Recovering from Childhood Abuse

Sarah Kelly and Jonathan Bird

This book is written by survivors for all survivors who experienced any form of abuse or neglect in childhood and for those who provide support.
Dedication

To all the brave survivors and their supporters who have helped us learn what works in recovering from childhood abuse.

In memory of those people who could not find the support they needed to survive as adults and tragically took their own lives.

All happy families are alike; each unhappy family is unhappy in its own way.

Leo Tolstoy, *Anna Karenina*

People are not disturbed by things, but by the view they take of them.

Epictetus, first century AD

Thanks to BIG Lottery and all our other generous funders and donors who have made NAPAC’s work and this book possible. Grateful thanks also go to Peter Saunders, Helen Munt, Julie Brock, Kathryn Livingston and Melanie Goodwin of First Person Plural, and Tracey Storey of Irwin Mitchell, who have all contributed to the writing of this book. Proof reading and layout were kindly donated by James Badenoch QC, Ann Watkins and Katie John, and our thanks go to them for their time and efforts.
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>About the authors</td>
<td>4</td>
</tr>
<tr>
<td>Foreword – Tim Lambert</td>
<td>5</td>
</tr>
<tr>
<td>Introduction</td>
<td>6</td>
</tr>
<tr>
<td>Chapter 1: What is abuse?</td>
<td>9</td>
</tr>
<tr>
<td>Chapter 2: Maladaptive coping strategies</td>
<td>25</td>
</tr>
<tr>
<td>Chapter 3: Mental health</td>
<td>32</td>
</tr>
<tr>
<td>Chapter 4: Dissociative spectrum – Katherine and Melanie of FPP</td>
<td>41</td>
</tr>
<tr>
<td>Chapter 5: Impacts</td>
<td>49</td>
</tr>
<tr>
<td>Chapter 6: Therapy and appropriate coping mechanisms</td>
<td>56</td>
</tr>
<tr>
<td>Chapter 7: Transfer of responsibility</td>
<td>67</td>
</tr>
<tr>
<td>Chapter 8: How to disclose and how to hear disclosure</td>
<td>80</td>
</tr>
<tr>
<td>Chapter 9: The legal process – Tracey Storey, solicitor, Irwin Mitchell</td>
<td>86</td>
</tr>
<tr>
<td>Conclusions</td>
<td>96</td>
</tr>
<tr>
<td>Bibliography</td>
<td>98</td>
</tr>
<tr>
<td>Useful contacts</td>
<td>99</td>
</tr>
</tbody>
</table>
Sarah Kelly is a survivor of childhood emotional and sexual abuse. She was abused from infancy to age 17 by close family members and their friends. She has undertaken many years of therapy to address the emotional and physical legacy the abuse has left her with. Sarah has been working with adult survivors of childhood abuse since 1997 in a variety of work settings. She has been working with NAPAC since 2002 in various roles and currently is the Training and Development Manager for the charity.

Sarah trained as a Person-Centred counsellor and uses Person-Centred principles in the work she undertakes for NAPAC. She is also actively involved in raising awareness with professionals about childhood abuse and the impacts of this in adulthood. She firmly believes that with good understanding and support, adult survivors can heal from their childhood trauma and live fulfilling lives. By raising awareness of childhood abuse within society, Sarah hopes that more people will be involved in keeping children safe from a crime which devastates so many lives.

Jonathan Bird was brought up in Hampshire and has been living in West London for thirty years. He has been involved in NAPAC since 1999 and was Treasurer from 2001 to 2003. He was elected as Chair of Trustees in May 2005 and retired from this role in September 2011 to take up a staff position as Operations Manager.

He was abused by several men during childhood and has spent many years in therapy and participating in support groups. He knows from personal experience how important it is to have the support of people who understand as we go through the process of recovery.

Jonathan completed a PhD in international environmental politics in 1993, which, with the benefit of hindsight, he can now see as either a constructive coping mechanism or a way of avoiding therapy. Eventually years and thousands of pounds spent in therapy did make his nightmares stop and he then trained as a teacher and worked in secondary education for ten years. In his spare time, Jonathan enjoys cycling and sailing and keeps a small boat on the Solent.
The title of this book is perhaps its most important phrase. It is important because it conveys the fundamental message that survivors of childhood abuse can expect to recover, that they have within themselves the ability to do so.

The book, written by two survivors of childhood abuse, is derived from the personal experiences and journeys of its authors and what they have learned, personally and through their work. It is directed particularly to others who have experienced abuse and is a powerful reminder that although each individual’s experience is their own, they are nonetheless not alone. Recognising this may itself be one of the elements that can promote healing. It should also be read by those who in their professional lives have any involvement in the care or treatment of people who, as a result of their childhood trauma, experience as adults psychological and mental health problems.

Recovery is itself a crucial term, with several key aspects; recovery of something stolen or lost, recovery from injury, regaining possession or control, returning to health, and others. All of these are applicable. The book has, throughout, the themes of hope and of hopefulness, of building on the inherent capabilities, qualities, strength and resilience of survivors of abuse that remain their own, in spite of what they may have experienced. People may be inclined to 'define' others by single issues, such as being survivors of abuse, or of domestic violence, or having a disability or mental ill health. Survivors may sometimes get drawn into defining themselves similarly. It should be remembered that, whilst this experience is an important, crucial aspect of the individual person, it is not their entirety. They are men and women, artists, librarians, doctors, drivers, lovers, spouses, parents, who have lives to lead, contributions to make and other experiences to encounter.

Survivors of any abuse in childhood have the right, and often express their need, to be heard, and for their experiences to be acknowledged, however long ago the abuse may have happened. NAPAC is an organisation that provides for this, and offers other support and information.

This book is a timely one. The media has daily reports of abuse of children by individuals, and of the active or passive collusion of others, or of organisations, that has allowed the abuse to happen, and of the damage that this inflicts. There is less about the capability of survivors of abuse and of their potential, particularly when allied to the right support, at the right time, to recover.

Tim Lambert, FRCPsych, Consultant Psychiatrist and NAPAC Professional Advisory Panel member
March 2014
Introduction

Children have very intense needs which are both physical and emotional. We have all seen children cry in desperation when their needs are not met, and some of us can remember those feelings. The distress children can show may seem petty from an adult point of view, but for the child the distress is very real. Children are dependent on adults for their survival and need to be able to develop a secure relationship with their carers to feel that their needs will be met. Those needs cannot always be met immediately by the carer, but if a child feels that their needs will be met soon enough they will grow up with a belief that the world is basically a safe place.

Not every child is lucky enough to have such a safe and nurturing environment. This book is for those who were not so lucky in childhood and for others who give support, either personally or professionally. We now understand much better the importance of early years and child development. We do not stop learning when we reach adulthood. Learning is a life-long process. The things we learn and the way we see ourselves in the world are greatly influenced by our childhood experiences. But it is never too late to learn new ways of understanding ourselves.

Children who have been abused or neglected can be left with long-lasting psychological impacts which can seem like unchangeable personal characteristics. Not every person who suffered extreme childhood abuse will develop mental health problems, but many do. Some of these mental health issues can be addressed and changed with hard work and support. Some physical wounds cannot be changed but we can all find new ways of coping with adversity.

All child abuse is bad and there is never any excuse if an adult is doing it. One isolated incident may have negative long-term consequences if the child is not supported afterwards. If there is a safe home environment for the child, however, she or he may be able to cope with many experiences of cruelty and not be greatly affected in the long term. Each person is an individual with unique experiences and a complex set of circumstances. We are all different.

Today it is a crime in Britain for an adult to hurt a child in a way that leaves a visible mark, but this has not always been the case. Decades ago children were routinely beaten and ‘disciplined’ in many other cruel ways. Most modern societies have also recognised how the sexual abuse of children is a very serious crime with damaging long-term consequences. And yet we know that many young
people are still being hurt deliberately by adults today, as described in many NSPCC reports (see bibliography).

At NAPAC we hear from adults of all ages and backgrounds who are struggling to cope with these long-term consequences. Our oldest caller was a 98-year-old woman who described being sexually abused in the 1920s; she was very clear in her description and wanted to talk about it for the first time in her life. It is never too late to deal with this kind of emotional and psychological pain.

Some people just need to have their experiences heard and validated – to be believed. Others have grown up with an inability to trust other people, especially in intimate relationships, and need time and support to learn to trust again. Childhood abuse can lead to a person feeling dirty and worthless, and low self-esteem is one of the symptoms we hear about most frequently.

We use some terms in the book which have been challenged in the past, such as the word ‘survivor’. Some people who were abused would rather be thought of as a ‘thriver’ who has managed to move on and leave all the pain behind. Many people dislike being called a ‘victim’, but we recognise that in a legal context this is the word that has to be used, even if many years have passed since the crime took place. A survivor is someone who has managed to get through something which could have caused severe damage or death. NAPAC is part of an increasingly global movement to improve understanding of this healing process. In this movement the word ‘survivor’ is widely used, and we have chosen to use it too. We were victimised during childhood, but we are not victims as adults today.

For many former victims it has been hard to talk about their childhood experiences because often people find it hard to hear or to believe. However, public understanding of the problem grew during 2013 when more and more cases of celebrity abusers came to light. Some people in society who previously closed their eyes to the problem can no longer ignore it and brush it under the carpet. Better policies and procedures are in place in the criminal justice system, but there are still some officials and journalists holding on to old stereotypes. We still hear the unfounded assumption that most complaints are from people who make up stories just to get compensation or to get an innocent person into trouble. We know this does happen, but we also know that it is very rare compared to the total number of children who are abused. The Crown Prosecution Service issued guidance in 2013 requiring investigators to focus on the credibility of the allegation rather than the credibility of the complainant. This is major progress, but it may take time for attitudes to change at the front line of investigations into these appalling crimes.
We understand that for many people the sheer horror of the content of our accounts is too much to hear. This is a very genuine and honest response. It should be hard to hear about such terror deliberately inflicted on children. But it is important that our stories are heard because the secrecy and silence that have prevailed for decades makes it easier for abusers to get away with their crimes today. And yet there are still influential people who refuse to accept the endemic nature of the problem in the UK and globally. We believe there have always been abusers in every culture throughout history. We also know that compared to many other countries the UK has made good progress in addressing the problem. But there is still very little support in place for adults who were abused as children, and that has to change.

This book is intended to be easy to read and is for individual survivors, their partners and supporters, and for professionals in mental health and caring fields. We have not included footnotes or detailed references to the literature, but there is a bibliography at the end. It is very hard to put a figure on the amount of abuse that is perpetrated against children, but we refer to peer-reviewed papers and research from respected organisations like the NSPCC.
Chapter 1: What is abuse?

The NAPAC Support Line has been in place for over ten years and we have heard from many thousands of survivors seeking support. NAPAC was set up by survivors for survivors. We have been through it. From more than ten years of experience and by keeping informed about research and best practice we have learned what works and what does not work. Here are some of the most common questions we hear.

What do you actually do?
What is a survivor?
Why do I feel like it was my fault?
What is child abuse?
Why is there not enough support for survivors?
What makes somebody abuse children?
Does the fact that I was abused mean that I am now a danger to children?
Can I ever heal the pain/anger/sadness I feel all the time?
Will it ever stop?

Many of us were quite surprised when we were told we were survivors. We did not feel like survivors. Instead we felt like failures and good-for-nothings. We felt low and we were hurting. We had some good days but we had a whole lot of bad days. Mostly we put on a brave face and got on with life as best we could. This is what the child had to learn to do.

There are many different types of child abuse, and it exists on a huge scale. The truth is that childhood abuse has many devastating effects. Being survivors does not mean that we have to have everything sorted out. Being survivors means we have recognised that we have been through something that should never have happened and we now want to let our wounds heal. If you were abused in any way as a child then you have the right to call yourself a survivor.

All abuse is serious and fits into a number of categories, which include:

- Physical
- Sexual
- Organised or ritual
- Emotional or psychological
- Neglect
Physical abuse

Physical abuse involves contact intended to cause feelings of intimidation, pain, injury, or other physical suffering or harm.

Under Section 58 of the Children Act 2004, it is unlawful for a parent or caregiver to smack their child, except where this amounts to "reasonable punishment", though this is not defined in the legislation. So whether a smack amounts to reasonable punishment will depend on the circumstances of each case, taking into consideration factors like the age of the child and the nature of the smack. Physical punishment will be considered "unreasonable" if it leaves a mark on the child or if the child is hit with an implement such as a cane or a belt.

It is illegal for teachers, nursery workers and child care workers to smack another person’s child. If a person is employed privately by a parent, such as a baby sitter or nanny, the parent may give permission for that person to smack their child as long as it is reasonable and does not amount to an offence.

Physical abuse can include:

- Hitting (with or without an implement)
- Punching or kicking
- Slapping
- Biting
- Shaking
- Throwing or knocking down
- Beating up
- Choking or smothering
- Poisoning
- Drowning
- Giving a child harmful drugs or alcohol
- Burning or scalding on purpose.

Sexual abuse

Childhood sexual abuse occurs when a child or young person is pressurised, forced or tricked into taking part in any kind of sexual activity by an adult or another child. This type of abuse involves contact or non-contact activities and can include:

- Inappropriate kissing
- Touching a child’s genitals or breasts
- Encouraging a child to touch another’s genitals or breasts
- Vaginal or anal intercourse
- Oral sex
- Explicit sexual talk
- Exposing sexual organs to the child
- Showing pornography
- Lack of privacy to bath or undress

Copyright © NAPAC 2014
• Watching a child or children engage in sexual activities or encouraging them to do so
• Taking sexually explicit photographs or filmed footage of children.

Incest is sexual activity between close family members, e.g. parents, siblings, step-siblings, grandparents, aunts, uncles, etc. Sometimes adults within families have consensual incestuous relationships; but when a child is involved, this would constitute sexual abuse.

**Emotional abuse**
Emotional abuse, also referred to as psychological abuse, is an abuse of the mind. Some children are subjected to psychologically harmful behaviours which can cause them to lose confidence and their sense of self-worth.

It can involve wilfully inflicting emotional anguish by threat, humiliation, insult or other non-verbal contact such as deliberately ignoring a child. However, emotional abuse may be inflicted unintentionally, for example by telling a child that they were unplanned or a mistake, and yet cause the same emotional harm.

Emotional abuse encompasses all forms of childhood abuse because it involves the betrayal of trust by the abuser. A child who is physically, sexually or neglectfully abused is almost certain to suffer some level of psychological effect as well.

Some survivors contacting NAPAC struggle to articulate the emotional abuse they suffered as children, because it is often more subtle and less tangible than physical or sexual abuse. There is a saying, “sticks and stones will break your bones but words will never hurt you”. It is the emotional damage left from the abuse we suffered in childhood which is often the hardest aspect of our recovery.

Continually ridiculing or making fun of a child will hinder the development of self-esteem, as will expecting a child to be able to behave like an adult.

Emotional abuse can include:

• Making threats to the child
• Name calling
• Giving a child the silent treatment or ignoring them
• Public or private ridicule or humiliation
• Withholding love and affection
• Constantly putting down the child and making them feel worthless
• Frightening and intimidating a child
• Giving conflicting or inconsistent messages
• Treating a child differently from siblings
• Having unrealistic expectations of a child’s ability or level of development
• Caregivers becoming emotionally unavailable because of drug or alcohol misuse
• A child witnessing domestic violence.

**Ritual or organised abuse**

We define ritual abuse as being when one or more children are abused in a highly organised way, by a group of people. This group may subscribe to a belief system which, for them, justifies their actions towards that child. Some ritual abuse may be perpetrated by criminal groups who use masks and disguises to hide their identity and to frighten the children in order to keep them silent. This can involve whole families and may have been practised as a ‘religion’ or a way of life for many years. In the 1980s in Cleveland and Orkney allegations of this kind of crime were investigated but dismissed. There were many people who found it hard to believe, and some described it all as being ‘Satanic panic’. More recently police have had some success in securing convictions for crimes of this nature, for example in Kidwelly, North Wales, in March 2011. At NAPAC we regularly hear from survivors of prolonged torture, and some now live with the most severe consequences of mental health trauma, such as Dissociative Identity Disorder (DID). Such people do not always make good witnesses, which is partly why the crimes are so hard to prove.

Criminal gangs may also procure children to be abused by gang members and by paying ‘customers’. We have seen several examples recently in Rochdale, Oxford and Peterborough. Although the media coverage of these hideous crimes has often focused on the racial background of gang members it should be noted that it has, in past cases, often been people of white British heritage who are prepared to pay to abuse children. We know this from the testimonies we have heard from survivors of organised and ritual abuse.

Although survivors speak of differing experiences, many elements are common.

- Elaborate rituals, ‘games’, ‘set ups’ and ‘ceremonies’
- Use of inverted crosses, candles, masks, cloaks, dressing up, etc
- Systematic emotional, physical and sexual abuse
- Photographing or filming of the abuse
- Being used in prostitution
- Being forced to take drugs and/or alcohol
- Being tortured, sometimes to the point of death (allegedly)
- Being forced to participate in the abuse of others, coercing the child into believing they are equally culpable
- The use of mind control such as being put to sleep, drugged or being told a bomb or a listening device has been inserted into them so the abusers would know if the child told anyone
- Sacrifice – animal and even human (allegedly).
Neglect

Neglect happens when the responsible adult fails to provide adequately for the needs of a child. Neglect may be deliberate and conscious cruelty or it may be an inability or unwillingness to care for and nurture a child. It can happen in many different settings, in the home or in institutions. Poverty can be an explanation but never an excuse. Children need to be able to develop a secure and safe attachment to their carer, and poverty need not stop this from happening.

Neglect can take place in different forms including physical, emotional, educational or medical. Here are some examples.

- Failure to provide adequate food, clothing, shelter, hygiene or supervision.
- Failure to satisfy a child’s normal emotional needs or displaying behaviour that damages a child’s normal emotional and psychological development. For example, a caregiver using drugs or alcohol and not being emotionally available for the child, or a child being left to play computer games constantly and not interacting with other children or adults.
- Failing to see that a child receives proper schooling (either persistent truancy not being addressed or a child being denied an education).
- Failing to seek medical care for the child when appropriate, including routine dental care.

Some myths about child abuse

Given that these types of abuse happen to countless children on a daily basis within the UK, and given that most of those children survive into adulthood ... a question that frequently arises is why is there so little support for abuse survivors?

There is not enough support for adult survivors of childhood abuse partly because it costs money, and partly because provision of support for survivors would be a tacit admission of failure. Yet we know that we have failed children as a society and we continue to fail them. We should never forget that the perpetrators of abuse are responsible for that abuse. It is a widespread social problem that needs to be tackled far more seriously than it is currently.

