sense of empowerment through their sharing. She described how one of her close friends had experienced being repeatedly raped for many years by her own uncle. Joyce was amazed by her action and willingness to let go of the past. Joyce stated:

I disclosure about the past abuse and it was a big relief. After the disclosure, friend of mine told me what had happens to her during her childhood. What she had gone through it was something that was very terrible but she still chooses to put it down.

(Joyce/Int1/lines 27 – 30)

Since then, Joyce learned to brave herself in sharing with others, particularly those who had experienced sexual abuse. The past few years, whenever she had encountered any survivors she braved herself to talk about her past abuse. Each time she shared, she feels empowered by her own sharing. In Joyce's sharing, she always encourages other survivors to move on from the past rather than being burdened by the past. She believes the important thing for herself and other survivors is that they have learned to move on from the past that they cannot change. She expressed:

We can't change our past, we cannot change the environment and we cannot change others but we can change ourselves, we can change our thinking and change our attitude of how to deal with the things that are hurtful. Hence, put it down and moving on is the best way.

(Joyce/MO/Int1/lines 36-39)

Joyce used many resources to assist herself to move on from the past. One

of the important resources was self-help books. Joyce read a lot of books about love and forgiveness. Reaching out to help other survivors helped Joyce to feel empowered. This had encouraged her to continue to be in a helping profession to reach out to more survivors. Though Joyce’s parents were not aware of the abuse, Joyce perceived the love that they had given to her had helped her a lot in overcoming her past. Figure 8 is a visual map that provides an overview of the experience encountered by Joyce in her journey of recovery from childhood sexual abuse.

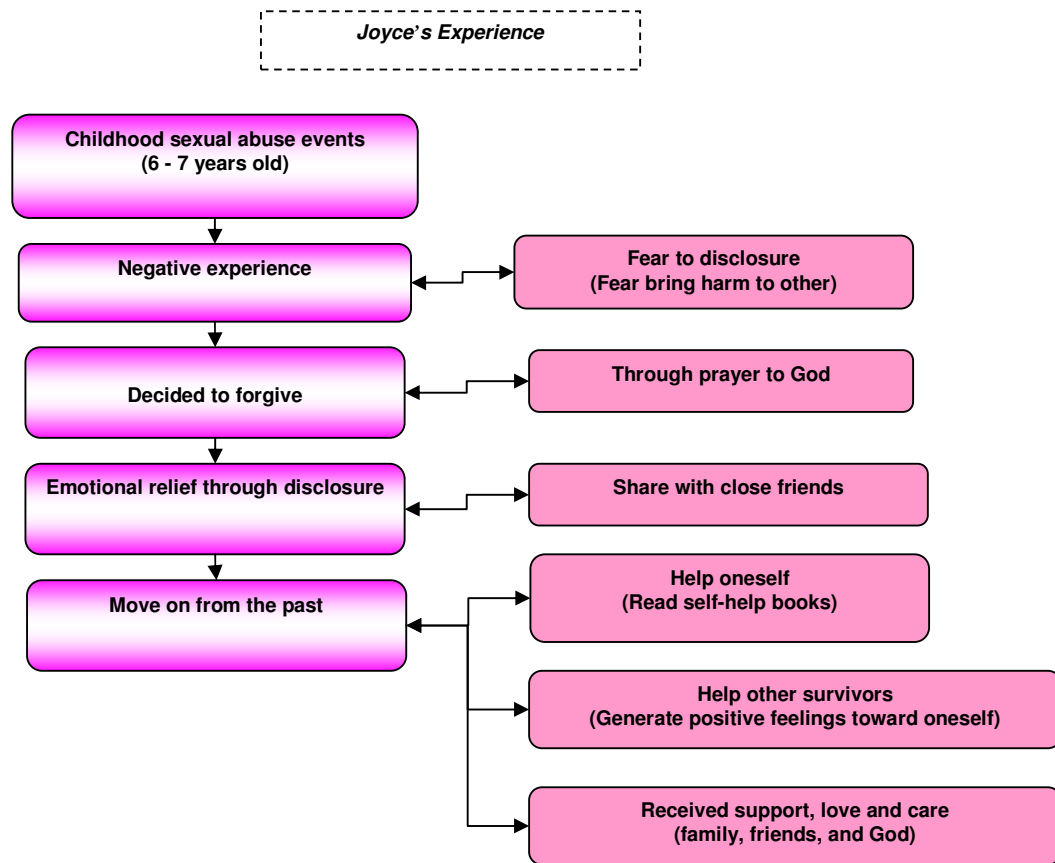


Figure 8. Visual map of Joyce’s experience of healing.

Maria

Background. Maria was 53-year-old Malay lady. When she was being interviewed, she held a high ranking position in an Educational Institution. She was a married woman with four daughters. She went through many years of child sexual abuse although it did not involve penetration. According to Maria, her healing from childhood sexual abuse only started after she got married. Maria considered herself as a hard worker and she enjoyed spending quality time with her retired husband.

Description of the experience. Maria was sexually abused when she was 7 years old and the abuse only stopped when she was 17 years old. Maria was adopted by a family when she was 2 months old. She was bought up together with 7 brothers who were the biological children to the adopted parents. Among the seven brothers, the third brother was the one who had constantly sexually abused her for 10 years. During the initial years of abuse, it started with peeping Maria taking bath and he continued in stroking his penis on her arm while she was sleeping and it had happened almost every night in the past. Molestation stopped when she was finally given a separate bedroom to sleep at night. However, it did not successful stop him from sexually abusing her. He continued becoming an exhibitionist whenever she was alone at home with him.

In the initial years of the sexual abuse, Maria believed God was there to help her and guided her strategies to prevent penetration. Since the age of 7 years old, she learned to wrap herself tightly with a blanket before she slept. Whenever the third brother was around at home, she ensured that she always stayed closely with the adopted mother to prevent him coming close to her. Maria encountered many challenges to survive from the sexual abuse.

After many years of struggles and fears of the third brother's sexual behaviors, Maria decided to leave the adopted family. She went back to her biological family and that was how the sexual abuse stopped. It was a very tough decision for Maria to decide

to leave the adopted family members. Maria was bothered by many stressors living with the adopted family. First were fears the abuser may go further in sexually abusing her such as rape her. At the same time she experienced many negative treatments from her adopted mother and adopted grandmother. Though Maria was very close with the adopted father, the fear was just too overwhelming for her to continue to stay with the adopted family members.

After Maria left the adopted family, she decided to disclose to her biological family members about the sexual abuse she had experienced in the past years. It was her first ever disclosure of the sexual abuse to others. Afterwards, Maria experienced a sense a relief:

When I went back to my own family, I told my sister, they know about it however they did not confront the adopted family of the abuse that took place ... No matter how, after I talk to them, I felt the burden had taken away from me.

(Maria/CE/Int1/lines34 -39)

After went back to the biological family members, Maria worked hard to excel in her academic performance and she received an opportunity to pursue a diploma course in teacher's training college. In her studies, she had the opportunity to attend psychological classes to understand children and adolescents. This helped her in understanding that the sexual abuse she had undergone was connected to psychological development experienced by the brother. She described:

After read all the books and articles in psychology classes. I got to understand it was part [of the] development process he had gone through. I got to understand at that time in his life he was curious about sex. I got to understand he wasn't lustful and I learned to understand his sexual behaviors it was common characteristic in an adolescent.

(Maria/RES/Int2/lines 21-24)

Psychology classes helped Maria find an answer about what caused the brother to sexually abuse her. This form of understanding led Maria to be more accepting of her past.

In her final year of her study, she met her husband whom she described as the most significant person in assisting her to overcome the past childhood sexual abuse. His acceptance toward her past and his loving support toward her had helped her tremendously. In tears, Maria expressed: *“I got a man who understands me and a man who give me his undivided love. In knowing there is somebody who willing to go all out to help me ...”* (Maria/SUP/Int3/lines 150-151)

Maria further described in the interview session:

Married to him it was a turning point in my life. It was feeling like I started my life with him. As mentioned before, in my younger days, I did not have any person that I really can trust. After married him, he accepted me and I accepted him. I was feeling in this world I have somebody that trusted me and I trusted him.

(Maria/SUP/Int3/lines225-228)

Married life was good for Maria. She received loving treatment from her husband as well as from her in-law family members. After many years of marriage, Maria encountered opportunity to meet up with her adopted brothers including the third brother (abuser) though several family occasions. Maria felt the changes in the third brother; she perceived he had changed to become a better person. In several encounters, she can sense this third brother yearning for forgiveness from her. With a gentle smile on the face, she described: *“I had forgiven him for what he had done. He was young. He was in stage of often thinking about sex. He was in the stage of curiosity about sex.”* (Maria/Int1/FOR/lines71-72)

Maria further explained the reason she decided to forgive by stating:

I can see from his eye, he was feeling guilty of what he had done. We both know what had happened before but we just can't talk about it. From his look, from the hug and the touch that he had given to me I can see and I can feel he wants forgiveness from me. But we never speak about it till now.

(Maria/Int1/FOR/lines 76-80)

Forgiveness took place years ago. Maria shared she currently had close relationship with all her siblings (adopted or biological). She believes that she no longer

holds any grudges with any person. She perceived she is living in a life that is full of happiness and contentment. She perceived forgiveness had led her to gain more support and care from family members as well blessing from God. Figure 9 is a visual map that provides a summary of the experience encountered by Maria in her journey of recovery from childhood sexual abuse.

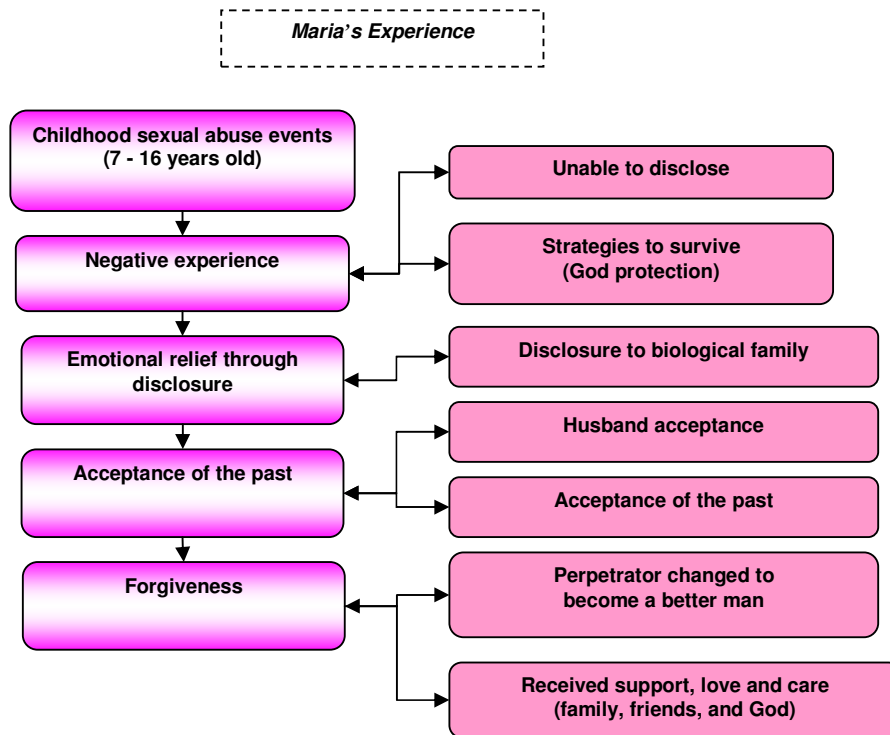


Figure 9. Visual map of Maria's experience of healing.

Nor

Background. Nor was a 22 year old Malay lady, pursuing her undergraduate degree study in a local University. Nor admitted she was in early stages of healing from childhood sexual abuse. She had gone through 7 years of sexual and physical abuse. She believed healing took place when she met a female psychologist who had helped her a lot in the recovery journey.

Description of the experience. Since birth to ten years old, Nor was the only child of her parents. When she was 10 years old, the father had adopted two older children. The year the adopted brothers moved in and stayed with the family was the same year the sexual abuse took place. She was raped by both adopted brothers. The sexual abuse stopped when she was 17 years old, because one of the adopted brothers got married, as well as Nor learned to protect herself from the abuse after going through treatment with a psychologist.

Nor had encountered many challenges in getting herself on the path to recovery from childhood sexual abuse. One of them that she often faced was fear of being judged by others after disclosure of the past abuse. She was often challenged by people with many questions after she disclosed such as, “Why you did not report to police?” Nor felt strongly being judged whenever such questions emerged in the conversation after disclosure. She stated in tears:

There are two of my friends who were with me in a group counselling session. After I had disclosure to them of what had happened in the past they both started to judge me. They kept questioning me why I did not do that? and why I did not do this? ... They don't understand, I don't want any person to get hurt. I don't want my parent to get hurt especially my mother. I am concerned she will feel really bad after she get to know what had happened to me.

(Nor/SUR/Int3/lines 236-238 & lines 247 -248)

Nor often experienced fear to disclose the past abuse. She ended up keeping silent about the abuse. Sometimes when the feelings of hurt caused by the sexual abuse were just too overwhelming for her to cope, she learned to find outlets to express her

emotion. She found crying, drawing, and writing song lyrics were very helpful for her to express her emotion. She expressed how writing song lyrics helped her to gain back a sense of control:

Through songs, I can write whatever I want. I feel I am in control because I no need to listen to other people. When I write song, there are no boundaries that I need to worry. Writing songs really help me.”

(Nor/EO/int3/lines 199 -201)

Outlets for emotion are particularly important for Nor to overcome negative emotions and to gain a sense of control of her life, and to enable her to gain a sense of acceptance of the past is particularly important for Nor. In interview session, she consistently addressed that damage caused by the sexual abuse cannot be repaired, thus she learned to accept the past. She stated:

The damage had been done and it cannot be repair so easily. The scar it is there with me. Whatever had happened I have accepted it ... the only thing I can do is to push myself to limit to overcome the past. I will continue to push myself to the stage I know I had reach the stage that I had move on from the past.

(Nor/ACP/Int3/lines 32 -33 & lines 38-40)

In the journey to recovery from childhood sexual abuse, Nor encountered many challenges. She expressed that several aspects playing important roles in helping her were getting support from the psychologists and friends and practicing prayer. Support from psychologists and friends was able to assure her feelings of being accepted. Prayer enabled her to remain calm as well as provided her hope for a better tomorrow. Figure 10 is a visual map that presents a summary of the experience encountered by Nor in her healing journey.

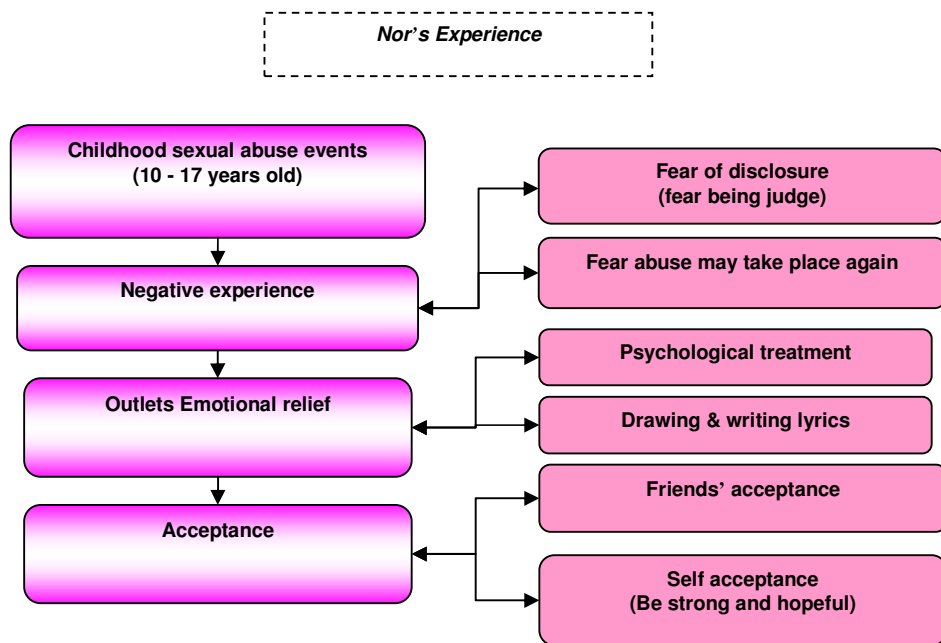


Figure 10. Visual map of Nor's experience of healing.

Sandra

Background. She was a 36-year-old Chinese lady who was working as a therapist in a nonprofit organization, involved in counselling work for more than 13 years. Sandra perceived herself in the advanced stage of healing from childhood sexual abuse. The healing from childhood sexual abuse took place after she made disclosure about her past abuse to a person in a training workshop for the helping professions.

Description of the experience. Sandra was sexually abused by two trusted neighbors whom she treated as her brothers. At that time, Sandra's father was suffering with cancer and Sandra's mother had to spend most of the time in hospital to take care of the father. Sandra and her youngest brother were left alone at home and the perpetrators took advantage of the circumstances to sexually abuse Sandra. The rape took place for a period of one year and Sandra was around 10 years old. When Sandra was 11 years old, she got to understand what they did to her was wrong and she started to fight back whenever they attempted to abuse her. After struggling with the sexual abuse for almost 1 year, Sandra's father finally recovered and came home. Not long

later, Sandra was suffering with serious asthma for period of 6 months and the family decided to move to a new place. After moving, Sandra's illness was gone and the memories of the sexual abuse were also gone. Sandra was unable to remember any of the sexual abuse memories for more than 14 years. All the childhood sexual abuse memories started coming back to her after she was awakened from a blackout following a mugging incident.

When the memories of childhood sexual abuse were one by one revealed, Sandra went through a period of shock. She was in the stage unable to accept and unable to believe in her own memories. At that time, Sandra was actively involved in counseling work and she was well-known as a trainer as well as a paracounselor in a nonprofit organization. She was in the stage of fears that she would be unable to be healed from the childhood sexual abuse. She used a period of 4 months, intensively searching for healing. She was in the stage of being obsessed about healing and used all kinds of strategies to help herself be healed. However, none of the efforts were successful. Sandra described:

When all the memories came back and it just tore me apart. It was very shocking at that moment and I could not believe it and I just feel I cannot breathe. I read a lot books, which was not really helpful to me. I went back to the place where I was robbed. I was hoping to get some insight from this place because this was where the memories start coming back. But it was not helpful as well.

(Sandra/SUF/Int1/lines 45-49)

After many unsuccessful attempts, Sandra did not give up search for healing. She continued intensively to search for healing until she met an accident that almost cost her life but she survived. She was hospitalized for few months, that was time Sandra start to reflected back on her own actions and decided to slow down herself in searching for healing. After the accident, she continued her voluntary work as a paracounselor and attended many training workshops.

After months of struggles, Sandra finally experienced a sense of healing from childhood sexual abuse through a training workshop that she had attended years ago. According to Sandra, in the training workshop participants were required to find a partner to take turns sharing their personal issues. She was paired up with one of the male paracounsellors who thought highly of her. She decided to share her past stories with him. After sharing about the past, he did not treat Sandra differently. This action of his made a big positive impact on Sandra, who said:

After I told him, he did not treat me any indifferent. He treated me as same as before and it make me feel really good. It made me felt at that moment, thing are fine and people still accepting me who I am. I do not have to be in the victim, I can be who I am and people still accept me. That was a turning point of everything for me.

(Sandra/ACE/Int1/lines 330-334)

Sandra further explained how the way he treated her left such a positive impact on her:

I do not want myself to be perceived as weak. When the memory came back I was unable to accept what had happened in the past. It was very shocking memories after so many years of suppression. The memories just came back. I did not know where to hide and I don't think I was in the stage of able to accept what had happened to me. By somebody accepting me, it gives me courage to see thing differently. He had helped me more accepting toward myself.

(Sandra/ACE/Int1/lines 348-354)

Based on Sandra's sharing, acceptance of the other led her to be more accepting toward herself. Since then, more healing has taken place for Sandra in her journey to recovery from childhood sexual abuse. She continued attended training workshops and experienced many breakthroughs. After a period, Sandra gained substantial healing from childhood sexual abuse, and has reached out to help many survivors through her profession as a paracounsellor. Moreover, she had also shared her healing stories through her own personal blog. All the above breakthroughs led Sandra to come to the point to forgive herself as well as forgiving others. She stated:

Interestingly, when I decided to go through recovery process things just fall in and fit in all the parts I needed to go through for healing. When I was in Taiwan, I don't know why I found many books about love and forgiveness. That was one of my themes

whenever I am dealing with a trauma client. End of the day we have to go to this point of forgiving our self, others and let go the past experiences.

(Sandra/FOR/Int1/lines 124-128)

One bit of philosophy that grips Sandra strongly in her journey of healing from childhood sexual abuse was consistently to make a decision to be healed from the past. Sandra believed in the importance of having a sense of autonomy within oneself to overcome childhood sexual abuse. She described:

We are not in control of whatever that had happened in our past ... but what we can decide is from now how much I want this incident to affect me. For example I can ask myself question "Do I want it to affect me? If yes, for how long? for one minute? Or five minutes or ten hours? We can make a decision because we all aware of what is happening within ourself.

(Sandra/CHO/Int2/lines 313-318)

Sandra believed that as the survivor, she is responsible for her own healing. Thus, consistently making the decision to be healed is part of the recovery from childhood sexual abuse. In her journey of healing, she liked to do self-reflection, and felt that personal blog writing had helped her a lot in evaluating her healing process. She felt proud of herself because she perceived she was in a much higher stage of healing compared to years ago. Figure 11 is a visual map that provides a summary of the experience encountered by Sandra in her healing journey.

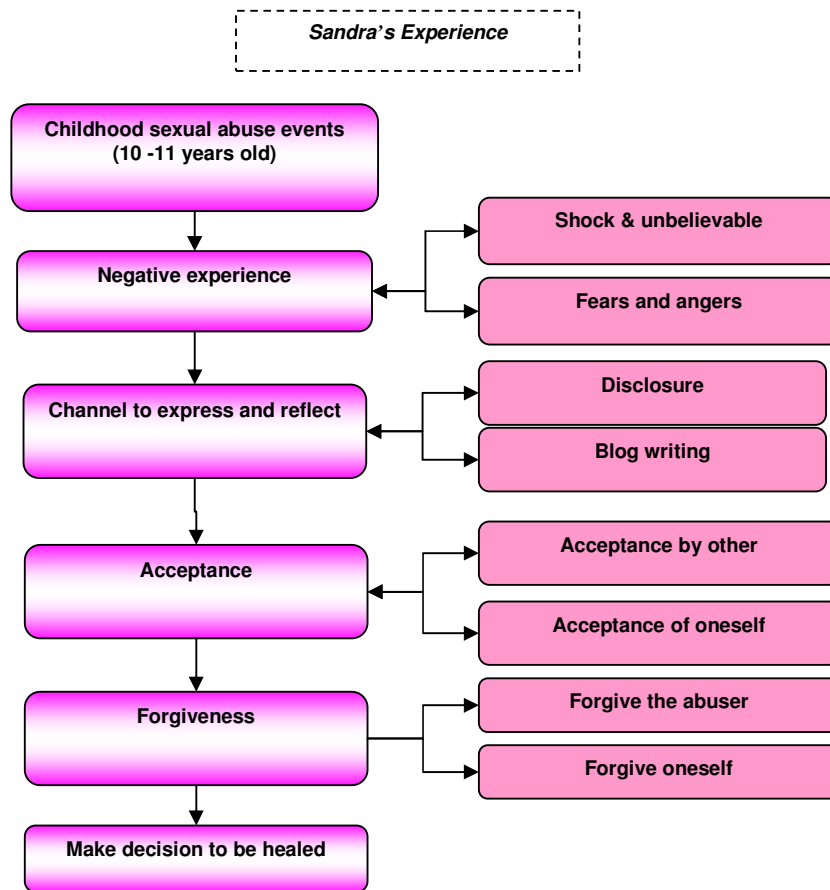


Figure 11. Visual map of Sandra's experience of healing.

Bracketing Process

Bracketing was implemented in different stages throughout the process of this study. It started before any data were collected and it only ended after all the collected data were completely analyzed. In the first stage of bracketing, a total of five personal biases of the researcher were identified with the aim for the researcher to be aware of her own biases. They were: (a) childhood sexual abuse is a traumatic experience that causes negative impact to women survivors, (b) healing from childhood sexual abuse is possible for women survivors, (c) survivors require a long process to heal from childhood sexual abuse, (d) in order to understand the experience of healing from childhood sexual abuse, the perspective of women survivors who had undergone the

experience is required, and (e) survivors have their own internal resources that can guide them toward healing.

Bracketing was then implemented in the process of carrying out data collection. The identified biases were listed in the interview protocol in order to continuously remind the researcher of her own biases when data collection was carried out. Bracketing was used in the stage of analyzing data as well, as the list of personal biases continued to be referred to by the researcher to ensure objectivity in analyzing the data. Finally, bracketing was used to assist the researcher in identifying emergent themes based on women survivors' perspective.

Steps of Data Analysis

The Stevik-Colaizzi-Keen data analysis method was used in analyzing the data (Moustakas, 1994). This selected method was based on Moustakas's modification of three methods of data analysis proposed by Stevick (1971), Colaizzi (1973), and Keen (1975). In this study a total of eight steps of data analyses were involved in analyzing the collected data. Step one to step three are briefly reported in this chapter and detailed references are attached in Appendices E, F, and G. Step four to step eight are reported as findings of the study in chapter 4.

First, a phenomenological approach was used to gain a comprehensive description of the survivors' healing experiences. Therefore, the interview sessions with the survivors were led by questions involving "what" and "how." Continued probing on significant experiences of healing was carried out to ensure an in-depth understanding of the survivors' healing experience. (Please see Appendix E.)

Second, all of the interview sessions were verbatim transcribed by the researcher. Several months were used to generate a total of 21 verbatim transcriptions.

(Please see Appendix F.) Third, a list of relevant statements was identified and they were treated as being of equal value to be analyzed. (Please see Appendix G.)

Fourth, each of the statements was grouped into a wider category and a total of nine meaning units were identified. They were: (a) Confronted with struggles, (b) Channels to express, (c) Acceptance, (d) Forgiveness, (e), Letting go and moving on, (f) Support from others, (g) Spirituality, (h) Helping self, and (i) Helping others.

Fifth, the researcher drew out the “individual textural description” (Moustakas, 1994) focused on “what” was the experience of the phenomenon experienced by each research participant. In this step, each of the research participants’ verbatim examples was included to provide a better description. The sixth step was aimed at drawing out the “how” of the experience of the phenomenon experienced by the research participants, and the researcher prepared an “individual structural description” (Moustakas, 1994) of each participant.

Seventh, a composite textural description (Moustakas, 1994) and a composite structural description (Moustakas, 1994) were constructed to provide an overview of the healing experience encountered by the 7 participants. Eighth, a description of the essence of the experiences was constructed based on the composite textural-structural descriptions of the 7 women survivors’ healing experiences from childhood sexual abuse. Reports of data analyses generated by step 4 to step 8 are reported in detail in the following sections.

An Overview of the Central Research Question

In this study, the central research question was: “How do women survivors experience healing from childhood sexual abuse?” The focus on only one research question was with the intention of providing in-depth inquiry to understand the phenomenon of women healing from childhood sexual abuse. An in-depth analysis was

conducted and an in-depth description of the study findings is reported with the aim of answering the above research question. The details of the research findings are reported in the following section.

Findings

In this section, the findings are reported based on the flow of data analysis recommended by Moustakas (1994). The presentation of the findings begins with a report of the clusters of meaning that emerged from the study. It continues with a report on individual textural and structural descriptions of healing experience and follows-up with a report on composite textural and structural healing experience. Finally, the essence of the healing experience from childhood sexual abuse is presented.

