

**Finding a Way through the Darkness:
Sexual Abuse, Self-disclosure and the Therapeutic Alliance**

by

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Abstract

The fast pace changes in the world have had tremendous impacts on the practice of psychotherapy. Modernity, the media, and technology have changed the way we view others and ourselves. The social construction of identity continues to change in ways that must be welcomed and understood. Social work practice occurs in an environment much different from the place where the profession first developed. We are called to continue to evolve and honor the commitment of a profession that recognizes the central importance of human relationships. This case study examines a novel way to challenge the dominant cultural discourse within the therapy room. It concerns the challenges of a young man coming to terms with his sexual abuse and how therapist self-disclosure assisted in redefining the masculine narrative and worked toward the construction of a post-traumatic male identity.

**Privacy Disclaimer: To protect the confidentiality of the client, identifying information has been disguised and certain details have been concealed.*

Therapy is aimed at the form-giving, meaning-making part, the narrator who at every waking moment of our lives spins out its account of who we are and what we are doing and why we are doing it.

-W.T. Anderson

Sitting on the courtroom bench, I become aware of the beating of my heart. Not a normal beat, not even the one you feel when you have just barely missed hitting a car that mysteriously comes out of nowhere. Not even like the heartbeat when you trip and toss a carton of eggs into the air, deftly defying the laws of physics by catching them with one hand while balancing on two toes. But rather a heartbeat that is so loud, so consuming it feels like it is coming out of your ears and forces all other senses into the background. I turn and look around, half expecting those nearby to have heard it, and find myself reaching for the edge of the bench. Glancing down, I notice the bench has a comforting smoothness, an almost velvety texture and roundness where the varnish has worn away. It is a quality that bears witness to those individuals who have come to this courtroom seeking justice. This hand-tooled memorial serves to anchor the insecurity of these moments and is somehow consoling in this time of uncertainty.

The judge enters and my comfort disappears as I am forced to stand and release my hold on the oak bench. I look towards Kevin, having worked with him, as his psychotherapist these past eighteen months; I can gauge his affect. He is scared. The presence of his mother Lisa and his Aunt and Uncle, as well as myself, do little to ameliorate the intensity this moment. It is the moment he would come face-to-face with his cousin, Manny, who had sexually abused him for five years. Two uniformed court officers, guns holstered at their sides, enter the courtroom and are immediately followed by a short, overweight, and unkempt man wearing orange prison garb. Hands and feet shackled, he shuffles slowly towards the lone seat in front of him. He sits down as the clang of the metal punctures the silence. Looking towards Kevin, I can see him studying Manny from the corner of his eye. Frozen, not even blinking his eyes; his white-knuckled hands gripping one another, his breathing quickens, and he begins to tremble. Somewhere in the courtroom, I hear someone sobbing. It's Kevin's mother, Lisa, who has collapsed onto the bench, unable to stand, her face turned into her sister's shoulder. It is a tearless sob. She no more tears to

cry, so Kevin cries for her, tears streaming down his cheeks without a sound.

The judge begins to read the charges. Finishing, he turns towards us, asking if the victims want to make a statement prior to sentencing. Lisa stands, and begins to respond to the judge's request, but cannot find words to adequately express the pain of a mother who could not protect her child. She lives with that demon daily. As a survivor of sexual violence herself, it is all she can do to hold it together, she shakes her head no, unable to read the statement she had prepared, and remains silent. I look towards Kevin. Slowly he rises from the bench, and with the weight of uncertainty strapped to his shoulders, he moves towards the microphone. Alone, with a piece of ruled loose-leaf paper crumpled and held tightly in his left hand, he looks younger. It is almost as if Manny's presence had somehow transformed him into that vulnerable eight-year-old who just wanted to learn how to fish. Kevin clears his throat, and suddenly I can feel the heaviness of his silence. Everything stopped except the ticking of the clock, taking me back to my first meeting with Kevin, almost two years ago, and how I came to be part of his story and his truth.

As a psychotherapist working in a private practice setting, I have come to recognize that telling one's story is an important aspect of developing a secure and organized sense of self. McAdams (2011) views psychotherapy as a major venue for the telling of stories stating that,

Therapists work with clients to re-story their lives, often aiming to find more positive and growth-affirming ways to narrate and understand emotionally negative events...through repeated interactions with others, stories about personal experiences are processed, edited reinterpreted, retold, and subjected to a range of social and discursive influences, as the storyteller gradually develops a broader and more integrative narrative identity (p. 236).

Developing a narrative of one's life allows an individual to piece together threads of experience into a pattern, weaving together groups of discreet experiences with all their complexities into a cohesive tapestry of self. However, creating this tapestry of self-truths is a complex and multi-faceted process and spinning the thread of life is not without difficulty, particularly for those with experiences that are not so easily incorporated into the design of their lives. Against a backdrop of

an ever-changing world, greatly influenced by consumerism, technology, and a world full of many truths. Traumatic experiences shatter narrative and one's sense of self in ways that are profound and life changing. For the male survivor of sexual violence, these traumatic experiences disrupt the coherence of the dominant masculine narrative and complicate the healing process for these men.

So what do you know about football?

