

Part III: Healing is Possible!

By [Michael J. Bland, Psy.D., D. Min., L.C.P.C.](#)

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I can enter your house because of your great love. I can worship in your holy temple because of my reverence for you, Lord. Guide me in your justice because of my foes; make straight your way before me. Then all who take refuge in you will be glad and forever shout for joy. Protect them that you may be the joy of those who love your name. For you, Lord, bless the just; you surround them with favor like a shield. (Psalm 5: 8-9; 12-13)

The onset of problems following sexual abuse in childhood can be influenced by a number of things including: the age of the child; prior functioning of the child; the degree of coercion and physical threat; the frequency, duration, and extent of the molestation; the length of abuse; the length of time the experience was kept silent; the level of family support following disclosure and the person's resiliency to such horrific experiences. While healing is possible, it takes commitment and work. Some of the dimensions of healing include a support system, emotional, spiritual, interpersonal healing. Such healing can not be done alone or in isolation.

In the previous article of this three-part series, I wrote about a time-honored model of healing which made a distinction is made between victims and survivors, and how they relate to the trauma of being sexually abused.

VICTIMS relate primarily in the present tense with the trauma they experienced. Their primary identity and level of functioning is defined by the trauma.

SURVIVORS relate more in the past tense with the trauma they experienced. Their identity and level of functioning is much greater than the victims', however, a flashback can send the survivor temporarily back to the victim mode.

I would now like to introduce the term thrivers or thriving survivors as the third part of this model.

THRIVERS or Thriving Survivors have as their main goal to live life, to move beyond the trauma, and to integrate the trauma into the wisdom of the person they have become. While they will never forget what happened, it no longer serves as a defining, limiting experience.

It is important for a thriving survivor of sexual abuse to develop a healthy understanding and expression of their sexuality and relationship needs. Often this includes an awareness and acknowledgment of their emotional, psychological, and spiritual gifts along with a vision of the future. In this sense, a vision of the future would be realistic and plan for certain emotional or spiritual "flare-ups" or adjustment difficulties. Truly, a thriving survivor is busy about living life looking forward after having integrated the past and present. The thriving survivor focuses on not allowing such horrific experiences to emotionally, psychologically, or spiritually define them or paralyze them.

The unpredictable barriers to healthy living often occur suddenly. Such random flare-ups can throw a survivor or thriver into a time-limited crisis. At that time, the feelings of devastation, poor self image, and sadness can momentarily set someone back. This is when a survivor or a thriving survivor needs their strength to reach out to their trustworthy personal and professional support system. While despair can set in a thriving survivor they are also able to recognize it and have the ability and courage to conquer it.

A change of circumstance of any kind produces a loss of some kind (the stage changed from) which will produce a



normal human reaction. Counselors often use a common acronym:

- **T = To** accept the reality of the loss
- **E = Experience** the reality of the loss
- **A = Adjust** to the new environment without the lost object/person
- **R = Reinvest** in the new reality

For thriving survivors, or anyone, life experiences often hold barriers, impediments, or challenges to healthy living. Some of these obstructions to healthy living may included additional grief, trauma, unpredictable flare-ups (conflicts), obsessive thoughts about the past or present, or circular thinking which is often based on impressions and that are not always factual. All of these obstructions are part of the reality of life and can result in adjustment difficulties including depression or anxiety. A person who has survived a trauma may be predisposed to obstructions or adjustment difficulties to healthy living. However, the more a thriver is able to develop resiliency and integrate their past trauma into their emotional and spiritual life. They are able to admit that their life and development has been changed, not ended.

Breaking the silence and secrecy of the abuse often enables the victim to begin to accept the reality of what they experienced or what was done to them and to adjust to the reality that it was not their fault. This often provides an opportunity for them to choose to reinvest their energy into life giving things as opposed to using their energy to hold the secret and shame. However, it is important to remember that this is a choice that can only be made by the individual. Some victims “linger” in one stage or another for various reasons, some known and others unknown. This term for this is malingering.

What is malingering? The term refers to a continuum of behaviors ranging from subconscious exaggeration of actual symptoms all the way to outright fabrication of symptoms (American Psychiatric Association, 1994). This definition highlights the fact that a person who is malingering may indeed have genuine symptoms but is exaggerating them for some reason. In all cases, however, the motivation for such behavior is secondary gain. That is, the symptoms either allow the person to get something they want or to get out of something they do not want.

Not all people malingering in the same way or even for the same reasons. Malingering in general terms is not a common occurrence. Although exact estimates of prevalence are impossible to obtain as most malingerers do not confess to their behavior, it is clear that the percentage of people suspected of such behavior differs depending on the situational context and nature of the secondary gain involved.

Regardless of how one conceptualizes healing, healing remains a process and not an event. Healing is not a simple check list of things that are needed to be accomplished. Rather, healing, of any kind, is a process that takes time, and in some cases, a life time. But I know from my personal and professional experience that healing is possible! I consider myself a thriving survivor of clerical sexual abuse in-part because of the support, assistance, and prayers of many people—including you! Thank you for reading this three part series and please let me know what you think.

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