Clusters of Meaning

Nine themes emerged from the study. They were: (a) Confronted with struggles, (b) Channels to express and reflect, (c) Acceptance, (d) Forgiveness, (e), Letting go and moving on, (f) Support from others, (g) Spirituality, (h) Helping self, and (i) Helping others. Themes and evidence in participants' statements are shown in Table 1.

Table 1

Themes and Evidence in Participants' Statements

<i>Theme 1: Confronted with struggles</i>	
Participants	Evidence in participants' statements
Angie	"I had many gentlemen whom were interested of me but I ended up rejected them."
Elle	"This is kind of secret I prefer to keep in me. I don't want share because it might bring harm to my family members.
Intan	"I never share with any person because is something too shameful to talk about it."
Joyce	"In the beginning of my relationship with my boy friend, when he touched me I was feeling not comfortable."
Maria	"I became very protective toward my girls . . . when they were all

young I do not want anything to happen to them.”

Nor “If my parent and my relatives know I believe many things will happen. I am concern many people will get hurt.”

Sandra “I was afraid of getting hurt and I did not put in effort to build the relationship due to the fact that I have once being hurt by someone I trusted.”

Theme 2: Channels to express and reflect

Participants	Evidence in participants' statements
Elle	“When I cry, it helps me to heal my soul. I cry because I want to heal my soul. When I cry, it helps me to release the stresses in my body and I believe it is important for me to let it out.”
Intan	“For me when I cry, it isn't means I am weak. Crying help me a lot in release stress. When I cry, I felt the tension went out together with my tears.”
Maria	“When I went back to my own family, I told my sister what had happened. After I talked to them, I feel the burden taken away from me. My life can goes on.”
Nor	“Through songs, I can write whatever I want. I feel more in control because I no need to listen to other people. When I write song, there are no boundaries that I need to worry.
Sandra	“Writing is one way to reflect of my past and reflect of myself. This helps me to analyze and identify what actually had happened.”

Theme 3: Acceptance

Participants	Evidence in participants' statements
Elle	“I accept who I am today come with the past I have gone through. If I did not gone through that in my life I might become a difference person.”
Intan	“My husband played significant role in helping me because he learned to accept that was my past.”
Maria	“What has happened in my past is just like a ‘Bollywood story’. Some people life's story got more drama than the other. I got an extra drama in mine early life story [Maria laughing when sharing]”
Nor	“It is relieves for me because I have group of friends who know about my past. They do not judge me and they do not give me negative views.”
Sandra	“It makes me feel good and people still accepting me who I am. I do not have to be in the victim stage, I can be who I am because people still accept me. That was a turning point for me.”

Theme 4: Forgiveness

Participants	Evidence in participants' statements
Angie	"I learn to forgive my mother those I cannot forget what she failed to do."
Elle	"The biggest thing to do is learn to forgive. Forgive the person who did that to me. It is really helpful for me."
Intan	"I need to forgive him because I want to feel better for myself. If I don't forgive him, I will end up feel hurt inside."
Joyce	"I forgive him, I decided to put it down."
Maria	"Whatever happened during my younger day, I cannot forget but I can forgive him."
Sandra	"I forgave everyone, including him and a friend of his."

Theme 5: Letting go and moving on

Participants	Evidence in participants' statements
Angie	"I keep telling myself I need to pull myself back to positive direction."
Elle	"You just know is time to let go. I just reach a stage I want to let go all these angers and all these burdens."
Intan	"I tell myself, all these bad experiences it will continue come and I have no choice but learn to survive. I want to move on and continue to become positive."
Joyce	"Beside forgive I decided to just put it down and left it behind."
Nor	"Many times I remind myself if I am going to be weak now what going to happen to my future? It urges me to keep on moving even those I have reached the stage I cannot move anymore."
Sandra	"I let it go because I believe I deserve a better life."

Theme 6: Received support from others

Participants	Evidence in participants' statements
Angie	"My own children have saved me."
Elle	"This group of people, I able to understand them, I able to trust them and I feel safe to tell my secret. Whatever I want to do I will take them as practice group."

Intan	“The support given by my husband helped me a lot in overcoming what had happened.”
Joyce	“Yes, support from my friends and my parent, even my roommate were really helpful for me.”
Maria	“I got a man who understands me and his undivided love towards me and you feel there is a person who willing to go all out to help you.”
Nor	“I am quite lucky because I have these psychologists who provided me support in life.”
Sandra	“I had disclosure my past issues through a role play in a training workshop. After the role play, all my friends were silent but they give me a big hug ... this means a lot to me.”

Theme 7: Spirituality

Participants	Evidence in participants' statements
Angie	“The only thing really help me throughout the journey is my spiritual believe.”
Elle	“I perceived whatever had happened is like a test from God to see me how mature I am in handling this problem of mine.”
Intan	“I learned to accept it was test from God to make me to become a better and mature person.”
Joyce	“God is the one who gives me strength, give me the power of love to continue my life and forgive people who hurt me in my life.”
Maria	“I feel at that time when I was only 7 years old, I believe God was there telling me to wrap myself and to protect myself.”
Nor	“Praying to God soothes me a lot and it is very calming.”
Sandra	“God or someone the higher above want me to survive.”

Theme 8: Helping self (Self-Resiliencies)

Participants	Evidence in participants' statements
Angie	“I keep telling myself I need to pull myself back to positive direction.”
Elle	“I want to become a happy go lucky person and I don't want to worry about tomorrow.”
Intan	“Positive thinking had made all the other aspects possible. When

we start with positive thinking it will lead us to positive direction such as forgive other.”

Joyce	“Inside the books has a lot of motivation such as recognize our weakness and recognize our past. [Joyce addressed the books she had read had helped in her healing journey]”
Maria	“When I was in the teacher training college I had attended lessons on psychology. I can related and understand my own experience. I got to understand why such thing happened to me. I got to understand he did that to me because he was very curious of the girl’s physical body.”
Nor	“If I have to face a situation that I cannot stand up anymore to walk I will crawl to get myself keep moving.”
Sandra	“I read many books about forgiveness and I attended many courses related to forgiveness.”

Theme 9: Helping others

Participants Evidence in participants’ statements

Angie	“I provide all those gifts to the children at the children homes I can see the happy smile from their face. When I see the happy face from the children it gives me the happiness of life.”
Elle	“When I focus out, I become a role model for other. Focusing out is a very powerful source for you to let thing go.”
Intan	“When I reach out to help the other especially for those who having extreme problems it makes me realized my problem was so small compare with them.”
Joyce	“I feel good when I conduct a counseling session where I can share with other, teach others and guide others about issue of sexual abuse.”
Sandra	“Working on this helping profession, I can see people from a very depress stage to hopeful stage . . . after I helped them. All these make me feel I am important and I am needed in this life of mine.”

Individual Textural and Structural Description of Healing Experience

Angie

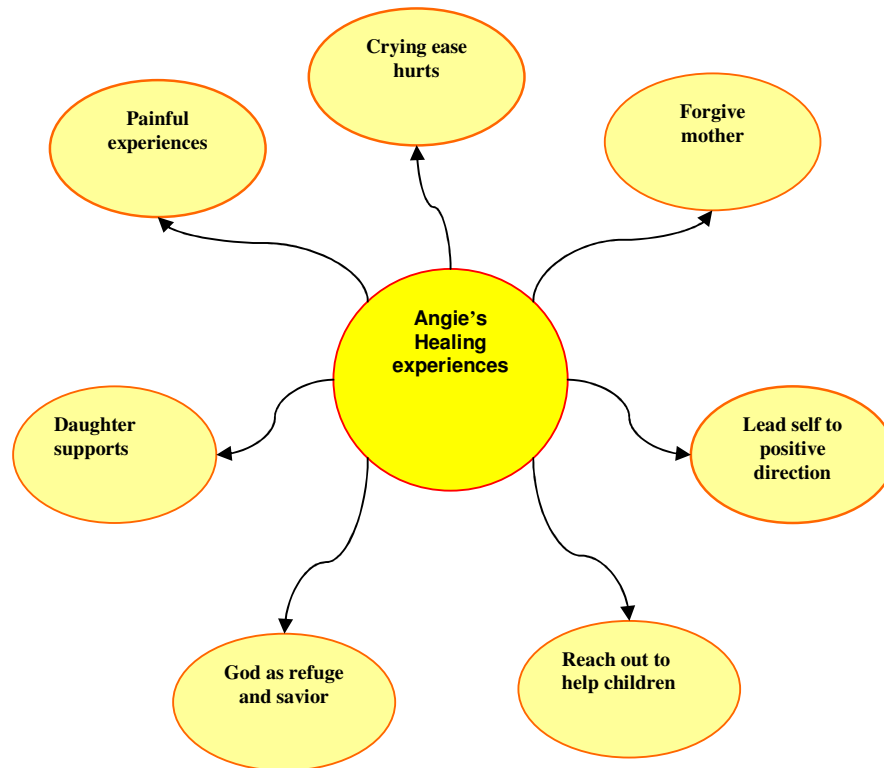


Figure 12. Angie's healing experiences.

Angie shared several aspects of her healing from childhood sexual abuse (see Figure 12). There were painful experiences, crying ease the hurts, forgive mother, lead self to positive direction, received daughters' support, God as refuge and savior, and reach out to help children. Each aspect is discussed and supported by Angie's statements.

Painful experiences: Textural description. Angie connected healing with painful experiences. She reported several negative feelings she had encountered on her healing journey. Words such as "shame," "dirty," "not deserved," "painful," "alone," and "no support" were used to describe the negative feelings she had encountered. Further, Angie had also connected the painful experiences with the treatments she

received from the people in her environment. She used words such “bullies,” “discriminate,” and “betray” by the family members.

Painful experiences: Structural description. Angie spoke of feeling shame and feeling dirty that tended to emerge in the context of dealing with relationship, and particularly with men who showed interest in her, as well as during her secondary school life. She was in a stage where she believed the good gentlemen who she had encountered were too good and she believed she did not deserve such good men. These negative feelings and thoughts had caused Angie to avoid or stay away from all the men with good qualities she had encountered. They also caused Angie to face low self-esteem. She ended up being married to an abusive man, which did not go well, and she decided to leave. Since then, Angie has become a single mother and raised her two daughters.

Angie connected the painful experience of healing from childhood sexual abuse with the treatment she received from her own sisters and mother. Angie did her first disclosure of the sexual abuse when she was 10 years old. She had expected support and help from her family members but she ended up experiencing discrimination and bullying from them.

She spoke of experiencing constant bullying and discrimination from her older sisters. In the interview session Angie was in tears when she talked about the near nightly occurrence of her older sisters refusing to let her sleep on the bed with them.

Angie mentioned several times in her interview sessions that when she asked for help from her mother, she ended up feeling “betrayed” by her mother, who failed in protecting her. There was an incident when Angie attempted to run and hide from her own brother because she was afraid of being abused again. However she was caught by her brother and he slapped her in front of their mother. Angie’s mother did not help her

but ended up blaming her for running away. Angie experienced extreme hurt and she described she still can feel the feeling of being betrayed by her mother.

Moreover, Angie perceived the healing journey as painful for her. She often described she was feeling “alone” and experiencing lack of “support” in her healing journey. It was a lonely journey for her because she did not have any adult there to provide support. Angie has two children with her but she felt her children were too young to understand what she was going through.

Crying ease the hurts: Textural description. In three interview sessions, Angie cried very often, particularly when she was addressing the hurt and pain she had gone through in her recovery journey from childhood sexual abuse. Angie also expressed that when she feels hurt, she tends to use tears to ease the hurts. Angie stated, “I hid myself in the toilet and I start crying” and “I cry in the bathroom.” In expressing her hurt emotion, Angie tends to choose a safe place to express her feelings such as the bathroom or toilet. She explained she did not want her children to see her in tears.

Crying ease the hurts: Structural description. In Angie’s perspective, when she was feeling hurt over what had happened, she used to cry to express her emotion. According to Angie, after she had expressed herself through crying she was able to pull herself back in a positive direction. Further, Angie described crying helped to comfort her when she was feeling negative emotions. Thus, she often used to cry to express her emotions.

Learned to forgive mother: Textural description. Angie had linked healing with learning to forgive and particularly to forgive her mother. Angie used phrases such as “learned to forgive my mother,” “understand my mother,” and “cannot forget.” The phrase “cannot forget” what the mother failed to do was repeated several times in the interviews.

Learned to forgive mother: Structural description. Though Angie was feeling betrayed by her mother, yet she also learned to forgive her, in part because she believed her mother was in the stage of mind where she wanted to protect her own son. Angie expressed that she was the only child who spent much time taking care and providing financial support to her mother who was suffering from cancer. The forgiveness experienced by Angie came with struggle of not being able to forget the hurt caused by the mother.

Led self into positive direction: Textural description. Angie expressed she had experienced many times bringing herself back on a positive track. She used terms such as “pull myself back to positive direction,” and “get out from the negative emotion.” These were often used statements in connection with bringing herself out from negative thoughts.

Led self into positive direction: Structural description. Angie reflected that when she was in a negative mode, she pulled herself into positive thoughts by getting herself focused on her role, being a mother for her two children. Angie also said that she wanted to become a mother who can protect her own children. She believed her two daughters were “children of God” and that taking good care of her own children was equal in meaning to serving God.

Received daughters’ support: Textural description. Angie connected her healing from childhood sexual abuse with receiving support from her daughters. She used statements such as “my girl ... bring me back to positive track,” “the words she said surprised me and helped me,” and “she massaged me, she make me a hot tea, and she cooks for me.”

Received daughters’ support: Structural description. Throughout the healing journey, Angie received support from her children. She believed without the children’s support she could not have walked so far in her healing journey. Further,

Angie expressed that the loving treatment she received from her daughters was very comforting. She described several times when she was not feeling well, her eldest daughter cooked for the family, and massaged her head. All those actions done by her eldest daughter were very comforting.

God as refuge and savior: Textural description. Angie linked her healing from childhood sexual abuse with the presence of God in her life. Angie talked about “God loves me very much,” “depend on God,” “He answered my prayers,” and “I can see God and I can feel God present in my life” to address how God played a significant role in helping her heal from childhood sexual abuse. The element of God was consistently shared and emphasized by Angie in all her interview sessions.

God as refuge and savior: Structural description. According to Angie another important aspect in helping her in recovering from childhood sexual abuse is her spiritual belief. There were two aspects identified by Angie how “God” played a significant role in her healing: first was that her spiritual beliefs helped her to feel assured and loved by God, and second was Angie encountered miraculous experiences with God.

Several times in the interview sessions Angie described her healing journey was very “alone” and was very challenging. Therefore she had to depend on God to help herself, to assure herself and to comfort herself. Belief in God helped her to feel assured that God loves her very much. The feeling of being loved by God means a lot to Angie because throughout her healing journey Angie encountered a lot of rejection and bullying by the family members. Angie had even described without the presence of God she might have died many years ago.

Angie had had several miraculous experiences with God. Angie described God had saved her from harm by the abuser. She described in detail of one of the miracle experience she had encountered where God had saved her from the brother’s abuse.

Angie described she was hiding from the brother at one of the bushes. Angie remembered she was praying very hard and she was asking ““God, please don’t let him see me.” Angie believed God had answered her prayer. She was very amazed because the brother could not see her though he was standing right in front of the bush where she was hiding.

Reach out to help children: Textural description. Finally, Angie connected her healing from childhood sexual abuse with reaching out to help children. In the interviews, Angie mentioned several times that she liked to reach out to help other children. Angie used statements such as “see the happy face from the children provides me the happiness of life,” “See those smiles make me feel really happy,” and “feel touched.” Most of the statements mentioned by Angie connected to positive emotion she had encountered when she was able to reach out to children.

Reach out to help children: Structural description. Reaching out to children helped Angie gain positive emotions such as happiness and feeling appreciated. Angie described her experience reaching out to a group of children from children’s homes. She bought a few boxes of gifts for the children to the home, and seeing the joy and happiness in the children when she delivered gifts made Angie really happy.

Moreover, in Angie’s perspective the children returned the love and care that she had given to them. Angie described her experience taking care of a little girl belonging to her friend who was a single mother. Angie took some time to show love and care toward this girl. After a period of time the little girl was able to sense her love and care. According to Angie, she brought the little girl to church and she was amazed when the little girl said to her, “Peace be with you.” Angie felt really appreciated by this little girl’s action, and felt her love and care by this little girl.

Additionally, Angie believes it is important to reach out to children because the children need to be protected and guided. Currently, Angie is working as a children’s

caretaker and she was aiming to reach out to more children. She wanted to protect and guide the children. Angie emphasized the importance of taking care of the children's emotion. She described that when saw emotional problems happen to the children under her care, she acted fast to minimize the suffering the children might encounter. Reaching out to children provided a sense of direction for Angie in her healing journey.

Elle

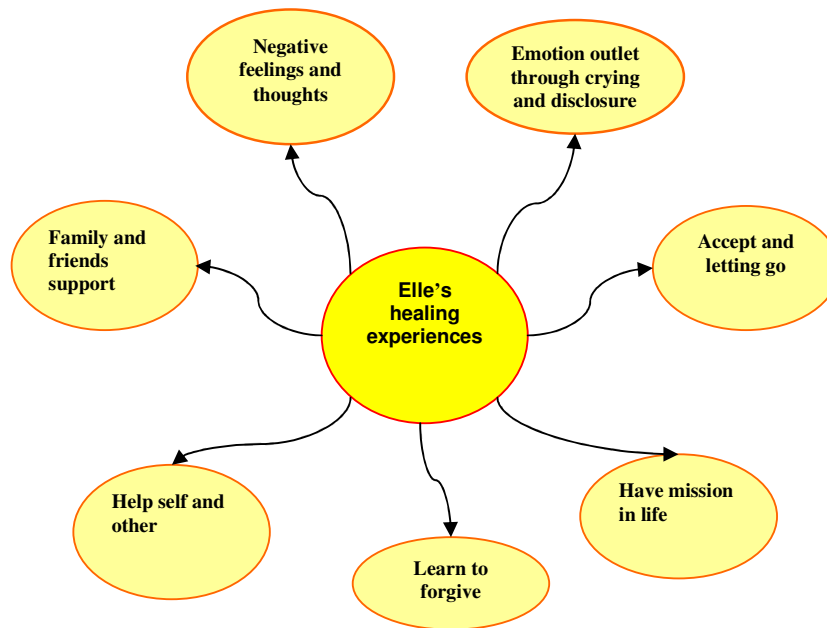


Figure 13. Elle's healing experiences.

Several aspects were identified by Elle pertaining to her healing from childhood sexual abuse (see Figure 13). They were: Confronted with negative feelings and thoughts, Emotion outlet through crying and disclosure, Accept and letting go, Have a mission in life, Learn to forgive, Help self and other, and Received support from family and friends. In this section each element is discussed and supported by Elle's statements.

Confronted with negative feelings and thoughts: Textural description. Two aspects were recognized by Elle in discussing of fears and negative thoughts as part of her journey in healing: fear of disclosure and hindering by negative thoughts. Elle spoke of encountering a lot of fears in disclosing to others what had happened to her, and used phrases such as, “I was very scared,” “I was feeling very skeptical,” “I am afraid mum might be mad at me,” “I am afraid mum might scold me,” and “I am not sure what mum will react.” She had also experienced a lot of negative thoughts that prompted her to judge herself negatively: “I feel dirty,” “No one will love me,” “I am not good enough,” and “I am not smart enough.”

Confronted with negative feelings and thoughts: Structural description. Around feeling fear of disclosure of childhood sexual abuse, Elle experienced greater fears of disclosure to her mother and father. She had the perspective that disclosure would bring more harm to the family and make things more complicated. She was concerned that her father might be unable to take it if he learned his nephew had raped his own daughter. In addition, her father’s health was not good and that made it even more difficult for Elle to disclose to him. Elle had successfully disclosed to the mother and brother what had happened to her and received support from them, but Elle was still not ready for disclosure to the father.

Next, Elle was haunted by negative thoughts that caused her tend to judge herself negatively, which were influenced by her mother’s perspective on virginity. Elle’s mother stressed a lot about Elle being able to find a husband and marry because Elle was still a virgin. She experienced tremendous stress every time the mother addressed this aspect, until she decided to disclose to the mother what had happened. Since then, Elle’s mother had accepted her and stopped talking about the issue of virginity.

Emotion outlet through crying and disclosure: Textural description.

Regarding emotion outlet, Elle identified two aspects which had led her to experience healing from childhood sexual abuse: crying, and disclosure. In phrases such as, “When I cry it helped me,” “Crying heal my soul,” “Crying make me feel more close to my soul,” she spoke of crying as healing for her, and also used phrases of “Crying allowed to express sadness,” and “It is very healthy to cry.” When she spoke of the aspect of disclosure and how it was healing for her, she used statements such as “I feel so much lighter,” “I have big relieved,” “I feel better,” “I no need to watch my back,” and “I feel free.”

Emotion outlet through crying and disclosure: Structural description.

Crying and disclosure were addressed by Elle as outlets for emotional relief. Elle had given several examples of how her negative emotions were finally overcome through crying and disclosure. According to Elle, she was the type of person who found it difficult to trust people and tended to hide herself. She used many layers of protection to protect her inner self. All these had created many stressors in Elle’s body. Thus, crying played a significant role in helping Elle to let go of all the stressors in her body. On several occasions, she had felt so much fresher the following morning after a long night of crying. She believed the entire burden inside her had been removed and all the accumulated rubbish inside her had been cleared after crying.

In Elle’s sharing, she expressed that disclosure of the childhood sexual abuse brought her closer with her family members and boyfriend. After disclosure, she was able to gain love and attention from her mother. Her mother started to give Elle more freedom and this made Elle become more responsible for her own actions. Another unique aspect shared by Elle in pertaining to disclosure was when she learned to let go of the past. She learned to let go of the revengeful feelings toward the perpetrator and his family. Elle was concerned her boyfriend would learn she had been sexually abused.

This led her to disclose to him what had happened. Elle described after disclosure, the boyfriend had accepted her and this had helped her to overcome the fear that the past might affect their relationship.

Learn to accept: Textural description. Elle's aspect of acceptance is linked to healing very frequently in her interview sessions. Elle used phrases such as, "I accept and believe what had happened," "I also accept that who I am today came with the past," "There must be a reason why something happen," "I accept the fact it was a mistake that he did," and "when I saw my mother cried she made feel she had accepted me." Acceptance as addressed by Elle connected to acceptance of self, acceptance of the past, and acceptance of others.

Learn to accept: Structural description. Acceptance of self and acceptance of past were emphasized a lot by Elle in her interview sessions. She believed the past had shaped her lifestyle and had determined the circle of friends she mixed with. Overall, she believes her past had made her become a better person today. Elle believed in the importance of learning to accept the past. According to Elle, if a person does not accept her past she might end up being in denial of what had happened. Denial might cause the person to shut down all the negative memories and she could end up becoming an unreal person in life.

Learn letting go: Textural description. Learning to let go is perceived as one of the important aspects by Elle in helping her recovery from childhood sexual abuse. Elle talked about, "Just let it go," "I have to make choice to let go," "I am capable to let go," and "You just know it is time to let go." Elle associated letting go as being a choice; it is possible and every survivor is capable to do so.

Learn letting go: Structural description. Elle described that after she went through several training sessions, she gained understanding of the importance of letting go to help herself recover from the past experience. Elle described her letting go

experience had made her free from many negative feelings. After learning to let go, she no longer had to worry about how others see her and how she should sit or talk. Letting go had also helped Elle break free from feelings of anger and hatred toward the cousin brother who had abused her.

Another interesting aspect about letting go for Elle was that she perceived letting go was equal to the meaning of giving herself a second chance to be reborn. Through letting go, Elle obtained a new perspective of herself. She stopped seeing herself as small and she stopped hiding herself. She came to understand that perceiving herself small had caused her to feel guilty about what had happened in the past.

Forgiveness: Textural description. According to Elle, forgiveness consists of two aspects: forgiving herself and forgiving the abuser. However, throughout the interview session, she highlighted the aspect of forgive herself more than forgive the abuser. Elle used several statements such as, “biggest thing to do is learn to forgive,” “forgive the person who did that to you,” “I had forgiven myself for being so dumb, quiet, and did not speak up,” “I had forgiven myself for building up the wall,” and “forgive of whatever I had done or failed to do.”

Forgiveness: Structural description. Elle emphasized the importance of forgiving herself, as she did not want to spend energy to be harsh on herself. She allowed herself to be reborn and transformed to become another person that she deserves to be, a person with freedom to express herself to others. She perceived this as the most powerful thing she was experiencing now in her life.

Further, Elle decided to forgive the abuser. Making the decision to forgive him had helped her in her recovery. She believed everyone does make mistakes and she believed the abuser had made a mistake because he was very young. Besides, Elle did not want to spend her energy to recall what he did to her.

Reaching out to help self: Textural description. Regarding the aspect of reaching out to help herself, Elle shared two aspects that helped her in healing from childhood sexual abuse. The first aspect was personal growth training that Elle had attended and the second aspect was Elle's determined attitude to help herself. Elle used statements such as, "The advanced training course really helped me break through," "I love this training and without this training I can't become who I am today," "The training had helped me many different ways," and "The training taught me not to think too complicated." The second aspect was Elle's determined attitude to help herself. Elle used statements such as "I can make a decision," "I will make it happen," "I don't want to worry about tomorrow," and "I want to become a happy go lucky person."

Reaching out to help self: Structural description. According to Elle, the personal growth training and her determined attitude were both interrelated and influenced each other in helping her to recover from childhood sexual abuse. Elle claimed the personal growth training had made a major impact on her transformation. She perceived this training had increased her social circle from 10 people to 300 people. The training had helped Elle become aware of the defense mechanism she used in her past. Elle expressed that she was facing a lot of difficulties in trusting people and was very protective toward herself. After attending several training sessions, she had learned to remove the defenses and became who she wanted to be. Further, Elle learned to perceive that everything is possible to make it happen. She stressed the importance for the person to decide to make it happen.

Elle's determined attitude had saved and helped her in recovering from childhood sexual abuse. When she was 11 years old, when she got to know what the cousin brother did to her was wrong and she decided to stop the abuse by herself, she was brave and firmly said to him that she would hurt him if he was going to touch her. Her determination successfully saved her from further abuse. She also indicated a strong

determination to be happy in life, thus she was willing to let go of the past to make herself happy and free from all the fears. Elle proudly expresses her past and this had made her become a role model for other people.

Figure 14 is the picture drawn by Elle which represented herself after she had gone through a series of transformations after attending a series of personal growth training. She perceived herself no longer plain in color and no longer needed to hide herself with a shield. Elle was feeling herself as full of different colors, just like the peacock. She was feeling proud to show herself.



Figure 14. Elle's depiction of herself.

Reaching out to help others: Textural description. Reaching out to others was often highlighted by Elle in the interview sessions, as it had brought many aspects of healing to her. Elle used words such as, "Helping people allowed me to open up myself," "Focusing out is a very powerful source," "By helping others I become a more responsible person," "Helping other also gives me a mission," and "Reaching out to people, make people feel alive."

Reaching out to help others: Structural description. In Elle's sharing of reaching out to others, she addressed helping others helped her to open herself and opened her eyes to many people who needed help. This constructive energy within her had helped her learn letting go and moving on from her past for a reason. Further, she

expressed this form of energy had helped her to become a person who was living with soul in life. In her perspective, people who are living with soul are happier and more contented. Elle also claimed through reaching out she gained personal growth and she was able to open up more to other people.

Spiritual belief: Textural description. Elle shared several aspects of her spiritual belief that led her to recovery from childhood sexual abuse. Elle expressed, “I believe things happened for a reason,” “It was not a mistake for things to happen,” “I feel it was a blessing for me,” “I feel like an education session from God,” and “I feel God is teaching me.”

Spiritual belief: Structural description. Elle felt that her spiritual belief had helped her to perceive the past positively, as well as helped her to believe there was something great behind what had happened to her, that what had happened in her past was God’s arrangement to prepare her for bigger challenges that she might face in the future. Her past was a blessing for her because she learned to appreciate life and people surrounding her. She believed her past and what was happening now were grooming her to become a better person in future.