I moved my head down a few more inches, trying to catch a glimpse of the fourteen-year-old boy who sat before me slumped in the chair. It was my first meeting with Kevin, and I was hoping to make eye contact at least. Kevin slid even lower, ensuring I would not see him as he pulled his black hoodie down almost to the end of his nose. He was determined. There was no way this man, this psychotherapist, was getting in. After sitting with both him, and his mother for the past forty-five minutes, intently listening, as she explained the circumstances that led her to seek counseling for her son, all I could think was - he would rather be anywhere but here. Kevin had not moved or uttered a word as his mother shared all that had occurred over the previous nine months, since that day that he disclosed his sexual abuse, perpetrated by his older cousin Manny. Once she had finished, I asked her to leave Kevin and me alone for a few minutes so we could speak with one another. Now, I wanted to hear his story.

As I sat facing Kevin, I wondered where to begin. How could I help him tell his story? This barely fourteen-year-old young man who had learned silence as a survival skill did not want to talk with anyone. Your mother filled me in on the events of the past month. Silence. It must have been difficult for you to talk about those things. Silence. I'm glad you are here. Silence. He pulled his black hoodie down further over his head. Silence. The only sound was the ticking of the clock, cruelly reminding me that I was getting nowhere with Kevin. I struggled. How's school going for you? Silence. He sat there frozen, emotionally closed, and locked. I sat there putting the pieces together in my head; more questions than answers, unsure whether I had that key. Do you play sports? What did you think of the Superbowl? He looked up - finally a response. So what do you know about football? That was my way in, the bridge to Kevin sharing his experience. I sat and thought for a minute about all of this, then walked through the door that Kevin had

opened between us. Did you watch the Superbowl? He said as he reached up and pulled the hoodie over his head, revealing a young teenager with brown hair and green eyes. A fine of layer peach fuzz covered his cheeks, interrupted by a few pimples, squeezed, one too many times in a desperate attempt to banish them from his teenage reality. He wore a Baltimore Ravens jersey, baggy sweats, and sneakers. I noticed that he was biting his nails.

As we continued to speak, I could sense a distance in our interaction and made a mental note of it. He had a blank expression as if he could not be happy or sad. It was a state of numbness I recognized from working with other survivors of sexual violence. It is almost as if he could not allow himself to feel, to smile, or to cry. If he did, then all of it would come out - laid bare on the floor in front of me, this stranger, this therapist. I would be privy to those feelings, those emotions, and those thoughts - the ones that he worked so hard to keep buried deep within him. Talking was hard for him. Men aren't supposed to get hurt or talk about feelings, or challenges. So he kept it in; he kept all of it inside himself. It was safer there. We spent about thirty minutes together alone that day, with Kevin agreeing, despite his initial resistance, to attend sessions weekly, every Tuesday at 4 p.m. He left the way he came in - in silence - leaving the door open behind him.

Numerous studies have shown that survivors of male childhood sexual abuse are at an increased risk for a variety of psychological impacts such as suicide, depression and anxiety, addiction, post-traumatic stress disorder, dissociative disorders, overdeveloped avoidance response, somatoform disorder, tension reduction behaviors, as well as challenges with sexual identity (Alaggia & Millington, 2008, Briere & Spinazola, 2005). Clinical presentations vary, and while not present in every case, clinicians should remain aware of the ways in which adaptations to sexual trauma can manifest themselves in the daily lives, and coping skills of their clients. Indeed, it is important for clinicians to educate themselves regarding the impact and challenges surrounding assessment and treatment of those impacted by sexual violence, or refer clients to those clinicians that have experience working with sexual trauma.

As we sat across from one another, Kevin with his hoodie pulled down, and me struggling to engage him, my clinical assessment might have been something other than post-traumatic stress disorder. Kevin's initial clinical presentation was one of a defiant youth, a young man disenchanting

with society and yearning for the independence, and control of their environment, that teenagers in American culture often deem as the ultimate goal of adolescence. A clinician assessing an individual challenged with addiction, eating disorder, self-injury, or compulsive or unsafe sexuality should make note of these behaviors as a possible indicator of a trauma history, often involving sexual violence. Clinicians working within managed care environments, or those clinical settings that require a quick assessment, are at risk of missing individuals, such as Kevin, who have been impacted by trauma. These individuals can present with a complex array of behaviors and symptomology. It is imperative that each client is assessed and screened for a history of traumatic experience in their past. Not doing so is a disservice to the clients who seek clinical intervention.

At this early stage of treatment, paramount within the clinician's mind should be the development of the therapeutic relationship. The therapeutic relationship is the foundation of the treatment, without which no healing can occur. Indeed, the cornerstone of treatment with a survivor of sexual violence is establishing and maintaining a safe therapeutic environment, "a major factor in ameliorating the negative effects of abuse" (Hunter, 1990). For the survivor of sexual violence, the development of a safe therapeutic relationship with a knowledgeable clinician is paramount for effective engagement and a successful outcome of treatment. The engagement process for the client, such as Kevin, can be more complex and nuanced, and require an awareness surrounding sensitive issues that might complicate or sabotage the course of treatment. These are individuals who have experienced violence, often by a person in a position of power or perceived position of power. Therefore, this power dynamic figures greatly into the therapeutic relationship as the "experience of betrayal of trust by someone in a position of authority is so germane to their abuse" (Beutler and Hill, 1992, p.20). As the very nature of the therapeutic relationship has a power differential implicit in its structure, recognizing and remaining vigilant to this underlying dynamic is key. This power differential requires the clinician to work through engagement in a conscious and deliberate way, to address the process challenges inherent in the therapeutic process and the therapist-client dyad.