Child abuse is usually perpetrated behind closed doors and perpetuated using fear, silence, isolation, embarrassment, shame and guilt. People who are abused will often not speak about it for many years. At NAPAC we hear first disclosures mostly from people in their late 30s or 40s, but many are much older. We believe many people never speak about it, but recently this has started to change.
as more and more people feel they will be believed. This, in itself, makes it harder for abusers to get away with hurting children today. Less secrecy means less child abuse.

Nobody really knows why people abuse children, and certainly more research is needed to look at the causes. But one thing we do know is that there have always been some people in every culture who have a propensity to hurt others. Some abusers are genuine paedophiles in that they are sexually attracted to young children, some get a perverted reward from hurting vulnerable people, and some are repeating patterns of behaviour learned in their own childhoods. We believe such people need help to change their behaviours, but also that they will not do so until they can understand that what they do is a terrible crime. That help would have to be in place for as long as they live. They would have to be watched closely wherever they are to ensure no relapse into offending behaviour.

**Children are an easy target and abuse is always a choice made by the abuser.**

In order to justify this choice they come up with all sorts of nonsense. For example:

“They need to hear negative things to toughen them up”

“They need to learn to defend themselves”

“In other countries girls are married at 13 and have babies”

“They deserved it, without proper discipline children get out of control”

“I’m expressing love”

“I am preparing them for sexual relationships when they are older”.

**This is all nonsense.**

Abuse is about the misuse of power and control in relationships and it can take many forms. Children are less powerful than adults.

**Abusers always make a choice when it comes to abusing children.**

**It is a myth that all those children who were abused will become abusers in adulthood.**

This myth is often peddled by abusers and by their legal defence teams. “This poor chap was abused himself when he was a child so of course he could not help it”. Yes, he (or she) could certainly have helped it by simply choosing not to hurt children. Survivors can find themselves worrying that they are destined to hurt children because of what happened to them, especially male survivors. This may be enough to stop them from seeking the support they need and deserve. A little simple logic
proves the myth to be untrue. We know that many abusers do not just abuse one child. They abuse as many children as they think they can get away with. We can also assume that there have been abusers in every culture throughout human history. If every one of those abused children became an adult who went on to abuse several children, there would be no one alive in the world today who had not been abused as a child, even allowing for the massive seven times increase in global population over the last 200 years.

There is never any excuse for child abuse, and the overwhelming majority of people who were abused as children could never go on to abuse other children. This is another particularly damaging myth for male survivors as some people believe that it is only ever men who abuse children. We have heard from many men who have kept themselves away from children as they have felt this myth was real and they would automatically become abusers. NAPAC has heard from older survivors who told us they never hugged their children or grand-children because they were worried that they might harm them.

These are tragic situations which should never have occurred. Let us reiterate: it is a myth that if you were sexually abused in childhood you will automatically go on to abuse a child in your adult life. However, it is true that a very small minority of sexually abused children grow up to be sexual abusers of children themselves. It is also true that survivors of sexual abuse can grow into very angry adults, which should not really be a surprise. Mostly, we see that this anger tends to be turned against the self in many self-destructive ways. Some survivors of sexual abuse can become violent adults or adolescents, however.

Some people who have suffered physical or emotional abuse or neglect may grow up to pass on these damaging behaviours if they become parents. Such patterns or ‘learned behaviours’ may be all they have ever seen, so good parenting may never have been modelled for them. We also hear the view expressed that “it never did me any harm”, or that children need to “be made tough to cope with the real world”.

Abuse is complex; it takes many different forms and manifestations. It is hard to generalise, but there are some common themes.

Often male survivors find it hard to see themselves as being victims or in any way ‘weak’. We say to these survivors that showing vulnerability is actually a sign of inner strength.

Both male and female survivors may have difficulty in trusting and allowing emotional closeness or intimacy. This may also lead to a conscious decision never to have children of their own. This might
be because they feel they could not make a good enough job of parenting or just that they believe that whatever they do as parents it may all go horribly wrong anyway.

A whole range of inappropriate assumptions can be made about survivors of sexual abuse and subsequent sexuality and sexual orientation. Some argue that sexual orientation is innately fixed by genetics; some argue that it can be influenced by the environmental circumstances. Again, we do not accept that it is possible to generalise on this complex question. We have heard from women who were abused by men and who feel they will never be able to trust men. Some male survivors of abuse by men can only ever be intimate with women. For some male survivors of abuse by men the opposite is true. There can be a concern voiced by survivors that because their body was aroused by the touch of an abuser then that must mean that their sexual orientation as an adult must be towards the same sex/gender as the person who touched them inappropriately as a child. None of this is necessarily true. The human body naturally responds to touch, whether in adulthood or childhood.

It is important for us to remember these facts about survivors.

- Survivors are strong because they have got through something really awful.
- Survivors can be whole again because there are people who care.
- Survivors have stamina and determination because they have made it this far.
- Survivors are courageous because they are raising their voice against abusers.
- Survivors are compassionate because they know the importance of being loving.
- Survivors are extraordinary because they have survived.
- Survivors can be anyone they want to be because they have options.
- Survivors can make a difference to the world because they have willpower and strength.
- Survivors can take back control of their lives because it is their right.

We have also been asked the following questions on many occasions and thought it may be useful to share them here.

Can I call it abuse?
It wasn’t sexual abuse ... It wasn’t rape so I’m not sure if it counts as abuse ...
Why is most of the support only for survivors of sexual abuse?
What about the rest of us who were abused in other ways?
It only happened the one time and it wasn’t really serious – so why do I feel so bad?
Others have been abused far worse than me ... I was one of the lucky ones really ...
Maybe they didn’t mean to do it ...
Maybe they couldn’t help it ...
Do females abuse as well as males?

Abuse is something which causes significant harm. A dictionary definition is *improper usage or treatment, especially regular or repeated*. In the USA it is referred to as maltreatment. Abuse can
happen wherever respect is absent; it can be deliberate or just thoughtless. So if you are still struggling with what happened to you and if the memories of what happened still bring you pain or distress, then you can say you were abused.

It does not have to be sexual abuse for you to call it abuse and for you to get support. The media tend to focus on sexual abuse and, sometimes, physical abuse or extreme neglect. At NAPAC we know that sexual abuse is a massive problem – but we also know it’s not the only problem. We know from experience that other forms of abuse (physical, ritual, emotional and neglect) are also very damaging to the individual. It is often the emotional component of any type of abuse which does the long-term psychological damage.

This is why NAPAC is dedicated to supporting survivors of all types of abuse – not just sexual abuse.

There are still pitifully few resources in the UK for survivors of childhood abuse. Most of the support that is available is for survivors of sexual abuse. Attention is frequently diverted away from the other forms of abuse which we know still exist and are just as harmful. There has only recently been some recognition in government of the importance of treating mental health issues generally with the same seriousness as physical health.

Society has not yet seen the significance of other types of abuse. This needs to change. People have been suffering emotional turmoil in isolation for far too long.

With many types of abuse there is no physical evidence. The emotional impacts of abuse are not easy to heal partly because they are not visible. People are only likely to talk about the emotional impacts of abuse if they believe that support is available. But support is not available because people are not talking about it, so perpetually concealing the need. People who talk about the long-term emotional impacts are sometimes accused of wallowing in self-pity. We believe this is the complete opposite of self-pity. It takes great bravery to show vulnerability and to seek support in emotional healing and recovery.

It does not have to be rape for you to call it sexual abuse and for you to get support. There are many ways in which children are sexually abused; being forced to watch pornographic films or being spoken to in a sexual way are examples of non-contact sexual abuse.

It doesn’t have to have happened more than once for you to call it abuse and for you to get support. There is no minimum requirement of the number of times abuse occurs for you to be allowed to call it abuse. Once is too much.
At NAPAC we hear from people who have been abused on a single occasion and are struggling to cope. We hear from other people who have been abused many times throughout their childhood who seem to be finding things easier to handle. Individual resilience varies enormously. It seems that if an abused child is supported appropriately and cared for quickly the long-term consequences may be less severe.

**There is no hierarchy of abuse. There is no grading of what was better or what was worse. Pain is pain.**

All abuse is bad whether it happened once or whether it happened a thousand times – it can leave you feeling equally bad and in need of support. There will always be someone out there who seems to be worse off in life than ourselves. We all have a tendency to say that what happened to us was insignificant when compared to the experiences of others. We should try not to think like this because diminishing our own experience of abuse really only serves to play into the hands of abusers.

*All abuse is bad.*

*We should not minimise what happened to us.*

*We should not overstate what happened to us.*

*We should just state the reality – the reality that it was very bad.*

*It should not have happened.*

*It has had devastating consequences and we have a right to move on.*

What happened to you was bad enough for you to deserve support and **you** are worth receiving that support.

Both males and females can be abused and both males and females can be abusers.

- Males abuse males
- Males abuse females
- Females abuse males
- Females abuse females
- Adults abuse children
- Children abuse children
- Powerful people abuse vulnerable people.

**It is all abuse.**

The fact that females also abuse can come as a big shock to some people. Women are traditionally seen as the caring, nurturing gender. Women are seen as the people who bring children into the world and look after them. Unfortunately we know from experience that sometimes females abuse.
It can be hard for a survivor to disclose that they have been abused by a female because of the misconception that abusers are always male.

But we feel it is important to address another common misconception about the way some parents see themselves. It is only a small minority of parents who deliberately or unconsciously hurt children, although it may be impossible to say exactly how many. But some parents describe feeling very guilty about relatively minor lapses or omissions in caring, while others seem unable to see how very serious shortcomings can be damaging to a child’s development. As Donald Winnicott put it in 1973, “an ordinary devoted mother ... is a good-enough mother” (and we should add that this can equally be said of fathers). Parents, and especially single mums, are often unfairly criticised in the media and by other parents. As survivors of extreme cruelty know only too well, all children really need is security and love. A caring single parent is preferable to a two-parent family where care is absent.

There are also misconceptions that females cannot rape males, which is how the UK law now stands. Women can forcibly penetrate another person’s body with an object; in the UK this is called serious sexual assault. The human body responds to touch or sexual stimulation even in an abusive setting, and female abusers can use this bodily response in order to sexually abuse a boy. They can manipulate and confuse the boy by saying that because he had an erection that means he enjoyed and consented to the abuse. Society seems to view male and female abusers differently. For example, if a teenage boy is sexually abused by an adult female, some may describe the boy as being ‘lucky’ to have an older and experienced woman to teach him about sex. When this is reversed, however, and it is a teenage girl and adult male, there is, quite rightly, outrage and calls for the man to be punished. Slowly it seems signs are starting to appear that these sexist attitudes are changing.

So far we have been talking about abusers being adults who abuse children. However, it is important to note that many children are abused by another child, often older than themselves but always in a more powerful position. Child abuse is the misuse of power and control, and children can misuse this power as much as any adult abuser. NAPAC hears regularly from survivors who were abused by another child, most often a sibling but also cousins and friends.

People who abuse children always make a choice to do so, and that choice is never justifiable. Even if an abuser had suffered horrific childhood abuse themselves, it is never an excuse for them to pass that on.
People who abuse children always know what they are doing. It is always a choice and it is always the wrong choice. Abuse does not happen accidentally, even if it is a sudden loss of control in a rage. As adults we are responsible for our actions.

At NAPAC we have no sympathy with abusers or their apologists, but we do try to understand them. We know some abusers experienced childhood abuse themselves and need support to heal their pain and change their behaviour. Anybody who is worried that they, or someone they know, may be tempted to abuse a child can get help from an excellent organisation called Stop it Now at www.stopitnow.org.uk.

Sometimes it is hard to see that what happened to us was abusive. A useful exercise may be to imagine a child (at the age that you were at) going through the experience that you went through. Would you call what was happening to that imaginary child abusive? If you would, then what happened to you was also abusive and you can call it abuse.

The NSPCC say that one in four young adults (25.3%) had been severely maltreated during childhood, and that over 90% of children who experienced sexual abuse were abused by someone they knew (or thought they knew)(Radford et al, 2011). The Council of Europe assess the level of sexual abuse against all children to be one in five of the total population of children.

Since 2002 NAPAC has been running a Support Line for adults who suffered any kind of abuse or neglect during childhood. Approximately two thirds of callers speaking about being abused themselves during childhood are female and one third are male. About 80% of calls are from people seeking support for themselves, and 20% of calls are from partners or supporters of survivors or from professionals. As the following data will show, the vast majority of survivors who contact the Support Line were abused by somebody they knew. This data confirms the finding of the NSPCC during their prevalence study that children are more at risk of abuse from someone within the family or in a position of trust, such as care workers or teachers.

Survivors who contact NAPAC seeking support for their recovery are commonly in their 30s or 40s. Some people wonder why children do not speak out about abuse at the time, especially now that Childline has been in existence for many years. It is difficult to talk about abuse at any stage of life, but especially for a child. A child does not have the cognitive development or emotional awareness to understand or process violent or sexual abuse. The child just has to try to survive and that may mean pushing the awareness of the pain to the back of their minds. Decades later it can come back as increasingly clear memories in adulthood which the adult mind can process by addressing the emotional pain in counselling or therapy. We should not be surprised by the resurfacing of
memories many years later. Recovered memories do occur, and this process is a completely normal response to unspeakable trauma.

We recognise that there is an emotional component to all types of abuse, and that it is often this emotional aspect that does the long-term psychological damage. This is especially true if the abuser is a person whom the child should be able to trust.
Whilst it continues to be vitally important for children to be aware of stranger danger, we also need to equip and empower our children to disclose abuse from those closest to them.

The internet is both a blessing and a curse in its influence on child abuse. It is a great source of support for both children and adult survivors looking for support, information and guidance. The internet is also used by those who abuse children. Abusers use the internet to get in touch with other abusers and to share images of children being abused.

Within the media there is a commonly used term which is very unhelpful and damaging to survivors of childhood abuse: the term ‘child pornography’. Pornography is something for adults and which adults should give consent to taking part in making. However, many adults who participate in the making of pornographic materials are very vulnerable people who are manipulated or forced into
doing so. We also know that many are survivors of childhood abuse, as is true in many areas of the ‘sex industry’.

Children cannot consent to sexual activity, and therefore the term ‘child pornography’ is a contradiction in terms, both legally and morally. Sexual abuse images of children in still or moving format are really forensic evidence of a crime scene. To describe this material as ‘child pornography’ plays into the abusers’ hands and makes it easier for them to produce and trade in these horrific materials. All such materials are made by abusing children and recording that crime in some way, and demand and payment for these images fuels and promotes the crime.

For many years this crime was not taken seriously, and those who were convicted of viewing these images were mildly reprimanded. They had not actually abused a child themselves, so their offence was seen as a victimless crime. It is far from a victimless crime; each and every image is a real child who is being raped, beaten, sexually assaulted or simply stared at in an inappropriate way. Many of the survivors who were filmed or photographed during the abuse are haunted by the fact that these images are probably still circulating amongst child abusers.

There are some other ill-informed assumptions made about people who describe childhoods which were not as good as could be reasonably expected. Some have alleged that it is often just a story made up to get compensation through the courts. This may be true in some cases, but such people would have no reason to contact NAPAC because we are not involved in that kind of work. We do not investigate crimes or judge offenders. That is for the police and the courts. We take what we hear at face value in a non-judgemental and confidential way and focus on supporting the survivor in healing the emotional turmoil that so often lasts long into adulthood.

There has also been much study and discussion on the nature of memory and how memories have been shown to be open to influence and change. If someone has recurrent intrusive memories of painful childhood experiences, we believe that is nearly always based in some historical reality. Again, it is not our job to judge. Some therapists have been criticised over the decades for allegedly implanting false memories of childhood abuse in their patients. This has happened on rare occasions and mostly in the USA some decades ago. Therapists throughout the world have become aware of this danger and have changed their working practices at the level of the governing professional bodies. But anybody can call themselves a therapist and every profession has members who are less than perfect.

The process of reporting a crime to the police is discussed in detail in chapter 9, but here it is important to point out that reporting a crime is bound to stir up memories. We always encourage
survivors to report abusers when they feel strong enough to do that, but they will need emotional and psychological support along the way. It is not an easy thing to do. Increasingly police forces recognise this and will less frequently discourage counselling than used to be the case. For many years investigators and prosecutors have discouraged witnesses from getting any kind of emotional support because they feared it would contaminate evidence. This view has changed and the British Crown Prosecution Service guidance now reflects this more up to date understanding. However, both survivors and counsellors should be aware that they may have to agree to hand over case notes to the court.

NAPAC does not keep any notes or case histories. This decision was taken at the outset to protect survivors and enable them to talk about anything in complete confidence. We would only breach this confidential arrangement if we hear information about someone in imminent danger, such as a known child being abused. We would also be legally bound to breach confidentiality if we are told about money laundering, drug dealing or terrorism, but we have never received that sort of information.
Chapter 2: Maladaptive coping strategies

Over more than ten years of work at NAPAC we have seen many thousands of survivors become empowered through emotional support to start dealing with the legacy of abuse and move on. We know it is impossible to forget a history of childhood abuse, but we also know that it is possible to find constructive and less damaging ways to cope with that history. To start that process we first need to see where we have got to and how we got there.

Maladaptive strategies or unavoidable consequences can be coping mechanisms, behaviours or actions we adopt in order to cope with traumatic experiences or stress. The impacts survivors have to deal with are on a wide spectrum, from low self-esteem through to thoughts of suicide, and the effects can be devastating. But people can and do heal from the wounds of childhood abuse. As much as we were betrayed and let down as children, as much as we may feel that we are broken beyond repair, we are not broken forever. We have survived this far and we are most definitely fixable. But the healing process is hard work and you need support on the journey. When we look in detail at what happened it can seem like a can of worms with no bottom. There is a bottom to the can but getting there can be very hard work, and going through it may feel as if things are getting worse before they get better. But the feelings will get better, in the end. You can make the nightmares stop. Nobody can do that for you, but you may need help to achieve it.

The impacts of abusive experiences are unique to individual survivors, and so are the ways that survivors try to cope with their thoughts, emotions and feelings. We recognise that some of the coping mechanisms that people use are less healthy than others, and that sometimes survivors use unhealthy means to cope with the emotional pain they feel.

Sometimes it can feel impossible to cope in any other way. We may not even logically understand why we do what we do at all; all we know is that when we cut, binge, starve ourselves, or overwork it somehow makes the unbearable feelings and memories just slightly more bearable and manageable for a while.