Support from family and friends: Textural description. Elle shared that she received a lot of support from family members and friends, and that support from them had played a significant role in helping her to recover faster from childhood sexual abuse. Elle used statements such as, “I can feel her love,” “They care about me,” “I feel I have a family there for me,” “They make me feel they can understand me,” “They make me feel I am respected being who I am,” and “He knows me very well.”

Support from family and friends: Structural description. Support she treasured most was her family member’s acceptance and care after she disclosed the abuse. Her mother and brother made her feel they want to be part of her life, often checking with her if they noticed something was going wrong. This made Elle feel that

she was being loved and cared for by family members. Pertaining to the support from friends, she said they were a group of people she got to know through her training. Elle appreciated the guidance given by them and they were considered a safe community for her. Their honest feedback had helped Elle get to know herself better and this had led her to become more true to herself. Their function as a safe community helped Elle feel safe to practice her true self before she practiced it in society.

Intan

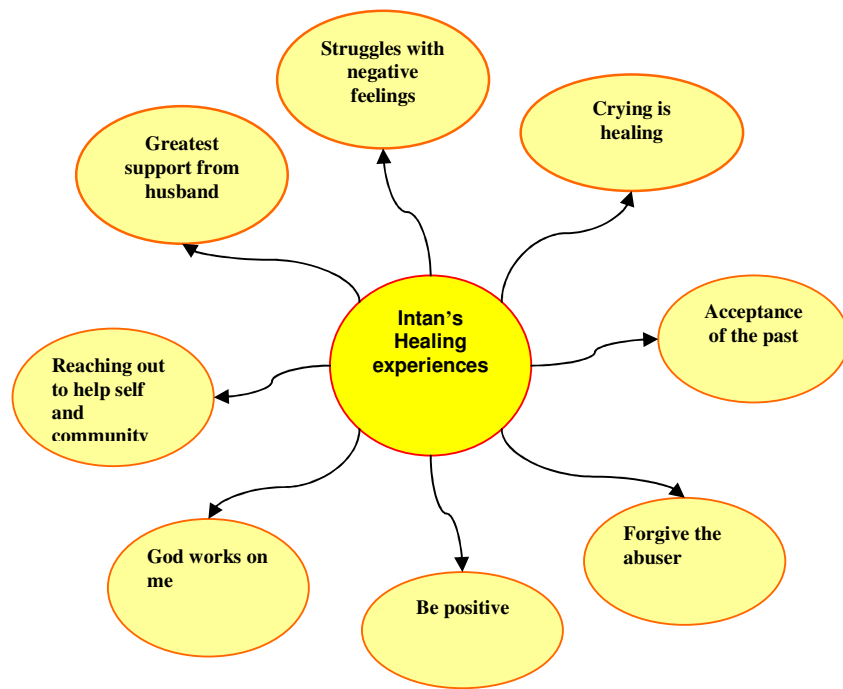


Figure 15. Intan's healing experiences.

Intan revealed a number of healing elements that connected to her healing experiences from childhood sexual abuse (see Figure 15). She had identified her healing experiences with Struggles with negative feelings, Crying is healing, Acceptance of the past, Forgive the abuser, Be positive, God works on me, Reaching

out to help self and the community, and Received greatest support from husband. Each of these aspects is discussed and supported by Intan's statements to create in-depth understanding of her healing experiences.

Struggles with negative feelings: Textural description. Intan shared that she had encountered negative feelings throughout her healing journey. She used statements such as, "I am scared they might judge me," "I was having fear of how they were going to see me," and "It made me feeling really awful" in addressing her fears in disclosure to others. Further, she had encountered a lot negative feelings when she was recalling the sexual abuse she had gone through. She used statements such as, "I was feeling really regret and feeling blaming," "I was feeling really frustrated with men," and "make me feel really angry."

Struggles with negative feelings: Structural description. In her journey of healing, Intan experienced two aspects of negative feelings. First aspect was the feeling of fear and awfulness of disclosure. Those feelings were caused by strong feelings of shame in Intan about what had happened in the past. These shamed feelings caused Intan to refuse disclosure to any person of her past except her husband. The second aspect of negative feeling was connected to feelings of frustration, anger, regret, and blaming. When she was recalling the past memories it also caused her to experience regrets and self blame for having failed in protecting herself from the abuse.

Crying is healing: Textural description. In Intan's perspective, crying was healing and had helped her in many ways in her journey of recovery from childhood sexual abuse. The crying process usually took place when Intan was alone in a room. She used statements such as, "I cry a lot especially when I am alone," "I cry to let out the emotion," "Crying helped me a lot," and "I will allow myself to cry."

Crying is healing: Structural description. Intan considered crying as a form of emotion release and stress release. For her, crying was healing because it provided

her a channel to release the suppressed emotions that she had accumulated for a period of time. In Intan's perspective, crying helped her to release stress in her body. She experienced all the stresses washed away from her body through crying.

Acceptance of the past: Textural description. Acceptance of what had happened in the past played a significant role in Intan's healing journey from childhood sexual abuse. She described her husband's acceptance of her past as helping her a lot in recovery. She used statements such as, "For him, whatever had happened in past it already a history," and "He learned to accept that was my past." Intan had also encountered her own acceptance of her past throughout her healing journey. She used statements such as, "I said to myself, it is alright, it already past, no need to feel regret," and "What had happened already past and I need to let it pass."

Acceptance of the past: Structural description. Intan felt really appreciated by her husband's acceptance of her past. According to Intan, her husband had accepted her past by not showing anger and questioning about the past abuse experience. Further, he continued to show support toward Intan in the way she wanted. All these made Intan feel grateful to have him as a husband. Intan had also discovered her own acceptance of the past, and used a lot of self talk to comfort and assure herself when the past memories came back and affected her. She comforted herself by reminding herself she was blessed with a supportive husband. Further, Intan believed that whatever happened in life it happened for a reason. Thus, she learned to accept her past with an open heart though it was very challenging for her.

Forgive the abuser: Textural description. In Intan's perception forgiveness plays a significant role in helping her to recover from what had happened. Intan expressed her forgiveness experiences, using phrases such as, "I got to understand the importance to forgive," "I keep remind myself to forgive him," "I need to forgive him," "After I forgive him, I feel much better," and "I had forgiven him."

Forgive the abuser: Structural description. Intan went through struggles before she was able to forgive the abuser. She went through a stage of questioning what made him do that to her, and when she got older she came to understand better. She believed he was very young when he did that to her and that he was badly influenced by his peers. Intan spoke about her decision to forgive the abuser because she wanted to be kind to herself. In the past, when Intan recalled the past it caused a lot of hurt and pain. Thus, she decided to forgive him because she wanted to free herself from the painful and hurtful feelings. Since forgiveness took place, Intan has experienced less flashback and was happier.

Move from the past: Textural description. Intan spoke of the importance of moving on from the past in helping her stay on track to recover from childhood sexual abuse. In Intan's perspective, moving on from the past was directly connected to getting herself to stay in a positive direction. She expressed, "I want to move on," and "I need to move on in life."

Move from the past: Structural description. Intan described times in her life when she had encountered experiences that pulled her down such as back stabbing by others. Whenever she encountered such negative experiences, past memories came and affected her emotionally. Intan wanted to become a successful person in life. She believed past memories had the power to stop her. In such circumstances, moving on from the past enabled Intan to get herself out of the negative emotion and it helped her continue to stay on the path in a positive direction no matter what may happen.

God knows best: Textural description. In the healing journey, Intan believed God had presented in her life and had helped her in overcoming the hurts caused by the past childhood sexual abuse. Intan expressed several statements connecting her healing with her spiritual belief. She said, "I learned to accept it was test from God," "Believe God knows the best for me," "I feel being assured by God," and "I believe what had

happened was faith arrangement by God” to describe her acceptance that what had happened was a test of faith by God. Moreover, Intan had also used statements such as, “I worship, I pray, and I read Al-Quran” and “I pray to God” to search peaceful feeling from God. Finally, Intan was in tears when she said, “God gives me a really good man.”

God knows best: Structural description. Intan believes things have happened for a reason. She strongly believes that what had happened in the past was an arrangement God made so that she could become a better mature person, and that it was because of the past that she is now an assertive and confident person. She was feeling thankful to God because she was having a life blessed with happiness. Intan was able to obtain peace through praying and worshipping because it helped her to replace negative thoughts with positive thoughts. One aspect she felt really grateful to God was being blessed with a wonderful life partner who had helped a lot in overcoming her past and helping her to let go of her past.

Reaching out to help self and the community: Textural description. Reaching out to help self and community had helped Intan feel empowered in many ways in her healing journey. The first aspect Intan emphasized was the importance of being a positive person in helping herself in this recovery journey. Intan had overcome a lot of her struggles and challenges by staying positive in her life. She used statements such as, “I feel grateful,” “I enjoy the happiness I have in my life,” “I am enjoying my life,” “I want to become a winner,” and “I learned to become positive from my life experiences.”

The second aspect Intan shared was the importance of reaching out to the bigger community. She used statements such as, “I do a lot of welfare works especially for children,” “I am involved in promoting sex education,” “I want to make sure I can reach out to more children,” “I reach out to help those who having extreme problems,”

and “Helping other it makes me feel more in peace.” To Intan, reaching out to the community meant focusing on helping children.

Reaching out to help self and the community: Structural description. In the first aspect of being a positive person, Intan expressed her feeling of gratefulness for being able to provide to others in need of help. When she reached out to others it had opened her eyes to see many people were in great suffering compared with her. Reaching out experiences had made Intan learn to appreciate her life which was filled with happiness and she symbolized as a fairy tale story that always ends with “happy ever after.” Further, Intan emphasized she did not want to become a loser and she did want to become a winner. Thus, she learned to move on to survive and she was aiming to become a successful person in life in the future.

The second aspect was reaching out to the community particularly children in rural areas. According to Intan, she had prepared a training module for children’s personal safety and she had trained a group of facilitators to use the training module to reach out to the children in the community. Reaching out to children made Intan feel empowered and she was aiming to prevent sexual abuse happening to other children. Intan had encountered the experience of reaching out to those who were suffering with great poverty, which had helped her open her eyes to perceive her problem as not the greatest problem. It had also helped her to appreciate her life and made her learn to be grateful for what she was having in life. All this reaching out to the community had triggered Intan’s passion to open a shelter home for sexual abuse victims and unwed mothers. Reaching out to others in Intan’s perspective was a form of empowering others and empowering herself.

Received greatest support from spouse: Textural description. In Intan’s healing journey from childhood sexual abuse, support received from her husband had played a significant role in helping her overcome her past hurts. Several times Intan

went into tears when she talked about the support she received from him. She used statements such as, “He played a significant role in helping me,” “He always put me as a priority,” “He is a very gentle partner when come to love making session,” “I am very lucky to have him,” “He is willing to do anything to fulfill my needs,” “He is willing to sacrifice for me and children,” and “He is a very good husband.”

Received greatest support from spouse: Structural description. There were several aspects identified by Intan connected to healing from childhood sexual abuse with support from her husband. They were husband’s acceptance of her past sexual abuse, feeling respected in sexual intimacy with husband, and love and attention from her husband. In the first aspect, Intan felt grateful because her husband was able to accept that she was no longer a virgin. She further emphasized that although she can sense he was feeling hurt after knowing she had lost her virginity, but he did not show any anger or query about her past.

The second aspect was pertaining to sexual intimacy with her husband, as Intan felt respected and loved by him. There was a time when she asked about the reason he was so gentle; he explained he did not want to hurt her and he did not want to trigger the sexual abuse memories. Intan felt appreciated, loved, and respected by her husband.

Finally love and attention received from her husband had helped her not to recall the past sexual abuse experiences as often as before. He made her feel he loved her and the children so much and he was willing sacrifice whatever he could for the sake of the family. Intan shared an incident when her son was hospitalized due to high fever and Intan had to stay with the son in the hospital. At that time Intan and husband have only one car for travel. Her husband decided to leave the car for her in the hospital and walked more than 30 kilometers to reach home in the middle of the night. Many other incidents had shown her husband’s love for her and their children. Intan felt really grateful and blessed to have him as her life partner.

Joyce

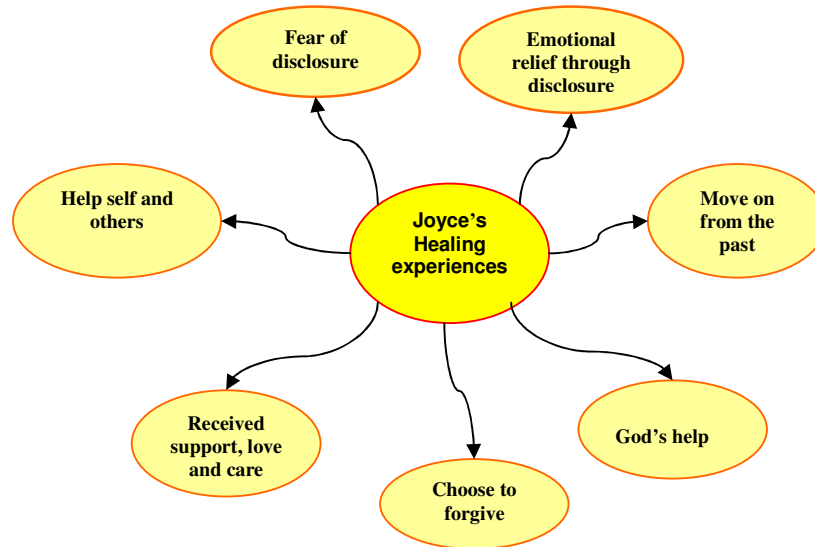


Figure 16. Joyce's healing experiences.

Joyce identified seven aspects associated with her healing experiences from childhood sexual abuse (see Figure 16). She connected her healing experiences with Fear of disclosure, Emotional relief through disclosure, Move on from the past, God's help, Choose to forgive, Received support, love and care, and Reaching out to help self and other. In this section each of these aspects is discussed and supported by Joyce's statements.

Fear of disclosure: Textural description. In the interview sessions, Joyce expressed her fear in disclosing the child sexual abuse incidences to family members and her boyfriend. Joyce used statements such as, "I did not tell anyone," "I don't dare to tell him," "I don't want to spoil the relationship," and "I don't want to share."

Fear of disclosure: Structural description. In the healing journey of childhood sexual abuse, Joyce shared her concern in disclosing what had happened in the past. There were two aspects connected to her fear of disclosure. First aspect was connected to her uncomfortable feelings whenever she talks about her past experience of being sexually abused. To prevent such uncomfortable feelings Joyce decided not to

share, particularly with family members and her boyfriend. Second aspect that caused her unwillingness to disclose to the family members and boyfriend was fear of the unknown. When further queried about this, she expressed she was concerned about what may happen. She was afraid she might spoil the family relationship or she might cause embarrassment to the family. Thus, she decided not to disclose in order to minimize any harm that it may bring to others, especially her loved ones.

Emotion relief through disclosure: Textural description. Fear to disclose what had happened had caused struggles in Joyce on her healing journey. Thus, being able to share and disclose to another about what had happened to her brought emotional relief to Joyce. She used statements such as, “My disclosure about the incident it was a big relief,” and “I had disclosed to my former roommate. It was helpful.” Although Joyce was able to disclose what had happened in the past she was however selective in choosing the person to whom she wanted to disclose.

Emotion relief through disclosure: Structural description. Joyce described the emotional relief that took place when she disclosed to others. After disclosure she got an awareness that her past sexual abuse experience was not as bad a condition as what others had gone through. Disclosure had made her feel better about her own past abuse and enabled her to learn to let go and move on faster. Further, disclosure to others had also helped Joyce experience reflection of herself. This form of reflection had helped her to learn to understand herself and her past.

Move on from past: Textural description. The decision to move on from the past had played a significant role in helping Joyce overcome childhood sexual abuse. In the interview sessions, Joyce often used such statements as, “I put it down and move on,” “I can choose to put it down,” “I can choose to continue move forward,” “let it go,” and “I only can move on and move forward.” Joyce stressed the aspect of a decision she needs to make to enable her to move on.

Move on from past: Structural description. Joyce described a pattern; she has to constantly make the decision to move on, and she highlighted two aspects that were helpful in allowing her to move from the past. First was accepting the fact she cannot change her past and second was to make the decision to change things that she can change, which was herself. These two aspects were interconnected; Joyce consistently addressed that she accepted she cannot change her past, and she believed she can change her own thinking, attitude, and mind set. This aspect of change had helped her learn to transform the hurtful past into something more positive. Joyce gave the example that she decided to forgive and love the abuser rather than hate him because she wants to move on from the past.

Figure 17 was drawn by Joyce to symbolize making choices to be healed. She spoke of choices that she had made to help her overcome past experiences. She was in darkness, experienced realization, and now has choices to move out from the darkness.

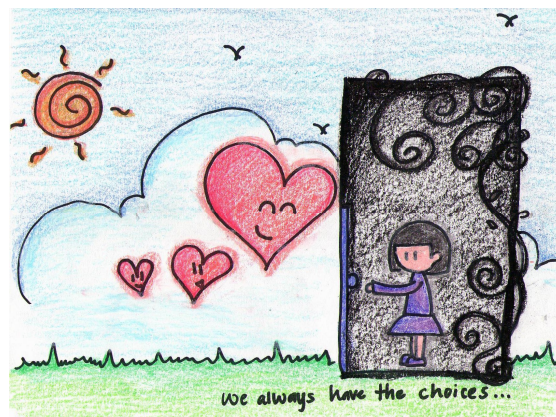


Figure 17. Joyce's symbolic drawing of her healing process.

God's helps: Textural description. Joyce's spiritual beliefs had helped her in overcoming many aspects of her life, particularly in overcoming childhood sexual abuse. From the first interview session to the last, the aspect of God always emerged. Joyce used statements such as "God help me a lot," "I believe is God working on me,"

“God who changed me a lot,” “God gives me the strengths,” “God gives me the power of love,” “God got rid my burden,” “I had gone through all these with God,” and “I can see a lot of love from my friends, from my family, from God.” Joyce strongly believes God has played an important role in helping her in overcoming her past.

God’s help: Structural description. Joyce emphasized several aspects of how God had helped her in overcoming childhood sexual abuse. The first aspect was connected to negative feelings such as hatred and uncomfortable feelings. Through prayer, Joyce found peace and no longer had feelings of hatred and uncomfortable feelings toward the cousin who had sexually abused her. Second, Joyce expressed that God had given her strength to love and forgive those who had hurt her. Third, Joyce believed God had changed her thinking, values, and perspective. According to Joyce, she was a very impulsive person but now she has become a very patient person. Since she got to know God, she was able to see the love and care from her parents and she learned to appreciate them. Finally, there were several times Joyce experienced assurance from God when she needed it most. There were times she was thinking to hurt herself and God’s words emerged in her mind assuring her, “everything will be fine, everything is in His hands, and everything is in his control.” Joyce experienced immediate peace in her when she heard those words from God. Further, Joyce had also experienced similar peace experience when she was listening to gospel hymns.

Choose to forgive: Textural description. This aspect was very focused on forgiving the abuser. Joyce used statements such as, “I can choose to forgive and forget,” “I forgive him,” “Forgive people who hurt me,” “I decided to forgive,” and “I can choose to forgive him.” Aspects of choosing to forgive were interrelated with the aspect of move on from the past and aspect of God’s help, as described in the following section.

Choose to forgive: Structural description. Joyce had several reasons for choosing to forgive the abuser. First was to move on from the past. According to Joyce, whatever had happened in the past she cannot change it but she was able to make herself feel better by forgiving him. Thus she decided to forgive him to help herself to move on from the past. Second was pertaining to her spiritual belief. She believed God forgives all sinners including herself and the abusers. Thus, she believed it is only right for her to forgive the abuser.

Third was connected to her reflection on consequences that might take place if she did not forgive him. After going through some personal reflection, she realized a decision to forgive not only benefits herself but also others. Joyce had described forgiveness had helped her not to feel angry at what had happened. Further, forgiveness had prevented the possible tension that might occur in the family relationship. Thus, all of these had an impact on Joyce in her decision to forgive the abuser.

Received support, love, and care: Textual description. Joyce reported she received support, love, and care from family and friends which had helped her a lot in overcoming what happened in the past. Joyce identified parent, friends, and roommates as the people who provided her support. However, not all of them knew she had been sexually abused. She used statements such as, “parent support,” “people love me,” “I have a good family,” and “I had gone through all these with God, family, and friends.”

Received support, love, and care: Structural description. Joyce received a lot of assurance, acceptance, love, and care from her parents, though they do not know what had happened to her. Joyce said she was a very rebellious child and that many of her actions had hurt her parents badly. However, her parents continued to accept her, loved her, and cared about her. Those actions from the parents had helped her to learn to forgive the abuser and learn to love the abuser as how her parents love her. Further, Joyce received support from friends, and particularly from friends who had gone

through childhood sexual abuse. In the past few years, Joyce had encountered several friends who had identified themselves as sexual abuse survivors. Through sharing, Joyce became aware she was not alone and through sharing she realized she was very fortunate because she had not gone through a serious form of sexual abuse like other friends who had experienced repeated rape by one of their family members. The following is the picture drawn by Joyce symbolizing support, love, care she received from God, family members, and friends in her healing from childhood sexual abuse.

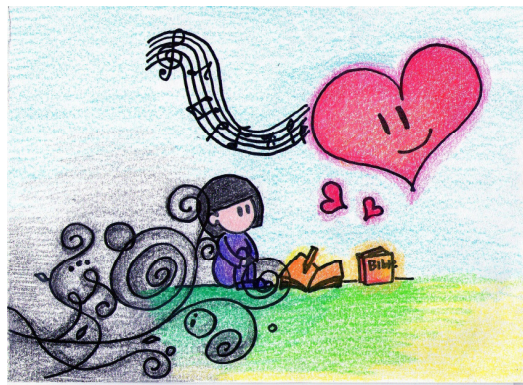


Figure 18. Joyce’s symbolic drawing of her support system.

Reaching out to help: Textural description. The healing aspects of reaching out to help consists of two aspects. First was reaching out to help self and second was reaching out to help others. Both aspects had a significant impact on Joyce’s healing from childhood sexual abuse. In the aspect of reaching out to help herself, Joyce read many self-help books and spiritual books. She used statements such as, “read books help me,” “I read books that talk about love and forgiveness,” and “Inside the books has motivation messages” to describe her experiences. Regarding reaching out to help others, Joyce connected with her healing through reaching out to help her clients and friends. Joyce used statements such as “We first have to do it before we can teach our client,” “When I said those words to my clients or friends I actually also say it to myself,” and “I feel good when I reach out to others through counseling session.”

Reaching out to help: Structural description. Reading resources such as self-help books and spiritual books provided different aspects in helping Joyce recover from childhood sexual abuse. The first aspect was associated with positive messages she gained from the books such as love and forgiveness. Joyce spoke of one book which had the Chinese title of *Bring Love Back Home*. Through reading the book she understood she cannot change what had happened in the past and she cannot change the people in her environment. She gained a deeper understanding that she had power to make the decision to forgive those who had hurt her and to make the decision to love rather than hate those who had hurt her. The second aspect of reading resources that had helped her in recovery was connected to self- reflection of her own past and weaknesses. Reading resources had provided her an in-depth understanding of herself and had continued to motivate her to become a better person.

Reaching out to help others in Joyce's perspective on her healing was connected to experiencing feelings of empowerment and gaining self-reflection. In the first aspect of feeling empowerment as reported by Joyce, she felt encouraged and supported when she was able to help others. Reaching out to help others had given Joyce a sense of meaning in her life. This encouraged her to believe it was a calling for her to continue to reach out to more women survivors in her future career as a counsellor. Pertaining to the second aspect of self-reflection as a counsellor, Joyce consistently examined herself, and whether or not she is on the right track of recovery. She often questioned herself whether she was practicing or applying what she preached in counselling sessions with her own clients.

Maria

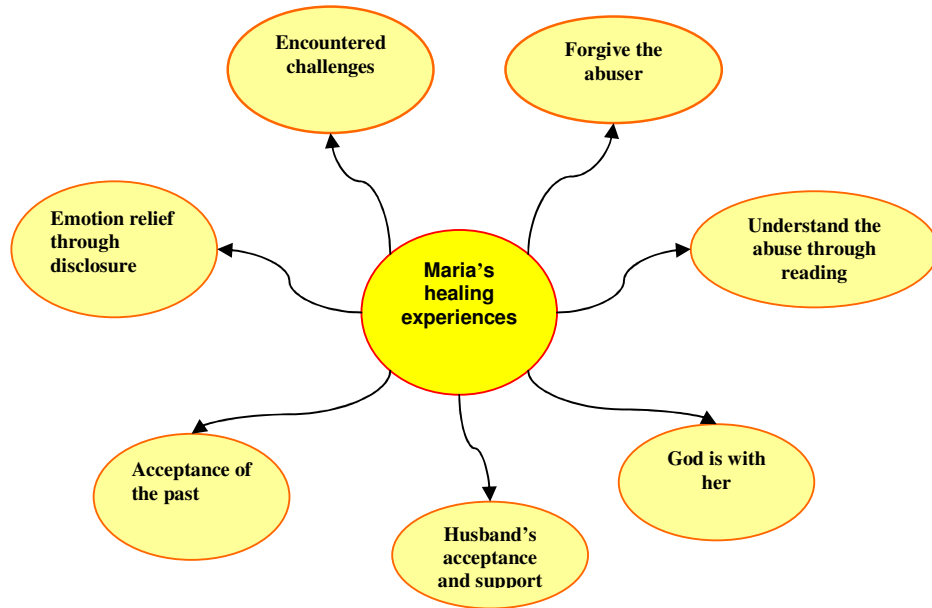


Figure 19. Maria's healing experiences.

Several aspects were identified by Maria pertaining to her healing from childhood sexual abuse (see Figure 19). She had identified her healing experiences with Encountered challenges, Forgive the abuser, Understand the abuse through reading, God is with her, Husband acceptance and support, Acceptance of the past, and Emotion relief through disclosure. In this section, each aspect is discussed and supported by Maria's statements.

Encountered challenges: Textural description. In Maria's perspective, she had gone through many challenges in her healing journey. In the initial stage, Maria had to make a drastic action to get herself out from the abuse. By the age of 17 years, she decided to leave her adopted family to prevent more serious sexual abuse from taking place. Maria used statements such as, "I had run away from the home," "I want to get out from the house," and "I make a decision to move out from the family."

After she returned to her biological family, Maria encountered challenges to gain acceptance from her biological father, as Maria was brought up by adopted parents with different up-bringing. Thus, it caused a lot of tension between Maria and her

biological father. However, life became much better after Maria got married to an understanding husband. Yet, Maria continued to face challenges in her recovery journey. She expressed she became very protective toward all her daughters. She described, “I become very protective toward my girls,” “I become overprotective,” and “I look out who they go out with.”

Encountered challenges: Structural description. Maria faced several challenges in her journey of recovery from childhood sexual abuse. The sexual abuse started when she was only 6 years old. It started with peeping her when she was changing or bathing. The abuser continued with another form of sexual abuse by placing his penis on her arm when she was sleeping. This continued until Maria was in secondary school. When Maria turned 16, he ended up exposing his naked body in front of Maria. All these forms of abuses caused a lot worries and insecurities in Maria. By the age of 16 years, Maria decided to leave her adopted family and went back to her biological family. After she moved back to her biological family, she felt much safer and no longer felt threatened. Although Maria was feeling safe staying with her biological family, yet she experienced rejection from her biological father. Maria described it as she was bought up differently by the adopted family, thus her biological father faced difficulties accepting her.

Life become much happier after Maria married. However, she became very protective toward her four daughters. She described that when all her daughters were young she required them to report to her where they were and whom they mixed with. She insisted the daughters to do so because she does not want her daughters to experience the hardship and mental disturbance that she had gone through. Maria further described she wants her children to have a normal childhood, a normal adolescence, and adulthood. She wanted them to have a normal life in university, get married, and have children.