For Kevin, this process involved a loosening of the locus of control within our initial sessions.

From a clinical perspective, I made a conscious decision to let Kevin dictate the direction and content of our initial conversations. This perspective allowed him the experience of being in control of interactions with another male, something that had become unfamiliar to him after several years of abuse. Several sessions were spent engaging Kevin in discussing what interests him; his favorite sports teams, and his challenges as a teenage boy. For the next month, that's all we talked about - football. But through these on-going football discussions, Kevin began to feel safe enough to share some his stories and what he had experienced in his fourteen years of life. I came to learn much about Kevin, about who he was, and how he viewed the world. Through this process, he came to know me as a male who was safe, an individual who would not hurt or exploit him, and as someone with whom he could identify. More importantly, he began to view me as someone he could trust, thus allowing for the development of a solid therapeutic relationship.

Did I ever tell you how my Dad left the house?

During the second month of treatment, Kevin decided to share some information regarding his relationship with his father. I was not expecting this conversation; it had been several weeks since our first meeting, and talking about his father was something that Kevin avoided. He quickly changed the direction of the conversation whenever I approached the topic.

There wasn't a time that Kevin could remember a peaceful Sunday morning. The routine was always the same, lying awake in his bedroom, looking up at his super-hero posters; he would hear the front door open. Julio, Kevin's father, would try to enter the house without making too much noise, an almost impossible feat after a night of drinking. Julio, the youngest of seven children, was a slight man, with coarse black hair and deep brown eyes. Standing five-foot-one, he had a slender build, and unassertive demeanor, preferring to remain in the background. Emigrating from Puerto Rico as a teenager, Julio never felt comfortable in his new country unless he had a bottle of rum at his side, which according to Kevin was often a daily occurrence. The turn of the key in the door was all it took to wake his mother, Lisa, from her fitful sleep. After yet another night of waiting for her husband to return home, she had little patience left for his drinking or his women.

More often than not, Kevin witnessed the violence. He remembers his father intoxicated and arguing with his mother; he remembers plates hitting walls, and his mother sobbing on the kitchen floor. He remembers bruises on arms and legs, tears on faces, and one too many trips to the emergency room. During these fights, Kevin would not leave his room. Retreating into his world of superheroes, he felt safe. Able to escape into this world of powerful figures, with their super powers, strong sense of right and wrong, and their ability to fight back, Kevin felt a sense of safety and escape that was sorely needed.

But on this particular Sunday morning that wasn't working. Kevin recognized the tone of his father's voice and knew it was coming. It wouldn't be long now. The cursing had started. He jumped up in bed as he heard the first slap across his mother's face. He felt the house shake as his mother struggled to get out of the path of Julio's drunken tirade. He tried harder to escape his reality, placing his head under the pillow. He said a prayer. Two prayers. Nothing was working. He rose from the bed. Taking a deep breath looked up at his posters and stepped out of his room and into the kitchen - right in between his parents - first with his words, then with his fist. Julio lost two teeth that day, along with his pride, and his marriage. He moved out that Sunday and life changed dramatically for Kevin and his mother.

Raising Kevin alone was a struggle for Lisa. She worked full-time as a radiology technician and over time as a mother. Lisa was the only daughter of first generation immigrants from Italy. A vibrant young woman with full brown wavy hair, she had bright blue eyes that had begun to lose some of their sparkle, a result of one too many years spent arguing with Julio. She was emotional and would break into tears frequently when discussing anything relating to Kevin. Coming from a traditional Italian background, her family was very important to her. As the oldest of three children, she maintained a close relationship with all her family members, including her father and brother, who struggled with alcoholism. Every week the family would gather together for Sunday dinner, and Lisa would make sure that she and Kevin always attended. She worked hard to ensure that Kevin maintained his relationship with his father. Though that relationship, according to Kevin, was Saturday afternoons at a fast food restaurant, either McDonald's or Burger King, and on the rare occasion, when Julio had some money, a movie. But Julio was not as consistent with his parenting obligations as he was with his drinking.

Lisa would often find Kevin waiting on the front porch for his father, who more often than not, was still sleeping off the previous nights binge. She was particularly excited when Julio's father took an interest in teaching Kevin how to fish. Kevin remembers those fishing trips with his grandfather fondly.

Kevin's grandfather, a reserved, hard-working man, had moved himself, his wife, and his seven children to New York City from Puerto Rico. It was a promise he had made to his wife the night he asked her to marry him. A reserved man, with traditional values, he took great pride in his ability to support his family, often working two or three jobs. He always found time to spend with Kevin. A church-going man, he never approved of Julio's love of women and rum, and often chastised him for his lack of consistency parenting Kevin. Kevin would often reminisce about those afternoon fishing trips with his grandfather, who had become the primary male figure in his life. He provided Kevin both stability and love, an attachment without the emotional turmoil Kevin had come to know as family life.