For some survivors, coping mechanisms are about not wanting to feel anything at all, because the feelings we have inside are too overwhelming. We do anything we can to numb, drown out or try to take away the feelings, emotions and memories, for example with drugs or alcohol.

Sometimes, though, our coping mechanisms are not about trying to make us feel better; they are about us trying to take back control of our lives in some way. Sometimes we try to punish and hurt
ourselves more because we believe we deserve that. But remember that childhood abuse is never the fault of the child and you are in no way to blame for the abuse you suffered.

If we use one or more unhealthy coping mechanisms as ways of dealing with our feelings, memories and emotions, we may find that these methods have helped us in some way. It may feel impossible to even think about using a healthy coping mechanism. We may never have learned any healthy ways of coping as we were growing up. We just did what we could in order to survive the confused, painful and hurt feelings we were experiencing.

We may know now that the abuse we experienced was not our fault, but still find it hard to see that neither are the ways we adopted in order to get through and survive. Many survivors who contact NAPAC view their coping mechanisms in a very shameful, negative and self-judgemental way. They so fear the judgement from others of how they cope that they hide their self-harming behaviours, or omit the real truth of how much drugs or alcohol they are consuming. So they try to hide from people just how bad they are feeling inside and how they are coping with these feelings. Many callers to our Support Line tell us nobody would ever guess how much they are hurting inside because they just put on a brave face every day and get on with things.

**Here are some examples of the maladaptive ways in which people cope.**

**Trivialising, forgetting or minimising the abuse so that it becomes less important.** If the abuse is thought to be insignificant or less than others have experienced then the belief is that there should not really be anything to worry about.

**Obsessive behaviours.** Having a routine or set way of doing things can help us feel in control, important for survivors because abuse takes away power and control. Routines can feel comforting and are certainly a helpful tool in everyday life when there is a lot to do. Sometimes, however, our control over routines can reverse and we can become obsessive over how things need to be done. Although routines can be reassuring, obsessions are very much anxiety-based and driven by fear. For example checking that the doors and windows are closed at night as a routine can help reassure us that as we sleep we are safe and protected. When this routine becomes obsessive, however, those checks need to be completed repeatedly before the person goes to bed. Once in bed, they then may have to get up on many occasions to repeat the checks and to ensure that they are safe. In this example the repercussions are numerous. Little sleep or very disrupted sleep causes us to be tired and saps our energy. It can impact upon memory and concentration, making everyday tasks harder and in some cases impossible. In this situation, if the survivor is also living with others the obsession can additionally impact on relationships and cause tension.
**Taking revenge on the abuser.** There are many ways that survivors think or fantasise about getting revenge on their abuser. It is hugely important to say here that any acts of violence are illegal and could get you in trouble with the police or put you into a situation where you could be endangered physically or emotionally. If you are having thoughts about this, please talk them through with someone you trust, or contact the NAPAC Support Line 0800 085 3330 where you can talk to one of the trained volunteers who understand these very complex feelings. It is natural to want ‘to get your own back’ when you have been so wronged and betrayed by the person who abused you. Seeking legal redress against the abuser is sometimes the right thing to do; it may help protect children today from that same abuser. But this is very challenging and is bound to trigger painful memories. The very best way you can get your own back is by taking back the power and control they took from you during the abuse, and living the very best life that you can live. Living well is the best revenge.

**Sleep.** Some survivors sleep as much as they can as a way of not having to deal with thoughts and feeling during waking hours. For some, even though they experience bad dreams or nightmares whilst sleeping, these somehow feel easier to deal with than being awake. Many people use medication, drugs or alcohol to help them sleep for longer periods than usual. Some survivors have a reversed sleep pattern, e.g. sleeping during the day and being awake at night, as they find sleeping at night difficult if that is when the abuse occurred.

**Distraction through work, study, hobbies.** Some survivors fill their time so fully as a form of escapism that they are not thinking about their feelings, and when it is time to sleep they are so exhausted they sleep deeply.

**Helping other people.** Sometimes helping other people feel better through friendships, voluntary work or community events can help us to feel useful and needed, and also provide us with a sense of purpose. Helping others is a very constructive and healing thing to do, but it can become a way to avoid addressing our own needs.

**Intellectualising the abuse and ignoring the feelings.** Trying to rationalise or make sense of the horror can become a loop of continuous internal dialogue in a survivor’s head. To try to understand the mind of an abuser is a journey into a very dark place and is best avoided, at least until most of the recovery work is done.

**Rehearsing conversations** that you could then have with other people about the abuse.
Buying things or comfort shopping. Buying things for control, such as collecting items, is a form of compulsive behaviour, or stocking up on food and material belongings can be, if physical neglect was an issue for you.

Self-neglect. This is neglect of health; hygiene; appearance. Sometimes the unconscious thinking behind this self-neglect is that no one will want to be near us, and therefore we will be safe from others harming us.

Gaining or losing weight. This is often linked with self-protection: “If I am overweight then I won’t be sexually attractive”. “If I lose weight I will have a pre-pubescent body and won’t receive unwanted sexual attention.” “If I am overweight then my layers of fat will protect me.”

Eating disorders

Eating disorders are not just about food and eating. They are often about difficult problems and painful feelings which cannot be expressed, faced, controlled or resolved.

Food can be used as a coping mechanism in times of boredom, anxiety, anger, loneliness, sadness, guilt or stress.

Eating disorders can start subconsciously, and often people with eating disorders say that it is the only way they feel they can stay in control of their life. Eating disorders begin as a means of trying to control a situation, but often end up controlling the person.

Some common eating disorders

Anorexia nervosa – This is a condition where the sufferer experiences a distorted body image. For example, a person may think they are overweight when in fact they are significantly underweight. Anorexia nervosa is characterised by the refusal to eat; eating significantly less each day than the body needs to physically survive; excessive weighing and exercise; and an obsessive interest in what others are eating.

Bulimia nervosa – People experiencing bulimia nervosa tend to have an emotional void inside. After a person has binge eaten a large quantity of food to fill this void, they have an almost immediate need to get rid of this food (purge) either by vomiting or with laxatives or both. Following a binge, people may also starve themselves or exercise excessively until they have got rid of the excess calories. Physically there are fewer indicators that a person has bulimia nervosa, as weight tends to fluctuate but is neither extremely above nor below average.
**Binge Eating Disorder (BED)** – Binge Eating Disorder shares many of the same characteristics as bulimia nervosa. The significant difference, however, is that following the binge eating, a person does not feel the need to purge and can easily become obese.

**Compulsive overeating (comfort eating)** – Compulsive overeating is when a person feels compelled to eat when they are not hungry. The majority of people who are compulsive overeaters are overweight or obese. Many sufferers experience great shame as they cannot control their compulsion.

**Self-harm** is a coping mechanism used by many more survivors than is generally realised. There is a common misconception that people who self-harm are attempting and failing to end their lives. This is untrue. For many self-harmers, their self-harming is about wanting to live, not wanting to die. The self-harm activity is one way of coping with trauma and inner feelings of pain and hurt. Self-harm has been described by some self-harmers as the ‘internal scream’, as the sometimes unbearable pain inside is released by the self-harming act. For people who are in extreme emotional pain all the time, a controlled act of inflicting physical pain on themselves can feel like a release from emotional pain.

There are many ways to self-harm. People may:

- Take too many tablets
- Cut themselves; burn their body
- Bang their head
- Throw their body against something hard
- Punch themselves
- Stick things in their body
- Swallow inappropriate objects
- Pull out their hair (Trichotillomania).

There is often an absence of pain during the act of self-injury. The body produces natural opiates, which numb it, so that little is felt or realised consciously. Self-harmers are often aware of how to look after themselves, and know where and how deep to cut, and have first aid kits to dress wounds. The common denominators of people who self-harm are the feelings of powerlessness and helplessness, thus the link to abuse.

Sadly some healthcare professionals, friends and relatives regard people who self-harm with mistrust, fear and disrespect and see their behaviour as attention seeking and manipulative. A lot of people who self-harm do so in secret and never disclose their self-harming activities to others. So in
most cases the self-harming behaviour cannot be seen as attention seeking. The fear of judgement from others often creates further isolation for the self-harmer.

**Addictions and dependency.** One of the most common ways of coping with the legacy of childhood abuse. Addictions and dependency have nothing to do with either lack of willpower or intelligence. For many the habit started as a way of coping with unbearable feelings that the individual felt could not be dealt with in any other way. Others just drift into the habit while trying any types of prescription or illegal drugs out of boredom or curiosity.

Some people misuse drugs and alcohol as a way of coping with thoughts, memories and feelings. One reason why survivors misuse depressant or pain-killing drugs or alcohol is because they are effective at numbing the pain and taking the attention away from certain memories. Conversely, stimulant or hallucinogenic drugs may take a user ‘out of themselves’.

Other forms of addiction or dependency include:

- **Gambling** – chasing the ‘buzz’ of winning
- **Taking risks** – extreme sports which give an adrenalin rush, or walking out alone late at night. For some these risks may be a subtle form of suicidal ideation: “if I die during a parachute jump or I am murdered walking home then my friends or family won’t have to deal with my life ending through a suicide attempt”.
- **Sex** – seeking love or affection through sex or having so little self-worth that sex is not a big deal at all. We have heard from sex workers who tell us that their body was already violated through childhood sexual abuse and they learned to dissociate or ‘switch off’, so they might as well make money from it.

**Isolation.** Some survivors find that living in isolation from others gives them a sense of safety. If there are no other people around them then they cannot be hurt. Many survivors contacting NAPAC talk about needing to wear a mask around other people in order to protect themselves and others from the intense feelings inside. Choosing to live in isolation often means that this mask is not needed in the same way, but it can be extremely lonely at the same time.

However you have coped and got through life to the point where you are reading this book, we are really glad that you did. It takes real strength and courage to face the abuse head on.

Later we will take a look at some of the healthier ways of coping. If you are recognising some of the unhealthier ways above and are giving yourself a hard time in any way, please try to be strong and resist. See it for what it is, a less than perfect way of coping that got you through difficult times.
Now you can start to find more positive ways of coping. You have done the best you could so far to cope with something which you should never have had to suffer. You have already achieved more than you probably realise just by getting this far.
Chapter 3: Mental health

We all have a physical body which we should take care of by trying to be healthy and taking regular exercise, proper nutrition and enough rest. It is equally true that each of us has mental and emotional needs too.

Although over the years it has improved, there is a stigma attached to our mental health. People generally have less issue in telling people they have a broken leg or even something as serious as cancer. When it comes to depression, anxiety, Post Traumatic Stress Disorder or having suicidal feelings, it can be much harder to share this with others. It can also feel incredibly hard to be told about a mental health issue, and the fear of saying the ‘wrong’ thing or making things worse can sometimes leave us feeling lost for words.

There is a myth to debunk before we get any further into this chapter. People who have mental health issues are generally not violent, dangerous or likely to cause you any harm. There are rare exceptions that hit the headlines and are tragic for all concerned.

Levels of mental ill health in society have been underestimated and not taken seriously for a long time, although this is now starting to change. If you are reading this and have a mental health issue then you are most certainly not alone.

Mental health issues can impact upon an individual in many ways by creating:

- Negative thought processes
- Self-destructive behaviour patterns
- Irrational thoughts or feelings
- Psychosis (unshared perception of reality, hallucinations, paranoid thoughts or voices)
- Physical ailments
- A range of feeling and emotions
- A range of diagnoses and conditions.

There is a spectrum of emotional and mental health needs and they can change dramatically over time for better or worse. Here are some fairly common distressing emotions and mental health conditions which survivors contacting NAPAC talk about.
**Post-Traumatic Stress Disorder (PTSD)**

When in danger, it is natural to feel afraid. This fear triggers many split-second changes in the body to prepare to defend against the danger or to avoid it. This ‘fight-or-flight’ response is a healthy reaction meant to protect a person from harm. But in PTSD this reaction is changed or damaged. People who have PTSD may feel stressed or frightened even when they’re no longer in danger. PTSD develops after a terrifying ordeal that involved physical harm or the threat of physical harm. The person who develops PTSD may have been the one who was harmed, or the harm may have happened to a loved one, or the person may have witnessed a harmful event that happened to loved ones or strangers. PTSD used to be called ‘shell shock’, a term used to describe the experience of soldiers in the trenches of the First World War. It can also be caused by a range of traumatic incidents where neither fighting nor running away is possible, such as: mugging; rape; torture; kidnapping; child abuse; transport accidents; bombings or natural disasters.

**Complex PTSD** was first described by Judith Herman in 1992 and is the result of trauma which has lasted for a prolonged period of time, usually over many months or years. It is an anxiety disorder which affects both our psychological and physical being. Non-complex PTSD can arise from a single traumatic event such as a car accident, rape, physical assault, etc. However, the crucial aspect to complex PTSD is survivors feeling captured and being or feeling unable to escape the situation causing the trauma.

Examples of these types of captivity are:

- Sexual, physical, emotional and ritual abuse
- Domestic violence
- Bullying
- Harassment
- Sexual exploitation.

Symptoms of complex PTSD can include: severe depression; suicidal feelings; anger issues; low feelings of self-esteem and self-worth; feeling ashamed and guilty. A person experiencing complex PTSD may also experience flashbacks, sleep disturbances and panic attacks. A significant difference was identified by Dr Herman in comparing complex PTSD recovery between combat veterans, people trapped in domestic violence situations, and people who were sexually abused during childhood. She found that because war is reported in the news, society believes it happens and the sufferers feel more validated, so recovery is therefore less challenging than it is for the other two groups. Childhood abuse is under-reported both in the news and to the police.
Flashbacks

Flashbacks are linked with PTSD. A flashback is when you relive a traumatic experience as though it is happening in the present time. Flashbacks cause a person to lose touch with the here and now, and to believe that the traumatic incident is happening all over again.

The body (as well as the mind) can also remember, and during a flashback a person may physically feel the abuse as though it is happening. The experience can involve all the senses including touch, sight, smell, hearing and taste, and any of these being triggered may bring about a flashback. Flashbacks can be terrifying for a person experiencing them and this may lead to severe anxiety or panic attacks. They can also be very frightening to a person witnessing someone experiencing them. They can be more frequent at the beginning of the healing journey, for example following a survivor’s disclosure or when childhood abuse memories start coming into a survivor’s consciousness. Fortunately there are some techniques which you can use to ground yourself. Grounding means becoming aware and present in the current time and place, the here and now. There are some grounding techniques at the end of this chapter.

Anxiety

Anxiety is a state of apprehension, uncertainty, and fear resulting from the anticipation of a real or fantasised threatening event or situation. People with anxiety worry about things which hold no obvious cause for concern, or their worrying is generally out of proportion to the events being worried about, and they tend to expect the worst from life. Anxiety can dominate thinking to such a degree that it interferes with all aspects of daily life: work, school, relationships and social activities.

Anxiety attacks differ from panic attacks in that they come on more gradually, and can be less intense, but tend to last longer.

Symptoms can include:

- Irregular heartbeats (palpitations)
- Sweating
- Breathing heavily
- Muscle tension or pains
- Dizziness
- Indigestion
- Diarrhoea
- Feeling worried, tired, irritable, restless
- Lack of concentration
- Sleeping badly.
**Depression**

Depression is a psychological condition which affects our mood. Our mood becomes low when we are depressed, but this is more than ‘just having a bad day’. There is a common misconception that it is ‘just’ depression and only ‘weak’ people get depressed. Depression is not, however, something that we can pull ourselves out of. We may need medication or therapy in order to recover, as depression may be caused by a chemical imbalance in the brain. Depression can impact us psychologically, physically and socially.

Signs of depression can include any of the following:

- Feeling hopeless, helpless, anxious, worried, guilty or tearful
- Feeling irritable and intolerant of others
- Having low self-esteem and not taking care of yourself
- Lacking motivation, interest, energy or enjoyment of life
- Having a reduced sex drive
- Having difficulties making decisions
- Having slowed movement or speech
- Physical symptoms such as: constipation; loss of appetite or weight; unexplained aches and pains; changes to the menstrual cycle
- Having disturbed sleep patterns
- Having suicidal thoughts or thoughts of harming someone else.

**Anger**

Anger is a natural and rational response to abuse. We should not be surprised that many survivors of childhood cruelty are angry. It can be hard to cope with anger, and there are many more or less effective strategies, such as anger management courses. As with all of the challenging symptoms which can flow from childhood trauma, the most effective way to manage the symptom is to address and process the underlying trauma. But we can never change a person’s personal history. A survivor is never going to be able to simply delete the memories. But we can find more constructive ways of living with the symptoms. Anger is an energy and we have to find a positive way to channel that energy. For many people it turns out that helping others can become a very positive way of helping ourselves. This can come about through parenting in a way which the survivor of abuse was not lucky enough to experience themselves.
Panic attacks

Panic attacks are episodes of intense fear that come out of the blue, without warning and often for no apparent reason. They usually last between 5 and 10 minutes, but they can occasionally come in waves for several hours.

Some people who experience panic attacks can become aware of situations or events which can trigger them. This awareness can help to reduce the triggers of further attacks.

Panic attacks have a number of physical characteristics, such as:

- A rapidly racing heart, ‘missed’ heartbeats, palpitations
- Pain around the chest area
- Breathlessness and difficulty in swallowing, sometimes feeling as if you are choking
- Hot flushes or extreme chills
- Feeling faint and dizzy
- Pins and needles and numbness
- Churning stomach, nausea
- Sweating hands, trembling
- Weakness and powerlessness to take action.

These physical characteristics can feel extremely frightening, and many people experiencing panic attacks for the first time feel as though they are having a heart attack or that there is an underlying physical illness behind the symptoms.

When we are very frightened we tend to over-breathe (hyperventilate), and when we do this we breathe out too much carbon dioxide, which then changes the balance within our blood. Hyperventilating makes the above symptoms worse, which causes us to become more frightened, which can cause us to hyperventilate more. Thinking very clearly about breathing, or breathing into a paper bag, can help with this. For more grounding techniques see the end of this chapter.

Borderline Personality Disorder (BPD)

Borderline Personality Disorder, also known as Emotionally Unstable Personality Disorder, is a condition characterized by impulsive actions, rapidly shifting moods, and chaotic relationships.

Approximately 1% of the population has BPD and of these 75% are women. – MIND, 2010

The individual usually goes from one emotional crisis to another. Often there is an unhealthy level of dependency on other people, separation anxiety, an unstable self-image, chronic feelings of emptiness, and threats or acts of self-harm.
This disorder is only diagnosed when these behaviours become persistent and very disabling or distressing. Suicidal behaviours and completed suicides are not uncommon in individuals with BPD.