In Maria's perspective, the aspect of forgiveness was one of the important elements that had assisted her in recovering from childhood sexual abuse. Maria used statements such as, "I can forgive," "I cannot forget but I can forgive him," "I had forgiven him for what he had done," "I have no prejudice toward him," and "I already make peace with everybody." Forgiveness as addressed by Maria was mainly focused on forgiving the abuser.

Forgive the abuser: Structural description. The decision to forgive the abuser was influenced by the changes in the abuser. She saw many changes taking place in the abuser that led her to forgive him. As she described, he had changed to become more a spiritual person. Further, Maria expressed the way he had hugged Maria, he made her feel he was asking forgiveness from her. After having forgiven the abuser, Maria experienced peace within herself and felt peace with others. Since Maria decided to forgive him, she was no longer feeling any resentment toward him and others. Maria drew a picture representing that she was at peace with him and others because she had forgiven him (see Figure 20).



Figure 20. Maria's symbolic drawing of peace with the other.

God is with her: Textural description. In Maria's perspective, God played a significant role in helping her in her recovery from childhood sexual abuse. She used statements such as, "God was with me," "I feel God was there for me," and "God is

great.” Maria believed God was there to help her throughout her healing journey from childhood sexual abuse. Maria used statements such as, “somebody looking after you,” and “somebody is guiding you” to describe that God was there helping her.

God is with her: Structural description. Maria shared when she was going through sexual abuse in her childhood there was no one that she can depend on or she can ask for help. However, she believed God was always there guiding her and looking after her. At 7 years old, Maria learned to protect herself from sexual abuse by covering up tightly with a blanket every night. She believed God was the person who guided her to do so. The encounter with God had helped Maria overcome the feeling of loneliness and pushed her to move on for betterment in life.

Husband’s acceptance and support: Textural description. In Maria’s perspective, her husband had played a significant role in her recovery from childhood sexual abuse. Maria used statements such as, “I caught a good fish, I mean a good husband,” “I got a man who understands me,” “I have a man that I can talk,” and “Married to him it was a turning point in my life.” Maria shared there were many positive characteristics in her husband, using statements such as, “He is the jovial type,” “He is a very calm person,” “He is more like a listener,” and “he is very gentleman.”

Husband’s acceptance and support: Structural description. Very often Maria emphasized the role of her husband in assisting her in overcoming her past. She described the ways the husband carried himself such as being a good listener, a gentleman, calm, and jovial had helped her to be open and brave to share with him about the childhood sexual abuse that she had gone through. Her husband consistently provided her with undivided love and he was willing to go all the way to support and help her. Maria claimed since she married her husband she had made many positive transformations in her life. Maria no longer felt lonely; she felt accepted by her husband,

and she had someone that she can trust and depend on. Figure 21 represents the happiness she received from her husband. She highlighted that her husband had made her become a happy woman, and that being a happy woman had helped her make a happy family for him and for herself.



Figure 21. Maria’s symbolic drawing of happiness she received.

Positive attitude: Textural description. Maria talked about acceptance of the past and feeling grateful for what she has. She perceived that being positive had helped her in many ways to overcome her trauma experiences from childhood sexual abuse. Maria often used statements such as, “I just accept what had happened,” “I feel I am quite lucky,” “I feel grateful,” and “My life is just like a fairy tale story.”

Positive attitude: Structural description. Several aspects were addressed pertaining to Maria’s positive outlook helping her in overcoming her past. First, in the aspect of acceptance, Maria learned to perceive whatever had happened was part of life that she needed to go through. Second, Maria learned to view positively all negative events that had happened in her life. She viewed her life like a fairy tale story that started with a lot of suffering but ended with happiness. Finally, the positive attitude in

her had led her to appreciate and be grateful for the happiness she was experiencing in life.

Emotion relief through disclosure: Textural description. Maria experienced struggles, being unable to speak to any person about the abuse. However at age 17 years, Maria decided to leave the adopted family. That was the first time she decided to disclose to her biological parents what had happened. Maria stated, “After I talk to them, I felt the burden feeling was taken away from me.” That was the first time Maria experienced a sense of emotional relief through disclosure after years of abuse.

Emotion relief through disclosure: Structural description. In Maria’s perspective, the first disclosure meant a lot to her because she gained emotional relief and she gained the acceptance from her biological mother and sisters. Maria believed if she did not disclose what had happened she might continue being affected by what had happened in the past. This first disclosure also provided Maria the courage to disclose to her husband. Disclosure in Maria’s point of view connected to releasing feelings such as fear of rejection and assisted her in gaining acceptance of self, and acceptance from significant others such as her biological mother, sisters, and husband.

Nor

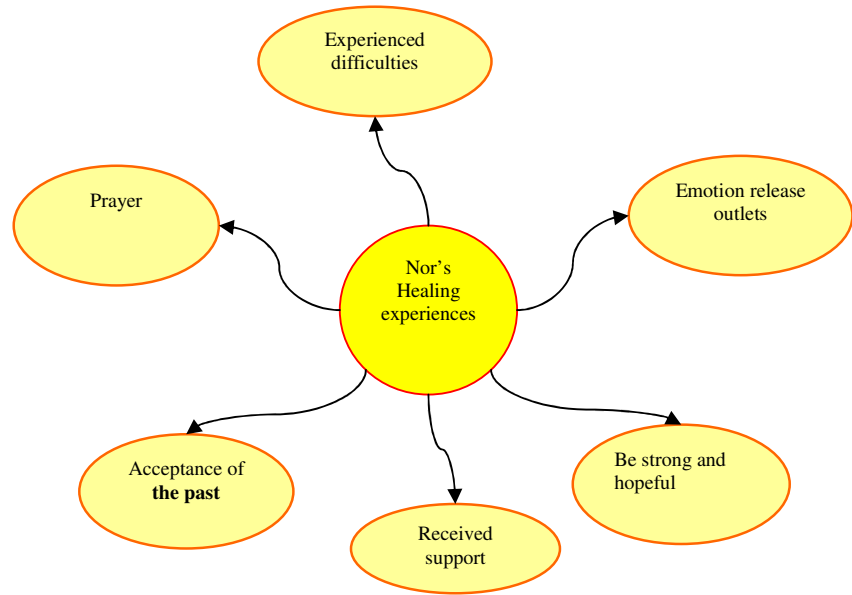


Figure 22. Nor's healing experiences.

Several aspects were identified by Nor pertaining to her recovery from childhood sexual abuse (see Figure 22). Nor had connected her healing with six aspects: Experienced difficulties, Emotion release outlets, Be strong and hopeful, Received friends' support, and Acceptance of the past, and Prayer. Each element will be discussed and supported by Nor's statements for further understanding of the dynamics of her healing experiences.

Experienced difficulties: Textural description. Several aspects reported by Nor were associated with difficulties in her healing journey from childhood sexual abuse. The first aspect was connected to her difficulties in coping with what had happened. Nor stated, "It was quite difficult for me to cope," and "It was very hard for me to cope with the situation that I had faced." Nor had also expressed her difficulties in fear of others knowing what had happened. She expressed, "I am very afraid to tell others" and "I am concerned how people see me."

Experienced difficulties: Structural description. The first aspect expressed by Nor was her difficulty in coping with memories of childhood sexual abuse on her healing journey. The fact that the abusers were her adopted brothers had caused Nor to face difficulties in coping. She encountered great tension when she was visiting her parents because one of the abusers was still living with her parents. Further Nor admitted that though the sexual abuse already stopped several years ago she was experiencing fears the abuser might abuse her again.

The second aspect of experienced difficulty was her fear to share or to disclose to others what had happened. Nor experienced several times being judged and questioned by people she had shared with about the sexual abuse. She had experienced being questioned by several friends about the truth of the abuse and she had also experienced being questioned for not disclosing to her parents about the abuse. All these negative experiences had caused her to be more cautious of her sharing and she ended up more reluctant to disclose to others.

Nor had written several songs to express the difficulties she had faced in her healing journey. The following is one titled “Invisible” written by Nor, expressing her feeling of being judged by others.

Invisible

Keep waiting someone to come and save me from this pain
Yet, no one comes and keeps watching me as I'm the wrong one
Do you know how it felt, this misery?
Kept inside of me, no one to tell and no one to lean on
Day by day, I felt more miserable than ever
I want to cry but there's no tears left . . .
Still, I wait for somebody to come and rescue me from this misery
Even though my heart is beating, yet I can hear it shattered bit by bit
Just waiting the right time to break into pieces
The way it hurts, as I feel like I'm dying
Could anyone hear me screaming and shouting?
Trying to bear the pain alone, yet how long do I have to bear it alone?
As days passed by, I keep waiting
That someday someone came and pull me out of this pain

Emotion release outlets: Textural description. Regarding healing from childhood sexual abuse, Nor highlighted emotional release outlets for her expression of sadness and anger. She used many forms of outlets to express emotions such as crying, writing songs, art works, sport, and empty room treatment. She expressed in statements, “Crying really helped me to ease the pain inside me,” “Writing songs really helped me to express my feelings,” “when I feel stress I will do painting, drawing and sketches,” “Rugby game helped me to release all the anger,” and “The empty room treatment it really helped me to ease the pains in me.” In the empty room treatment, Nor was placed in a safe room for 1 to 2 hours by her psychologist and she was allowed to do whatever she wants in the room. Nor found this treatment was very useful to her because she did not have fear of how people will see her, judge her. She was free to express all her emotion.

Emotion release outlets: Structural description. Emotion outlets expressed by Nor were connected to channels to be more in control of her own life, to ease the intense emotion such as pain and anger, and to be a strong person. In Nor’s perspective crying had helped her to express pain in her and brought back the confidence in her. Creating artwork such as scribble, drawing and painting had helped Nor to experience healing by reminding her to be strong to face what had happened and embrace the support system she current has. Lastly, the empty room treatment, song writing and rugby game were identified by Nor as a channel for expressing her intense emotion such as anger. Further it had helped her to have a space to be more in control of her own life. In Nor’s point of view outlets to express emotion and to be in control of life played a significant role in her healing. She had consistently addressed this aspect in her interview sessions.

Be strong and hopeful: Textural description. Although Nor experienced a lot of difficulties in coping with childhood sexual abuse she remained strong and

hopeful for her future. Regarding being strong in coping she stated, “I just have to keep pushing myself,” and “I have to keep pushing myself to the limit.” Next, in aspect of being hopeful she stated, “I am looking forward to see a new life and a new me,” and “I believe I will have family, trusted friends, and good career in future.” All the above indicated a strong resilience in Nor that had generated healing from childhood sexual abuse.

Be strong and hopeful: Structural description. Aspects of being strong and being hopeful in Nor’s perspective were interrelated. In her perspective, she continued to be strong to move on for her to see a hopeful future. In her interview sessions, Nor repeated several times that she had no choice but to keep pushing herself to the limit. She described in the journey of healing she had encountered times she was stuck and she was unable to continue walking in her healing journey. However, she was persistently pushing herself to keep moving on. According to Nor, by keeping herself moving, she was able to help overcome her fears of what might happen in future. In Nor’s point of view, whatever had happened in the past had caused her to lose control in life and she worked very hard to move on and was finally able to obtain a sense of control of her future life. Therefore, she was willing to push herself to obtain a life that she wanted to have that sense of control.

Received support: Textural description. Nor reported she had received support from several parties and it helped her overcome the difficulties of coping with childhood sexual abuse. Psychologists and her close friends were the source of important support systems for her. Nor used statements of, “The psychologist had helped me in many ways,” “I was very blessed to have the psychologist to help me,” and “I was feeling really thankful for my friends.”

Received support: Structural description. In terms of support received from the psychologist, Nor appreciated the friendship and support that had been given

by the psychologist. She appreciated how the psychologist had never limited the time of their meeting and she was willing to meet up with her in informal meetings. The flexibility offered by the psychologist had given the support she needed when she was in her critical condition. Further, one of the psychologists had disclosed to Nor that she was the survivor of childhood sexual abuse as well. This disclosure from the psychologist had given Nor assurance she was not alone. In term of support from friends, the aspect Nor appreciated was the channel to share, the acceptance, and the understanding given by friends. All these had helped Nor to release a lot of tension and stress in her recovery journey. Figure 23 was drawn by Nor to express her appreciation of love and care she received from her friends and the psychologists.



Figure 23. Nor’s symbolic drawing representing love and care she received.

Acceptance of the past: Textural description. The aspect of the acceptance of her past was highlighted by Nor in her interview sessions. She connected her healing from childhood sexual abuse with learning to accept what had happened. She stated “Whatever had happened I have to accept it” and “I learn to accept it”. In Nor’s perspective, acceptance of the past was connected to moving on from the past.

Received support: Structural description. Nor spoke of being unable to repair the damage the abuser done to her; however she learnt to accept what had happened in the past. This form of acceptance allowed her to be in a direction to set herself to move on from the past. Nor claimed she felt weak when she was unable to accept her past. Acceptance of what had happened had helped her to keep pushing herself to keep walking in the healing journey.

Prayer: Textural description. In the aspect of spirituality, Nor had shared that prayer had helped her many times in the healing journey from childhood sexual abuse. She used statements such as: “Praying to God soothes me,” “Praying is very calming,” “Praying makes me become stronger,” and “Praying makes me feel hopeful again.” Nor said prayers had generated positive aspects that had helped her in recovery.

Prayer: Structural description. Prayers had helped Nor in overcoming many intense emotions. She explained it provided her a private time and a private space to express her feelings. After expressing her emotions, she experienced instant feelings of soothing and calmness in her. In the short term, in dealing with the intense emotions, prayers had helped her in many ways. Moreover, prayer had helped her to be hopeful of her future life and this had helped her to be more positive in her process of recovery from childhood sexual abuse.

Sandra

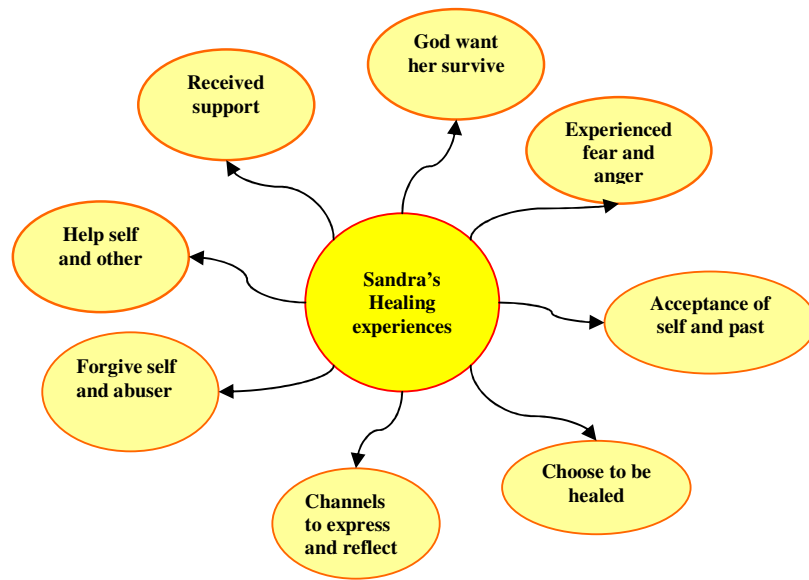


Figure 24. Sandra's healing experiences.

A number of aspects were identified by Sandra in association with her healing (see Figure 24). Sandra had identified aspects of: Struggled with fear and anger, Acceptance of self and past, Make decision to be healed, Channels to express and reflect, Forgive self and abuser, Help self and other, Received support, and God wants her to survive" sexual abuse. All aspects are discussed as supported by Sandra's statements.

Experienced fears and angers: Textural description. Sandra described in-depth about the struggles she had gone through in the healing journey. She experienced a lot fear and anger in her recovery from childhood sexual abuse. Regarding fears, Sandra used statements such as, "My most inner fear is not able to heal completely," "I was so obsessed with the feelings to be healed," and "I am quite afraid if one day my parent will find out." In the aspect of anger, Sandra stated, "I am very afraid of my own anger," "I am angry at myself," and "I can still feel a lot of anger."

Experienced fears and anger: Structural description. Sandra experienced that fears in healing were connected with her working in the helping profession. In Sandra's perspective, her profession as a para-counsellor had led her to hold high expectations on healing from childhood sexual abuse. Sandra had gone through a stage where she was obsessed to be healed from childhood sexual abuse. Thus aspect of fear of not being able to heal completely often worried Sandra. Further, the aspect of fear that the parent might know what had happened was connected to her feeling sorry for the parent. Sandra had shared she had attended a workshop where she had opportunity to deal with this fear. In the workshop she caught herself breaking down, crying, and was feeling very sorry for the parent.

Besides fear, Sandra expressed feelings of anger often arising although she had already gone through the forgiving process. She described how the anger in her was connected with the feelings of anger at herself for letting the sexual abuse happen. There were times she believed it was her fault and she blamed herself for failing to protect herself and failing to tell her mother what had happened. In her current profession, she was required to accompany women survivors to court. Feelings of anger toward the legal system often arose when she was accompanying the survivors of sexual abuse to court.

Acceptance of the past: Textural description. Aspect of acceptance was stressed by Sandra several times in the interview sessions. In her perspective, acceptance of the past had played a significant role in directing her to more advanced healing from childhood sexual abuse. Sandra stated, "I accept this had happened in my life," "I also accept it had an impact on my life," "I accept it had changed my life," and "I have accepted my past." Sandra learned to accept her past and the impact it caused.

Acceptance of the past: Structural description. Acceptance of what had happened had directed Sandra to gain several positive aspects. First was the positive

highlighted by Sandra in her increased readiness to be open to more resources to help herself. She had opened herself to attend many self- help workshops. She started to read many books related to forgiveness and self- help books for survivors. The second positive aspect Sandra gained was a realization she had autonomy to decide the impact of the past on her life. She came to understand she had the power to decide how much emotion to let out and that she was responsible for what she let out. Sandra further described she will not blame any person for causing her to feel in such way because she believed she is responsible for her own emotions.

Choose to be healed: Textural description. It was a snatch theft incident that had caused Sandra to recall all the childhood sexual abuse memories. For several months afterwards, she had traumatic experiences and was nearly killed in a car accident. After surviving the car accident, Sandra made a big change in her attitude toward what had happened. She started to intensively search for healing through making many firm decisions to be healed. Sandra shared, “I chose to let go of the hatred in the past,” “I chose to set myself free and regain freedom in my life,” “I did not die, I decided to do something in my life,” and “I keep searching to be healed.”

Choose to be healed: Structural description. Sandra experienced stages of positive impacts on her healing when she decided she wanted to be healed. In the first stage she began to allow herself to look deeper into the issue of childhood sexual abuse. In the second stage, she experienced all her internal struggles and difficulties decreasing when she allowed herself to look deeper into the issue. In the third stage, she came to change her thoughts toward what had happened and she came to believe she deserved a better life. In the final stage Sandra learnt to love herself after she had gone through the process of searching for healing.

Channels to express and reflect: Textural description. Sandra had highlighted channels to express and reflect in her healing journey from childhood

sexual abuse. The first aspect identified as a channel to express was self-disclosure. Sandra used statements such as, “I start to self-disclose,” “I shared with the helpers,” “I want to share with them,” and “Disclosure to other is like a form of self-assurance.” The second aspect was writing, and more specifically, writing in her personal blog. Sandra described, “I write a lot, writing is a one way to reflect,” “Writing had helped me to reflect a lot about my life,” “I wrote what I had gone through,” and “I wrote who I am now.”

Channels to express and reflect: Structural description. Sandra had reported using two channels to express and reflect. In the first channel was self-disclosure. Sandra perceived self-disclosure of childhood sexual abuse history to others had played a significant role in her healing from childhood sexual abuse. She described that sharing or disclosing to others had made her feel she had successfully passed the test to be in her journey of healing. It was like confirmation to herself that she is in healing from childhood sexual abuse.

The second channel to express and reflect was writing. Sandra perceived writing had helped her to analyze, identify, and reevaluate what had happened in the past and currently. This process enabled Sandra to gain both better and deeper understanding of her issues, which helped her to make more progress in her healing from childhood sexual abuse.

Forgive self and abuser: Textural description. There were two important aspects of forgiveness reported by Sandra, forgiving self and forgiving the abuser. Regarding forgiving self, Sandra stated, “I had come to the point of forgiving myself,” and she had experienced “true forgiveness” in one of the workshops she had attended. Regarding forgiving the abuser, Sandra used statements such as, “I have forgiven the people who have harmed me,” and “I forgave everyone, including him (the abuser) and one of his friends.” Further, Sandra had personally met the abuser and said to him, “I

have already let go of the past, I hope you will do the same and please do forgive yourself as well.”

Forgive self and abuser: Structural description. Regarding the aspect of forgiving self, Sandra perceived she was making a decision to forgive in order to have a better tomorrow for herself. Thus, she decided to forgive herself because she knows that without forgiving herself, it will cause her to hold the past tightly and she will end up suffering more. Sandra described an experience from a workshop where she learned to understand the sources of her anger and she learned to forgive herself. In the workshop, Sandra found herself angry at the person who represented a 10 year old her and she refused to follow instructions from the facilitator to hug the person who was role-playing her 10-year-old self. She had burst into tears when the facilitator confronted her and finally she hugged the child, and forgave herself for failing to protect herself from the abuse. The role-play had helped Sandra to experience true forgiveness of self.

Regarding forgiving the abuser, this took place when Sandra was given an opportunity to meet him. Sandra took up courage to face him and expressed her forgiveness toward the abuser for what he had done in the past. Sandra described she saw him in her house garden; however, he seemed like he did not dare to face Sandra. In seeing him struggle, Sandra came to understand that over the years the abuser had gone through a lot of uneasiness for what he did in his past. Sandra chose to believe the abuser will not repeat what he did as he knew the impact that he had caused and the wound that cannot be repaired. This belief had helped her to forgive him and enabled her to move on from the past.

Help self and other: Textural description. Sandra connected reaching out to help self and others with her experience healing from childhood sexual abuse. In reaching out to help self, Sandra identified two important resources that had helped in

her recovery from childhood sexual abuse: reading self-help books and attending workshops. Pertaining to self-help books in helping her in recovery, Sandra expressed, “I found many books about love and forgiveness,” “The book addressed forgiveness is the greatest healer of all,” and “I read many books about forgiveness.” Sandra had also attended many workshops related to forgiveness. She stated, “I attended many courses related to forgiveness,” and “I get a lot of insights from the workshops.”

In the second aspect, Sandra felt the importance of reaching out to others particularly the survivors of childhood sexual abuse. Sandra stated, “I was willing to put more effort to help the survivors,” “Particularly young survivors I always want ensure they are able to contact me,” and “Provide workshops on forgiveness and love.”

Help self and others: Structural description. First, reaching out to help self through self-help books and workshops had played an important role in providing insights to Sandra to gain healing from childhood sexual abuse. She learned to address the fears within her and she gained the courage to deal with the issue with which she struggled. After successfully helping herself, she applied it in helping other survivors.

In the training workshops, Sandra was given many opportunities to disclose what had happened in her past. Through personal disclosure she gained understanding that other people continued respecting her and accepting her. She gained an awareness of being a survivor of childhood sexual abuse and that she deserved to be respected. Further, the training workshops had also given her many opportunities to receive guidance from the trainers and facilitators. These opportunities had helped Sandra to be healed from childhood sexual abuse and at the same time she was learning to be an effective therapist.

Second, reaching out to help others was considered an opportunity for her to revamp the regret she had in regard to her past. Sandra admitted in the journey of recovery, she was hoping there was someone there to reach out to help her to overcome

the sexual abuse. Therefore, when she was given the opportunity to help young survivors she was willing to go the extra mile for them. Moreover, reaching out to help others was also connected by Sandra to feelings of being important, needed, and valued in the helping profession. Sandra experienced much life satisfaction and meaningfulness when she was able to help people from a depressed stage to be in a hopeful stage. The achievement in reaching out to help others made her feel she did not waste her life and she found meaningful purpose in life.

Received support: Textural description. Sandra stated the greatest support she had ever received in helping her overcome childhood sexual abuse was the support she received from her friends. Sandra expressed gratitude and appreciation toward her friends, describing that “they give me a big hug,” and “They never ask me any detail about what had happened” after they learned she had gone through childhood trauma. Among her friends, Sandra felt gratitude for the support and assurance that had been given by one of her best male friends. As she described it: “Acceptance from him make me start to believe that I am worthy person,” “He really helps me to look into this issue from the different view,” “By him accepting me, it gives me courage to see thing differently,” and “He did not treat me differently and this actually made me feel empowered.”

Received support: Structural description. Sandra declared the greatest turning point for her to experience healing from childhood sexual abuse was receiving acceptance and respect from her friends after she had disclosed her history of childhood sexual abuse. She described her best male friend as the person who had changed her to view her own issue in a different perspective. He was the first person who had made her feel she was sincerely accepted by him and that she was truly respected by him after she had disclosed what had happened in her past.

Sandra also received support from friends who were working in the helping profession. After disclosure of what had happened, they did not question her past and they assured her with their hugs. This meant a lot to Sandra; they made her feel she was respected and if she did need someone to listen, that they will be there for her. This form of acceptance and respect had made her feel she was not a fragile person and was a worthy person. Being treated with respect had helped Sandra to gain awareness that she was worthy of love and care. Acceptance and respect from them had provided empowerment to Sandra to be healed from childhood sexual abuse.

God wants her to survive: Textural description. Sandra described herself as a free thinker; however she did have some form of spiritual belief that had helped her in her recovery from childhood sexual abuse. After surviving a car accident, Sandra became aware of her traumatic experience which she suffered for several months. Sandra used statements such as, “Universe had given me feedback and it wants me to survive,” and “God or someone higher above want me to survive.”

God wants her to survive: Structural description. Interestingly, though Sandra declared herself a free thinker, her spiritual belief assisted her in her healing from childhood sexual abuse. This spiritual belief helped her begin to believe that she survived the traumatic experiences and the car accident for a reason, and that someone higher above wants her to survive for some reason. This awareness helped Sandra stop using drastic measures to overcome the trauma experiences and she learned to see the positive side of the childhood traumas she had gone through. Further, she found the meaning of incidents that had happened in her past and she started to believe there was much good in her.

Summary

Each woman survivor identified many forms of healing elements that assisted them in their recovery from childhood sexual abuse. There are many similarities between all of the reported healing elements. All the themes were later organized into themes that emerged in the group. The next section focuses on the composite or group analysis of the healing experiences of childhood sexual abuse encountered by 7 women survivors.

Composite Textural and Structural Description of Healing Experiences

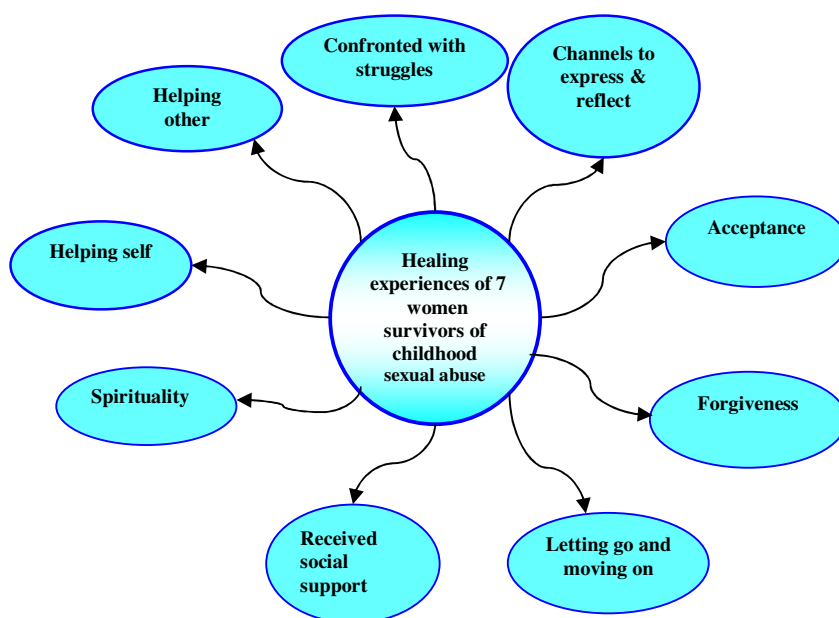


Figure 25. Composite healing experiences from childhood sexual abuse.