Several months into the fishing lessons, he developed pancreatic cancer. The cancer progressed quickly and within four months had taken his life. Kevin grieved for months after his grandfather passed away. The following spring, a cousin of Kevin's father, Manny, offered to continue the fishing trips, and Lisa agreed, thinking it was a positive interaction with a male.

As I reflected on that session, when Kevin spoke about his father, I began to recognize the importance of my relationship with Kevin. Not only was I his psychotherapist, an individual with whom he felt he trusted this information, but I had become one of the primary male figures in his life, an individual Kevin could rely on and trust with his secrets.

He made me try beer

Kevin: I never liked it but Manny always tried to get me to drink it. I took a few sips, but never more than that. It was nasty. And he used to smoke this stuff. I'm not sure what it was - but he always asked if I wanted to try it but I hated smoking - so I never did. He knew I liked to watch movies - you know - I used to go with my Dad all the time - so we would do that a lot. He (Manny) had all these movies we used to watch.

Me: What kinds of movies?

Kevin: He had lots of videos for kids - you know - like Power Rangers, Anime, Harry Potter movies... One day the Power Ranger video busted, so he put on a video that freaked me out.

Me: Which video was it?

Kevin: There was no name - it was just little kids- you know... I mean you know of kids. Like kids doing it -fooling around.

Me: Doing it?

Kevin: Yeah - you know - doing it... like... sex. It was little kids having sex.

Manny began sexually abusing Kevin. This lasted for four years.

Kevin couldn't remember how many times the abuse occurred with Manny. He did remember the scenario, one repeated over and over again. Manny lived in the basement of his parents' home. During visits to his Aunt and Uncle's home, and when Manny would "take him fishing," he would find a reason for them both to go down into his basement apartment. The ritual was always the same. They would sit on his bed and talk about the day. Manny would drink beer and smoke marijuana. He would ask Kevin if he wanted to try it. He would tell Kevin he wanted to show him something, and turn on his computer, forcing him to watch child pornography. Then he would pull down his pants down.

Placed in a powerless position by the perpetrator of the violence, stripped and objectified, their sense of control and agency gone, the act of sexual violence has profound consequences for the individual, calling into question a host of questions. As Herman (1992) states,

Traumatic events call into question basic human relationships. They breach the attachments of family, friendship, love, and community. They shatter the construction of a self that is formed and sustained in relation to others. They undermine the belief systems that give meaning to human experience. They violate the victim's faith in the natural divine order and cast the victim into a state of existential crisis. (p.51)

No longer assured of safety, the individual is called to renegotiate his relationship with the world,

with others, himself and his concept of truth. By its very nature, this upheaval shatters the sense of self, causing a rupture in the cohesive quality of the individual's narrative. The known quality of truth and reality becomes altered as sexual violence shifts perspectives, move boundaries and narrows horizons. For the male survivor of sexual violence, their perspective of the self shifts, challenging traditional concepts of masculinity. Trying to contextualize these experiences is challenging. "Male survivors face particular challenges in resolving the conflicting experience of their childhood sexual abuse histories with the tenets of masculine socialization and expectations of relational intimacy" (Kia-Keating, Grossman, Sorsoli, & Epstein, 2005, p.179).

Indeed, there is no metanarrative for male powerlessness, much less one that includes sexual victimization. The current construct of traditional American masculinity consists of power, physical strength, aggression, a sense of control, sexual prowess, mastery of one's environment, as well as a rejection of anything feminine. Gender roles reinforce these concepts, and while both the feminist and LGBTQ rights movements have shifted some gendered stereotypes the American masculine narrative remains firmly entrenched in our culture. In order to heal and move forward, male survivors of sexual violence, must somehow navigate uncharted territories and loosen the constrictive and rigid stereotypes, which have come to embody the ideals of masculinity. "Revisiting confusing, disempowering, 'feminizing' experiences may present an especially strong threat to men. Reinforcing that all children, regardless of gender, are vulnerable to victimization is an important message" (Alaggia & Millington, 2008, p.273).

Revisiting these experiences was particularly important for Kevin. As an adolescent, Kevin was at a pivotal moment in the development of his masculine identity. Influenced by popular culture, the media, and advertising, Kevin would need to challenge the images and concepts of masculinity that personified his ideas surrounding what it was to be a man. His recovery process would require him to traverse the cultural landscape of gender, as he struggled to renegotiate his masculinity as a male survivor of sexual violence. As David Lisak (2005) states, "the path to recovery winds straight through masculinity's forbidden territory: the conscious experience of those intense, overwhelming emotional states of fear, vulnerability, and helplessness" (p. 262). These

emotional states fly in the face of the traditional concepts of masculinity. Thereby presenting a complex endeavor to the male survivor who is called to deconstruct the masculine narrative and recreate a narrative that challenges the hegemonic masculinity that has become the dominant form of male expression in the American culture.

Faced with such an intense conflict between the emotional legacy of abuse and the emotionally constricting dictates of their gender socialization, male victims must find some pathway to a resolution. One pathway entails the rigid adherence to masculine gender norms, a resolution that requires the forceful suppression and repression of abuse-related emotions (Lisak, 1995).