**Obsessive Compulsive Disorder (OCD)**

Obsessive Compulsive Disorder is an anxiety-related condition in which people have obsessive thoughts and compulsive behaviours.

An obsession means an unwanted thought, image or urge which repeatedly enters a person’s mind.

A compulsion is defined as a mental act or a physical behaviour that a person feels compelled to perform.

These obsessions and compulsions are driven by fear. For people who experience OCD there is the fear that some dreaded or feared event will happen if they do not complete the repetitive acts or behaviours they are driven to do.

Examples of OCD thoughts and behaviours include:

- Counting
- Washing / showering
- Checking
- Hoarding
- Partaking in repetitive thought patterns (rumination).

**Other trauma-related conditions**

There are many other conditions that may have some root or cause in childhood trauma, too many to go into detail about here. At one extreme there is the simple fact that extreme violent or sexual abuse can cause infertility or permanent physical disability. It is increasingly widely accepted that schizophrenia may sometimes be caused by childhood trauma. At the less severe end of the spectrum, such conditions as irritable bowel syndrome (IBS), for example, may be caused by physical or sexual abuse. Symptoms may also be directly caused by physical trauma or by psychosomatic processes.
Grounding techniques

*Counting exercise* – start at 100 and count down in 7’s, e.g. 100 – 93 – 86 – 79, etc.

This exercise works well for those with limited numeracy skills as it engages the logical part of the brain and therefore changes the focus from the emotions and feelings which are causing distress. This technique is also very useful for those experiencing panic attacks.

*Square breathing* – you should visualise a square and then:

1. Breathe in for 2 seconds picturing one side of the square
2. Hold your breath for 2 seconds visualising the second side of the square
3. Breathe out over 2 seconds visualising the third side of the square
4. Hold your breath for 2 seconds visualising the fourth side of the square.

This exercise should be completed as many times as required for the breathing to become calm and regular.

*Simple breathing* – a simplified version of breathing as a grounding technique, which can be used in stressed or aggressive situations, is to:

- Place both feet flat on the floor and breathe into the diaphragm (so the tummy expands)
- Place your hand flat on your tummy and breathe in deeply to push your tummy out.

*The ‘Super-Shrug’*:

- Hold your shoulders right up to the ears and let them drop; this forces your lungs to expand and inhale.

*Using the senses*:

- Touch – what can you touch around you? How does the chair you are sitting on feel?
- Sight – What can you see around you?
- Smell – What can you smell?
- Taste – Can you taste anything?
- Sound – What can you hear?

An example of using the senses grounding technique is holding a set of your keys. This can be grounding in a number of ways:

- It is something tangible we can hold using our sense of touch (don’t squeeze too tightly)
- Our keys today often have our home key on – our safe place now
- There may be a car key – we have the means to ‘escape’ or get away now
- To have home / car keys means that we are now adults – we are no longer that scared and vulnerable child.
With the senses exercise, it is important to say out loud what you are experiencing in the ‘here and now’. This encourages awareness of the sense of sound due to hearing your own voice in the present time. Using the current date or time can also assist with becoming more present in the here and now.

If you are someone supporting a survivor, then you can really help by encouraging the use of these grounding techniques. It can often help to use the name of the survivor and let them know where they are; who you are; and what time and date (including year) it is.

For supporters or partners of survivors

If you are in a relationship of emotional intimacy with a survivor you cannot be that person’s therapist. It just does not work, because you are too close. But if you are in that relationship you are already taking a big step in supporting that person in their healing journey by simply reading this book. The more you get to understand the things a survivor might be struggling with, the better able you are to support them.

The key words in training volunteers to work on the NAPAC Support Line are:

- Normalise
- Validate
- Work at the survivor’s pace
- Empower.

By normalise we mean let the person know that they are going through a healing process that may be very hard work and may trigger very challenging feelings. They are not going mad; they are not alone, and it will get better with work and support.

By validate we mean allow the survivor to feel OK about their extreme emotions of fear, anger, sadness, hurt, loss or whatever it is they feel. They have every right to feel how they feel.

Nobody can rush the pace of another person’s healing journey, no matter how frustrating that may be. It takes time for the adult to process the extreme emotions that no child could ever be expected to cope with. But with the right support healing is possible, even decades later.

By empower we mean to give back the control to the adult that was taken away from the child by the abuser. This is the one big legacy of abuse that seems to us to cross all categories. If a survivor
can come to feel they can take control of their choices and how they can manage their healing journey, much of the work has been done. With support that decision can be made and can feel real.

These four paragraphs may be easy to read but very hard to put into practice. As a partner or a friend of someone going through the hard work of recovery you may become tired or irritated or resentful of that person’s behaviour towards you. We can only say be strong and be patient; it will get better.
Chapter 4: Dissociative spectrum

By Kathryn Livingston and Melanie Goodwin of First Person Plural

Dissociation, an essential ‘coping mechanism’

In this chapter the examples are female, and the words ‘her’ and ‘she’ are used in generalisations, but the points apply equally to males.

Normal, everyday dissociation

Dissociation is an ordinary and healthy process that we all instinctively use many times at varying levels throughout the day. It allows us to get on with living without being overwhelmed by external stimuli and life events. Children have a natural predisposition towards dissociating while adults will have a greater flexibility as to when and how they use it, although often this will be subliminally. Normally there is a considerable fluidity between your memories and thought processes, and we can access the information held in the brain as and when required.

You have a dentist’s appointment later in the day that you are not looking forward to, but you need to be able to go to work and do your job until the time of the appointment. You choose to put it ‘to one side’, allowing you to get on with what needs to be done now, knowing that this information is easily retrievable when needed.

To engage fully in experiences your thoughts, perceptions, feelings, sensations and memories are all connected, allowing the experiences to feel three-dimensional, whole, and retrievable as a memory. You will remember the content of the experience while holding the feelings and sensations. Our past experiences will influence our reactions and development of this memory. Of course we cannot retain every tiny thing that happens to us, but we do remember an enormous amount of occasions and situations at differing levels.

A small child enjoying a picnic with her family gets stung by a wasp. She cries out and the adults quickly assess the situation while comforting and reassuring her. They deal with the practicalities, while validating how much it hurts, and encourage the child to begin to focus on other things. The child will be able to process this situation because she was comforted, and because her truth, the pain, was validated and not dismissed, and because those around her really cared and when the time was right helped her to enjoy the rest of the picnic. This child may well be wary of wasps for the rest of her life but unlikely to suffer any profound effects.
At times of stress, witnessing a car accident for example, you may go into ‘overdrive’, disconnected from some aspects, to allow the immediate situation to be dealt with appropriately. Later when there is a space the feelings will be accessible, permitting an appropriate completion and processing of the experience.

**Managing abuse with highly developed dissociative coping skills**

For a child who is experiencing neglect or physical, emotional and/or sexual abuse, the most natural and healthy way of coping with an impossible situation is to dissociate from it. At the time this is a healthy, natural response that allows the child to separate out the impossible while conforming with expectations around them, and engaging at some level with the rest of their life. For many children this level of dissociating becomes their way of surviving but they never actually ‘forget’ what happened to them. They may bury all thoughts of the abuse very deeply, and ‘choose’ not to remember for many years, but the memories will be available to them as a whole when they decide to deal with them, or when something in their current life triggers the past to come into the conscious mind. When they are ready they are able to present a continuous narrative about what happened to them.

Lily was a neglected child, her daily needs were inconsistently met, and she was abused sexually by an uncle who visited several times a year. Lily was aware that other families did not live in the same muddle as hers, but was resigned to the impossibility of change. She always dreaded her uncle’s visits because she knew he would hurt her in a way she hated, but she also thought no one would believe her.

Lily never forgot what her uncle did to her, but she buried the memories deeply, although as a teenager and adult she always had a great mistrust of men. In adulthood she was gradually able to connect to the reality of her childhood. Lily always knew it was different, but she was not able to associate fully with how awful the pain was and the impact it had on her until it became necessary for her to understand why she behaved and reacted in ways she found unhelpful as an adult. If she had fully connected to her situation while a powerless child she would not have been able to tolerate it. Lily felt hopeless about her life, and at no point did anyone validate her reality. Dissociating gave her a level of tolerance enabling her to survive, although the long-term negative impact of her experiences had many lasting repercussions.
Dissociative Disorder Not Otherwise Specified (DDNOS) or Dissociative Identity Disorder (DID)

For some children who experience extreme, on-going abuse from a very early age the dissociation will become more profound. In a very young child the abusive memories will be stored in the brain in an unprocessed, fragmented state as though the abuse has just happened. If the abuse is on-going the child adopts the most logical, healthy way of surviving, by developing different parts to deal with different situations. ‘Parts’ or ‘Alters’ are the terms used to describe the distinctive personality states that the person with DID or DDNOS experiences as separate to themselves. ‘System’ describes the whole of the structure that the parts make up.

This allows the child to have parts who handle the abusive situations, others who go to school, clubs, gym, and as this child becomes older to have other age-appropriate parts to deal with their current life. These parts will be the partner, the person who goes to work, the mother/father, the part who runs a business. The possibilities are endless and each person who develops DID or DDNOS as a coping mechanism will have their own unique system that evolved to deal with their own situation.

For some adults the abuse will be continuing and it will be important for their dissociative coping strategies to be firmly in place.

Often children who survive through using dissociation at this level have been used in organised and ritualised abuse, and may have experienced very sophisticated mind control techniques. Most abuse at this level will include elements of ritual and being organised with the effects of mind control being experienced.

Bess is sixteen years old and has experienced sexual abuse by her father from three months old. She was ‘groomed’ within a paedophile ring from this age, using techniques to enable them to have control over her mind, body and emotional development. This allowed them to use Bess in extreme situations by her body and mind becoming compliant through a previously instilled process. Although her mother was not directly abusing Bess, she was definitely not protecting her. At an early age the impossible memories were stored in individually held parcels, unprocessed, and would during Bess’s adult life be remembered as ‘body memories’. At this early age Bess was unable to process what was happening to her. Her life was one of constant hyper-vigilance as she never knew if she would be hurt or played with normally. By the age of three Bess had started to develop ‘parts’ to deal with her life. Some parts dealt with one-off situations; other parts managed other times; and there were parts who managed ordinary daily living. This complex but logical way of developing continued throughout her life, not necessarily to deal with abusive situations but because her brain had lost the capacity to do it any other way.
Bess’s brain automatically compartmentalised the different situations in her childhood, but as an adult this became unnecessary, which allowed more linking of thoughts but only those relevant to her current way of living. The dissociative walls developed in childhood remained solid, while others became less dense in adulthood.

When the abuse has stopped

For people who developed DID or DDNOS to manage their abusive childhoods the on-going consequences in adulthood are often complicated, extreme and profound. The ‘external’ or ‘outward’ parts who manage daily living are the parts that most people will meet and be aware of. This can cause confusion for friends and family, as they will experience it as if several people are coming and going within the one body. It can feel like they are all very different but authentic at the same time. This is known as ‘switching’. The external parts are unlikely to have any idea that this is happening. They may be aware of what appears to be lost time, and a feeling of inconsistency in their life, but as this will have been their experience throughout childhood they will have developed subconscious ways of managing this and explaining it away to themselves and others.

The ‘internal parts’ who hold the traumatic memories may have no idea that the abuse has stopped, and little knowledge that it is many years later. Some people will always be aware that they have many parts without fully understanding why. Others will lead an ‘ordinary’ life, getting married, having children, working until something, including any of these events, permeates the profound dissociative walls and what has been so solidly in place no longer is.

While in the abusive situation dissociation was a very healthy, normal way of managing her life, but at sixteen, when the abuse stopped, it made Bess’s life very complicated as these parts, many of whom were very well developed and capable, continued to behave in ways that were no longer necessary, causing a lot of on-going chaos and distress.

Bess has many ‘parts’ who managed her life, allowing the parts for everyday living to have no memory of the abuse. It appeared that she had totally forgotten about the abuse, but Bess, who later began to understand that she was an external part, had never known about it. Her survival depended on her ‘not knowing’; just forgetting would have been too dangerous.

The walls between the parts who manage ordinary daily living are usually non-penetrable, but the parts who dealt with the abuse and trauma may have an awareness of each other and there is often a whole internal life going on that the external parts are not privy to.
Difficulties in adulthood

Amnesia

Dissociative amnesia, caused by the fragmentation of memories in the brain, prevents people from remembering the abuse but it also stops the remembering of ordinary as well as major events like your wedding day or having a baby. It can cause confusion for those around the person with dissociation, as some parts will remember certain things that others will not be able to. The lack of continuity of thinking and the parts’ different ways of perceiving and experiencing the world they now live in can be distressing for everyone and lead to many misunderstandings.

Some parts may have unique skills, speak a different language, have different interests that others do not. There can be different genders, sexual confusion and orientation held in the one body. Parts will probably cover a wide age range; some may even be older than the body’s (or host’s) age. Different parts will see themselves very differently – the colour of their eyes, hair, size – and some may have an eating disorder with the complications of body image that are a part of that.

Physical illnesses and differences can also add to the confusion. One part may have high blood pressure, another diabetes, another allergies, and yet another be unable to walk. All this is true and real for the part/s concerned but very confusing for others if they do not understand how DID can present. Some parts may be very depressed while others are not; they may feel suicidal and hopeless, and then a switch occurs and another part does not share those feelings.

For each individual part their reality is totally authentic to them. How they came to be is determined by the role they fulfilled within the whole system.

Attachment and trust

A child who grows up in a ‘good enough’ family will attach to a main caregiver who protects and keeps their world safe. This allows them to develop and gradually seek and master independence alongside forming many healthy relationships; this child will automatically have a secure attachment pattern and trust those around them. They will be helped to differentiate between who and what is safe as they grow up, enabling them to rely on their own judgement. Their ability to form relationships throughout life will be greatly influenced by this early experience. This child has a sound foundation on which to build future relationships.

The profound damage to the severely abused child’s emotional development is caused through the disruptive, disorganised and lacking attachment patterns rather than the actual abuse, although sadly for many survivors severe abuse will leave the body badly damaged as well.
For a child that does not have a safe attachment figure their ability to relate to others will be severely compromised. An adult with DID or DDNOS may have many different ways of relating, as the parts will each be affected by the relationship they were expected to have in the situation they were managing. One part may be quite adept at forming relationships, although even these are often quite superficial and have little potential for growth, while another is unable to form any relationships, and another might always end up in abusive situations as an adult. Yet another may push people away and then get deeply involved and as soon as they feel close to someone push away again. This can cause a great deal of pain and confusion for all concerned.

A part who was present during sexual abuse from a perpetrator who made them feel special will have a very different way of relating to others than the part who was abused in a cold, sterile setting. Both situations are completely wrong and never the child’s fault, but the young child’s brain interpretation of it will be very different. The part who was made to feel special may be able to form a relationship in adulthood, but continue to behave in a childish way of ‘being special’ with little potential for change. The child who was abused in the sterile setting may be very cold towards others, never allowing herself to get close to anyone, often appearing completely self-reliant, a necessary skill to survive her situation in childhood.

Sensitivity as to why someone with dissociation may behave in certain ways allows misunderstandings to be avoided. It is not necessary to know exactly what happened to be able to put many behaviours into an appropriate context.

Trust that should have developed naturally as a child will need to be learnt slowly over time, and has to be relatively well established before healthy attachments can form that will allow healthy adult relationships to begin. Probably the most important aspect in the healing process is being able to form a healthy attachment to a safe, understanding adult; often this will be the therapist.

**Triggers**

An adult with DID whose dense dissociative walls have become more permeable for whatever reason will increasingly be affected by external triggers. A trigger is an object, a place, a smell, a mannerism, for example, that will bypass the weakening dissociative barriers and cause a part to become distressed. As the dissociative walls become less defensive this allows parts to be exposed to things that they will previously have been protected from. This can be a big problem in the early stages of the dissociation becoming less effective, when so many things out in the world will be difficult for one or more parts to manage. For a while you can feel like some part is reacting to something every few minutes.
Understanding why that part is triggered by certain things and how it is related to their role allows a tiny space between the trigger registering and the part reacting. A lot of the work supporting people with DID is to help ground them and for them to gradually establish ways of stabilising themselves. One important way is helping all those parts who think the abuse is still happening or has just happened to be able to differentiate the past from the present, so encouraging the part who is reacting to the trigger to try and look around and orientate themselves to their reality in the present.

**Abreactions and flashbacks**

Experiencing abreactions and flashbacks is a reliving or a revisiting of the original trauma, so that what happened in childhood feels like it is happening again in that moment. The person’s sense of reality is severely compromised or absent altogether. It is often a small part of the whole memory and can feel very frightening for the person experiencing it and those bearing witness. It can be precipitated by an external trigger. It is a memory beginning to find its way into the conscious mind and needs to be managed carefully and gently, often being contained until it is possible to put a narrative to what happened. These past experiences can be very powerful both at the time and in the subsequent remembering.

There are a number of grounding techniques at the end of Chapter 3 which may help you to cope with flashbacks.

**Use of language**

The use of language is so important for someone with DID. It needs to be age-appropriate to the part who is in the body at that time. Certain words for different parts may have varying connotations that other parts and external people cannot possibly know. It is impossible to cover every eventuality, but it is possible to be aware and sensitive to any reactions that are happening and respond appropriately.

The person with DID may use you, we, them, us or a name when referring to themselves and this can be extremely confusing but is quite logical as well. They may talk about abusive situations that are very hard to listen to and may feel impossible and unreal. These situations will either have occurred or will be an illusion created by the perpetrator to make sure they seem totally real. If the person is allowed to talk about these abusive times they will gradually be able to sort out for themselves what actually happened and in what context. There will be some situations that may not be resolvable and over time will find their own place in the brain.
Co-consciousness

For many people with DID the non-permeable internal walls that allow this level of dissociation to operate mean that when a switch occurs it is absolute; the part who now has the use of the body will have no sense of being a part of a system or of a before or future. For others where the walls are a little less dense the external part may be aware that they no longer have any influence over what happens; they are powerless in the body but are not totally unconscious. When they come back fully they may remember very hazily about this ‘lost time’, but it does not fit into a time-line or have any impact or influence on them; it does not feel like anything to do with them in many ways.

Respectful, attentive listening is very important for anyone who is supporting someone with dissociation. Listening and having an understanding of the complexity of this disorder will allow you to respond to what is really being said or is happening in the moment and not try and second guess for yourself. The person with dissociation needs to be the expert on their story, but an understanding of the subject which enables the supporter, partner, friend or colleague to feel less frightened, enabling them to stay connected with that person, is helpful. For most people with complex dissociation one of the most helpful and reassuring things that anyone can offer is validation of their reality. It is not ‘as if’, it is absolute and real.
Chapter 5: Impacts

There are numerous ways that survivors of childhood abuse can be impacted by the abuse they experienced. These are some of the more difficult impacts people can experience following childhood abuse. This is not an exhaustive list, as the impacts on adult survivors are numerous.