A total of nine elements were identified by the 7 women survivors of childhood sexual abuse who participated in the research (see Figure 25). The identified elements were: (a) Confronted with struggles, (b) Channels to express and reflect, (c) Acceptance, (d) Forgiveness, (e) Letting go and moving on, (f) Received social support, (g) Spirituality, (h) Helping self, and (i) Helping others. In this section each of

the healing elements is discussed and supported with the women survivors' personal statements.

Confronted with struggles: Textural description. All of the women participants spoke of having gone through a lot of struggles in their journeys of recovery. This element of healing was connected to negative emotions they had experienced, negative treatment they had received from others, and negative judgment towards themselves. In addressing the negative emotions, they often used words such as “afraid,” “scared,” “fear,” and “don’t dare” to disclosure to others their history of childhood sexual abuse. They also described feeling “angry,” “frustrated,” and “regret” for what had happened in the past.

When women survivors talked about the negative treatments, they expressed heavy feelings such as sadness, anger, and disappointment. They stated, “bullied,” “discriminated,” “betrayed,” “not accepted,” “judged me,” and “no support” described the negative treatments they had received after they disclosed the childhood sexual abuse. Next, in addressing the negative judgments towards themselves, they often used words such as “shame,” “dirty,” “not deserved,” “not good enough,” and “not smart enough.” These negative judgments were partially connected with negative treatment they received from others after disclosing their history of childhood sexual abuse.

Confronted with struggles: Structural description. The struggles and difficulties have been perceived by the women survivors as part of the puzzle in their healing process. The struggles continued to come into their healing journey no matter what stage of healing they were experiencing. One of the most difficult aspects for them was to deal with the negative emotions, most prominently fear. The feeling of fear was associated with fear to disclose their history of childhood sexual abuse to family members and loved ones. Most of them believed that disclosure could break the family relationship because sexual abuse was done by a person who was connected to the

family or was very close to family members. Thus, they were often willing to suffer alone to avoid family breakdown. They have also experienced feelings of anger and frustration, connected to blaming self for failing to protect themselves from the sexual abuse. Although most of them acknowledged they were too young to fight and prevent the sexual abuse from happening to them, however, the feelings of anger toward themselves were often present in their healing journey.

Several women survivors encountered experiences of being bullied, discriminated, judged, and betrayed by the person to whom they disclosed the sexual abuse. Often, this came from family members and friends, and was based on the belief they did not do enough to protect themselves and to prevent the sexual abuse. These negative treatments directly affected how the survivors perceived themselves. Most of the survivors were suffering from negative judgment toward themselves. They experienced feelings of shame, being dirty, unworthy, not deserving good things in life, and not being good enough in anything. These negative perceptions toward themselves were associated the perception of the community they were living in and its perspective on virginity. Several of them associated feeling shameful and dirty because they failed in protecting their virginity. One person had a difficult encounter when her mother placed virginity as platform for her to get married. She admitted that was the greatest challenge she had ever encountered in her journey to recovery.

Channels to express and reflect: Textural description. Channels to express and to reflect were highlighted by all the women survivors in this study. Several channels to express and to reflect were identified by them, and used to express their emotion and to do self-reflection. They used words of “crying,” “disclosure,” “share with others,” “writing,” and “drawing” to describe outlets they had used in expressing their emotion. These channels were channels to experience “relief,” “free,” “ease,” and

being “lighter” from the negative emotion. Women survivors also reported “blog writing” and “disclosure” as channels for them to do self-reflection on their recovery.

Channels to express and reflect: Structural description. Channels to express and to reflect were perceived by the women survivors as helping them to overcome the negative emotions and move on from their past. Women survivors encountered healing experiences in many ways. First, it helped them to experience a sense of relief from the stress and the emotional pains of what they had gone through. Second, it helped them to experience feelings of being assured and accepted by others, in particular those who had disclosed to others what had happened. Third, there was one women survivor who described she regained a sense of control of herself after she allowed herself to cry in the empty room. In term of channels to reflect, it was addressed by the women survivors as a way for them to get to know themselves better, in that reflection was one of the ways to help her to analyze, identify, and reevaluate herself in her journey of recovery.

Acceptance: Textural description. There were 5 women survivors who reported acceptance played a significant role in helping them in healing from childhood sexual abuse. In this study, there were two categories of acceptance spoken of by the women survivors. First category was connected to the survivors’ acceptance of their past history of childhood sexual abuse. They often used statements such as, “I have accepted my past,” and “I accept and believe what had happened.”

The second category was connected to other peoples’ acceptance of their past history of childhood sexual abuse, in particular significant others such as husband, family members, and close friends. Two women survivors, namely Maria and Intan described how their husbands already had accepted that was their past and they used statements such as, “he accepted that was my past,” and “he understands me.” One

survivor described acceptance from one of her close male friends, using statements such as, “acceptance from him,” and “by him accepting me.”

Acceptance: Structural description. The self-acceptance of the past reported by the women survivors was connected to changes in their perspective on childhood abuse that they had gone through. Acceptance took place when they learned to believe their past had made them become a better person, believing the past had prepared them for a greater role today and in the future. Further, women survivors learned to accept that things happened for a reason and this helped them to learn to accept their past.

The acceptance of other people engendered a similar transformation in the women survivors’ perception on childhood sexual abuse. Maria and Intan spoke of the acceptance received from their husbands, and that it played a significant role in assuring and comforting them. They both felt assured and comforted when their husbands did not indicate anger toward them and the abuser. In their perspective, the absence of anger in their husbands indicated strong acceptance and love toward them.

Acceptance from close friends had also helped a survivor to change her perspective of herself and it later enabled her to be healed from childhood sexual abuse. Sandra stated that acceptance from her close male friend had helped her learn to perceive herself as a worthy person. She learned to believe she is someone worthy of being loved. Further, this acceptance had also given her courage to see her childhood sexual abuse in a different perspective, and enabled her to learn to accept herself and her past.

Forgiveness: Textural description. Six (6) out of 7 women survivors addressed the aspect of forgiveness in their healing journey of childhood sexual abuse. This aspect consists of forgiving the abuser, forgiving one’s self, and forgiving others. Between the three aspects of forgiveness, the aspect of forgive the abusers was often highlighted by the women survivors. The women used statements such as, “I forgive

the person who did that to me,” “Forgive people who hurt me,” “I had forgiven the people who harmed me,” and “I had forgiven him (abuser).”

Besides forgiving the abuser, women survivors reported the importance of forgiving themselves. They made statements such as, “I had forgiven myself,” and “I have come to the point of forgiving myself.” Further, women survivors also said that they learned to forgive other people who had witnessed the abuse but had failed to stop it. They stated, “I learned to forgive my mother,” and “I forgave everyone, including him and one of his friends.”

Forgiveness: Structural description. Regarding the aspect of forgiving the abuser, women survivors identified several reasons forgiveness took place within them. Several survivors decided to forgive the abuser because they believed the abusers were young offenders and that had caused them to make mistakes. Two survivors decided to forgive the abusers because they saw the abusers were suffering with internal guilt for the mistake that they made. They believed the abusers were yearning forgiveness from them, and therefore they decided to forgive their abusers.

Moreover, they described forgiving the abusers was an action to be kind to themselves. They said that after they had forgiven their abusers, they experienced inner peace, fewer flashbacks, and they were feeling free from pain and hurt. They concluded that the decision to forgive the abuser was to make themselves feel much better and it allowed them to move on from the past.

Pertaining to forgive oneself, women survivors expressed that they had experienced personal transformation after they had forgiven themselves. Elle reported that after she had forgiven herself, she experienced the inner freedom to express herself to others. Sandra had said that if she did not forgive herself, she believed she would continue to uphold her past which may cause more suffering for her. Sandra believed she deserved a better tomorrow, therefore she decided to forgive herself.

Finally, in the aspect of forgiving other people, Angie and Sandra shared about their decision to forgive others who witnessed the abuse but failed to stop or prevent it. Angie decided to forgive her mother although she failed in protecting her from the abuse, because she believed her mother was in the stage of protecting her own son. However, she admitted she could not forget her mother's failure although she had forgiven her. Sandra decided to forgive the person who was with the abuser when the sexual abuse took place, because it helped her be able to move on from the past and experience a better life. In conclusion, the aspect of forgiveness helped the women survivors to gain a positive perception towards self and others.

Let go the past and move on to be healed: Textural description. Several women survivors emphasized the importance of letting go the past and moving on to the stage of healing. In their perspective, letting go of the past enabled them to move on and allowed them to continue to be in the stage of healing. In addressing letting go, they used terms such as, "Just let it go," "put it down," and "time to let go." On the other hand, in addressing the moving on to be healed, they used terms such as, "Pull myself back to positive direction," "move forward," and "move on."

Let go the past and move on to be healed: Structural description. Letting go of the past had helped women survivors encounter many ways of healing from childhood sexual abuse. Letting go had helped them to be free from negative emotions such as hatred and anger. They experienced breaking free from worries of how other people may perceive them. Several women survivors perceived that letting go had given them a second chance to be reborn, in that it had helped them to transform their perception towards self from a negative self to a positive self.

Letting go of the past had allowed the women survivors to move on to the stage of healing from childhood sexual abuse. It had helped them to see their personal issues at a deeper level and subsequently they experienced less internal struggle. Finally,

it allowed them to transform their negative perception of their experiences into something positive.

Received social support: Textural description. All of the women survivors identified support from family and friends as having significantly helped them recover from childhood sexual abuse. In terms of support from family, they described, “I have a family there for me,” “My daughter bought me back to positive track,” and “I had gone through all these with God, family, and friends.” Further, several survivors highlighted support from their husband. They stated, “I have a man that I can talk to,” “he plays significant role in helping me,” “he always put me as his priority,” and “he is willing to do anything to fulfill my needs.” Further, several women survivors also addressed support from friends. They used words such as, “I feel thankful to my friend,” and “they give me big hug.”

Received social support: Structural description. In terms of family support, women survivors highlighted it was the acceptance, the love, and the care from family members that helped them in overcoming the trauma of childhood sexual abuse. Two of the women survivors emphasized that support from their husbands had played a significant role in their recovery. According to Maria and Intan, acceptance from husband as well as the love and attention from the husband had assured them in many ways. A women survivor expressed her appreciation of the respectful sexual intimacy that the husband had given to her, and was also described as the undivided love she had received from her husband.

Finally, several women survivors stressed the importance of support from friends in helping them in their journey of recovery. Aspect of acceptance was again highlighted by the women survivors. Acceptance from friends had helped the survivors learn to perceive themselves as someone worthy of love and care. Further, the survivors

appreciate the support, guidance, and honest feedback from their friends. One of the survivors perceived her friends like a safe community for her to be herself.

Spirituality: Textural description. All women survivors connected their recovery with their spiritual beliefs. Women survivors used the terms, “God,” “Universe,” and “someone higher above” to describe what assisted them in their healing from childhood sexual abuse. Further, women survivors reported that spiritual aspects such as worship, prayer, and spiritual reading had assisted them in coping and healing from childhood sexual abuse. They used terms of, “prayers,” “praying,” “read Quran,” and “read Bible.”

Spirituality: Structural description. There were four spiritual aspects identified by the women survivors. First aspect was connected to the presence of God in their life and assisted them in healing from childhood sexual abuse. Second aspect was related to how connection with God had changed their perspective on what had happened to them. Third aspect was associated with the inner resources believed given by God to help them overcome the inner struggles they faced in their healing journey. Forth aspect was connected to spiritual prayer and spiritual reading that helped them in coping and overcoming the childhood sexual abuse.

In the first aspect, women survivors experienced God’s presence in their life as being assured, comforted, guided, and protected by God. Several women survivors experienced that God had given them assurance and comfort when there was no one there to help them after the abuse took place. Women survivors had also experienced being guided and protected by God from further harm by the abusers, and perceived that God had performed miracles in their life to protect and rescue them from abuse.

In the second aspect, God had changed their perspective of the abuse that they had gone through. They believed whatever happened to them had happened for a

reason, and several perceived what had happened were tests from God. They believed God wanted them to become a better person and also was preparing them for bigger challenges in life. Further, the third aspect was connected to inner resources given by God assisting them to overcome childhood sexual abuse. Several women survivors believed God had given them the strength and love to forgive those who had harmed them.

Finally, spiritual prayers and spiritual reading were believed to have helped them in many ways to cope with what had happened. Most of the survivors reported that spiritual prayers and spiritual reading had helped them to experience peace and calmness in life, and had also made them hopeful about their future.

Helping self: Textural description. In reaching out to help themselves, three aspects were identified by the women survivors. First was to have a positive attitude towards what had happened in the past abuse. Second was connected to the resources used by the survivors to gain personal healing from childhood sexual abuse and to gain personal growth as a person. Third was associated with their persistency in constantly making the decision to be healed from childhood sexual abuse.

In the first aspect, women survivors expressed and showed positive attitude toward what had happened in their past. They used statements such as, “learned to become positive,” “I enjoy the happiness in my life now,” “I feel grateful,” “I am quite lucky,” and “my life is just like a fairy tale story.” In the second aspect, women survivors reported they attended training sessions and workshops and read many self-help books to help themselves recover from childhood sexual abuse. They used statements such as, “I read many books about forgiveness,” “I read many books about forgiveness and love,” “I attended many courses related to forgiveness,” “after reading books I learn to understand,” “I can understand why thing happened,” “training course

really helped me break through,” and “without the training I will not become who I am today.”

Finally, in the third aspect women survivors spoke of the importance to be persistent in making decision to be healed from childhood sexual abuse. They constantly make decision to let go the past and to forgive. They stated, “I can choose to put it down and move on,” “I choose to let go,” “I choose to set myself free,” “I keep pushing myself,” “I decided to forgive,” and “I choose to forgive.”

Helping self: Structural description. In women survivors’ perspective, positive attitude toward what had happened had played a significant role in assisting them to recover from childhood sexual abuse. They learned to view positively all the negative events that had happened in their life. They appreciate and treasure the happiness they are having in their life.

The positive attitude had led women survivors to search for resources and all the resources had assisted them in the process of healing from childhood sexual abuse. Most of the women survivors reported they actively searched for resources to help themselves. They read many self-help books particular books connected with forgiveness and love. Further, they attended training and workshops and successfully gained personal growth. Women survivors expressed that through all the resources, they gained insights into their personal issues and they learned to understand they have the power to decide to forgive the abuser. Moreover, several women survivors expressed that, through the resources, they found outlets to disclose and share with other of what had happened in their past.

Finally, women survivors also expressed the importance for them to continue making the decision to be healed from childhood sexual abuse. They said that when they were constantly making the decision to be healed, it had helped them to experience healing from childhood sexual abuse. It was able to help them to be free

from negative emotions and it helped them to be more in control of their life. As a result, they learned to appreciate themselves as a worthy person and one who deserved a better tomorrow.

Helping others: Textural description. The women survivors reported on the aspect of reaching out to others in their healing journey from childhood sexual abuse. They used words such as, “Helping people,” “helping others,” “help the survivors,” “reaching out to others,” “I reach out to help,” and “focusing out” when they were addressing reaching out to help others in need. Several women survivors shared their experiences of reaching out to underprivileged children such as children from children’s homes. Further, women survivors also spoke of their experiences in reaching out to help children and women who had gone through childhood sexual abuse.

Helping others: Structural description. Reaching out to help others was perceived by women survivors as a very powerful way for them to experience healing from childhood sexual abuse, and several healing elements were identified. First was that it helped them to be a that many people were in great suffering. This awareness enabled them to appreciate what they have in life.

Second, women survivors reported feeling empowered when they were able to reach out to others. They spoke of experiencing positive feelings such as feeling important, feeling valued, feeling peace, and feeling alive. These positive feelings were also connected to being able to revamp regret about their past. Several women survivors expressed feeling empowered when they were able to assist other survivors in their healing from childhood sexual abuse. Women survivors also expressed feeling empowered when they were able prevent childhood sexual abuse happening to other children through awareness programs.

Third, reaching out to others was enabling women survivors to find a sense of meaning in life. Several women survivors believed it was a calling for them to

work in the helping professions. Further, women survivors expressed that reaching out to others had assisted them to experience satisfaction in life. One women survivor said that when a person reaches out to help other, it was equal to a person living life with soul. In her perspective, when a person lived her life with soul, she or he will experience great contentment and happiness in life.

Finally, women survivors perceived reaching out to help others had helped them in self-reflection of their own recovery. This form of self-reflection was connected to evaluating and analyzing their recovery from childhood sexual abuse. Hence, reaching out to help others was perceived as one of the important aspects for them to gain personal growth as a person.

In sum, through this group analysis nine healing elements emerged for discussion. They were: (a) Confronted with struggles, (b) Channels to express and reflect, (c) Acceptance, (d) Forgiveness, (e) Letting go and moving on, (f) Received social support, (g) Spirituality, (h) Helping self, and (i) Helping others. Each theme emerged based on the analysis of the textural description used by the women survivors. In pertaining to composite structural description, there were many similarities in description particularly on themes of forgiveness, acceptance, and letting go. The similarity of beliefs was related to the strong connection between the themes in bringing healing to women survivors. Each healing theme belief played a significant role in enhancing other healing themes.

Essence of the Healing Experiences of Women Survivors

Women survivors had identified a total of nine elements of healing connected to recovery from childhood sexual abuse. Among the nine elements of healing, five elements were the processes that they had gone through in their healing journey and the other four elements were connected to the elements that contributed to

their healing. The following figure offers an illustration of the essence of healing from childhood sexual abuse.

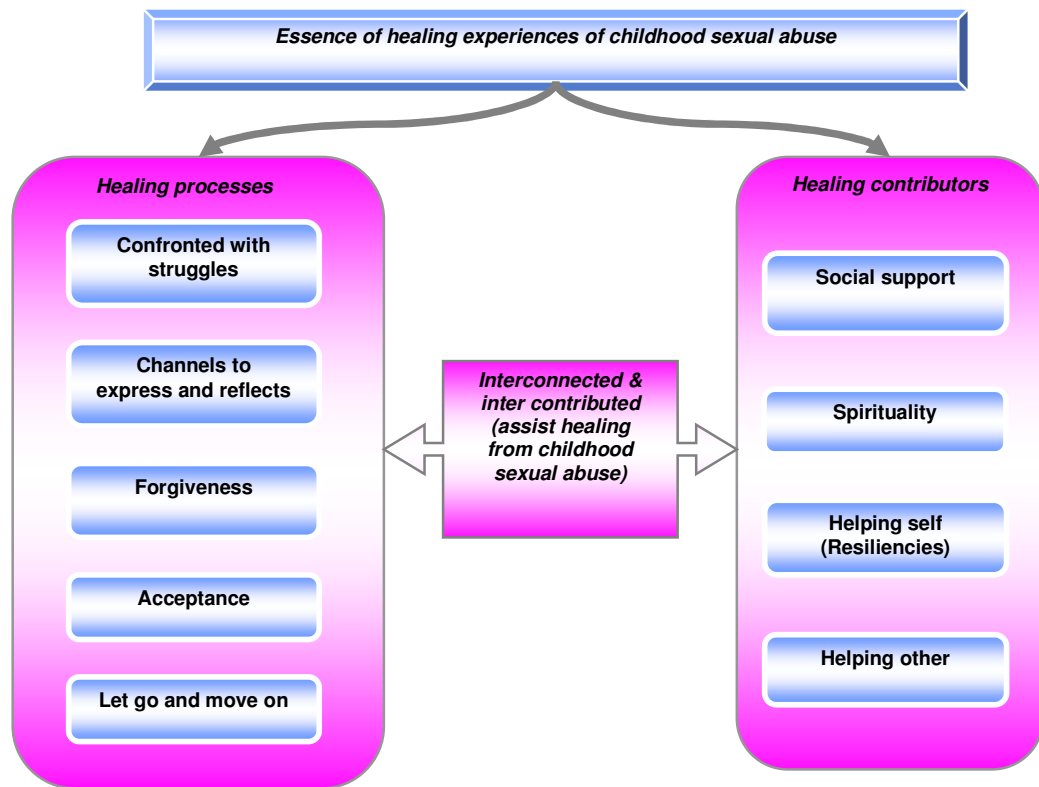


Figure 26. Overview of the essence of healing from childhood sexual abuse.

Healing processes: Healing from childhood sexual abuse was not a simple journey for women survivors of childhood sexual abuse. Indeed, women survivors have to go through several healing processes, in which they have to confront with struggles, they search for outlets to express and reflect, they come to a point to accept the past, learn to forgive themselves, their abusers, and others, and finally they come to the stage of letting go and moving on from their history of childhood sexual abuse. Those the healing processes involved in journey recovery from childhood sexual abuse are similar among women survivors however the flow of the processes it may difference in each women survivor.

One of the greatest struggles expressed by the women survivors was that they often experienced negative emotions such as fear and anger. Feeling of fear was often associated with fear of disclosure to others of what had happened. On the other hand, feeling of anger was connected to failure in protecting themselves from the abuse. Besides being haunted by negative feelings, women survivors encountered negative treatment from others after they disclosed their sexual abuse. Negative treatment received from others had caused fear to disclose their history of childhood sexual abuse. On top of feeling fear and suffering negative treatment from others, women survivors had experienced many inner struggles caused by negative judgments toward themselves. They experienced inner struggles of feeling shameful, dirty, and unworthy. After a period of time, the struggles encountered built up to the stage where the survivors could not handle anymore, and this had pushed them to search for outlets to express their emotion and tension.

Seeking channels to express and reflect took place when women survivors were unable to sustain their overwhelming feelings and tension. Women survivors used crying, disclosure, writing, drawing, and writing blogs as channels to express and reflect freely. Channels to express were perceived as channels to experience relief from negative emotions and gain a sense of control of their life. Further, the channel in which to reflect was helpful for the survivors to evaluate their healing from childhood sexual abuse and get to know themselves better. Among the women survivors, two survivors who were involved in the helping professions put emphasis on the aspect to reflect. They both admitted the training background of helping professions had led them to perceive the importance of doing reflection in their recovery.

All women survivors experienced a process of acceptance, as they learned to accept what had happened in their past. Acceptance of the past took place after women survivors experienced transformation in their perception and belief that what

had happened in the past happened for a reason. They believed experiences in their past had made them become a better person and had prepared them for their greatest role in the future.

The process of forgiveness took place when women survivors decided to forgive themselves, their abusers, and others in their journey of recovery. Forgiveness was perceived as a way to treat oneself better. Most of the women survivors experienced positive transformation within themselves after they had experienced forgiveness. Forgiveness helped them experience inner peace, freedom from negative feelings, and feeling freer in expressing self to other. Most of all, forgiveness enabled them to move from the past and experience a better tomorrow.

Finally, a sense of direction in the journey of recovery from childhood sexual abuse was shared by women survivors, that of letting go of the past and moving forward. This process was based in a series of positive transformations experienced by the women survivors in the processes of acceptance and forgiveness. Their sense of direction in what needed to be healed continued to assist women survivors to see their personal issues at a deeper level and subsequently lessen their internal struggles within themselves.

There was no straightforward answer from the women survivors as to when all the above processes will stop or when will women survivors finally be able to experience an ultimate healing from childhood sexual abuse. Narrative sharing from the women survivors unveiled that healing was a continuous process that they have to journey with in their lives. Ultimate healing from childhood sexual abuse may or may not be achieved in their recovery journey, but most important was that women survivors continue to have a sense of direction to be healed and this will continue leading them to an ultimate healing. Thus, a sense a direction to be healed from

childhood sexual abuse was what they needed for enabling them to move forward and hope for a better tomorrow.

Healing contributors. In going through the healing processes from childhood sexual abuse, women survivors found the social support they received, the spiritual beliefs they practice, their actions in reaching out to help self and others have helped them tremendously in the journey of recovering from childhood sexual abuse. These contributors were perceived as having sped up and facilitated the process of healing from childhood sexual abuse experienced by the women survivors. The stronger the healing contributors, the stronger the healing processes experienced by the women survivors. Thus, healing processes and the healing contributors were both connected and contributed to women survivors' experience of healing from childhood sexual abuse.

Social support was associated with love, care, and most importantly, acceptance. The acceptance from others was extremely important for women survivors of childhood sexual abuse. Acceptance from spouse seemed particularly important for married women, whereas, support from family and friends were perceived as important for single women. Most of the time women survivors experienced extreme fear to disclose their past abuse because they were unsure of what might happen. This uncertainty always created internal struggles and doubt within them. Acceptance from others transformed their perception toward themselves. This form of transformation had helped them in overcoming their internal struggles and challenging the doubts within them.

Throughout the journey of recovery from childhood sexual abuse, women survivors were confronted with many forms of suffering. It can be symbolized as struggling to survive in the deep sea. Spiritual belief was like a "life jacket" that keeps women survivors floating and prevents them from drowning. The women survivors

believed God was there to guide them and protect them when there was nobody there to support them. Further, spiritual prayer had granted much inner peace for many of the women survivors. This inner peace continued leading them to be hopeful for a better tomorrow.

In the recovery journey from childhood sexual abuse, resiliency in the women survivors was a powerful resource in assisting them in staying on track in their recovery from childhood sexual abuse. Positive attitudes toward the past, present, and future were often shown by the women survivors. Positive attitudes in them continued to lead them to search for resources that could assist them in healing. They read self-help books, attended self-help training, and they practiced what they have learned from their reading and training. Most of all, they were in the stage of actively making the decision to be healed from childhood sexual abuse. The principle of “never give up” was continuously advocated by the women survivors throughout their journey of healing from childhood sexual abuse.

Reaching out to others was another powerful resource that allowed women survivors to obtain insight on their past and to transform them to become a better person. Through reaching out, women survivors could open up their horizons to see greater suffering experienced by others. This exposure helped them to learn to appreciate what they have in their present lives. Moreover, reaching out to others had turned to be the greatest source of empowerment for the survivors. Women survivors perceived they were able to replace negative feelings and thoughts with positive ones. The most amazing aspect encountered through reaching out was that women survivors found a sense of meaning and purpose in life, which in turn provided them with the experience of having happiness and contentment in life. The essence of the healing experience consists of healing processes that survivors need to go through, and is never a straightforward process for women survivors. It involved dynamic processes and

women survivors may go through several cycles of the healing processes to obtain ultimate healing from childhood sexual abuse. Further, a smooth healing processes required the presence of the healing contributors, those who played significant roles in helping them recover from childhood sexual abuse. The healing processes and the healing contributors are both interconnected to each other to bring healing to the women survivors.

Chapter Summary

In summary, nine themes emerged from the research findings. These were: confronted with struggles, channels to express, acceptance, forgiveness, letting go and moving on, support from others, spirituality, helping self, and helping others. Themes were later distilled into two components, the healing processes and the healing contributors to reflect the essence of healing from childhood sexual abuse. Both components were interrelated in creating healing for women survivors of childhood sexual abuse.

CHAPTER 5

DISCUSSION, IMPLICATIONS, SUGGESTIONS, AND CONCLUSION

This qualitative study using a phenomenological design investigated the process of healing from childhood sexual abuse. Seven women survivors who had experienced childhood sexual abuse and were in the stage of healing from it were participants. Based on the narrative sharing from the women survivors, this research developed an in-depth understanding of healing experiences encountered by women survivors of childhood sexual abuse. Planned outcome of the study intended to provide helping professions such as counsellor, psychiatrist, psychologist, social worker, and other professionals' helper to gain in-depth understanding of women survivors healing experiences from childhood sexual abuse. This chapter consist discussion of the research findings, implications for the counselling and psychotherapeutic practice, implications for counselling and psychotherapeutic training, implications for psychotherapy models on healing from childhood sexual abuse, recommendation for future research and conclusion.