Within the social construct of American masculinity, the male survivor of sexual violence has two responses to the disempowerment resulting from his experience of sexual violence. The male survivor begins to view life through these opposing contexts, thus causing a rupture in his perception of the world and forcing a change in his reality. West (2013) views this dichotomy from a Jungian perspective and states that there is a duality created from victimization, a schema which include an "element of being both the passive, traumatized, 'victim', as well as the aggressive, traumatizing, abuser" (p.75). Both Gartner (1999) and Lisak (1995) have shown that a significant number of abused men react by becoming hypermasculine; in other words, "over controlled, unemotional, action oriented, and abusive to others" (Kia-Keating et al, 2005, p.170). These individuals identify with anger, aggression, bullying, or other behaviors they view as powerful. The behavior allows the individual to protect himself from the overwhelming emotional states that accompany the trauma, channeling it through traditional masculine behaviors. This over compensatory adaptation allows the affected male continued identification with the male narrative, thus preserving his narrative coherence within the construct of the dominant male narrative, though does not lend itself to processing the trauma as seeking assistance and speaking of feelings is not part of this narrative.

During the initial few months of treatment, Kevin experienced several instances of aggressive behavior in school and some additional behaviors surfaced while participating in male team sports. He was assigned detention for on-going behavioral challenges with a male teacher. An active participant in after school sports, Kevin began having a difficult time with teammates, and

was often benched after not backing down from an argument or altercation. Kevin's mother, Lisa, and his school seemed perplexed by his behavior. Both were aware of his disclosure of abuse and the on-going court case, yet neither made the connection between his behavior and the struggle to integrate his experience of sexual abuse. Though Lisa was in psychotherapeutic treatment with another clinician, I met with her several times during this process in order to provide psychoeducation regarding some of the challenges that Kevin was experiencing. These meetings provided an opportunity to gain perspective on Kevin's functioning outside the therapeutic milieu while also allowing for work on the family communication and dynamics.

Six months after our initial meeting, it became evident that Kevin was beginning to withdraw from the external world. Once the outgoing and engaged teen, he started to avoid most social contact, preferring the safety of his internal world. Kevin stopped playing baseball, once his favorite sport, and his grades in school markedly declined. The impact of the sexual violence filled his daily reality with an expectation of danger and distrust. Kevin's world cloaked him in feelings of powerlessness; it was no longer a safe and wondrous place, but one wrought with fear and danger, nuanced meanings, and hidden agendas. Kevin had internalized the powerless persona, the other response to an experience of sexual violence. This internalization of powerlessness moves the male survivor away from identification with the perpetrator of the violence, and rather than externalizing his feelings of anger and betrayal, focuses them inward towards themselves. For those impacted by trauma, it is not uncommon to develop challenges with addiction or other self-medicating behaviors. Clinicians may observe behaviors such as lack of social interaction, a decrease interest in activities outside the home, and an increase in time spent alone.

During one session, almost a year after our initial meeting, Kevin came for a session visibly upset. He sat on the couch, pulling a pillow onto his lap, as he shared his experience of the weekend. The previous Saturday night he had a date with his girlfriend and decided the time was right for a kiss. I listened intently as Kevin described the immense anxiety that accompanied his decision to kiss Charlene. Sitting on a bench, at the park. Looking into her eyes. Smelling her perfume. Leaning in to kiss her. It all was going just as he planned. As his lips touched hers, he

opened his eyes. There above her left shoulder was an image of Manny.

Kevin: I couldn't move. I just sat there. Staring. I didn't know what to do. For a second I thought it was really him.

Me: What did you do?

Kevin: I didn't know what to do. I just froze. It felt like I wasn't even there anymore. Then I blinked my eyes and looked again, and again, and again.

Me: He was still there?

Kevin: Yes, he was still there and he was laughing at me - just looking and laughing. [Tears began to stream down his cheeks]. Why? Why did that have to happen? No one knows what its like. No one - just when I think that I'm OK - something like this happens. I just want to feel like a normal kid.

Me: You are a normal kid Kevin - though it might not feel like it right now.

It is not uncommon for survivors of sexual violence to experience a flashback to a traumatic scene. Often triggered by a sensory event these flashbacks create a bridge to unwanted and unwelcome memories of the trauma. Epstein writes,

Experiences of trauma become freeze-framed into an eternal present in which one remains forever trapped, or to which one is condemned to be perpetually returned through the port keys supplied by life's slings and arrows. The sense of one's own continuity, of the stretching along between past and future is collapsed by trauma (Epstein, M., 2013, Kindle Locations 2175-2178).

These flashbacks are the mind attempting to make sense of experience. It is the interaction of the implicit and the survivor's narrative. The collapse of temporality is particularly disruptive to the survivor of trauma, as it interferes with the coherence and continuity of the individual's narrative.

For the impacted male, this shattering of narrative has the effect of causing a disruption of one's sense of self in relation to the world around them. Unable to place their experience into a form,

where it can be better understood, this disruption of known reality can cause a re-experiencing of the traumatic event. Forced to relive the traumatic event not only through memory, but through somatic experience, the survivor of sexual violence struggles to place these experiences into a world in which there is no fit, no story, no narrative that can help explain away the unexplainable, creating an on-going sense of danger and instability that can interfere with one's ability to fully enjoy life.