- Loneliness and isolation
- Alienation (feeling different from everyone else)
- Mistrust of others or self
- Being self-destructive or sabotaging anything good in life
- Insecurity
- Low self-esteem or self-confidence
- Depression
- Dissociation
- Confusion and self doubt
- Living in denial that the abuse took place (did I make it up or dream it)
- Amnesia (blocking out memories either consciously or sub-consciously)
- Anger
- Anxiety
- Withdrawal from other people or society
- Self-pity
- Defiance (refusing to let the abusive experiences take over life)
- Lack of trust
- Problems with authority – rebellion
- Fear of judgement from other people
- Avoidance of anything to do with childhood abuse (such as switching off TV programmes when child abuse is mentioned)
- Lashing out at other people
- Having no family support (abuse tears families apart, for example when Mum cannot believe her husband is an abuser)
- Guilt or shame
- Becoming overly loyal to others
- Lack of self-care
- Poor memory
- Finding it difficult to ask for help
- Lying to people about past experiences to avoid judgements
- Avoiding people because interacting with other people takes too much effort
Issues described by callers to the NAPAC Support Line by % where at least one issue was described (6,679 callers) as recorded by NAPAC volunteers between Sep 2010 to Apr 2013

This graph shows the concerns callers have mentioned during the call without being prompted. We do not conduct a questionnaire; we just explore the feelings the caller describes and signpost to ongoing support where that is available and appropriate. It is these feelings that lead to the negative coping mechanisms we have already described. But as adults we can address and process these feelings in a way that a child cannot. Children do not have that level of emotional or cognitive development, whereas most adults do.

We know that there are many ways in which childhood abuse and the feelings listed above can make seemingly simple things very challenging in adult life. One example has been scientifically explored in work done by Bangor University in collaboration with NAPAC on how some female survivors of childhood sexual abuse find it very difficult to endure cervical smear tests. We have heard some women say they would rather run the risk of cancer because the experience is so terrifying. It is terrifying because they have to submit to being penetrated in a way that is often very similar to the physical circumstances of the sexual abuse they endured as a child. If they are then told to “Just relax, now” a full flashback of pure terror can be triggered if that was how they were spoken to by the abuser. The research led to some simple recommendations about how to give the woman some sense of control and choice in the examination process.

This is one example of how being out of control in ways which many people would find easy to cope with can be difficult for abuse survivors. Others include dentistry and, for male survivors, prostate
examination. If practitioners can be made aware of the concerns and be persuaded that the concerns are not trivial there are usually relatively simple solutions that mainly involve a bit of gentle consideration.

Another way in which survivors can find themselves challenged by developments in their personal lives is when they become parents. On the NAPAC Support Line we often hear from new parents who have been triggered into remembering how they were not properly cared for as children. Often this triggering can occur when a child reaches the age a parent was when he or she was being abused.

In Scotland a group led by Sarah Nelson and Sue Hampson has developed a course to support survivors when they become parents called Safe for Parents to Say. The course provides participants with the opportunity to develop their knowledge and abilities in relation to parents who are survivors of childhood sexual abuse and the impact this may have on their parenting. It aims to help support workers feel more confident, competent and aware when working with adults who do disclose, and enables them to support parents with their anxieties and challenges in parenting. It includes raising awareness of abuse and in particular concerns around the intimate care of children, over-protectiveness and anxieties around children’s sexual development, and very importantly open communication with professionals.

You are not alone.

Why doesn’t anyone understand?
Am I the only one?
I feel so alone – I hate carrying this secret!
Why won’t anyone believe me?
Will anyone believe me?
How many people were abused as children?
Why don’t more people talk about it?
I really want to talk to others who understand.

Nobody can be entirely sure how many have suffered childhood abuse. On average two children die as a result of abuse or neglect every week in the UK. We used to wonder about figures such as ‘1 in 4’ or ‘1 in 5’, but we now have little doubt that it could easily stretch to those proportions (NSPCC, Council of Europe).
So are you on your own? The answer is a resounding ‘No’!

You are one of many millions of people who have suffered.

Silence and secrecy are some of the favourite tools used by abusers. Silence and secrecy enable them to continue abusing children without getting caught. It’s not at all uncommon for survivors to feel isolated and overwhelmed. Many survivors feel so alone that they continue to carry the secret of what happened to them for many years. One of the best ways to start tackling abuse is to break the secrecy and silence. Breaking the silence will help break the chain of emotional pain.

Trust

We know that abuse can make trust difficult, but please trust us when we tell you that you are not alone. Abused children have learned at an early age that the world is a dangerous place. This is especially true when the abuser was someone whom the child should have been able to trust, such as a caregiver.

Everyone’s experiences are different and the ways we handle things are different … but in the UK millions of adults have been abused as children over the decades and most of them feel alone.

You are not alone

There are people who understand the issues of childhood abuse and the vast impact that it can have when we become adults … it may just be a case of finding these people.

As well as those who have an understanding of what you have been through (and are currently going through) there are also those who do not. Fortunately the majority of adults in the UK were not abused as children – so they don’t have the same understanding as survivors. How could they?

There has been very little education about child abuse and its consequences. This must change.

Child abuse continues to be something many people do not even want to think about – it is simply too horrific. If somebody hasn’t experienced abuse then it can be very hard for them to believe what they are hearing. It is one of the most secretive and covered up of crimes. It can also seem like the most unbelievable of crimes for those who have not experienced it.

It can be hard to believe why anyone would want to hurt a child! Some people do not want to believe that children are abused because it can be too overwhelming for them, and they may not necessarily know how to support you.
The police and prosecutors have recently tried hard to learn the lessons from mistaken assumptions made in the past. Today survivors’ testimonies are taken much more seriously, but it is still very difficult to get a conviction in court and the vast majority of abusers still escape justice.

You may also be met by survivors who do not want to remember what happened to them because it is all too painful. It is not that they do not understand what you are going through; it is more a case of them not being in the right place to support you at the moment. These survivors may distance themselves from you to protect their own emotions.

If the first person you tell doesn’t believe you then we hope you find the strength to tell someone else until you find someone who does. You can always call NAPAC during opening hours.

We believe you. You are not alone!

You know your truth and we won’t disbelieve you. Truth is not something that is negotiable, and sometimes it’s the only thing that will set you free. So keep speaking out.

If we aren’t alone then why don’t more people talk about it?

It is difficult because of the repercussions
Because of what everyone else might think
I don’t want to hurt anybody
No-one will believe me
There’s nothing they can do about it
I’m now an adult … so I have moved on
I’m trying to put it to the back of my mind
It happened a long time ago
The family would be torn apart
I don’t want to be a burden
I’ll be labelled mentally ill
I feel embarrassed or ashamed
It would upset my family, my children
It’s not a big deal – nothing much happened anyway
The perpetrator won’t be brought to justice, so what’s the point?
The facts in my head are a bit blurry so I don’t want to say things that aren’t 100% true
I don’t want to look like an attention seeker
I don’t want to draw attention to myself
Nobody else is talking about it and I’ll feel like the only one
I don’t want others to know my dirty secret
I’m afraid
It’s overwhelming – there’s too much and if I start talking will I ever stop?
I want to still be me and not a victim
I don’t want my abuser to win by letting it affect my life now
I don’t want counselling … only weak people need counselling
Everyone has needs. Everyone has problems. Counselling provides a safe environment for exploring difficult issues. Counselling is for those who are strong enough to face their pasts head on.

I might get so angry that I’d do something I’ll regret
I don’t want to think about it or remember the details
I let it happen … I didn’t stop it
People will think I’m unlovable
People will think I’m promiscuous

Being voluntarily vulnerable will not make someone a victim. Voluntary vulnerability is something only those who are really strong can face.

I don’t like being vulnerable – to me ‘vulnerability’ means ‘victim’
I don’t know what words to say – I don’t know where to start
My abuser is still alive and I couldn’t face having to go to court
My partner would kill them
I am too busy and don’t have time to sort it all out and get on with the rest of my commitments
People are too busy to listen
People have their own problems – they don’t want to hear mine
The last time I talked about it I wasn’t helped

These are only some of the reasons why survivors do not speak out.

The reactions we sometimes get as survivors can prevent us wanting to speak out. We can be made to feel isolated.

Survivors are sometimes told that they live in the past, to which the response could easily be ‘No, the past lives in me’. This is why some people cannot tolerate the term ‘historic abuse’ to describe offences committed against children many years ago. The crime may have been committed many years ago but the effects can be continuing in that survivor’s every living moment.

We know that as survivors we sometimes have a tendency to want to save the world from abusers by making as much noise as possible. There is certainly a lot we can all do to help prevent abuse.

Literally screaming and shouting in the streets is not always the best way of drawing attention to such a serious issue, as it may alienate the general population further from what we are trying to achieve.

We can make the world a better place with small steps and at our own pace.
We have to remember that the majority of the population have not suffered child abuse. A significant minority have, but we need to carry the majority with us in order to have an effective voice. We should try to engage them in this important conversation so solutions can be discussed.

But for each of us it is important that we take time to get help for ourselves first before trying to save the rest of the world.
Chapter 6: Therapy and appropriate coping mechanisms

There are many different types of therapy and counselling, far more than we can explore here. A therapeutic relationship/partnership like any other meaningful relationship can be at times difficult and complex, and finding the right therapist can be a complicated process. At NAPAC we have heard reports of both good and bad experiences with very many different practices. It seems that often it is not so much the type of therapy or counselling that is important as the personal connection between the practitioner and the survivor on the healing journey. There has to be trust. But it will also be out of the comfort zone, and will very likely be hard work and possibly the hardest work a person ever does in their lifetime. And it may well feel that things are getting worse before seeming to get better.

We often hear from people who say they have tried therapy or counselling in the past and it did not work. We would suggest that maybe a different therapist would work. We also hear on the NAPAC Support Line from people who have been in therapy for some time and feel they are ‘stuck’ or not making progress. In these cases we encourage people to stick with it but maybe to try bringing a new approach to their next session, such as exploring issues of trust with the practitioner or just reading out a ‘shopping lists’ of wants and needs. Sometime it is just a question of being stuck in a pattern and a new approach can get things moving again.

It can even be difficult for a survivor to really believe that the time they have with a therapist or counsellor is actually their time to explore their issues, which can follow on from a lifetime of not feeling worthy of being properly treated. Or maybe the survivor can expect the ‘expert’ to be the one who just tells them what needs to be done and how to do it. It is always hard work and nobody can do the work for the survivor. They have to do the work themselves, and appropriate support is needed.

It is often suggested that there is a logical sequence of starting in one-to-one therapy and then going on to join a therapeutic group to carry on the journey. At NAPAC we have run structured group work programmes and many participants have found them to be very helpful. We plan to run more when we have the money to do it. Support groups enable people to share and learn from each other. This type of peer support can be very effective, partly because the participants can see themselves as equals and each person can both give and take.
There are some basic needs which must be met before any kind of therapy can be effective. For example, physical security is necessary before any emotional work can start. It will not work if a person is street homeless or in a domestic violence situation where basic safety is absent.

Different types of therapy may be appropriate at different stages of the healing process. Some people find it hard to talk and may be able to access repressed feelings through art (writing fiction or drawing). Dance movement therapy or other physical activities may help release feelings if in a place where it is OK to shout and scream.

If you are offered treatment in this country in the NHS it is likely you will be offered Cognitive Behavioural Therapy (CBT). The UK NHS accepts CBT because it is goal oriented and practical and there is good evidence to support its effectiveness. It can be very helpful in addressing some aspects of symptoms such as eating disorders or drug or alcohol misuse. But it will not help a person understand the underlying causes of those symptoms.

As we said before, finding a therapist is not an easy task and not one you have to do on your own. Ask NAPAC Support Line, ask a friend who might have been there, or discuss it with your GP. Bear in mind that anyone can call themselves a ‘therapist’, but there are a few reliable listings where qualifications and insurance are checked before the practitioner can be listed. Even that does not necessarily mean that the person understands the needs of childhood abuse survivors, but you can expect to be talking to a trained therapist. The BACP, UKCP, Counselling Directory and the National Counselling Society all have postcode searchable lists of practitioners.

Unfortunately we do still hear reports of serious insensitivity and ignorance on the part of qualified practitioners who clearly do not ‘get it’. It is always best to work with a practitioner who is properly trained and insured. There are some internet resources where anyone can advertise services, so caution is needed. If a therapist or counsellor asks you if you enjoyed the abuse, they are probably trying to get you to take responsibility and ownership of your emotions. But this kind of questioning can seem very hurtful or confusing to survivors and is unlikely to be helpful. The NAPAC Support Line volunteers are trained to understand the common types of confusion that survivors struggle with; this is one example. Just because a child’s body responded to an abuser’s touch does not mean the child enjoyed the abuse or bears any responsibility for it. We hear all too frequently from survivors who have been put off counselling for many years by such insensitive comments from people who really should know better.

The absolute horror of childhood abuse is not explained in most training courses for therapists and counsellors. They have to study a lot of theory and then they are expected to pick up the rest on the
job. So be careful how you decide who to work with on these issues, get recommendations, and go through proper channels. There is a postcode searchable database on the NAPAC website which lists the organisations we know about and trust who can offer free or low-cost on-going support. However, there are areas of the UK where few services are available. It is about what is right for you; you need to feel you will be able to trust the other person. This applies equally whether you are paying for therapy/counselling or not. Therapy is a two-way process, two human beings who need to be able to communicate well and work together.

There are no big secrets to recovery from childhood abuse. We can all do it with the right amount and type of support. You do not have to have lots of money to pay for private therapy, although that may help if you can afford it. There is often a long queue for free services and money can enable the work to start much more quickly. But we cannot get someone else to do the emotional recovery work for us; we have to do it ourselves. And it is hard work to change the way we see ourselves and our experiences.

Equally there is no big final ending or ‘closure’ that enables a survivor to put it all behind them. It is not possible to change a person’s personal history. Freudian notions of catharsis or Janov’s ‘primal scream’ may be useful descriptions of how trauma can be psychologically processed, but none of this happens instantly like flicking a switch. For many survivors it may be necessary to dip in and out of therapy as different issues arise over the years. Some people see it as becoming like doing routine maintenance on a house or a car; it helps spot problems before they get out of hand.

Many survivors who go to their GP seeking emotional or therapeutic support are offered anti-depressants. This type of medication can help people cope with the extremes of emotional turmoil by simply ‘taking the edge off it’, which may be necessary sometimes. But these drugs will not help solve the underlying problem, which has to be explored with a trusted person in a confidential working relationship.

Some survivors try and learn as much as they can about how they think and feel. There are many self-development or personal development courses available which can provide us with the knowledge and understanding of how our abusive childhoods have impacted upon us.

As you learn more about yourself and how you got through difficult times by using maladaptive coping mechanisms you may start to feel bad about past mistakes and ‘beat yourself up’ over it. Those things got you through, but now you have learned and grown and found ways to take control. You may occasionally relapse into old habits, but you cannot unlearn what you have learned about yourself. Pick yourself up and keep on going.
Forgiveness is something we are regularly asked about on the Support Line. To forgive an abuser can seem to many survivors to be totally out of the question; to others it brings some peace. For some religious people it is a duty to forgive, but in the context of the major Jewish, Christian and Muslim religions the sinner still has to answer to God on the day of judgement. In some other religions, where there is a belief in reincarnation, the sinner will be punished in a different way. But religion has no monopoly on forgiveness; it can be as much a personal psychological journey as anything else.

Whether forgiveness is an important part of your healing journey or not, therapy/counselling and professional support is likely to be very helpful.

**Healing at your own pace**

When will I feel better?
Why do I still feel like this?!
How long will it take for me to feel better?
What if I never feel better?
Shouldn’t I have grown up?
I’m an adult now so why am I still dealing with childhood issues?
I have already had counselling ... but now I feel like I need some more ...
What if nobody wants me?
I feel like damaged goods ...
I’ve already tried counselling and it didn’t work ...
Are there any support groups in my area?
What shall I do now? I’ve tried everything and nothing has helped me ... now what?

Healing is a process, and every process takes time. How much time it takes differs from person to person. The starting point is finding what works best for you and then taking the journey towards healing at your own pace. It is not always helpful when we try to keep up with someone else’s progress ... because everyone’s pace is different.

**You will feel better in your own time.**

We are sure you want to feel better right now, but at the beginning of the healing journey you can expect to have both good days and bad days. You can expect to feel fine one day and not so fine the next. You may feel like you are going round and round in circles. But it may be helpful to know that you are never going to be in the exact same place again, because each time something happens you will learn something new and be at a different level.
We all have days when we ask ourselves why we are still feeling bad about something that happened in our childhoods. But it is perfectly normal to still be feeling the way we are feeling.

**Child abuse is a trauma like no other.**

When we are abused it can stay with us for a very long time. It is not about being locked into our childhoods – more like our childhood experiences being locked inside us. The adults we become are a result of our childhoods, and if our childhoods have been very badly distorted by abuse then it is little wonder that as adults we struggle coming to terms with what childhood represented for us.

**Childhood abuse is not just an issue for children. It is also an issue for the adults we become.**

The feelings we have as children do not just disappear when we reach adulthood. But it is important to believe that we can feel better as we heal. Nobody can say how long it will take.

We are all different individuals. Some survivors take a few days, some take weeks or months ... and some take some years before feeling better.

There is no right or wrong. Everyone’s experiences are different. Try not to focus on how long it will take – the important thing is that every step you take is in the right direction.

Sometimes it may feel like you are not going anywhere, but you are still moving towards healing since even backward steps can bring learning. And once we have learned something about ourselves we cannot then un-learn it.

Counselling works for many people but it does not work for everybody. It is worth bearing in mind that there are different types of counselling and that within each type of counselling there are different types of counsellor. Counsellors vary considerably. There may be different stages of a person’s healing journey when different types of therapy become more or less useful.

If you have tried counselling in the past and found that it did not work, it may be that counselling is not for you. Or it may be that the type of counselling you tried was not right for you? Or perhaps the counselling method was good, but the counsellor was not a good match for you?

If it is not working with a particular counsellor you do not have to go back to give them a second chance.

Your counselling is about you, not about appeasing them and fitting into their way of working.