Discussion of the Research Findings

Study revealed nine themes of women survivors' healing experiences from childhood sexual abuse. There were themes of, "confronted with struggles," "channels to express and reflect," "acceptance," "forgiveness," and "letting go and moving on" perceived as healing processes. Further, there were themes of, "receiving supports from others," "spirituality," "helping oneself," and "helping others" perceived as healing contributors. All themes in healing processes and healing contributors were interrelated and working hand in hand to assist women survivors to experience healing from childhood sexual abuse.

Confronted With Struggles

Most of the study of women healing from childhood sexual abuse associated with positive experiences (Banyard & Williams, 2007; Bogar & Hulse-Killacky, 2006; Koehn, 2007; Parker et al., 2007; McGregor et al., 2006). However, in this study women revealed they encountered challenges and struggles in the journey of recovery from childhood sexual abuse. Women survivors connected the struggles they experienced with negative emotion, negative treatment from others, and negative judgments toward oneself. The outcome of the study corresponded with the past literature of healing from childhood sexual abuse (e.g., previous studies reported women survivors encountered negative experiences in their process of recovery; Glaister & Abel, 2001; Herman, 1992; Phillips & Daniluk, 2001).

In addressing the aspect of negative emotions, women survivors often experienced fear in disclosure to others. Further, women survivors experienced anger and regret for the past incidents. Outcome of the study was in line with Glaister and Abel's (2001) study, which revealed that the healing journey was difficult for the women survivors, as most of them consistently faced negative experience and used much energy to cope with the negative emotions. Thus, it is congruent with the study that reported women survivors' experience a sense of sadness and loss of their energies, due to tremendous efforts used to cope with the past trauma (Phillips & Daniluk, 2001).

Negative experience in their healing journey as addressed by women survivors included receiving negative treatment from others after disclosure of the childhood abuse. Women survivors often connected the negative treatment received with discrimination, betrayal, and judgment from people around them, particularly after they disclosed their childhood sexual abuse. Consistent with prior study, women survivors encountered negative treatment from their own therapists (Koehn, 2007; McGregor et

al., 2006). As in previous studies, women expressed feeling not being understood by their respective therapists (Glaister & Abel, 2001; McGregor et al., 2006).

Experiencing negative judgment toward oneself was often reported by the women survivors in the study. They often experienced struggles with feeling dirty, shame, and not deserving in their healing journey of childhood sexual abuse. Two of the women survivors expressed that negative judgment toward oneself was connected to negative treatment they received from the others after they disclosed childhood sexual abuse. This is in line with Herman's (1992) work that during therapy, women often experienced a sense of self-loathing, shame, and invisibility when they were outside the therapy room.

In sum, previous literature supported the theme of "encountered struggles" experienced by the women survivors of childhood sexual abuse of this study. However, the previous studies presented in the discussion did not address the connection of the negative treatments with the negative judgment of oneself. In this study only two women survivors have identified that their negative judgment toward oneself was connected to negative treatment they received from others, but it provided valuable information in gaining a better understanding of the women survivors' healing experiences. Thus, negative treatments from other should be perceived as an important factor that capable of leaving a negative impact on women survivors who are searching for healing from childhood sexual abuse.

Channels to Express and Reflect

The study revealed that in the journey of healing from childhood sexual abuse, women survivors reported the importance of having channels to express and reflect. Women survivors had identified crying, disclosure, drawing, and writing as the channels that helped them to express their intense emotions as well reflect thoughts. Outcome of this study parallels one by Gupta, Bonanno, Putnam, Keltner, and Tricket

(2011), wherein they revealed expression of anger helped women survivors of childhood sexual abuse to gain better social adjustment. Further, Farber, Khurgin-Bott, and Feldman (2009) believe women survivors are able to experience great catharsis by expressing emotion through self-disclosure.

However, there are past studies that indicated the negative impact of expressing intense emotion, particularly anger. Studies revealed greater externalizing symptoms (Bennett, Sullivan, & Lewis, 2005) and greater interpersonal struggles (Luterek, Harb, Heimberg, & Marx, 2004) were experienced by the survivors when they expressed anger. Another study revealed expression of emotion led to greater psychological distress (Marx & Sloan, 2002). The above studies revealed that negative impacts came as a result of expressing intense emotion, thus questioning its benefit given concerns that it may bring negative impact to the survivors. However, the women survivors in this study perceived that it was very important for them to have such channels to express their emotions, contributing to their healing.

Regarding the aspect of a channel to reflect, one woman survivor used blog writing about her past and her recovery process. She found writing her story in the blog had consistently helped her in doing self-reflection on her own recovery from childhood sexual abuse. Several studies agreed with the survivor that writing about past trauma does bring positive effects to the survivors (King, 2002; King & Miner, 2000) however, the question of “How does it work?” often popped up and was not clearly answered in many studies (King, 2002). Several research articles attempted to respond to this question of how writing about the trauma was able to bring healing to the trauma survivors (Paez, Velasco & Gonzalez, 1999; Pennebaker et al., 1997).

In a study conducted by Pennebaker and colleagues (1997), their research participants gained new perspective through writing about the grief they were going through. Paez et al. (1999) discovered writing helped their research participants to find

a channel to think about their trauma and it helped to reduce the impact of trauma on them.

The above studies provide some insights on how writing was able to bring healing to the survivors. However, the process of how it took place was not clearly stated in the studies. In comparison, the outcome of this study provides an in-depth understanding of how it took place. One survivor expressed the channel to reflect was able to bring healing because it provided her with a sense of empowerment. She further reported that writing had helped her to analyze, identify, and reevaluate what had happened in the past and currently. In the process of analyzing, identifying, and reevaluating, she gained a better and deeper understanding of her own issues, which then assisted her to gain more progress in her healing from childhood sexual abuse.

While there are studies that revealed the positive effects caused by writing about the trauma (Paez et al., 1999; Pennebaker et al., 1997), other studies have revealed the negative impacts as well. A study by Lyubormirsky et al. (2006) revealed the negative impact on the research participants though talking and writing about trauma. Further, it is supported by another study which reported that research participants, who find it difficult to express emotion through writing, reported that they also have a negative perception toward the trauma event.

In sum, having a channel to express and a channel to reflect were important healing elements for the women survivors of this current study. Women revealed they gained positive impacts by expressing themselves through these mentioned channels. While several studies agreed with this perspective, there were others that did not. Despite the different perspectives on this healing element, it has its own healing value that deserves attention. In conclusion, this healing element may not work well for all types of trauma survivors but it did work well with certain group of trauma survivors who are capable to express their emotion and reflect on their personal thoughts.

Acceptance

Outcome of the study revealed acceptance was part of the healing processes and it played a significant role in assisting most of the women survivors in the study. In the healing journey from childhood sexual abuse, women survivors experienced acceptance of their past history, and identified two areas of acceptance. The first aspect was connected to self-acceptance toward their past history of childhood sexual abuse. The second aspect was associated with the acceptance of a significant other toward their past history of childhood sexual abuse.

In reviewing the aspect of self-acceptance, several studies supported the importance of the survivors' gaining acceptance of the childhood sexual abuse (Banyard & Williams, 2007; Glaister & Abel, 2001; Phillip & Daniluk, 2004; Sandberg, 1997). One qualitative study conducted by Phillip and Daniluk (2004) revealed women experienced self-acceptance in the recovery journey and it helped them to enhance their sense of self. Other studies revealed the survivors' acceptance of what had happened in the past as one of the important themes of recovery for women survivors of childhood sexual abuse (Banyard & Williams, 2007; Glaister & Abel, 2001; Sandberg, 1997).

A study by Kenny and McEachern (2000) reported a strong connection between the acceptance of a significant other and women survivors' recovery from childhood sexual abuse. More specifically, the study unveiled that acceptance from the community where the survivors were living had a significant role in helping women survivors in their recovery from childhood sexual abuse. Based on their research, authors believe that acceptance from the community enables survivors to reach for assistance from others.

In sum, self-acceptance and acceptance from others was perceived to play an important aspect in assisting women survivors' recovery from childhood sexual abuse. The previous studies that supported the element of acceptance in recovery from

childhood sexual abuse all have one similar stand: they presented acceptance as an action that allowed women survivors to go further to help oneself to recover.

Forgiveness

Forgiveness was reported as another important healing theme for the women survivors of childhood sexual abuse. This consists of forgiving oneself and forgiving others. This current study revealed women survivors believed that forgiving oneself had helped them to gain a better life and they learned to believe they deserved a better life, and it was supported by previous studies which reported forgiveness played significant role in healing from childhood sexual abuse (Gall, 2006; Herman, 1992). Herman (1992) described forgiveness as a way used by survivors to allow women survivors to move on from the past. Another study revealed forgiveness had great connection with lower depressive mood (Gall, 2006).

Women survivors have also reported healing took place when they decided to forgive the perpetrator and other. Women expressed that they decided to forgive the perpetrator because they perceived it as an action to treat oneself better. To forgive the perpetrator allowed them to move on from the past. Supported by a qualitative study conducted by Bogar and Hulse-Killacky (2006), this study revealed a strong connection of forgiveness with personal closure with the past, and it helped the women survivors be able to move on from the past. It is supported by another study in which survivors reported gaining positive feeling in forgiving the perpetrator (Wade & Worthington, 2003).

Most studies associated forgiveness with positive impact for the survivors of childhood sexual abuse (Bogar & Hulse-Killacky, 2006; Gall, 2006; Herman, 1992; Wade & Worthington, 2003). However, there are researchers and practitioners who expressed skeptical feelings about imposing forgiveness on survivors, and do not agree

about imposing forgiveness on the survivors or victims to forgive the perpetrators (Bass & Davis, 1994; Kennedy, 2000; Lagaree, Turner, & Lollis, 2007).

Based on the practitioners' experience, un-forgiveness is also capable of bringing positive impact to the survivors and they believe in some circumstances that forgiveness may bring harm to the victims (Lagaree et al., 2007). Kennedy (2000) argues that the action of demanding forgiveness may cause people to put blame on the victim in failing to forgive the perpetrator. Bass and Davis (1994) believe it is an insulting act to expect women survivors to forgive the abuser, and they believe this action is equal to denying the women survivors' feelings. Simply, several practitioners and writers are reluctant to have expectations of the survivors or victims regarding forgiveness because they believe it is an action that may jeopardize the survivors' healing through suppressing the freedom of expressing their emotions (Bass & Davis, 1994; Forward, 1989; Herman, 1992).

There two different stands on forgiveness, especially in regard to the aspect of forgiving the perpetrators. There is a group of practitioners and researchers who have a positive perspective in forgiving the perpetrators. Then, there is a group of practitioners and researchers who focus on the negative impacts caused by expectation for the survivors to forgive the perpetrator. Hence, whether a genuine healing may occur through forgiving the abusers is arguable. Those there are two difference stand in perceive forgiveness, but in this study women survivors perceived that forgiving the perpetrators was an action to treat oneself better. It was not an action imposes by another, and thus, a genuine healing may be experienced by the women survivors. In sum, forgiving oneself and perpetrators are still considered as important healing aspects for the women survivors.

Letting Go and Moving On

In this study, the themes of letting go and moving on were expressed as important processes which women survivors were required to go through. Women survivors expressed that letting go and moving on had helped them in breaking free from negative emotions. Supported by a study conducted by Bogar and Hulse-Kilarky (2006), the healing journey from childhood sexual abuse where women survivors learned to redirect their focus from negative emotion to something else, is ongoing. Reported by Bogar and colleague, women survivors gone through a moving on process which had helped them re-direct their thought and energy away from the childhood sexual abuse.

Further, in this study women survivors perceive letting go and moving on are actions that have given them a second chance to be reborn and experience transformation. They perceived it was a transformation from a negative self to a positive self. This seemed to correspond to the work of Phillips and Daniluk (2004), discovered in their study which women experience transformation from a negative self to a positive self through letting go the identity of 'victim' and to embrace the identity of 'survivor'. Supported by several studies, letting go the victim identity (Phillips & Daniluk, 2004) and move on to survivor identity (Courtois, 1988; Draucker, 1992; Herman, 1992) played a significant role in assisting women survivors experience healing from childhood sexual abuse. Bass and Davis (1994) have a similar standpoint in understanding healing from childhood sexual abuse. They perceived the important point for women survivors was to learn to let go the damage and the crisis caused by childhood abuse. They believe after women survivors able to let go the damage and the crisis they will then reach the point to move on from past. In the process of moving on, women survivors will experience integration of body, sexuality, feelings as well as intellectual (Bass & Davis, 1994).

In sum, letting go generally connected with letting the negative feelings and negative thoughts associated with the childhood sexual abuse. In another hand, moving on is an ultimate process that will arrive after women survivors learned to let go the negative feelings and thoughts. Therefore, both of aspects letting go and moving on are interrelated and interconnected. The more letting go process take place in the healing journey the more the women survivors able to experiencing moving on from the past.

Receiving Social Support

Outcome of the study revealed that receiving support from the social environment had a strong positive impact on women survivors. Receiving support from the loved one, especially one's particular partner, family members, and friends have played significant contribution in healing from childhood sexual abuse. This is similar to previous studies which highlighted the importance of the support system in contributing to healing of the survivors of childhood sexual abuse (Banyard, 1999; Banyard & Williams, 2007; Hyman & Williams, 2001; Glaister & Abel, 2001; Hyman & Williams, 2001; Murthi & Espelage, 2005; Wright et al., 2005).

Receiving social support from someone special at some point in life appeared to be a significant factor in women survivors with high resiliencies (Hyman & Williams, 2001). In this study, women survivors revealed they feel they have a strong support system that had helped them many ways in recovering from childhood sexual abuse. Women survivors expressed they felt respected and accepted by the people they love, particularly their spouse. The outcome of a study carried out by Wright and colleagues is inline with the study's finding on social support. They revealed that receiving social support from a spouse or a partner enabled a strong protective factor to be developed that prevents women survivors from suffering depressive symptoms (Wright et al., 2005).

In this study, women survivors revealed they experienced a great sense of worthiness, love, and care through receiving social support from their environment. There is clear correspondence with several studies that have highlighted the relationship between support system and high resiliency in women survivors (Banyard, 1999; Hyman & Williams, 2001; Wright et al., 2005). The more the women survivors feel worthy to be loved and cared for, the higher their self-resiliencies. In addition, a study found that women survivors of child sexual abuse who had strong social support claimed to suffer less psychological loss compared to those who claimed to receive little support from their social environment (Murthi & Espelage, 2005).

Most of the previous studies revealed a strong and positive relationship in receiving social support on the impact of women survivors' recovery from childhood sexual abuse (Banyard, 1999; Banyard & Williams, 2007; Glaister & Abel, 2001; Hyman & Williams, 2001; Murthi & Espelage, 2005; Wright et al., 2005). However, a study by Merrill and colleague (2001) revealed a weak relationship between survivors' parental support and impact of women survivors' recovery. In their study, parental support was discovered not a strong predictor of the impact on the women survivor in comparison with factors of abuse severity and coping strategies.

In sum, most of the studies on the relationship between elements of social support on women survivors in recovering from childhood sexual abuse indicated a positive relationship. The stronger the support system the women survivors had, the more positive was the impact on women healing from childhood sexual abuse. There is also a study that revealed a weak connection of parental support and impact on women survivors of childhood sexual abuse. However, in general, most studies indicated a strong relationship rather than a weak relationship between social support and healing from childhood sexual abuse. Thus, the value of this healing element should continue to be considered as an important factor in practice as well as in research field.

Spirituality

The element of spirituality was brought up by all the women survivors as assisting them in experiencing healing from childhood sexual abuse. Women survivors addressed several aspects of spirituality that played a significant role in assisting their healing journey. The first aspect was connected to, “God is always there for them,” where they feel protected, comforted, and assured by God. In the second aspect, women survivors believed God had changed their perspective of the abuse they had gone through from negative to positive. The third aspect associated with God had provided them with resources to overcome the past abuse, such as strength and love to forgive. Finally, the last aspect connected spiritual prayer and reading to helping women survivors gain peace and calmness.

Regarding the first aspect, where women felt God always there for them where they feel protected, comforted, and assured by God, this was similar to the outcome in Bogar and Hulse-Kilacky’s (2006) study, where women experienced a sense of protection through their spiritual beliefs. In a study by Valentine and Feinauer (1993), women survivors experienced a sense of assurance as being a worthy and valuable person through using spirituality as tool for healing.

Pertaining to the second aspect, wherein women survivors perceived their spiritual belief had played a significant role in changing their perspective of past abuse from negative to positive, it is parallel with the results of Bogar and Hulse-Kilacky (2006). Their study revealed that spirituality contributed to women survivors’ experience of positive transformation in life, where they gained a sense of acceptance.

In discussion of the third aspect, where women perceived God provided them with inner resources such strength and love to overcome the past trauma, this is consistent with a previous qualitative study which revealed women survivors perceived that they can not overcome the past trauma without God. Indeed, they believed God is

within themselves to help them overcome past childhood sexual abuse (Bogar & Hulse-Killacky, 2006).

Finally, in the last aspect, women survivors expressed that spiritual prayers and readings had helped them in coping with the past trauma. More specifically, they experienced calmness and peacefulness through prayer and reading spiritual materials. This reflects as a positive religious coping strategy and it enables women survivors to experience less anger as well as a lower depressive mood (Gall, 2006).

In general, most of the studies on spirituality connected to healing from childhood sexual abuse presented the element of spirituality as contributing to greater healing. However, other studies connected to spiritual coping suggest that it may lead to negative impacts on women survivors, particularly negative spiritual coping. For example, studies revealed that trauma survivors who used negative spiritual coping (e.g., perceiving the abuse as God's punishment) had experienced negative impacts (Gall, 2006; Pargament, Smith, Koenig, & Prerez, 1998).

In conclusion, the argument whether or not spirituality is able to assist women survivors experience healing from childhood sexual abuse, it all depends on the type of spiritual coping used by the survivors. Positive spiritual copings led to positive impacts and negative spiritual copings led to negative impacts (Gall, 2006; Pargament et al., 1998). In this study, women survivors generally presented with positive coping strategies, thus it brought positive impacts in their journey of recovering from childhood sexual abuse. However, it is important to be aware and not to assume all spiritual copings will bring positive impacts to the survivors.

Helping Oneself (Resiliency)

This study revealed the aspect of "helping" oneself made a great contribution in assisting the women survivors to experience healing from childhood sexual abuse. In addressing this theme, survivors expressed three aspects. The first aspect was to have a

positive attitude of what had happened. Second aspect was emphasized as using resources to help themselves, and the final the aspect was connected to their persistency in making the decision to be healed.

In considering the aspect of positive attitude expressed by the women survivors in this study, there are several qualitative studies that have reported similar outcomes (Glaister & Abel, 2001; Sandberg, 1997; Valentine & Feinauer, 1993). Studies reported survivors' positive attitude toward oneself had positive impact on their healing from childhood sexual abuse (Sandberg, 1997; Valentine & Feinauer, 1993). Further, studies also reported positive attitude toward their life such as accepting the past (Glaister & Abel, 2001), and having a positive perspective on life (Valentine & Feinauer, 1993) had assisted the survivors' experience in healing from childhood sexual abuse.

Women survivors spoke of reaching out to obtain resources to help themselves in overcoming the childhood sexual abuse, and that this included reaching out to others in order to help oneself. One study revealed resiliencies in the survivors were connected to their capabilities in seeking emotional support from family and nonfamily members (Valentine & Feinauer, 1993). Another study reported that women presented as strong and resilient when they were proactively approaching the outside world to help oneself (Sandberg, 1997). In this current study, women survivors not only reported reaching out to others to gain support, but they have also reported reading self-help books and attended trainings to help oneself in overcoming childhood sexual abuse.

Finally, the aspect of persistency of the survivors making the decision to be healed is one of the important aspects in helping women survivors to recover from abuse. This finding is consistent with a previous study, which revealed women survivors who experienced healing from childhood sexual abuse consistently made mindful decisions to change their negative perspective of self (Bogar & Hulse-Killacky, 2006).

In sum, most of the studies reported that helping oneself (exercising resiliency) played an important role in helping women survivors to experience healing from childhood sexual abuse. Women reported using both inner resources and external resources. Internal resources connected to resources within the women survivors such as persistency to make the decision for healing and maintaining a positive attitude towards life. External resources were utilized as women survivors reached out to get support from the world around them.

Helping Others

Reaching out to help the other had identified by the women survivors as one of the important themes in their healing from childhood sexual abuse. Women survivors associated reaching out to others with several aspects. First aspect connected to reaching out to others who are in great suffering had helped women survivors to gain awareness of appreciating life. Second aspect was associated with feeling empowerment in being able to reach out to others. Third aspect related to survivors finding a sense of meaning in life by reaching out to others.

Regarding the first aspect, where women survivors gained awareness of appreciating their life through reaching out to others, a qualitative study by Lantz (1991) discovered that women survivors learned to appreciate life through reaching out to other survivors, and being able to provide positive well-being to them. A study conducted by Bauer and McAdams (2004) reported that people gained higher well-being when they were able to reach out and connect with others in the community where they are living. Thus, for women survivors who able to reach other people who are great suffering, they gained positive impact which may led them to grow and become a better person. Through this process, more empowerment may take place and lead women survivors to grow even further.

In discussing the second aspect, where women gained self-empowerment through reaching out to others, several studies reported a similar finding. In a study by Dierick and Lietaer (2008), reaching out to others led women survivors to experience empowerment. That study further revealed that people find a sense of self-confidence when they are able to help others, and they connected it as a therapeutic factor of Altruism. Findings were supported by another study, which reported reaching out or connecting to community helped to develop a sense of competency and efficacy within the person. There are parallels with another study, in which survivors reported being able to build a sense of self better when an individual involved herself / himself in community works (Banyard & Williams, 2007). Hence, helping others had a very powerful and positive impact on the women survivors of childhood sexual abuse.

Finally, in reviewing the last aspect in which women survivors found a sense of meaning by helping others in their community, a parallel is presented in existential theory by Frankl (1984), in that a human being finds a sense of meaning in life by providing help to others. A woman survivor found meaning in life by volunteering in the Rape Crisis Centre (Lantz, 1991), obtaining both a sense of empowerment and appreciation in life by reaching out to others.

Generally studies revealed positive impacts on individuals when they were able to reach out to help others (Banyard & Williams, 2007; Dierick & Lietaer, 2008; Lantz, 1991). However, there is another perspective that does not agree for women survivors to be reaching out to others without going through a proper healing process. This view is based on a concern that women survivors may be pushing too hard to move on from the past, which may cause women survivors fail to go through a grief process (Knauer, 2002). Women survivors are encouraged to have sufficient time to go through grief as well as have a strong support system that they depend on for support before they reach out to help others (Knauer, 2002).

Reaching out to others was perceived as a powerful healing element for the women survivors of childhood sexual abuse in this study. Several studies have a similar perspective on the positive impacts of reaching out to others in women survivors' recovery from childhood sexual abuse. Although there is another view that believes women survivors should not rush to reaching out, however, studies in this area were considered weak due to a lack of empirical studies. Yet, there is merit in understanding that women survivors healing from childhood sexual abuse need to consider the negative impact that may occur in reaching out too soon, when the survivors are not ready.

In conclusion, the above elements that emerged in the reports of women survivors have helped them experience healing from childhood sexual abuse. There are many studies that agree and support their perspective. However, there are prior studies that have presented the risks and the negative impacts that have been caused by the reported elements. In sum, it is important to be aware and understand the differences between the two positions. This leads to a more objective and being full of care manner in understanding women survivors healing from childhood sexual abuse.

Implications for Counseling and Psychotherapeutic Practice

The findings of this study have significant implications for counseling and psychotherapeutic practice with survivors of childhood sexual abuse. They reveal an in-depth description of women survivors' healing experience from childhood sexual abuse, which has strong implications for counseling and psychology practice. Thus, the following suggestions are made for application of the findings to the respective practices.

First, it is important for the practitioners to have an-depth understanding of the healing from childhood sexual abuse for women survivors. In this study women

survivors revealed they have to go through several healing processes which included being confronted with struggles, searching for outlets to express and reflect, coming to a point of accepting self and their past, learning to forgive themselves, their abuser, as well others, and coming to the stage of letting go and moving on from childhood sexual abuse.

Moreover, in this study woman survivors have also shared the healing contributors that contributed to their healing from childhood sexual abuse, which were social support they received, spiritual beliefs, and reaching out to help oneself and reaching out to help others. The result highlighted the healing contributors that contributed to women healing from childhood sexual abuse and the healing processes that were involved in the healing journey. Hence, in providing intervention to the survivors of childhood sexual abuse it is important for the practitioners' not only to look into aspects or factors that help women survivors but as well the processes that women survivors will encounter in their healing journey.

Second, an in-depth understanding of women survivors' healing experiences would enable a practitioner be an effective therapist in providing intervention services. Without an in-depth understanding of the dynamic of women healing from childhood sexual abuse, practitioners may end up doing more harm than being helpful to the women survivors. As supported by several studies, survivors revealed they received unpleasant therapy experience with their therapist (Armsworth, 1989; Josephson & Fong-Beyette, 1987; McGregor, Thomas, & Read, 2006; Stenius & Veysey, 2005). For example, the therapists blamed and expressed anger toward the survivors (Josephson & Fong-Beyette, 1987; McGregor et al., 2006).

Therefore, practitioners who are working with women survivors of childhood sexual abuse need to understand it is part of the healing process for women be

confronted with struggles. Hence, it required practitioners to be patient and allow sufficient time to see the women survivors indicated progress from the intervention.

Third, another interesting aspect of study findings that impacts on counseling and psychology practice is connected to “channels to express and reflect.” All the women survivors agreed on the importance for them to have channels to express their emotion such as through crying, painting, drawing, and writing. Unfortunately, there are not many related studies focused on this area which thus caused a lack of awareness among practitioners about this healing element. It is important for practitioners to prepare themselves with knowledge about assisting clients in emotional relief through effective and safe channels.

Finally, practitioners can use the study findings to strategize treatment plans for their clients who have a history of childhood sexual abuse. Treatment plans can be strategized according to the healing processes being faced by the women survivors. As revealed in the findings, healing takes place when women survivors are able to have channels to express their intense emotion. If the women survivor is in stage of experiencing difficulties to express intense emotion, thus the treatment plan should include strategies that allow women survivors to express the emotion effectively and safely. Hence, practitioners are encouraged to integrate strategies using expressive art therapy, art therapy, drawing therapy, movement therapy, music therapy, dance therapy and psychodrama to assist women survivors to express emotion, particularly unspeakable emotion experienced by the women survivors. In the process of implementing this strategy, practitioners are encouraged to identify the resources that are considered to be healing resources for the women survivors, such as family support. Practitioners can work closely with the family members to provide the support and this strategy able to enhance healing of women survivors from childhood sexual abuse.

Implications for Counseling and Psychotherapeutic Training

The results of this study have significant implications for counseling and psychotherapeutic training for helping professions, particularly those who are working with this unique group of women survivors. The study findings revealed that women survivors healing from childhood sexual abuse involved unique healing processes and unique healing contributors that worked together in helping women overcoming childhood sexual abuse. Thus, practitioners without a prior and adequate training more likely will face challenges in assisting women survivors recover from childhood sexual abuse. As reported by several studies, therapists experienced difficulties in dealing with cases of childhood sexual abuse because lack of adequate training (Day, Thurlow, & Woolliscroft, 2003; Janikowski & Glover-Graf, 2003). Hence, the following recommendations are made to integrate the findings into counseling and psychology trainings for trainees as well as practitioners who are interested or who are currently working with women survivors of childhood sexual abuse.

First of all, the findings can be used as a framework in developing training modules for senior practitioners as well as a new generation of practitioners. Findings revealed the aspects of healing processes and healing contributors. Thus, the training modules related to assisting female clients with history of childhood sexual abuse should be included in the two aspects to ensure practitioners gain a more comprehensive perspective on female clients healing from childhood sexual abuse. This form of training enables practitioners to understand the healing processes as well as able to predict the healing processes that may take place in assisting women survivors.