The content of Kevin's flashback speaks to the profound effect that sexual violence has on the individual. A first kiss, for a teenager, is an important step in gaining confidence with oneself and one's sexuality. That the flashback occurred during a moment of intimacy, a moment of vulnerability when Kevin felt confident enough to lean over and kiss his girlfriend, speaks to the incongruity of the experience of sexual violence, as contextualized by the dominant narrative of masculinity. However, it also indicated that Kevin was beginning to process the trauma of his sexual abuse. As Baljon (2011) states, "posttraumatic growth also correlates with intrusions of trauma-related thoughts or images, an important characteristic of posttraumatic stress symptoms, but not with fear and depression" (p.157). Rather than viewing these instances as pathological, I chose to view them as part of the healing process and worked with Kevin to help him see them in that way. Reframing the flashbacks is a way to help regain mastery of one's experiences, allowing the individual to process them in a safe way. Something that could not have occurred for Kevin while the abuse was occurring. My work with Kevin continued for the next several months. He continued to progress with minimal intrusive thoughts and flashbacks. Lisa reported that his social interaction had increased and he was participating in more school activities. I noticed the improvement in his affect. No longer hidden under his hoodie and silent, Kevin was engaged and talkative during our sessions. That changed quickly once he received the phone call.

The prosecutor called to inform Kevin that Manny had accepted a plea bargain. In exchange for his admission of guilt, Manny would be classified as a convicted sex offender and be required to register as such for the remainder of his life. The length of the jail sentence would be decided by the judge and could range from six to twelve years in prison. Both Kevin and his mother would have the opportunity to address the court to express the impact of the crime on themselves

and their family. Lisa was adamant about sharing her perspective with the court and with Manny. Kevin wasn't sure, but agreed to at least work on writing a statement. Perhaps most impactful to Kevin, Manny would be present for the sentencing.

I keep a baseball bat under my bed

We worked on that statement for the next few sessions. It was difficult for Kevin, the thought of coming face-to-face with Manny, of challenging the narrative that had begun to settle in his mind regarding powerlessness, began to take a toll on Kevin. He started to feel like Manny was watching him, knew his thoughts, and was going to seek him out when he regained his freedom, ready to jump him, to again render him powerless.

Kevin: I couldn't sleep last night.

Me: What was going on?

Kevin: I keep thinking that he (Manny) is waiting for me.

Me: Waiting?

Kevin: It's dark outside my front door. There are lots of shadows. I think sometimes that he got out of jail and is waiting for me. That he's going to grab me.

Me: That must be really scary.

Kevin: It is - I keep a bat under my bed - and my bedroom door locked - just in case...

At times, I began to feel like we were moving backward and started to doubt the benefit of working to craft this statement with Kevin. Perhaps, reporting it to the police was enough. That alone took tremendous courage. Since that phone call from the prosecutor, Kevin seemed to regress to a younger age, becoming more careful and less independent. His affect changed. He once again began to seek the safety of his room and exhibited a diminished interest in socializing with friends. His mother became concerned and asked for a session with Kevin, and I agreed to meet with them both to discuss her concerns. The following Monday, I met with both of them, just a two weeks prior to Manny's sentencing.

Me: Kevin, your Mom wanted to meet together because she has been concerned about you.

Kevin: What? Did I do something wrong?

Me: No Kevin, you didn't do anything wrong. Mom, why don't you share with Kevin what you are feeling.

Lisa: I've been worried about you. I never want to ask you anything because I don't want to get you upset.

Kevin: What?

Lisa: You have been in your room so much and stopped playing sports and are just so quiet now. It's all my fault [beginning to cry]. It's all my fault for bringing you over there - for leaving you alone. I made you go to his house all those times - you didn't want to go.

Kevin: It's OK Mom - it wasn't your fault...

Kevin's tears began to stream down his cheeks

There are powerful moments in psychotherapeutic treatment. This moment was one of them. Lisa expressed her sorrow, and Kevin expressed his love and forgiveness. I remained silent, letting the intensity and healing of that moment speak for it. A few minutes passed, and I spoke. *It is not anyone's fault, but Manny's.*

Kevin's anxiety began to increase as the court date neared. He shared several times that he felt he would not adequately be able to express the impact that Manny had on his life. He wasn't even sure that he would want to make a statement. How will I feel? How would he be able to be in the same room again with him after two years? What even happens in court? A multitude of questions and anxieties flooded the session. I sat with him while he listed the reasons why he didn't want to do it. Why he didn't want to stand up and face this man; the man who betrayed his trust, stole his innocence and destroyed relationships within his family. I recognized the struggle in his eyes. I had seen it many times before having worked with many individuals impacted by violence. It is the existential struggle between right and wrong, good and evil, between silence and speaking up. I have witnessed the effects of this fight on those individuals who have remained silent. After so many years, that silence begins to take its toll. One can see it in the eyes, the weariness, as the weight of bearing witness without taking action starts to

take chip away at the psyche, lowering self-esteem, increasing a sense of isolation and depression, and creating challenges with love and intimacy.