Find someone who fits with your way of working and do not give up searching for the perfect counsellor for you! They do exist.
Ask counsellors whether they have had any experience supporting adults who have been abused as children, because not all of them have.

It may also be helpful to remember that it is not a counsellor’s job to tell you what to do.

Their job is to provide a safe environment in which you can explore ways to feel better.

If you have already had counselling but feel that you need some more, just go ahead.

There is no limit on how much support you can have. Some people see it like maintaining a car or a house; every so often you just need to do it.

There is nothing wrong with dipping in and out of counselling. Many people do. It’s normal.

Some people think that only people who are mad or weak go for counselling. This is definitely not true.

It takes real strength to be able to recognise that you could use some help. It also takes real strength to be able to face childhood abuse.

When we were being abused we were vulnerable, so putting ourselves back in vulnerable positions (like going for counselling) can take real strength and courage.

Allowing ourselves to find safe spaces to be vulnerable as adults shows that we are no longer victims but survivors.

We are the ones who are now in control.

Allowing ourselves moments of vulnerability will, more often than not, help us to deal with the raw emotions, which in turn enables us to heal.

The hope of healing is always there.

Even if we feel like we have tried everything and nothing has worked.

Just because something has not worked in the past does not mean it cannot work in the future.

Be determined about your healing.

No matter how long it takes ... keep trying.

No matter how many times you have to try the same methods ... keep trying.

We all have moments of feeling frustrated about not getting anywhere.
When we find ourselves in those moments it can be useful to focus on what it is we are frustrated about.  

Writing down the specific things we want can be eye opening.  

Sometimes what we want is the impossible.  

We cannot cure the whole world in a day but we can make parts of it better bit by bit.  

We cannot heal other people, but we can work on healing ourselves.  

We cannot change the fact that the abuse happened, but we can change the impact it has on us today.  

**We have survived. Now we can aim higher.**  

Aim not only to survive, but to thrive. Take our attention away from the impossible task of changing the past and onto the attainable mission of changing our present and future.  

**May we never give up!**  

**Don’t quit.**  

When things go wrong, as they sometimes will,  
When the road you’re trudging seems all uphill,  
When the funds are low and the debts are high,  
And you want to smile, but you have to sigh,  
When care is pressing you down a bit,  
Rest, if you must, but don’t you quit.  

Life is queer with its twists and turns,  
As every one of us sometimes learns,  
And many a failure turns about,  
When he might have won had he stuck it out;  
Don’t give up though the pace seems slow,  
You may succeed with another blow.  

Often the goal is nearer than  
It seems to a faint and faltering man.  
Often the struggler has given up,  
When he might have captured the victor’s cup,  
And he learned too late, when the night slipped down,  
How close he was to the golden crown.  

Success is failure turned inside out,  
The silver tint of the clouds of doubt.  
And you never can tell how close you are,
It may be near when it seems so far.
So stick to the fight when you’re hardest hit,
It’s when things seem worst that you must not quit.

Anonymous

Many people talk about survivors being ‘damaged goods’. Adult survivors of child abuse have been hurt in very significant ways. We have shown incredible strength and resilience to get through what we have been through. We are not ‘damaged goods’. We are wounded humans. We are all unique.

The abuse does not define who we are. Though sometimes our true selves can get buried underneath the rubble, debris and destruction left behind by the abuse.

Try to see the rubble for what it is. It does not belong to us and we do not have to stay beneath it.

Start by throwing the rubble off and letting our true selves out from under its weight.

Be determined to see all of the rubble cleared no matter how long it takes.

One piece of rubble at a time. **Bit by bit.**

We could start with the piece of rubble called ‘low self-esteem’.

All forms of abuse make children feel bad about themselves, and these feelings are carried into adulthood.

Low self-esteem weighs us down and tries to deflate us and stop us from being all we can be. So throw it off by starting to work on feeling better about ourselves.

Building our self-esteem does not always happen naturally, so we may need to take small steps to steadily build it back up. **Bit by bit.**

One way of doing this may be to recognise times when we say negative things about ourselves and start replacing them on purpose with positive things. This is the essence of CBT, described in clinical language as positive reframing. This may be challenging but it is worth it.

For example, if we have a habit of saying

“I hate myself” we could start saying

“I love myself”, or even “I like myself” or

“I am OK with me”.

Copyright © NAPAC 2014 63
Even if it feels uncomfortable and false at first, we have to start somewhere when removing the rubble.

We can learn from others who have gone before us and see that we start believing the nice things or positive things we say about ourselves over time.

It may also help us to recognise the positive things that we already do.

We can congratulate ourselves for managing even seemingly small things like smiling at someone or cooking a meal.

Every positive thing we say about ourselves or do for ourselves will help to remove low self-esteem.

Removing the rubble is sometimes easier with others alongside us. Team work helps share the load and encourages us to never give up.

We have a postcode search on the homepage of the NAPAC website to assist you with looking for local support where it exists.

Not all support groups are advertised publicly, so it may be worth talking to your GP as sometimes the NHS provides local services for survivors.

**Whatever you decide to do, remember that one of the keys to healing is to do now what is right for you.**

We are not here to tell survivors what to do. We assure survivors that healing is possible.

Many survivors who make up their minds to heal receive the support they need and gradually start to feel better.

The next step is down to you. What do you want to do right now?

Your healing needs to be taken at your pace, so do what feels right. If it feels right to put this away for a bit, then that is right for you. If you want to look into further support, then do that. If you want to talk to somebody, do that.

**This is your life and you are the expert on your life, nobody else.**

**Take control and do next what you want to do next.**
Survivors have already been through abuse which should never have happened. Each and every survivor deserves much better experiences than they have already been through, and the great thing about healthy coping mechanisms is that we can give them to ourselves. We all deserve good things in our lives (even though we might not believe this yet) and the list of healthy coping mechanisms below has been split into sections: healthy things you can do for yourself and by yourself, and healthy support you can get from other people.

If you try one or more of the positive coping mechanisms and they do not quite work for you, just choose another off the list. As individual as we all are, what works for one person may not work for another. Positive coping mechanisms which did not help in the past may be worth trying again now. We change as we go through our healing journey, and as we change, so do our feelings about ourselves and the needs we have.

It is also important to remember that a healthy coping mechanism does not always mean an easier coping mechanism. It takes a huge amount of courage to change patterns of behaviour.

Sometimes it can feel easier to stay with unhealthy coping mechanisms because they are familiar and can feel safer. You are worth making the change for.

**Healthy coping mechanisms – which you can do alone**

- Meditation, especially mindfulness
- Journaling – written / audio / video
- Exercise and sports
- Running really quickly on the spot
- Getting some fresh air
- Going for a walk somewhere you like
- Gardening (if you don’t have access to a garden, a window box might do)
- Creative writing / poetry / music / crafts / painting / drawing etc.
- Using a punch-bag or punching soft objects like cushions
- Screaming into a pillow
- Doing star jumps
- Screaming / shouting
- Crying, even on your own when you don’t even know why you are crying; it processes trauma
- Reading nice things
- Treating yourself to something you like, maybe nice toiletries
- Having a bubble bath
- Eating yummy food (whatever is yummy to you)
- Listening to / playing music
- Learning something new – Khan University or Memrise (two free on-line learning websites)
- Watching films and TV you enjoy
- Religion / faith / prayer
• For atheists there is existentialism – *The Myth of Sisyphus* by Albert Camus addresses suicidal ideation head-on
• Stroking / cuddling / playing with pets
• Cuddling soft toys
• Writing a list of good things about yourself – things you are good at doing – things good about yourself
• Dealing with emotions as they arise rather than burying them – using some of the above techniques.

**Healthy coping mechanisms which need more than one person**

• Talking about your feelings, but be careful who you trust
• Letting others know where you are emotionally
• Counselling / Psychotherapy / Drama Therapy / Homeopathy / Reflexology
• Letting someone take care of you
• Not being isolated – don’t suffer in silence – forums / helplines / friends / family / pets / e-mail support / pastoral carers / health professional (GP, CPN, Crisis Team, Mental Health Services)
• Drama
• Socialising, with people you can trust
• Exercise classes or team sports in a club
• Practise asking for help when you need it, but try not to be too demanding or needy; this can be tricky for survivors who have never felt worthy of support, but it is worth trying.
Chapter 7: Transfer of responsibility

We believe the term ‘grooming’ is not helpful in describing how abusers prepare children and their carers for abuse to be possible. The word ‘grooming’ is useful to describe looking after a horse or a person’s appearance. Here we are discussing how people plan and prepare to commit one of the worst crimes possible. We should not minimise or belittle that with inappropriate language. What is described in this chapter is different from the sexual exploitation perpetrated by gangs in, for example, Rochdale, Oxford and Peterborough in recent years. Again, there are common elements, but this chapter describes how abusers manipulate children and carers in the home. It is in the home that the vast majority of abuse occurs, perpetrated by someone known and trusted by the child and the carer. Here we hope to explain how that trust is gained and then exploited.

Firstly it is important to understand that it is not just the child who is prepared for abuse – it is the primary carer as well, because they control access to the child. The process can last many years and take many different forms, but there are common features. Abusers target vulnerable children but also vulnerable carers; a single Mum on a low income can be seen as an easy target. Abusers will invest a great deal of time, energy and perhaps money to get close and become trusted.

Many years later, once the child has grown up, if he or she decides to disclose the childhood abuse, the primary carer might still find it hard to believe. The abuser may have been seen by the carer as being well-meaning and helpful. This is one example of how responsibility for the abuse can successfully be transferred to the child. The abuser always wants to avoid getting caught.

Self-awareness leads to better understanding of the behaviour of others as well, so one can learn better who to trust and who may breach confidences. This can be another difficult part of the healing journey but is centrally important to achieving long-term security and stability.

Untangling the web of confusion

Why did I keep going back to that person if I knew it was wrong?
My body reacted to the sexual stimulation so how can I call it abuse?
I hate them for what they did and yet I still love them ...
Why can’t I remember the details? Did I imagine it?
Why does it bother me that my siblings got more attention from the abuser than me?
The person who abused me was in my family ...
Abusers want us to be confused. They want us to feel tangled up in a messy web of complexities, not knowing which way is up and which way is down. They do not want us to see things clearly, for what they really are.

**They know that if we start untangling the web, they will lose their power and control over our lives.**

Abuse is never the child’s fault. Abuse is always a choice made by the abuser. Abuse is always wrong. Abuse happens in many different ways, but behind every type of abuse is a misuse of power and control. Abuse is usually perpetrated by someone the child knows, often a family member.

Whether these facts are fresh revelations or old news heard time and time again, they remain absolutely true. Along the way survivors have discovered that it is these very truths that abusers try to distort in order to confuse their victims.

**How does an abuser transfer responsibility for the abuse onto the child?**

**This is an outline of what might happen.**

1. Abusers manipulate us into believing things to be true that are not.
2. We grow up still believing these lies to be true.
3. Along the way we are introduced to the truth.
4. We compare the lies (that we still believe to be true) to the truth and get confused when they contradict each other.
5. We know they cannot all be true so we have to decide which ones are really the truth.
6. This is where the confusion starts because whilst we are drawn to wanting to believe the truth, the way we were manipulated by the abuser pulls us back to believing the lies.
7. We never feel fully settled with knowing which is the truth, and end up feeling more confused.
8. The abuser’s plan succeeds.

**Now how about we add a couple of our own steps?**

9. NAPAC and other survivors spell out the tactics of abusers.
10. Survivors start to see the lies for what they really are.
11. Survivors start believing the truths and rejecting the lies.
12. Survivors are empowered to take back control of their lives.
For us to arrive confidently at the point where abusers lose and survivors win it may be helpful to have some insight into three key things:

- How do they make us believe the lies to be the truth?
- What specific lies are they trying to make us believe?
- How can we start learning and believing the truth?

1. **How do they make us believe the lies to be the truth?**

One word sums it up – **Manipulation**.

To manipulate means ‘to control, to influence, to use to one’s advantage, to exploit …’

It can also mean ‘to falsify, to rig, to distort, to alter, to change, to tamper with …’

Combining these two definitions can help us gain more clarity about what abusers do when they try to manipulate us.

They control us and exploit us by distorting and tampering with our minds.

**Abusers deliberately blur boundaries.**

One minute an abuser may provide for a child and tell them they love them; the next minute they may refuse to acknowledge the child’s existence. One day an abuser may lavish a child with gifts and money; the next day they may act in a physically aggressive way or force the child to engage in sexual activities.

**By blurring boundaries they shift the blame.**

They cause survivors to question themselves rather than the abusers …

“Why did I keep going back?”
“Why didn’t I report them?”
“Why didn’t I leave?”
“Was it my fault?”
“Why was I so stupid?”
“Why did I not fight back?”

Blurring boundaries is part of how all types of abusers get away with harming children.

They do not want it to be clear-cut. If it was, more children would feel able to tell and they would be forced to stop.

So how do they do it?
Essentially abusers take advantage of the innocent and trusting nature of children.

They use the fact that it is natural for children to be trusting.

Children naturally trust people older than themselves.
So abusers tell children lies from a position of authority.
Resulting in survivors believing lies to be true.

They use the fact that it is natural for children to love attention.

Children naturally love attention.
So abusers combine abuse with giving children attention.
Resulting in survivors believing the lie that they wanted the abuse (because they wanted the attention).

They use the fact that it is natural for children to compete for attention.

Children naturally compete for attention.
So an abuser may create an attention competition between siblings or other children whilst combining it with abuse.
Resulting in survivors believing the lie that they were jealous of others being abused more than they were (whereas in fact they were jealous of others getting more attention than they did).

They use the fact that it is natural for children to love treats.

Children naturally love sweets, presents, outings and other treats.
So abusers combine abuse with giving children sweets, presents, outings and other treats.
Resulting in survivors believing the lie that they accepted the abuse (because they accepted the treats).

They use the fact that it is natural for children not to know the law.

Children do not know the law unless told about it.
So abusers tell children lies about how the law works. For example, abusers may say “If you tell anyone about this you’ll be put in prison” or “I know the police and they say ...”
Resulting in survivors believing lies about the law (because they have no way to know otherwise).
They use the fact that it is natural for children to be protective towards people and animals they love.

Children are naturally protective towards people and animals they love. So abusers tell children lies that harm will come to the people and animals they love if they do not comply. Resulting in survivors believing the lie that they are protecting their loved ones by complying and remaining silent (because they may feel it is too frightening and risky to find out if their abuser is lying).

They use the fact that it is natural for children not to know how widespread child abuse is.

Children don’t know how widespread abuse is. So abusers can easily make children feel like they are all alone. Resulting in survivors believing the lie that they are alone.

They use the fact that it is natural for children to believe that the abuse is normal.

Children often believe that what is happening to them is normal. So abusers can manipulate children into believing that this happens to everybody. Resulting in survivors believing the lie that there isn’t anything to report (because they believe it was normal).

They use the fact that it is natural for children not to want to get into trouble.

Children do not like getting into trouble. So abusers threaten children with getting into trouble if they do not comply. Resulting in survivors believing the lie that the abuse is their fault and they will get into trouble because of it (because that’s what they’ve been told).

They use the fact that it is natural for children to believe you only get punished if you do something wrong.

Children believe that if you are punished it is because you have done something wrong.
So abusers tell children they are being punished for something. Resulting in survivors believing the lie that the abuse was their fault (because they think they deserved it).

**They use the fact that it is natural for children to love family members.**

Children naturally love members of their family. So abusers who are related to their victims know they will love them as family members. Resulting in survivors believing the lie that loving the abuser must mean loving the abuse (because they have not been taught that it is possible to love a person and hate their behaviour).

**Abusers also take advantage of other things that are natural or normal.**

**They use the fact that it is natural for the human body to react to sexual stimulation.**

The human body naturally reacts to sexual stimulation, consensual or non-consensual. So abusers stimulate children sexually and sometimes tell the child that if it feels ‘nice’ they must be enjoying it. Resulting in survivors believing the lie that if their bodies reacted to the stimulation they must have enjoyed the abuse.

**They use the fact that it is common for the media to focus more on sexual abuse than on other types of abuse.**

The media sensationalise child abuse and focus more on sexual abuse than other types of abuse (physical, emotional, neglect and ritual). So abusers know that if they abuse children in ways that are not sexual the children are less likely to see it as being abusive. Resulting in survivors believing the lie that if it was not sexual it was not abuse.

**They use the fact that it is common for the media to focus more on ‘stranger danger’ than on abuse within the family.**

The media focus more on the danger of strangers abusing children than the far more frequent cases of children being abused by family members in their own homes.
So abusers know that children will not hear many (if any) stories of abuse within the family in mainstream media.
Resulting in survivors believing the lie that not much abuse takes place within the family.

2. **What specific lies are they trying to make us believe?**

Now we have some understanding as to how they manipulate us into believing lies, we can untangle the web of confusion by unpicking some of the specific lies they are trying to make us believe.

We have already mentioned some of them above and have decided to repeat them again below for further deconstruction.

**It may help to remember that each lie they want us to believe is serving a purpose.**

**A purpose that acts in favour of abusers rather than survivors.**

As we look at each lie, we have to think about how the lie helps the abuser and how it has a negative impact on the survivor.

Here are some of the lies that abusers want us to believe, with the relevant truth, purpose, and untangling following each one.

**Lie** - ‘When you kept going back you were saying “yes” to being abused’.

**Truth** - When we kept going back it was for something other than abuse.

**Purpose** - To make survivors believe the abuse was their fault.

**Untangling**

We did not go back for more abuse. So why did we go back? Abusers combine abuse with things they know we want.

Things like attention or treats. It is these things that we kept going back for. We were children. It is natural for children to want more attention and treats. It is also natural for children to be afraid of losing something or someone they love. Abusers can use this to threaten to withdraw a person or thing the child loves and thus manipulates the child to comply with the abuse in order to prevent loss.
Lie - ‘When you did not leave you were saying “yes” to being abused’.

Truth - When we did not leave it was because something was forcing us to stay.

Purpose - To make survivors believe the abuse was their fault.

Untangling
Most abuse takes place within the family. As children we may not have known how to escape from our family, so lack of knowledge prevented us from leaving. Leaving something familiar (however horrendous) for the unknown can make children fearful. So fear may have prevented us from leaving. As children we may have been threatened with things to prevent us from leaving. Children are not as physically strong as their abusers so it may have been physical force that prevented us from leaving.

Lie - ‘When you did not say “no” you were saying “yes” to being abused’.

Truth - When we did not verbally say “no” it does not mean we were saying “yes”.

Purpose - To make survivors believe the abuse was their fault.