Further, in developing a training module for therapeutic work with women survivors, considering the integration of a strategy based upon the healing processes experienced as effective by the women survivors is encouraged. Findings can be used to provide a useful guideline to identify therapeutic strategies that can generate healing

for the women survivors. For example in assisting a women survivor who is in the stage of experiencing difficulties and challenges in overcoming childhood sexual trauma, therapeutic strategy such as “normalize the negative feelings and thoughts,” “empower women’s feeling toward oneself,” and “reframing negative thoughts to positive thoughts” can be considered as appropriate strategies to introduce in training modules to the trainees and practitioners. To introduce trainees and practitioners to effective therapeutic strategies in each healing process will enhance the possibility of ensuring an effective therapy session to the women survivors who are seeking help from them.

Finally, the findings revealed that the healing journey for women survivors was not an easy process. Women experienced difficulties and challenges in overcoming their childhood sexual abuse, taking time for healing. Working with this unique group of women survivors requires therapists to be patient, understanding, and sensitive as well. Furthermore, for therapists to listen to all the traumatic experiences and events encountered by women survivors it may led therapists experience vicarious traumatization. Hence, the element of practitioners’ self-care should be integrated into their training. The aim is to prevent vicarious traumatization, which is closely connected to burnout, compassion fatigue, secondary traumatic stress as well as work stress in working with trauma survivors (Sabin-Farrel & Turpin, 2003).

Implications for psychotherapy models on healing from childhood sexual abuse

The outcomes of the study have significant implication on the current theoretical perception on women survivors healing from childhood sexual abuse. In this section, three implications on theoretical were identified. There were the awareness of the current theories limitation in understanding healing from childhood sexual abuse, the need to extend the current theories on healing and finally there is a need to have

integration of theories to obtain comprehensive perspective on healing from childhood sexual abuse.

First, findings of the study reflected there is a limitation of the relevant theories of healing in understanding the survivors' perspective on healing from childhood sexual abuse. Based on the outcomes of this study, the healing experiences encountered by women survivors were involved the healing processes as well the healing contributors. However, when the researcher reviewed each healing theory individually, none of theory able to fully reflect of the experiences of encountered by women survivors of childhood sexual based. This conclusion was draw out based on the reviewed of the three relevant theories.

Three theories were identified and reviewed in the previous literature review section; there were existential theory, feminist theory and creative recovery model. Both the existential theory and feminist theory successfully highlighted the important of the healing contributors or resources used by the women survivors to experience healing from childhood sexual abuse. In another hand, theory of creative recovery model emphasized the healing processes that women survivors have to go through in their healing journey. Each theory only successful highlighted one healing aspect, it either the healing resources or the healing processes, thus it unable to provide a comprehensive perception of healing. This phenomenon is understandable because there are not many research conducted based women survivors' perspective on healing from childhood sexual. Hence, this may lead to many theories on healing from childhood sexual abuse was not successful capture the essence of healing.

Second, there is need to extend the relevant healing theories to enhance the understanding of healing from childhood sexual abuse. Based on the outcome review of the three theories, none of the single theory able reflects the important of both healing processes and healing contributors to recover from childhood sexual abuse. Thus, there

is a need to extend the current theory to have more complete perspective which consist the aspect of healing processes and healing contributors.

Finally, there is a need of integration of theories to obtain comprehensive perspective on healing from childhood sexual abuse. The stated limitation of the current theories, it leads to the need to have a theoretical concept that able to provide comprehensive perspective on healing from childhood sexual abuse from the survivors' perspective. Thus, study findings suggested there is a need for future researchers or practitioners to integrate several theories to obtain the comprehensive perspective on healing from childhood sexual abuse.

The integration of the theories believe able to provide the researcher to obtain the actual healing experiences experienced by women survivors, this believe will helped researcher to develop a more solid framework that can be apply to their study. Furthermore, the integration of the theories believe will able to offer practitioners to have a more holistic perspective on healing which will lead to holistic intervention for the women survivors who come to their assistance. In sum, findings suggested there are many limitations in current relevant theories of healing to provide the comprehensive perspective on healing from childhood sexual abuse especially in the women survivors' perspective. Moreover, findings also recommended further extending and integrating healing theories, because it believes will able to provide a comprehensive perspective on healing from childhood sexual abuse from the women survivors' perspective.

Recommendation for Future Research

Findings have impact on the practitioners' counseling and psychotherapeutic practice and impacts on their educational training. Several suggestions for future research were identified and presented in this section for the consideration of practitioners and researchers.

First, it is recommended to use the study's findings as a framework in investigating healing experience encountered by women survivors of childhood sexual abuse, because it covered two important areas consisting of the healing processes and healing contributors. Based on this framework it enables covering a wide range of healing elements that contribute to women survivors healing from childhood sexual abuse. Researchers may consider using these findings as a framework to design a questionnaire or to plan an intervention program or to develop a training module for practitioners.

Second, it is recommended to have future researchers identify ways to reach out to different ethnicities. One of the limitations of this study was not successfully involving Malaysian varieties of ethnicity such as Indian and Indigenous. In this study, only Chinese Malaysian and Malay Malaysian were in the group of survivors who were willing to be part of the study. Several attempts to reach out to the Indian community were not successful due to issue of childhood sexual abuse considered as a "taboo" subject in the Indian community. Thus, researchers will need to be prepared for situations where certain ethnic groups of women survivors may feel reluctant to be part of a study. Researchers will need to consider their options to gain trust from this group and community before being able to involve them as part of the research.

Third, it is recommended to do further investigation of one of the healing elements which was lacking in specific studies of this element in connection with the women survivors healing from childhood sexual abuse. This element is "channels to express and reflect." In most of the previous studies on healing from childhood sexual abuse, this element was often not reviewed or discussed. However, this healing element often received attention in research connected with trauma experience. Several studies on trauma presented positive impacts on survivors when they were able to have channels to express themselves. There are also studies that disclosed negative impacts

on survivors when they express oneself in similar channels. Thus, there are different perspectives on this healing element, and its further investigation is strongly recommended, because it is considered a very significant healing element for the women survivors in this study.

Fourth, it is recommended to conduct more qualitative studies with adult survivors healing from childhood sexual abuse. This recommendation is based on the fact that studies on women survivors healing from childhood sexual abuse are extremely limited in Malaysian context. After 2 years intensive search on the previous studies that are relevant to child sexual abuse in Malaysia context, only seven research articles were found. Out of these seven studies conducted by Malaysian researchers, one study focused on adult survivors and used a survey methodology (Singh et al., 1996). Hence, it is recommended to have more local and international researchers investigate the issue of childhood sexual abuse, particularly from the context of adult survivors in Malaysia.

Fifth, it is suggested for future researcher to reach out to women survivors who are faced more difficulties in recovering from childhood sexual abuse. In this study, women survivors who had volunteered for this study indicated well coping from childhood sexual abuse. Believe they are women survivors who have to struggle daily to fight against the sexual trauma they had experienced from their childhood. They are the group women survivors where their voices should be heard as well. However, to reach out to this group survivors will required a lot patient and creativity in the researcher. It required a lot patient of the researcher to gain the trust from the women survivors. It required a lot creativity of the researcher to discover ways to reach out to women survivors. In sum, future researchers are advice to have a detail plan of ways to reach out to women survivors as well ways to sustain a trust relationship with the women survivors.

Further, the dearth of studies based on adult survivors is not unique to Malaysia but has is present in other developed countries. Several studies addressed a similar phenomenon that happened in their home countries when they reviewed previous studies on childhood sexual abuse (Glaister & Abel, 2001; McGregor, 2001; Walsh, Fortier, & DiLillo, 2010). Thus, it is recommended in the future to have more researchers conduct more qualitative studies because it will help to contribute to deeper understanding about healing from childhood sexual abuse, particularly based on the adult survivors' perspective.

Conclusion

The aim of this phenomenological study was to gain understanding of the healing experience encountered by women survivors of childhood sexual abuse. Findings revealed nine healing elements encountered by women survivors in their journey of recovery from childhood sexual abuse. Out of the nine healing elements, five were described as healing processes (e.g., confronted with struggles, channels to express and reflect, forgiveness, acceptance, and letting go and moving). The remaining four elements were termed healing contributors (e.g., received social support, helping oneself, helping other, and spirituality) which played a significant role in facilitating the healing processes of women survivors of childhood sexual abuse. Thus, both healing processes and healing contributors are interrelated in contributing to healing for women survivors. Practitioners and researchers need to be informed of both healing processes and healing contributors in order to understand the women survivors' healing experiences. Lack in recognizing either or any one aspect (healing processes and healing contributors) may cause practitioners or researchers to be unable to have a full picture of the healing experiences encountered by women survivors.

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Appendix A

Letter to Research Participant

Thank you for your interest in my dissertation research on the healing experience from childhood sexual abuse. I value the unique contribution that you can make to my study and I am looking forward to your participation in my study.

I am a PhD student from the Faculty of Education, University of Malaya and I am conducting research on women survivors of childhood sexual abuse. The aim of this study is to understand the healing experiences of women survivors of childhood sexual abuse. The research approach I am using is a qualitative one through which I am seeking comprehensive depictions or descriptions of your experiences. In this way I hope to answer my research question: "How do women survivors experience healing from childhood sexual abuse?"

Through your participation, I hope to understand the essence of healing experience from childhood sexual abuse. I am seeking accurate and comprehensive portrayals of what these experiences were like for you: your thoughts, feelings and behaviors, as well as situations, events, places, and people connected with your experience.

For your information, your participation in this study is voluntary. If you choose not to participate or to withdraw from this study at any time, there will be no penalty involved. Procedure of this study will involve interviewing you on the healing experience and will require you to write down your personal reflection of your healing experience in a diary.

Your participation will be confidential. You will be given a pseudonym which will be used to refer to you throughout the study. The interview session will be audio-taped in order for the researcher to review the conversation throughout the study. The audio tapes will only be reviewed by the researcher and will be discarded after the completion of the study.

I value your participation and thank you for your willingness and commitment of time, energy and efforts. Please do not hesitate to ask questions about the study before participating or during the study. I can be contacted at this contact number 016-9001203 or this email address cleeping@yahoo.com.

With warm regards,

Nicole Chen Lee Ping

Appendix B

Participant Release Agreement

I agree to participate in the research of “How do women survivors experience healing from childhood sexual abuse?” I understand the purpose and nature of this study and I am participating voluntarily. I grant permission for the data to be used in the process of completing a Ph.D. degree, including a dissertation and any other future publication. I understand that a brief synopsis of each participant, including myself, will be used and will include the following information: age, race, religion, marital status, number of children, occupation and any other pertinent information that will help the reader come to recall each participant. I grant permission for the above personal information to be used. I agree to meet at the following location _____ on the following date _____ at _____ for initial interview of 60 to 90 minutes. I will be available at a mutually agreed upon time and place for additional sessions. I also grant permission for audio-recording of the interviews.

Research participant

Researcher

Date

Date

Appendix C

Demographic Questionnaire

- 1.Pseudonym : _____
- 2.Age : _____
- 3.Race : _____
- 4.Religious background : _____
- 5.Occupation : _____
- 6.Education level : _____
- 7.Marital status : _____
- 8.How many children : _____
- 9.Age when first abused : _____
10. Age when the abused stopped : _____
11. Numbers of perpetrators : _____
12. Relationship with the perpetrators : _____

Appendix D

Interview Protocols

Topic: Healing experience of women survivors of childhood sexual abuse

Objective: To explore and understand the healing experience of women survivors of childhood sexual abuse.

Research question: How do women survivors experience healing from childhood sexual abuse?

Important notes:

1. Material need to bring along

- Two MP3 (IC recorder)
- Interview protocol
- Participant Diary
- Researcher Diary
- Small note pad

2. Instruction for researcher in interview session

- The questions given only serve as a guide. You have to give space for issues/ideas/themes that may emerge during the visit or during observation and during the interviews.
- Please focus on the response of the research participants to guide you on the follow-up questions during your interviews.
- Each question must be probed until saturation level (i.e., until no new matters emerge).
- Use (R) for researcher and (P) for participants in your interview notes.

INTERVIEW PROTOCOL

Name of participant : _____
Place : _____
Date/Day : _____
Time/Duration : _____

PART A: GETTING STARTED—RAPPORT BUILDING		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<ol style="list-style-type: none"> 1. Explanation of research objectives. 2. Inform participants' rights and confidentiality 3. All information shared in the interview will be confidential and will not be made available to other without your permission. I will not identify your name in my report or any conversation 4. Consent form will be issue and sign by participants. 5. Getting to know participant <ul style="list-style-type: none"> • Where is your home town? • Are you married? • How many children do you have? 		

PART B: PROBING CONVERSATION OF HEALING EXPERIENCES

Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>In Stage 1 interview— Focused on life history that connected to healing experience</p> <p>Questions:</p> <ul style="list-style-type: none">• What made you decide to be part of this study?• How was your life before and after abuse?• How long you took to move on from trauma to healing?		

Part C: Express Appreciation		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>1. Any other information that you would like to add before we end out first interview session?</p> <p>2. Express appreciation to participant</p> <ul style="list-style-type: none"> • Thank you so much of your sharing. It is an eye opener experience for me. I really appreciate of your time and willingness <p>3. Schedule for next interview session</p>		

Interview Protocol Stage 2

Topic: Healing experience of women survivors of childhood sexual abuse

Objective: To explore and understand the healing experience of women survivors of childhood sexual abuse.

Research question: How do women survivors experience healing from childhood sexual abuse?

Important notes:

1. Material need to bring along

- Two MP3 (IC recorder)
- Interview protocol
- Participant Diary
- Researcher Diary
- Small note pad

2. Instruction for researcher in interview session

- The questions given only serve as a guide. You have to give space for issues/ideas/themes that may emerge during the visit or during observation and during the interviews.
- Please focus on the response of the research participants to guide you on the follow-up questions during your interviews.
- Each question must be probed until saturation level (i.e., until no new matters emerge).
- Use (R) for researcher and (P) for participants in your interview notes.

INTERVIEW PROTOCOL

Name of participant : _____
Place : _____
Date/Day : _____
Time/Duration : _____
Session : _____

PART A: GETTING STARTED—RAPPORT BUILDING		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<ol style="list-style-type: none"> 1. Inform participants' rights and confidentiality 2. All information shared in the interview will be confidential and will not be made available to others without your permission. I will not identify your name in my report or any conversation 3. Follow up to gain further information after the first interview. <ul style="list-style-type: none"> • How was life for you, after the first interview? • There are several aspects that you have brought up in the last interview. I will appreciate you can further share with me more in this session. <p><i>* This task will only be carried out if the researcher requires further clarification and explanation from the participant.</i></p>		

PART B: PROBING CONVERSATION OF HEALING EXPERIENCES

Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>In Stage 2 interview— Focused on the detail of the healing experience</p> <ul style="list-style-type: none"> • Please tell me about your healing experience from childhood sexual abuse? <p style="text-align: center;">Or</p> • How is your healing experience from childhood sexual abuse? <p style="text-align: center;">Or</p> • What is your healing experience from childhood sexual abuse? <p><i>* Required to use a lot probes and clarification to find out more information from the participants</i></p>		

Part C: Express Appreciation		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>Any other information that you would like to add before we end our second interview session?</p> <p>Express appreciation to participant Thank you so much of your sharing. It is an eye opener experience for me. I really appreciate of your time and willingness</p> <p>Schedule for next interview session</p>		

Interview Protocol Stage 3

Topic: Healing experience of women survivors of childhood sexual abuse

Objective: To explore and understand the healing experience of women survivors of childhood sexual abuse.

Research question: How do women survivors experience healing from childhood sexual abuse?

Important notes:

1. Material need to bring along

- Two MP3 (IC recorder)
- Interview protocol
- Participant Diary
- Researcher Diary
- Small note pad

2. Instruction for researcher in interview session

- The questions given only serve as a guide. You have to give space for issues/ideas/themes that may emerge during the visit or during observation and during the interviews.
- Please focus on the response of the research participants to guide you on the follow-up questions during your interviews.
- Each question must be probed until saturation level (i.e., until no new matters emerge).
- Use (R) for researcher and (P) for participants in your interview notes.

INTERVIEW PROTOCOL

Name of participant : _____
Place : _____
Date/Day : _____
Time/Duration : _____
Session : _____

PART A: GETTING STARTED—RAPPORT BUILDING		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<ol style="list-style-type: none"> 1. Inform participants' rights and confidentiality 2. All information shared in the interview will be confidential and will not be made available to other without your permission. I will not identify your name in my report or any conversation 3. Follow up to gain further information after the first interview. <ul style="list-style-type: none"> • How was life for you, after the interview session? • There are several aspects that you have brought up in the last interview. I will appreciate it if you can further share with me more in this session. <p><i>* This task will only be carried out if the researcher requires further clarification and explanation from the participant.</i></p>		

PART B: PROBING CONVERSATION OF HEALING EXPERIENCES

Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>In Stage 3 interview— Focused on reflection on the meaning.</p> <ol style="list-style-type: none">1. What do these healing experiences from childhood sexual abuse mean to you?<p>or</p> <ol style="list-style-type: none">2. What sense does it make to you?<p>or</p> <ol style="list-style-type: none">3. Now you are in healing stage, where do you see yourself going in future? <p><i>* Required to use a lot probes and clarification to find out more information from the participants</i></p>		

Appendix E

Interview Notes From One Session

Stage 1 – First Interview Session with Sandra

Topic: Healing experience of women survivors of childhood sexual abuse

Objective: To explore and understand the healing experience of women survivors of childhood sexual abuse.

Research question: How do women survivors experience healing from childhood sexual abuse?

Personal Biases

1. Childhood sexual abuse is a traumatic experience that causes negative impact to women survivors.
2. The healing from childhood sexual abuse is possible for women survivors.
3. Survivors require a long process to heal from childhood sexual abuse.
4. In order to understand the experience of healing from childhood sexual abuse, the perspective of women survivors' who had undergone the experience is required.
5. Survivors have their own internal resources that can guide them toward healing.

Important notes:

1. Material need to bring along

- Two MP3 (IC recorder)
- Interview protocol
- Participant Diary
- Researcher Diary
- Small note pad

2. Instruction for researcher in interview session

- The questions given only serve as a guide. You have to give space for issues/ideas/themes that may emerge during the visit or during observation and during the interviews.
- Please focus on the response of the research participants to guide you on the follow-up questions during your interviews.
- Each question must be probed until saturation level (i.e., until no new matters emerge).
- Use (R) for researcher and (P) for participants in your interview notes.

INTERVIEW PROTOCOL

Name of participant : Sandra (Participant 2)
Place : Sandra's Office
Date/Day : 30th August 2010 (Monday)
Time/Duration : 3.30pm – 4.35pm
Interview session : # 1

PART A: GETTING STARTED—RAPPORT BUILDING		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
4. Explanation of research objectives. 5. Inform participants' rights and confidentiality 6. All information shared in the interview will be confidential and will not be made available to other without your permission. I will not identify your name in my report or any conversation 7. Consent form will be issue and sign by participants. 8. Getting to know participant	Provide participant the research letter informed the objective of the study. Further, inform consent form was given and signed by participant 2	

PART B: PROBING CONVERSATION OF HEALING EXPERIENCES

Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>In Stage 1 interview— Focused on life history that connected to healing experience</p> <p>Questions:</p> <p>What make you decided to be part of this study?</p>	<p>Sandra decided to be part of the study for the aim to assist me and share about survivor experiences.</p> <p>Workshop: Attended workshop on TA. Activity led her to disclose child sexual abuse experiences to the partner. It was a male partner.</p> <p>He knows her from volunteer works. After the disclosure, he still treated her normal. That was the turning point for her.</p> <p>His action indicated acceptance other toward her. Other did not see her differently.</p> <p>Don't be perceived weak.</p> <p>Acceptance toward other: Sandra experienced after disclosure, people still treat as normal person. She mentioned twice she had experienced this acceptance twice in the workshops that she had the disclosure.</p> <p>Self: - do something for myself Though I am aware I cannot change what had happened to me but I can do something.</p> <p>- did internship at Taiwan</p> <p>- Sandra believes she can decide how much this can impact her.</p> <p>- 1 or 2 percent. She will be responsible of her decision.</p> <p>- Blaming will not serve anything. She believe people have the power / the authority to decide what they</p>	<p>What I have learned about healing childhood sexual abuse from Sandra today?</p> <p>Disclosure lead to acceptance Sandra attended a TA workshop. The trainer requested them to find a partner to share some personal issue. The activity had led her to disclose child sexual abuse experiences to the partner. It was a male partner. Sandra knows him personally as a volunteer in a nonprofit counseling organization. After Sandra had disclosed what had happened to her, her partner still treated her as normal. The normal treatment from this partner became a turning point for Sandra. In Sandra perspective, his action indicated acceptance toward her. He did not see her differently. He did not perceive her weak. All these means a lot to Sandra. Sandra experienced after disclosure, people still treat as normal person.</p> <p>Accept the past Sandra believes we should celebrate because we all survive from what had happened to us. Whatever happens had developed who we are today</p> <p>Sandra as a person There are lot characteristics in Sandra helps her in</p>

	<p>want for herself</p>	<p>overcoming what had happened to her. She aware she cannot change what had happened to her but she can do something to help herself. Sandra search resources to help herself.</p> <p>She did an internship in Taiwan - Sandra gain a lot exposure through the internship in Taiwan. Sandra believes she can decide how much this can impact her. Such as 1 or 2 percent. She has to be responsible of her own decision.</p> <p>She believes blaming will not serve purpose in recovery.</p> <p>She believe people have the power / the authority to decide what they want for herself.</p> <p>After Sandra recalls back the CSA memories, she went through a shock period of 4 months. But she never stops searching for healing. She went through hard time and used inappropriate ways to be healed. She never gives but continue to joins workshop and discovery herself through workshops. She currently apply her survivors skills to others survivors. She believes must be reason why she survived.</p> <p>Reading resources In process of recovery Sandra bought a lot books connected to forgiveness and love. Sandra read a lot of books.</p>
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Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>How was your life before and after abuse?</p>	<p>Read books: Particular about forgiveness and love. Sandra read a lot of books.</p> <p>Letting go: - Let out anger</p> <p>after clear the anger sorrow and sadness will come. Guilt will come and attack Acceptance (accept past Forgive (not denial) Love (find the meaning from the incident) Whatever happened develop who are you today. Celebrate it</p> <p>Gain back the autonomy</p>	<p>Learn to let go Sandra addressed several aspects in letting go process she had gone through. Let out anger After clear the anger, the sorrow and sadness come. Where feeling of guilt will come and attack the survivors. Acceptance – survivors learn to accept her past Learn to forgive (not denial) Learn to Love (which to find the meaning from the incident)</p>

Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>How long you took to move on from trauma to healing?</p>	<p>Since Sandra recalled back the CSA memories, she went through a shock period of 4 months.</p> <p>But she never stops searching for healing. She gone through a hard time and had used inappropriate ways to search for healing.</p> <p>She did not give up but continue to joins workshop and discover herself through workshops.</p> <p>She applied what she had learned to survive to other survivors.</p> <p>She believes, there must be a reason why she survived from the childhood sexual abuse.</p>	

Part C: Express Appreciation		
Guide to interview	Researcher's notes	Researcher's comments Issues / Reflection
<p>Any other information that you would like to add before we end out first interview session?</p> <p>Express appreciation to participant Thank you so much of your sharing. It is an eye opener experience for me. I really appreciate of your time and willingness</p> <p>Schedule for next interview session</p>		

Appendix F

Participant's 1st Interview Session Transcript

Interview Transcription–First Interview Session with Sandra

Participant Sandra
Interview # 1
session:
Place: Sandra's Office
Date: 30th August 2010
Time: 3.30 pm – 4.35pm

RESEARCHER: Thanks for willing to participate in this study. I appreciate it a lot. You don't look like a 36 years old women (referred to the demographic questionnaire filled by Sandra).

SANDRA: I am very sure. I am 36 years old. (Sandra laughing)

RESEARCHER: You look so much younger than your age.

SANDRA: (Laughing)

RESEARCHER: I really appreciate you came to me and then spoke to me and informed me you are one of the survivors. Whatever you said in today conversation will be keep private and confidential. I am the only person will able to access to the data. I just want to assure you. We know each other before. However I appreciate you can share with me a bit about yourself. I know you are single. Are still single and available?
(Both laughing)

SANDRA: I am still single but not available.

RESEARCHER: I am just curious to find out. What make you interested to participate in this study?

SANDRA: I just want to help you. I also find out some of the students and volunteers that I know, there are also survivors of childhood sexual abuse. We all are in this helping profession field must be a certain reason why we want to get involved in the job. Let's say, I am a survivor and then I am this kind of job and what are the thing that we really wanted to be aware more. I actually come from that kind of perspective. In these 5 years working as social worker, I actually found out I am very fear of my own anger. As you know working in this field you are bound to be very angry especially the system. I am very cautious about it and always be alert to identify where this anger comes from. I am very aware, I am not a savior and do not want be a savior. People have their own way of coping. I am just here to accompany that person. Sometime I am very afraid of my own anger. I asked myself very often, "Is this current anger or past anger? Which and where it came from?" I met some of my own teachers and teachers abroad and told about this anger to them. They said to me "I deserved it"

RESEARCHER: Really? (Expressed in sad tone)

SANDRA: They said to me I had chosen a career that I know it will put me face this kind of conflict like the inner self conflict. I purposely choose this career as a way to test out whether I am healed or not. I am kind agreed with them and I do test myself.

RESEARCHER: You are working in this career because you want to test yourself whether you are in healing.

SANDRA: Yes, I have a very high standard of healing. (Expressed smile on her face). If I healed it means that I will become very calm, very good and no anger. (Laughing) I know it is impossible. That why my teachers said I deserved it, I deserved be living in the "Hell." She means I allowed myself in a stage emotion tearing apart. But somehow these 2 years I am more willing to let go and I don't have to prove to myself I am healed perfectly from my past experiences. I don't have to so be so hard working to prove that I am healed. When I have that, I kind of let go a lot of things. I know that I am angry with the system or whatever it is. But I know that, this is the anger and I need to look at it and put a foot stop on it.

RESEARCHER: Do think, this anger is very much related with your childhood abuse experiences.

SANDRA: I am not sure. It might not relate with my past experience or it might relate to some other thing. I get easily upset when I involved in such situation where there is an unfair treatment and there is an injustice treatment. I get upset about that. In this working career I have no choice and everyday I have to face these sexual violence cases. Everyday my social worker will come to see me and they will share their frustration with me. I have to deal with all these frustrations daily thus caused a lot angers. I actually don't like to be that type of person. That can tear me apart but whether that is associated with my past experiences I am not sure about it. I know I am a bit angry with myself at that time.

RESEARCHER: You are angry at yourself about?

SANDRA: I am angry at myself about letting the thing happened. I mean it is part of healing, even though I had went through the forgiving process but when come to the point still have the anger of letting the thing happened. I am thinking to write a book to address how the fears come about. I have gone for a forgiveness workshop last year. I told the teacher I am the survivor and I want to deal with this issue. Actually my most inner fear is not able to heal completely. That is my inner fear. I have a lot of indicators. I will spot on these indicators supposedly it is not necessary but I will do that to myself. When I went through the process with my teacher, I told my teacher I am quite afraid if one day my parent will find out. What going to happen? I told the teacher I thought I had went through this already and happily living for sometime. Till I have make a decision to write a book. The fears started to come out from me. At the end of the session, there was actually a process where the teacher wants me to have a conversation with my dad and mum. There were two participants who were involved in the role play. One participant became my dad and another became my mum. I told them (the person who role played as the dad and the mum), "I need to tell you something but I am very afraid and I am not sure whether you both can take it or not." Later, they just look at me and I just break down. I said to them "I am sorry" and I just break down. The teacher

said, "This is a process of true forgiveness." Which I think is true. I need to go through this process, I feel sorry for my parent. I do not know why.