As I sat there with Kevin, I recognized the immensity of this opportunity. Kevin had the ability to face the individual who had caused so much upheaval in his life, the opportunity to begin to dismantle the narrative of powerlessness that started to feel so familiar to him. I recognized the profound impact that this might have on Kevin, this young man who struggled to regain his sense of self. As his psychotherapist, I sat and bore witness to that struggle over the previous year. For a fifteen-year-old teenager, without many perspectives or experience in life, there are not many alternatives. There is no path, no narrative of healing to follow. For the male survivor, it is much easier not to stand up for yourself, to remain silent. How many times did Kevin lay in his bed, staring up at his superhero posters, silent, as his father physically abused his mother? How many times did Manny reward him for his silence? How many times did he threaten him - causing him to remain silent? The one time that Kevin spoke up, that he took action, caused his father to leave the home. The second time he did not remain silent, reporting Manny to the police, caused a rupture in his family. No, in his mind there was only one alternative - stay quiet - don't speak up - don't draw attention to yourself - don't make yourself a target. Protect yourself. I knew what to say to say to Kevin. It wasn't the textbook response or the generic; well let's weigh the alternatives. In my mind, there was only one alternative. That was to speak up.

I took a deep breath, as both anger and tears filled the room, cognizant of the dynamics at work at that moment. I was keenly aware of the innate power differential between us. Though I tried to empower Kevin, by the very nature of our client-therapist relationship, Kevin was placed in a powerless position. I had thought about this over the previous few months. How does this power differential influence the therapeutic relationship? Does it impact the therapeutic relationship in a way that can inhibit growth and healing? Despite all my efforts at minimizing the effects of these power differentials, was there any other way I could assist Kevin? I knew that this was a pivotal moment for him, a pivotal moment for us, and our work together. It was a moment that might impact his life for many years to come. Kevin there is something I want to share with you. For the next ten minutes, I shared my personal experience of sexual violence. He didn't ask details or ask why I

wanted to share that information, the walls didn't collapse around me, nor did my license fall off the wall. But I let him know that I understood his feelings and challenges, that I had felt similar sentiments. The sharing of my experience helped give him hope. In that moment of darkness, a door opened to our shared experience, to the power dynamic in that room, in that space, and within the therapeutic relationship there was a transformation. He wasn't the only one anymore, and I wasn't other. That could facilitate the work towards empowering him, to reclaiming his power. Kevin only asked one question - So, you were able to get over it. I told him I was.

The traditional psychoanalytic perspective states that disclosure in and of itself, regardless of the motivation, is a boundary violation and avoided at all costs, seen as taboo or destructive to the therapeutic process. Indeed Freud (1958) instructed clinicians to view themselves as a mirror for their clients stating, "The (therapist) should be opaque to his patients and, like a mirror, should show them nothing but what is shown to him" (p. 118), in the hopes of fostering an environment conducive to transference. However, other perspectives espouse a differing view. Within the school of humanistic psychology, "self-disclosure is both expected and desirable as a means of exhibiting congruence" (Rogers, 1961) and transparency (Jourard, 1971). Additionally, feminist empowerment therapy recognizes the value of "judicious self-disclosure in reducing the power imbalance between therapist and client" (Hanson, 2001, p.96).

For male survivors of sexual violence, these power imbalances can interfere with treatment. Already challenged with stigma and an experience of abuse that disrupts the coherence of the masculine narrative, these individuals are sensitized to their perceptions of powerlessness. Clinicians should be mindful that these dynamics greatly impact the therapeutic relationship with individuals such as Kevin, who have experienced powerlessness and are struggling to renegotiate their view of the world. The corrective emotional experience with the therapist will involve acknowledging, addressing, and re-visiting these dynamics throughout the course of treatment. If a therapist is untrained, or unaware of these dynamics, the probability is greater that there will be a rupture in the therapeutic relationship. This breakdown may lead to a re-traumatization of the client due to a re-enactment of the dynamics of the abuse.

As previously noted, the configuration of the clinician-client dyad, in and of itself, has an inherent power differential within its configuration. "Therapists must always assume that they are participating in domains of power and knowledge and are often involved in questions of social control. On this view, therapists must work to demystify and unmask the hidden power relations implicated in their techniques and practices" (Besley, 2002, p.134). My decision to disclose my personal experience of sexual violence was necessary on a variety of levels. Beyond the opposition of varying perspectives, I consciously made a clinical decision to address the power dynamics within our relationship, though my reflexive use of self. Hartman (2006) writes,

Disclosure is not a choice. It lurks in the co-construction of experience to be formulated and interpreted. It is interpreted through itself. By formulating an experience, one discloses that which has already been (in some unformulated way) disclosed. To disclose does not mean to tell but, rather, to open. The unconscious is not made conscious as interpreted by an expert on mental structure. The emphasis is not on mental structure but on mental structuring. (p.281)

Kevin may have already known implicitly, that we shared this experience. Kevin had formulated inferences and judgments based both on his peripheral knowledge of clinical skills and online identity, as well as his experience of our relationship. He based this on the reference books in my office, the depth of my knowledge, my level of empathy, as well as what he interpreted from googling my name online.