Untangling
Saying “no” can happen in more ways than just a verbal response. Our body language can indicate that we are not consenting. The fact is that children should never be abused and it is never their fault. It is impossible for a child to consent to abuse. If a child is ever in a situation where they are seen to be ‘consenting’ to abuse it is because they have been manipulated and forced to do so. This is not consent.

Lie - ‘You cannot trust your own judgements’.

Truth - It was the abuser not our judgements that betrayed our trust.

Purpose - To enable the abuser to maintain control over the survivor.

Untangling
Children do not make conscious decisions as to whether or not to trust people for the first time. Children are naturally trusting. It is not about being unable to trust our judgements – it is about not being able to trust child abusers.
Lie - ‘It was no big deal so there is no point complaining’.

Truth - Child abuse is never acceptable, and all who have suffered have a right to speak out.

Purpose - To trivialise the trauma and keep survivors silent.

Untangling
For abusers to continue harming children without any negative repercussions for themselves they have to make sure their victims do not speak out. One way of doing this is to make it seem as if the abuse is normal, perhaps trivialising it; making children believe that other children (who are not complaining) are going through the same things and are not bothered by it. The fact is, all abuse is wrong and none of us should be made to feel as though what happened to us was trivial.

Lie - ‘If your body reacted to the sexual stimulation then it was not abuse because you “enjoyed” it’.

Truth - If our body reacted to the sexual stimulation then it is because our body was reacting in the way it was designed or evolved to react.

Purpose - To make survivors believe it was not abuse.

Untangling
Sexual stimulation has nothing to do with whether a person is enjoying what is happening or not. Sexual stimulation is a sign that a person’s body is reacting normally. It is a basic instinct. We do not choose to make our bodies feel like that.

Lie - ‘You are all alone. No-one will believe you’.

Truth - We are not alone and there are people who will believe us.

Purpose - To isolate survivors and keep them silent.

Untangling
Telling children that they are all alone and they will not be believed prevents them from reaching out and seeking the support they need. The more times abusers say these things, the more we believe them.
Lie - ‘You deserve to be abused’.

Truth - No child ever deserves to be abused.

Purpose - To make survivors believe the abuse was their fault and to crush their self-esteem.

Untangling
Abusers will do all they can to prevent their victims from reporting them. By transferring the blame and crushing a child’s self-esteem the abuser is attempting to put up permanent barriers preventing that child from speaking out.

Lie - ‘You were in control over whether or not the abuse happened’.

Truth - The abuser had control over whether or not the abuse happened.

Purpose - To transfer the responsibility of the abuse to the one being abused.

Untangling
Abuse is about power and control. Abusers have the power and control over their victims. Abusers want survivors to believe that the survivors were in control instead of their abusers. Abusers want survivors to believe they chose to be abused and hence want survivors to believe that the abuse was their fault.

Lie - ‘If you love your abuser then you love the abuse’.

Truth - We can love our abuser and hate the abuse at the same time.

Purpose - To make survivors believe the abuse was their fault and to confuse them as to whether or not it was actually abuse.

Untangling
Loving a person does not automatically mean loving their behaviour. Many abusers portray themselves to the outside world as very ‘nice’ people. It is normal for children to be brought up to love family members. Most abuse takes place within the family. So when we, as children, love our family members and they start abusing us, it is not our fault that we have an emotional attachment to them. Sometimes forming an emotional attachment to our abuser can be a way of helping us to cope with what’s happening.
Lie - ‘You could have protected your siblings more by allowing yourself to be abused’.

Truth - Abusers had complete control over who they were going to abuse and all of the abuse was their fault.

Purpose - To make survivors feel like the abuse of others was their fault.

Untangling

None of us should have been abused. Not us, our siblings, other children we knew ... none of us. All decisions were choices made by the abuser. None of those choices was our fault. They were the ones in control, and any decision they made, with regards to who they were going to abuse, could not have been influenced by us as children. They were the ones with the power. It was not our fault.

Lie – ‘You were jealous when other children were abused more than you’.

Truth - We may have been jealous when other children received more attention or treats than we did – but we were not jealous of the abuse.

Purpose - To make survivors believe they wanted to be abused and hence think the abuse was their fault.

Untangling

Again, this is an example of abusers combining abuse with things they knew we wanted as children. Things like attention or treats. It’s these things we may have been jealous of. Not the abuse. We were children. It is natural for children to be jealous for more attention and treats.

Lie – ‘If you were abused you would remember all of the details ... you are just making it up’.

Truth - People who are abused often do not remember all of the details.

Purpose - To make survivors believe they were not abused.

Untangling

When traumatic things happen to us our memories can often become disjointed. It is a natural response to trauma. Our minds try to block out the painful details as a way of protecting us from having to deal with them. It is a coping mechanism and a natural response to trauma. This psychological response is not unique to child abuse survivors. Soldiers and car crash survivors, for
example, can also have similar experiences of not being able to recall details of traumatic events (or the order in which things took place).

This list of lies is not exhaustive but it will hopefully give some insight into the types of things abusers are hoping survivors of abuse will continue to believe.

3. How can we start learning and believing the truth?

We are each an expert on our own lives and it is clear from experience that what works for one of us may not work for another.

With this in mind we have compiled a list of suggestions of things that have worked for others.

Be empowered and take control.

There are many different routes to relearning the truth. What is important is that we get to the final destination.

We hope these few ideas help ...

You may like to: **Remind yourself about ‘hindsight’** ...

‘Hindsight’ means to look back at a situation with additional knowledge. Knowledge we have gained some time after an event took place. Knowledge we did not and (most of the time) could not have known at the time.

When we look back on our childhoods from an adult perspective it is easy to forget that there were certain things we simply did not know then.

Abusers are longing for us to get confused about hindsight.

They want us to believe that we knew then what we know now. They want us to think we made decisions as children in the same way we make decisions as adults. They want us to forget the differences between how children think and how adults think. Knowing that we are allowed and able to think differently now as adults may give us the freedom we need to start changing what we believe to be true.
You may like to: **Speak the truth out loud or write it down ...**

We can choose to disown the lies that come into our minds. A powerful way of doing this may be to speak out or to write down the specific truths that replace the lies.

It is sometimes easier to be clearer and more focused with a spoken or written sentence than a thought sentence, because often there are other competing thoughts and not as many competing spoken or written words.

You may like to: **Put up visual reminders of the truth ...**

We do not just have to wait for the lies to attack our thoughts before we can fight back with the truth.

We can be proactive in our counterattack. It may be helpful to write out the truths and put them around the place ... truths like “It wasn’t my fault” or “I am not alone” ... we can stick them in our rooms, homes, cars, diaries and anywhere else we feel able to.

If we don’t feel comfortable with others seeing them, we can be creative ... for example, instead of writing “I am not alone” we could simply write the first letters of each word, “I.A.N.A”.

You may like to: **Ask others to remind you of the truth ...**

If we know there are times when hearing the truth from others may be helpful, we could ask close friends or supportive family members to remind us of certain things every now and then.

This is why NAPAC exists. To remind survivors of the truths and empower every survivor to take back control of their lives.

---

**Conclusion on Confusion...**

If you still have feelings of confusion you are not alone. Child abuse at its core does not make sense. Those of us who do not abuse children will probably never fully understand why abusers do what they do. Hurting children physically, emotionally, sexually, neglectfully and ritually does not make sense.

Child abuse should not exist and yet it does.

Thinking about why child abuse exists can confuse us. But when child abuse happens we can remember abuser tactics, be certain of the facts, and refuse to be confused.
Chapter 8: How to disclose and how to hear disclosure

NAPAC has taken many thousands of calls from adults who were abused in childhood, and there are some key themes which occur in the vast majority of these calls. As we have already discussed in previous sections, children find it incredibly hard to talk about the abuse they are suffering. This is often because of fear of not being believed, the fear of being judged, and the shame and guilt which so many adult survivors also feel. Survivors who contact NAPAC are believed and accepted without judgement.

Childhood abuse is the misuse of power and control. At NAPAC we believe it is essential to the healing process that survivors are empowered to make their own choices and decisions. Many survivors who contact us are unsure of the options available to them or even what kind of help and support they need. NAPAC will explore with survivors the different support options available, such as support groups, counselling, and internet resources. Survivors are then able to make informed decisions as to the best way forward for them.

Many survivors who contact NAPAC are in their middle to later years of life and have carried their abusive experiences as a secret for the whole of their lives because of this fear, shame and guilt. The NAPAC Support Line allows survivors the time and space they may never have had before to speak about their abusive experiences and their feelings. Many survivors have described being able to talk openly, being believed and not being judged, as providing them with an immediate sense of relief and say it feels as though a burden has been lifted from them.

The key points for supporters of survivors listed at the end of chapter 3 are relevant, here but we also want to suggest ways in which professionals might respond effectively to survivors talking about abuse. At NAPAC we go to great lengths to look after the emotional well-being of all our team members as well as we can. The work we do is challenging in many ways, not least emotionally. The disclosee needs to be able to face engagement with the horror of the abuse, something many people would try to avoid. For professionals this needs to be supported through clinical supervision.

NAPAC has a training package for professionals who are likely to encounter occasional first disclosures, called Supporting Adult Survivors of Childhood Abuse (SASCA), which is accredited by the Royal Society for Public Health. For details see our website or e-mail training@napac.org.uk

What does it mean to disclose?
What are the benefits of disclosing?
Why should I tell?
Do I need to tell?
Who should I tell?
Who shouldn’t I tell?
How many people should I tell?
How should I tell?
How much detail should I disclose?
Where should I tell?
What will be the reaction when I tell?
Is it normal to feel afraid of disclosing?
Will disclosing be hard?
What could go wrong if I tell?
Will I be believed?
How will disclosing affect my family?
Could I be sued for libel or slander?
Will I regret telling?
Will people treat me differently after disclosing?
What will be different after disclosing?

To disclose means ‘to make secret information known’. Disclosing in the context of child abuse means to break the silence surrounding the abuse by telling another person that it happened to you. Disclosing often serves a dual purpose. First and foremost it enables you to break the silence. Abuse often causes chaos and confusion and having at least one other person to talk to can help with unpacking and untangling the chaos. Having someone else to talk things through with can give you a different perspective on things – to help break through all of the myths and lies. It can also help to break feelings of isolation. It is a way of embarking upon the healing journey without being alone. The second reason for speaking out is that it is important on a societal level. Abusers thrive on their victims being silent, so the more people who have the courage to tell, the better for child protection today and in the future.

At NAPAC we hear from many survivors in their 50s, 60s, 70s, 80s and even in their 90s who for the very first time talk to us about what happened to them. They talk about how relieved they are to have finally shared their burden with someone who cares and understands how serious the impact can be. We would not tell anyone that they need to talk about what happened to them as children (it is the choice of each individual) but it would be wrong of us to withhold the knowledge that we have of the relief and healing that disclosing can bring. For many people the benefits of disclosing far outweigh the negatives. But we recognise that there may be people who do not feel the need to tell, but if you are reading this then you are likely to be looking for ways to heal yourself.

The important decision to make is whether it is right for you, not for anybody else. It is about your needs – not anyone else’s. It is a way of breaking that silence and allowing yourself to go onto that
healing journey which sets you free. The full extent of the healing journey is usually only possible once you have told someone else. You can start the healing journey without having told anyone, but there’s something very empowering about letting somebody else know and breaking the silence. It is also liberating to discover that it is possible for people to treat you in the same way whilst knowing about the abuse. In order to feel totally unashamed it helps if someone else knows. Shame cannot exist in the light, only in dark and isolated places.

There are also lots of lies that you may have been told – both spoken and unspoken – and in order for those lies to be broken it is sometimes helpful to speak things out loud. It helps to get the muddle out of your head. And sometimes hearing your own words back, which happens when someone else is speaking them back to you ... hearing those words back is what needs to happen for you to realise what it is that you have been believing and to recognize it as lies. You need to tell in order to hear feedback on that.

Who you tell is up to you; only you know who it feels right to tell. Tell someone you feel comfortable and safe with, someone who is not likely to judge you. It can be someone you know; a colleague, a family member, a friend ... or it can be someone you do not know, as when calling the NAPAC Support Line. It is about you receiving the best support possible. If you start to tell someone and they are not reacting in a way that makes you feel comfortable, just stop telling them. You aren’t committed to telling someone all of the details by telling them a small amount.

It is probably best to avoid making your disclosure on an internet forum or through social media. Once something is said on the internet you have no way of controlling how far it goes or how other people may take it out of context. It could also make someone vulnerable to attack by ‘trolls’ who simply want to exploit people’s vulnerabilities.

For first disclosures you may want to avoid telling people who are particularly close to your abuser unless it feels safe to do so. It is not uncommon for survivors to go from telling no-one to wanting to tell lots of people. It is entirely your decision as to how many people you tell. Telling lots of people may feel safe for you. On the other hand, telling too many people may be unhelpful for you as you could end up repeating the same things over and over again and getting stuck. It may be worth considering your motives for telling various people, as it can be unhealthy for survivors to tell lots of people for the wrong reasons. An example of a wrong reason would be to ask lots of people as a way of searching for someone who will tell you exactly what you want to hear. So, for example, a survivor may be asking lots of people in order to get somebody to validate that the abuse was their fault or that they are worthless (for example, if they believe that to be true). Alternatively, a
survivor may be asking lots of people in order to find at least one other person who does not criticize certain unhealthy behaviors. By telling lots of people there is also the risk of not getting any time out. You may find it useful to have people who do not know what you are dealing with as a way of escaping having to deal with the issue 24/7. If everyone knows you lose your escape.

Once you have chosen the person (or people) you’re going to tell you may need to think about how you’re going to tell them. There are lots of different ways you can do it: in person; over the phone; by e-mail; by letter ...

The next stage is to think about how you want to say it. There are many different ways you can do that. You could practise in front of the mirror – or not – or in front of a pet. You could write a letter. Sometimes all the preparation in the world, however, is not quite going to match up to how you think it is going to be – you might prepare to do something and say “right, well I’m going to hand them this letter” or “I’m going to say these particular words” and when it comes to it, it doesn’t quite work out like that. Because you just do it. It is important to feel in control and not to be afraid when that feeling of control changes. Because really you are still in control. There is always the NAPAC Support Line.

One of the methods of telling would be that you could give someone a heads up by saying “I need to talk to you about something and it’s something difficult for me to talk about” so that they are forewarned and ready for a serious topic. May be you could tell them “I have something to talk about and you may want to have a look at this website” and you could give them the NAPAC website so that they know it is about child abuse. So without having to say the words you could let them know that it is with regard to child abuse.

Tell whoever you chose to disclose to as much as you feel comfortable with, remembering that you do not have to reveal all the details. Lots of survivors, when they think about disclosing, think that they have to go into the detail of what happened to them, but it is not really necessary. It is fine if that is what you need to do for you, because some people actually need to talk about more graphic details. But it is also fine not to, just say “this is what happened to me” and to talk about feelings, coping – that kind of thing, rather than focusing on detail. So there is no compulsory or necessary amount of details that you would need to disclose. Everybody is different, everyone’s experiences are different, and everyone’s present time is different.

Make sure you are somewhere physically safe. Somewhere that you are not worried about being overheard, a place where it is safe to get upset or cry because that can feel quite embarrassing for some and it might mean that you do not feel able to talk freely – as, for example, in a cafe. Find a
place where you do not feel closed in, but also not too exposed. It is all down to you – whatever you feel comfortable with.

It is like any hard thing we do in life; sometimes the build-up to it is actually worse than the event itself. You need to be aware that sometimes the reactions of other people will determine how hard or easy it is. So it can be about preparing yourself for it being hard. The thing to keep in mind is “what’s the pay-off?” – is it harder to tell and to go through that being hard? Or is it harder not to tell and not to have the healing you need and deserve? You do not need to tell everything all at once; you could test the waters by saying a couple of things and seeing the reaction to it.

You might get a really bad reaction because some people do not have a clue about child abuse. They may say the wrong thing or it may bring up something personal in them. You might get a really thoughtless reaction from someone, as opposed to a considered response. The telling might not meet your expectations. You might expect everything to be OK, to feel differently. Telling is the starting point and it opens up another whole realm of stuff. You may lose control again if the person you tell makes decisions that are not necessarily your decisions. For example, the person you tell could tell the police – and this takes the choice and decision away from you. On the NAPAC Support Line we only breach confidentiality and pass information on to the police if we are told about a known person in imminent danger, such as a child currently being abused.

You should be aware that certain professional people (such as teachers, doctors and social workers as well as counsellors and therapists) are also obliged to pass on information about a person in imminent danger. They should tell you in advance what their policy on this is and should warn you if they think you are about to tell them something which will mean they have to breach confidentiality.

There can be a wide variety of effects on the family, irrespective of whether the abuse took place within the family or not. It can affect the family in any event, because parents may feel angry or in some way responsible. There could be a split within the family – especially if the abuse took place within the family. People may take sides, or it may have the opposite effect and draw a family together. It may unite a family to tackle a problem together and families can become really close because of it.

Things that may have been going on prior to the disclosure may make more sense to someone else. For example if you tell a friend, and when you have been staying at that friend’s house you always want the light on, they might think “Ah! Now I get it!” So you do not have that ongoing battle of “turn the light off!” because they get it and so they become a bit more sensitive.
But some people may not know what to say and it becomes too hard for them, like passing a bereaved person in the street. People can become impatient and say, “You know it’s been three weeks now since you started talking about this, so shouldn’t you have got over it by now. It did happen when you were a kid after all!”

There is a difference between regretting telling and regretting telling certain people. It can be negative with some individuals and you may regret telling them; or regret telling them certain things. Some people may use it against you and spread gossip behind your back.

Whatever happens you will not be alone. Somebody else will know; the silence has been broken. You have gone against everything you were told during the abuse about not telling. You have taken control. You have proved that you have that control by speaking out. We like to think that there are many abusers waiting for a visit from the police because so many survivors are now willing to tell a little bit, and then a little bit more and then a little bit more ... there is no stopping us now.
Chapter 9: The legal process
By Tracey Storey, Solicitor

Introduction

The legacy of child abuse can be devastating, and the effects are often felt not only at the time of the abuse but also many years later. Adults abused as children may go for many years without telling anyone what has happened to them. No matter how long has elapsed since the abuse, help is always available and it is important to consider legal advice and options.

There are three main legal options to consider:

a) Reporting the abuse to the police
b) Applying for criminal injuries compensation from the government
c) Suing the abuser/the organisation responsible for the abuser to obtain compensation.