RESEARCHER: This thing happened when you were?

SANDRA: About 10 years old. That time it was my neighbor. That time my dad having cancer and I was age of 10. That time my dad was not at home. He was in hospital and my mum had to go to hospital most of the time. So we were left at home, only left me and two youngest brothers at home. We were quite close. Our family members were quite close. We always play together. If actually asked me what had happened, I can't really remember. After the incident, it repeated for several times. You know, the children play sex game. I remember, I don't feel comfortable but did not know how to tell. In the demography form you had just given to me, the part to write down how many perpetrators involved I wrote one and plus one (two sex perpetrator). I not sure whether is one perpetrator or two perpetrators. Actually, I don't have the clear memories. But in my memories there were two persons, he was there and there was another person. I am kind not very confirm and I am not so sure. So I think it was about one year plus, I mean the sexual abuse. After my dad had recovered from cancer he came back and eventually the abuse stops. When I was standard five (11 years old) and I started to understand what they did to me and I started to fight back. It was a little bit abusive if I remember correctly. When my dad came back and I fall sick badly. I was suffered with serious asthma. It went on for 6 months until we shifted to a new place. Since we shifted from that place, quite far apart and eventually my asthma stops. My memories also stop. I didn't really remember that incident until I was 24 years old.

RESEARCHER: Sound to me, you have blocked the memories for quite sometime.

SANDRA: Yes. Why I remembered back when I was 24 years old because that I was working somewhere near IMBI road that area. I was robbed by someone in the car park area. I had fainted and I woke up and my body felt very pain. The whole body was so pain and the memories came back. It just came back. I went into through a serious shock. It was continue for 3 to 4 months. That time I already started my volunteer works in a counseling centre (a nonprofit counseling centre). I had very good career and I had a very good relationship. From primary school to secondary school and to University, I was very well-respected. When the memories came back it just tore me apart. It was very shocking at that moment and I could not believe it and I just feel I cannot breath. I read a lot books, which was not really helpful to me so I went back to the place where I was robbed. I was hoping to get some insight from this place because this was where the memories start coming back. But it was not helpful for me. After that, I met an accident at the end of the year. I was knocked by two cars and I was nearly died. But I didn't die.

RESEARCHER: The accident was in the same place?

SANDRA: No, it was not there. It was another place. I did a reflection, I guess at that time in my subconscious mind just can't cope with the memories. Possible the subconscious had developed a feeling wanted to die because it was just too painful to cope with the past. Interestingly, the universe will give you some feedbacks and things just happened. I kind believe that. I didn't say that I created the incident but it just happened on the spot. So I did not die. I decided to do something in my life. I cannot use any drastic measure anymore and I have to do something. I start looking into

healing process which I really look into what actually had happened. Do you actually have a set of questions to ask? I am just concern if I continue talk like this you might not get what you want.

RESEARCHER: No need to worry about the set questions I have. This set of questions only uses it to guide me when I need. From your sharing I will know what next question I should ask.

SANDRA: (Laughing). Ok now I understand. I still continue volunteer in the counseling centre. Even, I have a feeling I should not involve in this kind of job. But I still continue and told myself that I should go slowly. I had chosen a lot of silly ways. I am not just gone back to the place where the incident had happened. I even had asked one of my friends. He was like an older brother to me. We know each other more than 10 years at that time. I even asked him to help me by touching me. I did a lot of silly things just to feel I am healing process. I don't know why I was so obsessed with the feelings. I was thinking if I encounter the fear maybe I can deal with it. I did a lot of silly thing but it did not go well. After I met the accident and I got to an awareness I should start slowly. I start reading book. After that, there was a teacher came from Sweden. He came and bought in Transaction Analysis. I went for the workshop. That time, there was a session the workshop participants need to partner with another person and talk about the past experiences. I do not know why, I had told the person about my past experience. In the counseling centre that I volunteered I am very well respected. Anywhere I go I always respected by people included him. This person looked highly on me. He looks at me as a capable person and very nice person. When I told him, he did not treat me any different. Treat me as same as before it make me feel really good. It makes feel it is fine and people still accepting me who I am. I do not have to be in the victim stage, I can be who I am and people will still accept me. That was a turning point of everything for me.

RESEARCHER: The turning point started when people don't treat you differently.

SANDRA: After the workshop he treats me as a same and he did not show he is very concern about me. He did show his concern but he did not treat me like I am very fragile or someone that very vulnerable. It makes me feel kind being respected by him and I deserved that kind of respect. People still treat me as a normal human being. Is likes a person who had cancer disease before now he gains back his autonomy. This experience gives me a kind of autonomy I can be the person I wanted it to be.

RESEARCHER: It is very interesting. My understanding from your sharing by treating you normal not treating you as someone vulnerable that actually help you. Can you tell me more about it? You mentioned it was a turning point for you.

SANDRA: I guess, I do not want myself to be perceived as weak. When the memory came I am kind I cannot accept this had happened to me. It was very shocking memories after so many years of suppression. The memories just came out. I did not know where to hide. I don't think I was in the stage of accepting that had happened to me before. By somebody accepting me, it gives me courage to see thing differently. This had help me accepting myself little bit more. There were many cases that I had deal it before but I just cannot accept that had happened to me. It was like a wound and it is very difficult to accept that wound. I had feeling people will look at me differently. By him treating me as a same person who deserved love and care make me feels

stronger. He had made me feel “I can still do something for myself, I can still deserve to be love and I can still be respected.” That is how important it is for me.

RESEARCHER: What I hear from you is the acceptance of other make you feel you deserved love and care. This is how you deal with other survivors. You make sure they feel the same way.

SANDRA: Yes.

RESEARCHER: You mentioned to me that experience was a turning point for you. That was how many years ago.

SANDRA: That was 11 years ago. Half years after I met the incident (incident being robbed).

RESEARCHER: That was a turning point for you learn to accept yourself. I also heard you mentioned about teacher. Is seems teachers from the helping profession had also help you a lot in pertaining to your healing.

SANDRA: After him (the person Sandra had disclosure in the TA workshop), I went and read a lot of books. In following year which was year 2000. I decided to resign from my job and went to Taiwan for 400 hours of internship. I went together with John, he was worked in Singapore. Before I went to Taiwan I had participated in another workshop. It was NLP workshop. That time, all the participants were from the Counseling centre that I volunteer as a paracounsellor. I did not know why I decided to disclosure. In this NLP workshop, that is a techniques call as “Timeline.” Through the technique, they will help you see your past and what had happened in your past. There were aspect of love and forgiveness as part of the technique. I came out and I did the role play. It was good because the techniques did not require me to tell too much detail. I just need to mention in this age what had happened and in that age what had happened. When I reach the age of 10, I told the facilitator something had happened in the age of 10. The facilitator asked “What had happened?” I answered him “I do not want to tell” and it was fine for me not to tell. After that he asked me “What do you hope to happen?” I told him “I hope my father didn’t have cancer and I also hope my parent to teach me beside love and care but also teach me somebody that I trusted can eventually hurt me.” That were the things that I hope it will happen. We went through a process of forgiving of all the scenarios and I did that. Until the teacher asked to look at the 10 years old girl but I could not do it. She asked me to hugs her, I just refused to do it. She said this to me, “I know you are a loving person, you took care of all the clients that came to you. You are very loving toward other people. Why you are so cruel to the 10 years girl?” I remembered it took me 20 minutes to able to decide I can hug this girl. That was the point that make me realized I actually not angry at the person that had hurt me but I am more angry at 10 years old girl who had let such thing happened to her. I think is quite common to especially young survivors that I deal with. I did that. So after I did that, I have another 2 weeks before go to Taiwan. The counseling centre’s friends were all silent about the whole role play but they give me a big hug. They never ask me any detail about what had happened. It was like an open secret but we respect each other. They make me feel like “It is fine if you want to talk about it but we will not gossip about it and we still treat you with respect.” This means a lot to me, it really means a lot. After that I went to Taiwan. Interestingly, when I decided to go through recovery process things will be fall and fit in the parts. When I was in Taiwan, I don’t

know why I found many books about love and forgiveness. That was one of my themes whenever I am dealing with a trauma client. End of the day we have to go to this point of forgiving yourself and let go the past experiences. Letting go the past experiences it isn't mean the person did not hurt you. Just that, we do not want to be torn apart because of our past experience because it is not going to help you. Let go is a way of loving ourself. It is not a way to say that "you are not wrong" (mean the abuser). These are my themes whenever I do any session or counseling. When I went to Taiwan I manage to meet up with a Teacher Wu. I went to a workshop conducted by her and the workshop was catered for para counsellors and social workers in how to deal with sexual abuse survivors. Immediately after the training, she picked me as a one of the helpers in a workshop dealing with the women survivors. It was a 30 hours workshop. I am glad, things just fit in the right time and right place. When I came back from Taiwan I am totally difference person. I still feel sad what had happened to me but it isn't affected me so much as before. That was a time I cannot fall asleep without light is on but now I can sleep without the light on. I was feeling annoyed of my mum who had nag me a lot. She said "Why you do not turn off your room light, do you know when you turn on the light it will make your skin darker." She gives me all kind of nonsense. I told her "I have to turn on the light." She said, "Are you sick. Are yougot psycho?" I replied, "You don't know what had happened, please shut up." (Sandra laughing). There was a point I was like that. So when I came back from Taiwan I start to give workshops on forgiveness and love. I read of books about childhood sexual abuse. After that, I got to know a social worker post was offer by a nonprofit group and I decided to join them. I had also acknowledged in public to my students before, I am survivor. This profession helps me a lot to going through this process.

RESEARCHER: Tell me more it.

SANDRA: Around year 2002 or year 2003, I met the person I mean the abuser in my house's garden. Though his family stays far from us but they do come and visit my family. My family and his family still remain as friends. Before I met him, I told myself "I know one day I will meet him and I will have many questions to ask him." But in the garden he just refused to have eye contact with me. That time when the incident took place he was very young maybe around 14 years old. I sincerely believe he did not do it intentionally. Yes, I need to believe so it will make me feel good. I know that (Sandra laughing). In that point, I just realized it is no use to question why he did that to me because it can't change the past. But I realized I can change something in both of us. I went to him. Oh, I forgot what I had said to him. (Sandra, paused for a while and read the print out blog write-up she did to search what she had said to him). I told him, "I had let go the past and I hope you also do the same."

RESEARCHER: What was his response?

SANDRA: He was looked at me and he was very quiet. After few years later, we meet again in other occasion we have some talking a bit.

RESEARCHER: I keep hearing you say, forgiveness and love. You also advocate for forgiveness and love. In your training you talk about forgiveness and love. Please tell me more about that.

SANDRA: I think (quite for a while). This is what I believe and I can see the changes. Actually when you started to deal with a full process of forgiveness a lot thing will be

in the mind. Some people will go into denial and some people will into aggression. There is a lot of fear, there is a lot of aggression and there is a lot of emotion that you have to go through. We have to go through all these emotions before come to forgiveness and love. Without doing that I feel is not solid. So you really have to do something about your anger and your guilt and about your pass experience either toward yourself or toward the person. In my case, I angry about him, no doubt but actually was angry at myself. I have to let out my anger. When the anger kind of like let out, you go to the stage where you are not block by your emotion. When you are not block by the emotion, then you can take in more things and take in more energy. End of the day, you will have to come to a stage “I accept this had happened in my life” and “I also accept it had an impact on my life and it had changed my life a bit or in a great deal.” By accepting this had happened and I can decide how much impact I want this incident to haunt me. I can decide. Then I actually can take the autonomy to say that “I can decide now is 1 percent, so I let it out 1 percent” or later I want 5 percent I will let out 5 percent. I can decide and I have to be responsible with my own decision and I can no longer can say “Is you make me feel suffer.” I know that I need to let it out and I have to be responsible. I actually doing it myself by victimize myself therefore I have to be responsible of my own emotion. Is not him anymore because the incident not happen anymore. So you will need to come to that stage. When you able to start accepting the past, you will then come to the stage to forgive. When I say forgive, it not saying that thing did never happen. Thing had happened, we cannot change it and we cannot “control alternate delete” and said it never happen. Even in the computer you had “control alternate delete” on it, the computer expert still able to get it out from the hard disk. We can never able to do that but what we can do is to decide how much we want the incident impact on our life. So if you want to have a better tomorrow that we need to decide either we want to hold tight of the past which does not serve us any good. The only good is you actually can say to other “He is the one who actually responsible to who I want to be.” I am sorry I might sound a terrible “you are the one be responsible who are you today.” It isn’t serving any purposes. We are actually victimizing our self and proof to other this had happened to me and it had created a lot of negative impacts on us. We can do it but we have to do it in the way. Now, I decided to let go this experience, I let it go it is not means you are not wrong but I let it go because I believe I deserve a better life. Then it will shift the wave and it work very well for most of mine clients. Especially for my refugees’ clients which most of the time I only can see them once time.

RESEARCHER: You actually guide them throughout the whole process, as what you had told me just now.

SANDRA: Normally with refugee clients I don’t have much time. I will give them about an hour session after that will be a follow-up. During an hour session, I will assist them in dealing with the anger which they have never let out before. After they fully expressed out the anger or the expression of anger and then I wrap it up with love with the aim to make them feel they deserve to be love. I will still tell them “I cannot create a miracle overnight, you will still think of the incident or you might still haunt by the nightmares. But remember, if it does come back the intensity more likely will be reduce and it will continue less and lesser. It will be smaller little bit a little bit. You have to know this is a process that you need to go through and by the end you will be fine.”

RESEARCHER: Actually, I found very interesting in this interview session. I feel like I am attending a seminar or a workshop. You have shared with a lot about the whole process that will take place in healing. (Both laugh together). It is very amazing sharing.

SANDRA: I took a long time. (Sandra laughs)

RESEARCHER: You like sharing the essence of the 10 years recovery experiences with me. I am very curious, just now you mentioned let go the anger. Please explain to me, how you did that?

SANDRA: Let say, if I am going to have opportunity to spend more time with a client. Normally I will ask the client to write a letter. A letter guided with steps. Two set of letters, one letter is to address to the perpetrator with the name. The first emotion she needs to write is anger. She can talk anything about the anger and after that anger she will come to sorrow.

RESEARCHER: Did you apply the same process to yourself?

SANDRA: I did that before. I used many approaches to help myself. This approach I used it before and I have used it in many places. Further, I have also use this approach in many sexual abuse survivors. This approach will take some time to process but it allow the survivor to go through their inner self and help the survivors to express it out. It will start with anger and after that it will come to second step which call sorrow. Which all the sorrow, despair and devastated will be express out by the survivors. Example the survivors can said "Because of you, I cannot be a perfect person and I don't know how to continue my life. Because of you, I have to think of you everyday and think of the incident everyday. Why I am need to go through all these thing everyday." Anger is an expression we tend to keep it inside or under carpet. If we don't deal with it, later on when we have a relationship it will actually it will come out and haunt us in many ways without us realize it. For example you might not angry at your boyfriend but angry with something else. Very often we were told not to express our anger emotion openly. A lot of time we hide it inside. Anger is a very powerful expression, we need to let it out and after that you feel sorrow. The third part is the fear, like example people that know I am a survivor I am fear of how do they look at me. Let say, my partner know about what had happened to me but when I have a child, I will have fear the same thing that can happen to her. The fourth part is guilt, the guilty feeling that we have. Sometime, we believe we are in fault. For example, "In that time, I should not go to his house" or "I should tell my mum early, this thing will not happen." After you went through all the four steps, the last step will be love. When I do the love part which is very difficult to do but I have to do it to complete the whole set. The love aspect is about to look into this incident and what the meaning of this incident in our life. Of course, we can find a thousand negative reasons of this incident. In another side this incident have make you to be a person who are you today. You look into the meaning of this incident in your life and celebrate that you have survived through the incident and you still live very well. If I talk about love, if we can go to the extend we appreciate that because of this incident it actually had make us a better person today. Tell yourself "I had gone through this incident, I did not kill myself, I did not go into drug, I did not go through all this nonsense and I am still surviving." The incidents have made me found my capabilities. By the end, I want to express thank you. I am not agree with what you had did to me but I want to let you go because I have

promised myself I want to love myself a bit more. If you have completed all these steps you already in the stage of 90 percent recovery.

RESEARCHER: Forgiveness part is about the stage of love.

SANDRA: Actually, look into the meaning of the incidents. What it means to your life. Look into the positive thing. Always remember you survived through. There is must be something good in you. That God or some in the higher above want you to survive. For those who have a lot of anger. I will let them tear new papers. When you tear the new papers you can hear the sound and when you tear the new papers, you will feel you let out a lot of energy. I will prepare a lot of new papers for them to tear. For the refugees, I will prepare a room and let them tear new papers. After they tear all the newspaper, the papers will be everywhere in the room. I will ask how they feel right now and normally they answer they feel better. I will explain to them because is normal to feel such way because they have release a lot of emotion out in them. I will explain to them you will feel very tired. Further I will describe this is the room in your heart. I will ask them "Do you still want these newspaper or emotion in your heart?" Generally all the survivors will answer me "I don't all these emotion in my heart." I will ask them "What you plan to do?" They will then answer "I want to clear all these emotion." I will response to them "Good, let throw all these newspaper or emotion into this plastic bag." After cleaned up the paper, I will continue asked them "Where you want to put these papers?" and they will answer "I don't want it to be here." I will continue and hint them "There is a door there." The survivors general action is open the door and leave the collected papers outside. I will continue explain to them "All the negative emotion is outside the room, it will not going affect you as much as before because today you already started to deal with it." For a one session that given to me, this is the only thing I can do (Sandra expressed she was only given one session for each survivors).

RESEARCHER: What I hear from you, you are type of person who will do something to help yourself. Is sound to me, the self in you is very strong. Further, you also guide the other survivors how to go about it to help themselves. As you said to the survivors, "you are the one who have power to decide."

SANDRA: You have the autonomy to decide how much you want the incident impact on you. I have not seen any client not able make such decision. In general, when a person had encountered trauma experience especially the trauma incidents involved taken away a person power belong to them, you will feel helpless. After the trauma incident, she feels she no longer has power to decide her future. This feeling is really scary for the survivors because she no longer feels in power to determine her life and she no longer feel safe. Therefore, the survivors need to understand and learn to do something for her to gain back the autonomy. When the survivors gain back this autonomy, she will realized no matter how bad experiences she still able to in control of my own personal space and relationship with other. This will help survivors feel better about themselves though they might not in fully recovery. In some situation survivors who had gained back some autonomy she might only feel 10% better at that moment. However, this autonomy will able to make her feel "I am not in lost, I am still in control and I have hope for my future"

RESEARCHER: What understand from you, the survivors able to understand they are in-control but whether they want to make such decision or not.

SANDRA: However, they are situation is a bit difference especially the sexual abuse or rape had just happened not long ago. She might came into the room and intend to kill herself. Such cases I will not able to do any counseling works with her.

RESEARCHER: Amazing to listen to your sharing. It is very amazing to know how you help yourself and how you use the same approach to help other survivors. I am aware you using a same method to help other. I am curious whether helping other survivors also have contribution to your healing from childhood sexual abuse?

SANDRA: Not really, I am very conscious what I am doing. In counseling session, we will able to see whether the client is in a good or a bad condition based on her facial expressions. I guess for court process, I will have an expectation on myself to give more commitment to go through the whole process with the survivors. Throughout my service in helping profession, I have been given many opportunities to handle child sexual abuse cases particular involved young survivors. I cannot denial in handling such cases I can become very persistent in providing support for the survivors I mean to the stage of 24 hours and 7 days especially in the critical stage. It is not about her but is about myself and I am aware about it. I am just want to ensure the survivors no matter what happened to her, they will have people to be there for them to go through the process. It is connected to my own childhood sexual abuse. When the incidents occurred I was only 10 years or 11 years old. I believe if there were someone they to support and helped me, it will make a big difference to me. If they someone there, I believe there is no need for me to go through the trauma experience and the 4 months it was a nightmare for me. It is totally nightmare for me. I was very persistence to be with the survivors for 24 hours and 7 days to be contact to able. After a while, I cut down a lot. I believe it is connected to my own regret of my past which I try to compensate in helping the survivors I met. I had a friend who had gone through the similar experience but she had committed suicide. This had also leaved an impact on me. I realized particular for the young survivors I always want ensure they able contact me no matter what had happened. I am aware it is my own issue that I need to be alert of myself. For example court cases, in court a lot frustration can take place such as the ways the defense council asked questions and the delay of the court process. I had experienced a lot of frustration in dealing with court cases. This is going sound really silly, I want to make sure I feel upset because of the court system rather them the sexual abuse issues. Thus, I went to ask my colleagues “Do you feel angry if you are me who face all the frustration in court.” If they answered me “Yes, I will feel angry if I am you.” This will assure me I am normal (Sandra laughing).

RESEARCHER: I don't think is silly, being a therapist and being a survivor it is very normal to do such self-reflection. It is action to assure our self (researcher and Sandra laugh together).

SANDRA: I had an experience being scolded by colleague and they said to me “Are you crazy, everyone will feel angry if they encountered such experiences in court?”

RESEARCHER: Can see some tears in you. Is that related with just now sharing?

SANDRA: Not really, I am type of person can easily in tears.

RESEARCHER: Thanks you for your sharing.

SANDRA: Do you finish ask all the questions?

RESEARCHER: Not to worry, I will get back to you next interview. I will look into the emerged themes and I will find out more from you. What I hear from you today, I can hear themes of acceptance of other where you would like other treat you as normal. You yourself as a person, and want to be heal and keep searching to heal. I really appreciate of your sharing.

SANDRA: Just now you mentioned me want to be heal. For any survivors, they just need this. It is really good as a stepping stone. For all the survivors I met, they just need to have this "I will feel better and I will better." This is already really good start for any survivors. The thing will just come.

RESEARCHER: I believe so. Thank you so much.

Appendix G: Relevant Statements on Forgiveness

Forgiveness of the Abuser

<Internals\Documentation\Sandra\Personal Blog\BSandra1-Disclosure> - § 2
references coded [7.24% Coverage]

Reference 1 - 1.16% Coverage

The teacher let me do a metaphorical action which is to “sprinkle the sparkling dust” to symbolize that I have forgiven the people who have harmed me before. I forgave everyone, including him and a friend of his.

Reference 2 - 6.08% Coverage

In the workshop I did a lot of sharing and I shared my experience of forgiving. I am here to share with you my experiences of forgiveness.

I still remember I was in my mother’s garden and I saw him and his family members. Many times in my mind I have rehearsed what I want to ask or say of one day when we meet. There was something I wanted to say him but when I saw him the lines that I have been practiced in my head just could not verbalize it. When I saw him at the garden he was not able to look at me. At that moment his expression made me feel he wasn’t daring to face me. I was suddenly understood his struggle and decided walked to his side and told him, “I have already let go of that past, please do forgive yourself as well.”

I was not insisting to ask him “why” anymore. I was willing to believe that over these years, he felt uneasy as well and due to what he did to me. He made me felt, he could not face me and to face the past. He was reluctant to bring up again. I chose to believe, if he knew that what he had done to me can caused wounds that cannot be repaired I believe he would not chose to do that to me.

<Internals\Interview\Sandra\Sandra transcription - inter ses 1 on 30-08-10> - § 2
references coded [4.66% Coverage]

Reference 1 - 2.78% Coverage

Around year 2002 or year 2003, I met the person I mean the abuser in my house’s garden. Though his family stays far from us but they do come and visit my family. My family and his family still remain as friends. Before I met him, I told myself “I know one day I will meet him and I will have many questions to ask him” But in the garden he just refused to have eye contact with me. That time when the incident took place he was very young maybe around 14 years old. I sincerely believe he did not do it intentionally. Yes, I need to believe so it will make me feel good. I know that (Sandra laughing). In that point, I just realized it is no use to question why he did that to me because it can’t change the past. But I realized I can change something in both of us. I went to him. Oh, I forgot what I had said to him. (Sandra, paused for a while and read the print out blog write-up she did to search what she had said to him). I told him, “I had let go the past and I hope you also do the same”.

Reference 2 - 1.87% Coverage

So you will need to come to that stage. When you able to start accepting the past, you will then come to the stage to forgive. When I say forgive, it not saying that thing did never happen. Thing had happened, we cannot change it and we cannot “control alternate delete” and said it never happen. Even in the computer you had “control alternate delete” on it, the computer expert still able to get it out from the hard disk. We can never able to do that but what we can do is to decide how much we want the incident impact on our life. So if you want to have a better tomorrow that we need to decide either we want to hold tight of the past which does not serve us any good.

Forgiveness of self

<Internals\Documentation\Sandra\Personal Blog\BSandra1-Disclosure> - § 1 reference coded [3.70% Coverage]

Reference 1 - 3.70% Coverage

When I was facing the 10 year old me, I really could not do it. I was looking at the 10 year old girl whom I have in my memory and I became so stubborn that I would turned my head away and not look at her at all.

The teacher asked, “Why?”

I answered, “I hate her.”

The teacher asked once again, “That time she was so young, what could she do? She needs your understanding and she needs you to forgive her. She has experienced so much for you and she as a person who is so kind to others. Why would you be so cruel towards her?” Then, I started to burst loudly into tears.

I struggled for 15 minutes and I was finally willing to hug that child and then we made a perfect ending.

<Internals\Interview\Sandra\Sandra transcription - inter ses 1 on 30-08-10> - § 4 references coded [10.56% Coverage]

Reference 1 - 2.80% Coverage

When I went through the process with my teacher, I told my teacher I am quite afraid if one day my parent will find out. What going to happen? I told the teacher I thought I had went through this already and happily living for sometime. Till I have make a decision to write a book. The fears started to come out from me. At the end of the session, there was actually a process where the teacher wants me to have a conversation with my dad and mum. There were two participants who were involved in the role play. One participant became my dad and another became my mum. I told them (the person who role played as the dad and the mum), “I need to tell you something but I am very afraid and I am not sure whether you both can take it or not.” Later, they just look at me and I just break down. I said to them “I am sorry” and I just break down. The teacher

said, "This is a process of true forgiveness." Which I think is true. I need to go through this process, I feel sorry for my parent. I do not know why.

Reference 2 - 4.79% Coverage

It was NLP workshop. That time, all the participants were from the Counseling centre that I volunteer as a paracounselor. I did not know why I decided to disclosure. In this NLP workshop, that is a techniques call as "Time line." Through the technique, they will help you see your past and what had happened in your past. There were aspect of love and forgiveness as part of the technique. I came out and I did the role play. It was good because the techniques did not require me to tell too much detail. I just need to mention in this age what had happened and in that age what had happened. When I reach the age of 10, I told the facilitator something had happened in the age of 10. The facilitator asked "What had happened?" I answered him "I do not want to tell" and it was fine for me not to tell. After that he asked me "What do you hope to happen?" I told him "I hope my father didn't have cancer and I also hope my parent to teach me beside love and care but also teach me somebody that I trusted can eventually hurt me." That were the things that I hope it will happen. We went through a process of forgiving of all the scenarios and I did that. Until the teacher asked to look at the 10 years old girl but I could not do it. She asked me to hug her, I just refused to do it. She said this to me, "I know you are a loving person, you took care of all the clients that came to you. You are very loving toward other people. Why you are so cruel to the 10 years girl?" I remembered it took me 20 minutes to able to decide I can hug this girl. That was the point that make me realized I actually not angry at the person that had hurt me but I am more angry at 10 years old girl who had let such thing happened to her.

Reference 3 - 1.10% Coverage

Interestingly, when I decided to go through recovery process things just fall in and fit in all the parts I needed to go through for healing. When I was in Taiwan, I don't know why I found many books about love and forgiveness. That was one of my themes whenever I am dealing with a trauma client. End of the day we have to go to this point of forgiving our self and let go the past experiences.

Reference 4 - 1.87% Coverage

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