Whether a therapist discloses or refrains from disclosure they are making a statement. Indeed, the influence of the therapist does not disappear by failing to acknowledge or choosing not to speak, or by renaming it something else. My choice was to either continue to perpetuate the power dynamic within the therapist-client dyad or thoughtfully and mindfully intervene in a way that transformed those dynamics. My intention was to bring into the conversation, that which had been co-constructed both consciously and unconsciously. Thus, allowing for a restructuring of the therapeutic relationship. One based on a more egalitarian foundation, aimed towards demystifying the person of the therapist and allowing Kevin to experience therapy as an

interchange between two males rather than between expert and patient. Gillon (2008) views men as actively constructing the meanings of masculinity on a moment by moment basis, and suggests that psychotherapy can be viewed as a political act, a pathway for creating new masculinities that challenges the oppressive effects resulting from the dominant forms of masculinity. Kia-Keating (2005) writes,

Therapists can take on the role of helping men to see their experiences in the context of traditional expectations of masculinity, to critically assess gender roles, and to learn how to reformulate traditional codes based on their own provisions. It is important for therapists to acknowledge and support the process of gender deconstruction, with the understanding that it is necessary to inform the process of amending patterns of abuse and violence. (p.183)

Indeed, the creation of meaning is a dialectical process, one that Kevin and I had entered into through our psychotherapeutic work together. Through this process, Kevin was able to begin to change his perspectives and masculinity, thereby challenging his masculine narrative. It is my belief that reconstructing a new masculine narrative is particularly important for male survivors of sexual violence. That moment in treatment, when I made the decision to share my experience of abuse, was the beginning of that reconstruction for Kevin. It presented him with a template, allowing for the development of a new masculine narrative, one that included his abuse experience.

The following week was the last session prior to Manny's sentencing. Kevin, while nervous, had decided to attend the sentencing with his family. We had worked together on the victim impact statement that he would read use as a consideration when the judge sentenced Manny.

Kevin: I'm nervous about seeing him - it's been almost two years. He won't be close to me will he?

Me: No. He will be behind a railing, to the left of the judge. There will be two police officers with him.

Kevin: I'm worried about my Mom - she's been crying for the past few days.

Me: Well, she's worried about you and concerned about what will happen today.

Kevin: I think I can handle it better than she can. She has a hard time talking about it.

Kevin: Can I ask you something?

Me: Sure Kevin - what would you like to know?

Kevin: Did you ever go to court when this happened to you?

Me: I didn't. I wasn't able to talk about the abuse until I was much older, so I did not have the opportunity to go to court or go to the police.

Kevin: Could I ask you one more thing?

Me: Sure.

Kevin: Would you come with me to court on Tuesday? You have been there with me through all of this and it would seem weird if you weren't there for this.

A week later, I found myself sitting there in court, as Kevin stood and moved towards the microphone. The court was silent as he stared down at the paper in his hands. It seemed as if he was frozen, unable to talk, to move, and unable to speak. He was waiting for the words to jump magically off that crumpled loose-leaf page and into his mouth. Then he inhaled; taking a deep breath that seemed to break the moment, as he looked towards me. I exhaled and nodded as he cleared his throat and began to speak.

Kevin: Thank you, your honor, for this opportunity to speak. This is what I want to say to the court. The reason that I told my Mom, and then said I would go to the police is because I saw Manny look at my little cousin Mary in a funny way. The same way that he used to look at me. I couldn't stand the thought of him doing things to her like he did to me and my other cousins. I want to ask you to give him the most time in jail that you can, so that he can't ever hurt anyone again. What he did to me has hurt me in many ways. I was afraid at night, my Mom cries all the time, I stopped hanging out with my friends and just stay home, and I even quit baseball. Please do whatever

you can so that no one else ever has to go through what I have.

Kevin and I have continued to work together these past four years. He no longer wears a hoodie over his head or fails to shave for two weeks. He isn't afraid to go out of the house, nor is he afraid of Manny. After a lower than expected score on his Scholastic Aptitude Test (SAT), he found himself a tutor and retook the exam, scoring 400 points higher than his original test score. Perhaps, even more indicative of his progress in treatment, Kevin incorporated his experience with sexual violence into his admission essay for college. Kevin now speaks of the future and a career. Through his hard work, he has been able to begin to live again, learning to place his experience of sexual abuse within the context of his life and not as the defining moment of his life.

For males, such as Kevin, who have experienced sexual violence, the disruption of masculine narrative coherence is profound. Feelings of powerlessness and isolation challenge the construction of the post-traumatic masculine identity. Masculinity, abuse, and seeking help are interrelated in complex ways. There is a dichotomy between the masculine narrative and the victim narrative. Working with male clients to recognize this dissonance and challenge the traditional views on masculinity is paramount to the success of treatment with these individuals. The importance and impact of the therapeutic relationship cannot be underestimated. The therapeutic use of self, as well as the sharing of my narrative of trauma and healing, provided Kevin with an example of a cohesive masculine narrative that included trauma, masculinity, and healing. Thereby, providing a template, which allowed him to begin to reconstruct his identity in a way that engendered posttraumatic growth.

As psychotherapy moves into the new millennium the continued impact of technology on the human experience calls for novel perspectives addressing the effects of these challenges of the human psyche. Whether the psychotherapist is challenging the masculine narrative of sexual victimization or the narrative of self-disclosure within the psychotherapeutic milieu, both the therapeutic process and the content of the conversation are changing in profound ways. Psychotherapists need to recognize these shifts have challenged the dominant discourse and look for ways that confront these assumptions and allow for the expansion of ideology in ways that expand horizons. As psychotherapists, we must

continue to work with clients in novel ways. We must challenge ourselves, and our profession, to find new ways to connect with clients. This requires a self-reflexivity that challenges the status quo and looks towards the emergent themes embedded within our culture.

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