Survivors report abuse or take civil action for a number of reasons. It should be remembered that neither the Criminal Justice system nor the Civil system are therapeutic processes. However, the desire to be heard, to hold abusers to account, to be finally believed, and to obtain justice are important considerations. Sometimes it is possible to get an apology from the organisation which allowed the abuse to occur. Sometimes taking action ensures that no other child has to suffer in the same way. Some survivors find the process of taking legal action cathartic or healing and an important step in the journey of not letting the abuse define them or the next part of their lives. Some, however, find the process very traumatic, and it can cause a resurgence in symptoms and distress. Survivors are not a homogeneous group of people, and their responses to the legal process will be personal to them. Furthermore, abusive experiences are very diverse, and sometimes no matter how damaging the abuse is it may not be possible to either secure a conviction or get proper compensation to help rebuild a person’s life. A lawyer should provide impartial and independent advice, setting out prospects of success, but there are often many personal considerations which only the survivor can evaluate. Sometimes securing a conviction or compensation can feel empty – the survivor still has to live with the consequences of the abuse and it goes without saying that money cannot compensate for the loss of a childhood and long-standing mental health problems which may result. In summary, taking legal action involves taking professional advice and weighing
this up alongside personal considerations. In this respect, taking legal action can be a way of taking back power.

**Reporting abuse to the police**

Deciding to report abuse to the police is not a straightforward matter. Survivors may want to think about what they want to achieve, what their fears are and what support they will have in place. People are often surprised by the long-term nature of a police investigation and the fact that their role is simply as a witness. It is for the police to investigate the crime and the Crown Prosecution Service to decide whether there is enough evidence to have a reasonable chance of a conviction. There needs to be sufficient evidence to prove that the abuse occurred “beyond reasonable doubt”. This can be difficult where a crime happened in secret, was deliberately concealed, and occurred in the past.

If you decide to report abuse, you can expect to be treated sensitively and for your report to be dealt with confidentially. You can make your report at any time. A report can be made by ringing the police on 101 or by attending the front office of your local police station during office hours. If you are in danger or have just suffered sexual assault, you should ring 999. If you attend the front office of the police station, ask to speak to somebody in private. You may not see a police officer straight away but they may take your contact details so a specially trained officer can contact you.

When you first report abuse to the police, the details are usually taken by a sexual offences liaison officer. Later a more detailed statement has to be taken so that the police have all relevant information to start off their investigations. The statement will often be video recorded. The recording can be used as your main evidence later on. After the statement interview, you may find that you remember things you didn’t recall before. If this happens, contact the police so that a further interview can be arranged. It is important that your evidence is honest and complete. Even if you took some actions that you regret or are ashamed of, it is important not to hold back that information. Holding it back could be used to undermine your credibility at a later date. Remember that you were a child and that shame and embarrassment were important tools in keeping you from reporting the abuse in the first place.

The police will sometimes refer to an ABE interview. This is “Achieving Best Evidence”. The police have special guidelines about achieving best evidence in cases involving sexual offences.

It is also important to remember that the media cannot reveal your identity as a person reporting sexual crimes. However, you may wish to tell close friends or family so that they can support you.
After obtaining a video or written statement, the police will then investigate and consider other witnesses, examine phone/computer records and review any relevant information held by others such as medical records or Social Services records. They will also try and identify and locate the perpetrator to formally interview him/her. All of this can take some time. For example, they may be trying to locate other children who also may have been abused, who by now have relocated or have different surnames. You should get regular updates from the police but be prepared for this to take time and don’t put your life on hold. Abuse which happened a long time ago does pose practical problems in securing evidence, but your report should be taken seriously and the matter properly investigated. Corroboration of earlier reports of abuse and similar abuse happening to others by the same person can all help to prove what happened.

The Criminal Court

After the police have investigated, the police will discuss the evidence with a Crown Prosecution Service (CPS) lawyer, who will then decide if there is a realistic prospect of conviction based on the evidence. The CPS is the main prosecuting authority in England and Wales and is responsible for advising the police, reviewing cases submitted by the police, determining the charges, and preparing and presenting cases for Court.

If a decision is taken that a case should go to a Criminal Court, the CPS lawyer will discuss the options available for you to give your evidence to the Court in a way which is comfortable for you. The lawyer then applies to the Judge to enable this to happen. You may decide to visit the Court beforehand to see the Courtroom and video link room before the trial, to help you decide which option is preferable for you. Arrangements can be made either with the police or with the witness support service of the Court.

Some people choose to give evidence about what happened to them via video link. This allows you to be in another room other than the Courtroom, so that you do not have to see or hear the person on trial. You will only see the person asking questions. You can choose to have someone from the witness support team in the video link room whilst being asked questions. You can ask for a break during the questioning.

Survivors often expect to have their own lawyer in the Criminal Justice system. Typically, however, the CPS acts as a prosecutor on behalf of the state and the Defendant has a criminal defence lawyer. The survivor is regarded as a witness for the crown prosecutor and does not usually have access to
legal advice at this stage. The important thing is to give a clear and honest and full account as best you can, bearing in mind that you are recalling deeply personal and traumatic events.

Anyone who reports a crime to the police can make a Victim Personal Statement (VPS) if they want to. Sometimes called a “victim impact statement”, it is an opportunity for you to record how the abuse has affected you personally. It is important for the judge who will take this into account when sentencing.

In most cases involving serious sexual crime, if a Defendant pleads not guilty, a trial will take place and a jury of 12 people will decide whether there is enough evidence to convict. They decide if someone is not guilty or guilty. They don’t declare someone innocent – that is not their role. They have to decide whether the evidence proves the offence beyond reasonable doubt and the Judge directs them on how to do this. The jury weighs up the facts and the Judge decides on matters of law which crop up from time to time as a trial unfolds.

Sometimes abusers change their plea to guilty. If they are found guilty or plead guilty, the Judge, not the jury, deals with sentence based on guidelines. If a sentencing is regarded as too lenient or too harsh, this can be referred to the Attorney General for review.

In June 2013, the Director of Public Prosecutions (Head of the CPS) set up the Child Sexual Abuse Review Panel. This is designed to look at cases again where the police or the CPS decided in the past that no action should be taken, but where survivors feel that their allegations were not dealt with properly. The panel has to review the case and advise whether allegations should be reinvestigated by the police or whether the prosecution decision by the CPS should be reviewed.

Cases can be referred to the panel by individuals by emailing nationalpanel@acpo.pnn.police.uk or by people bringing their cases back to the attention of the police/CPS.

Other remedies

Once you have reported the abuse to the police (and in some cases where you haven’t taken this step) you may wish to consider your further legal remedies. Civil action is about getting financial redress for what you have been through. Whilst no amount of money can change the past, it can help to rebuild your life, enable a return to education, enable you to retrain or get qualifications or access private therapy. Cases involving child abuse, particularly from some time ago, can be complex and it’s important to select a specialist lawyer to help you through this. Once again, seeking compensation can be a long and difficult process and so it is important that you are comfortable
with the lawyer you choose to represent you. Survivors of sexual abuse should expect clear and frank advice from their lawyer with guidance on the prospects of success, the value of their claim and the likely duration of the case. However, equally it should be remembered that none of these things can be precisely predicted. An experienced lawyer in this field should, however, be able to evaluate a case based on past case experiences, despite the fact that all cases are different.

Choosing a solicitor

Seeing a solicitor about traumatic personal experiences can be daunting. Remember everything you tell your solicitor is confidential. You can expect your claim to be dealt with sensitively and professionally. To choose a solicitor it is often best to follow recommendations or to research your lawyer online to see if they have the right skills for your case. ACAL (Association of Child Abuse Lawyers) can point you in the direction of solicitors specialising in this area. Details can be found on their website, www.childabuselawyers.com. When you make contact with a solicitor, ask them how many cases of this type they have concluded and ask them for an estimate of how long the case will take. Ask the solicitor if they can offer a free first interview either in person or on the telephone, so you can decide if you feel comfortable working with this lawyer and talking about the abuse with them.

To prepare for the first interview with a lawyer, make a list of any questions you might have and decide what you do and don’t want to talk about at the meeting. If you do find it difficult to talk about the abuse, then try and write down something so that the solicitor can consider your case and advise you on the prospects of winning. Be aware that the lawyer is there to give objective legal advice. You may not always receive the advice you want to hear, but it is important that the advice is realistic and that you are in a position to make informed choices. If you feel that you will need some support during or after the meeting, then consider asking a friend or family member to come with you or to meet with you afterwards. If you are having therapy or counselling it might be worth arranging an appointment with your therapist after the meeting.

If you have any documents such as papers from the police or a certificate of conviction of your abuser, then you should bring these along to the first meeting together with any other correspondence or evidence that you might have. To help see if you can apply for legal aid, it is helpful to bring along information about your income and expenses and those of your partner. It will also assist if you have proof of benefits and details of any savings that you might have, together with your National Insurance number.
Your solicitor should listen to what happened to you and will ask you a number of questions, which you should try and answer as best you can. Your solicitor will then advise you on how the law works and whether they can take the case forward on your behalf. If a solicitor feels that they cannot take your case forward they should explain the reasons to you. Your solicitor should also advise about how the claim is to be funded. Your solicitor won’t be able to provide you with counselling support, but if you need this they might be able to help point you in the right direction. Make sure that you tell someone you are attending the meeting and that family and friends are on hand to help you afterwards. The initial interview is the beginning of the process, and as your case progresses, there are stages which will require your involvement, such as attending a doctor such as a psychiatrist for assessment of the impact the abuse has had on you. This is an important part of the claim as it helps your solicitor to value your claim for compensation.

Criminal Injuries Compensation

The Criminal Injuries Compensation Authority (CICA) administers a government scheme to compensate victims of crime. Survivors of childhood sexual abuse can apply to the CICA for compensation. If an award is made it is paid to the survivor from the state. Since 1996, there has been a tariff-based scheme for all applications, and compensation is awarded on a different basis from compensation in Court cases. Since 1996, there has been a variety of schemes. A new scheme came into force in November 2012.

To apply to the CICA under the 2012 scheme, it is firstly necessary to satisfy the nationality and residency requirements. The abuse has to have taken place in England, Scotland or Wales.

The general time limit for making an application is two years from the date of the incident. However, if a person is under 18, then an application has to be made before their 20th birthday. In cases involving sexual abuse of children, it has to be two years from when the case was first reported to the police.

The 2012 scheme is clear that if a report has not been made to the police, ordinarily no payment for compensation will be made. There are, however, some exceptions to this rule.

Generally speaking, the CICA does not pay legal costs, and the responsibility for showing eligibility to apply to the scheme is on the applicant. The applicant also has to get basic medical evidence, paying up to £50 for this. However, if an applicant cannot afford to pay for medical evidence, the CICA may pay for a report and deduct it from the award at the end.
There is a limit to the loss of earnings that can be claimed from the CICA. It is only possible to apply for a loss of earnings under the 2012 scheme if an applicant has no or very limited capacity for paid work. It is possible to get help with care costs, but these will only be awarded in exceptional circumstances under the new scheme.

The CICA is able to take into consideration criminal convictions of a claimant and reduce awards as a consequence. The CICA can also consider any character evidence including involvement in drugs or crime, tax evasion or benefit fraud. A reduction or a refusal of an award can be made where the CICA consider that the claimant has failed to co-operate with a police investigation.

The CICA’s first scheme was created in 1964. If the abuse happened before 1964, then no award would be possible. Additionally if abuse took place before 1st October 1979 and the survivor and assailant were living together as members of the same family, then in these circumstances no award is made under what is known as the “Same Roof Rule”.

There are essentially five categories of compensation for abuse. These are the physical abuse of adults, physical abuse of children, sexual offences where the victim is any age, sexual offences where the victim is a child or lacks capacity, and there are some additional awards which cover sexual infections and other matters. It is only possible to claim for the three most serious categories. The most serious injury is awarded at 100%, with the next at 30% and the next at 15%.

Generally speaking, an award by the CICA is usually much less than a Court would award. If you have a CICA claim and a claim in the Court, the CICA will generally await the outcome of the court case before making an award of compensation. There is an obligation on the part of the applicant to repay the CICA award if they are ultimately successful in the separate civil action. Accordingly there may be greater advantage to a civil claim where some costs may be recoverable as opposed to the CICA claim where costs are limited and the awards less. However for some people, a CICA claim is the only option available to them.

Some people choose to apply to the CICA themselves without using a lawyer. In some cases this can be straightforward, and an application is made by a form which can be found on the CICA website at www.justice.gov.uk/victims-and-witnesses/cica. The application is then assessed on the basis of the written application without a hearing, unless you choose to apply for a review or an appeal of decision. The compensation is assessed by reference to set guidelines. It is usually advisable to apply for Criminal Injuries Compensation in addition to making a claim in the Courts. This can be a safeguard in case the civil claim is unsuccessful for any reason.
Civil Claims

It may be possible to bring a child abuse claim in the Courts against the individual who abused you, and/or the organisation that employed the abuser or the organisation that was responsible for your care. Civil cases of this kind are often quite complex, and usually you will need a solicitor to bring such cases.

All legal claims have time limits within which time Court proceedings must be issued. In cases involving child abuse it will ordinarily be three years from your 18th birthday. The Court has a general discretion to extend time limits, and there are special rules for people with learning difficulties or mental health problems. Time limits can be a problem. Certain reasons for not bringing cases earlier are regarded by the Court as either good or bad reasons for delay. It is important to take specialist legal advice about overcoming time limits in such cases. If you have recently been successful in securing a conviction of your abuser, it is much easier to bring a late civil case. Not being aware of the law is not regarded as a good reason for delaying in coming forward with a Court case. Over recent years the Courts have begun to have a better understanding of the nature of abuse and why it is sometimes difficult to come forward. The law on time limits has changed a lot in recent years, and your solicitor will be able to advise you on this.

For some people suing their abuser is an empowering experience and ensures that compensation is being secured from the person who hurt them. However, it is only possible to sue an individual abuser if he or she has the assets to meet a claim. There is little point in bringing a civil action against somebody who cannot meet a claim for damages. For some people, however, suing the abuser directly is very intimidating and involves sharing personal information about their condition and adult life that they would prefer their abuser not to know. Sometimes survivors feel very angry at the organisations that employed the abuser, or the organisations which were supposed to have protected them as children but failed to act. It is possible in certain circumstances to bring cases against local authorities and their Social Services departments for failing to protect children. It may also be possible to sue the organisation who directly employed the abuser, such as a church organisation or a school. If a recent conviction has been secured, the insurers acting for the organisation which employed the abuser will often accept responsibility at an early stage and work towards an out of Court settlement.

Claims for compensation rarely go to Court. If there is a strong case, the cases are usually settled out of Court. This is particularly the case where the abuse has already been proven in another Court, the abuser was employed by somebody, or a local authority failed to intervene when it should have
done. When suing a local authority for failing to protect a child, expert evidence is usually needed to assess the standard of social work employed at the time.

In civil cases it is usually necessary to obtain a detailed report from a psychiatrist or a psychologist detailing the impact of the abuse upon the individual. It is also necessary for the solicitor to consider how it has affected your ability to earn and whether there is any need for any ongoing treatment. Consideration should also be given to whether there is a need to retrain or gain qualifications to make up for time lost in education because of the abuse.

The amount of compensation that is likely to be received in any given case depends on a number of factors, including the impact of the abuse and how it has affected your life. If a claim is successful, compensation can be awarded for the abuse suffered and any long-term psychological problems. It is also possible to claim lost earnings, the cost of therapy, and other expenses. Because we are all different, the consequences of similar abuse can vary from person to person. Your solicitor should be able to advise you on how the Courts approach the assessment of compensation and how this would be applied to your case. As your lawyer learns more about you and obtains evidence such as medical reports, they will be able to provide you with a more accurate idea of the financial value of your case. It should be remembered that the Courts are generally speaking reluctant to make very large awards for compensation in these cases. Judges have been reluctant to accept that all adverse life events flow from the abuse. The reality is that people’s lives are very complicated and a number of factors have to be taken into consideration when assessing compensation. People have different levels of resilience and some people respond better than others to therapy and counselling. Some people who have suffered sexual abuse in childhood do very well in their careers and others do not. Others find it difficult to work at all, or feel that they have never reached their true potential.

**Funding**

There are a variety of ways of funding legal cases involving childhood abuse. Public funding or legal aid is still available for some types of cases. Cases also can be funded under a no win no fee agreement. Public funding is means tested. To check whether you are financially eligible for legal aid, it is best to check the legal aid calculator at [www.gov.uk/check-legal-aid](http://www.gov.uk/check-legal-aid). If you are not eligible for legal aid, then it is likely that your case will be funded by a no win no fee agreement (otherwise called a conditional fee agreement).
Even if you win your case, you may have to pay some legal costs. You must remember to ask your solicitor about this at the first meeting. Since recent government reforms to funding in personal injury cases, it is likely that there will be some deductions from any compensation you are awarded.

With CICA claims, there are a variety of funding agreements possible. These include a limited form of legal aid, contingency fee agreements and private agreements. You are entitled to ask for full costs information and funding information when you speak to your lawyer so that you can choose the best funding for your case.

Why bring a claim?

Survivors bring claims for many reasons. Survivors want to be heard and believed and they want somebody to take responsibility for the abuse they have suffered. They are often motivated by the desire to make sure that there are no more victims and that no other child has to suffer as they have done. They want to be heard and to be believed and to get justice. Sometimes they want an apology and sometimes simply to get access to funds to pay for much-needed treatment and therapy. Survivors also see civil action as a way of taking back power or to get closure or relief from the symptoms of abuse.

It is, however, important to remember that a claim for compensation in civil law cannot punish the abuser, and compensation is all that can be awarded. It is essentially a forensic exercise in proving your case, and survivors may feel that it is somewhat artificial. It is, however, your choice to bring a claim and you have more control over bringing a civil claim against your abuser than being a witness in a criminal trial. Some people can find the process cathartic. Others may feel re-traumatised by the experience. Taking legal action can be a useful way of restoring self-agency but it can also reinforce a person’s self-image as an abuse victim. This is because of the need to identify damage in order to progress the litigation. Not everyone who has been abused will be able to take legal action, but for some people, taking legal action can be transformative and a step on the journey to rebuilding their lives.

Tracey Storey is a partner with Irwin Mitchell LLP, specialising in child abuse claims. She heads the national abuse team at Irwin Mitchell, is an executive committee member of the Association of Child Abuse Lawyers, and she is the secretary of the Association of Personal Injury Lawyers’ Special Interest Group on child abuse cases.
Conclusions

NAPAC has had contact with many thousands of survivors of childhood abuse. As we say earlier in this book, everyone’s experience of suffering is different, and how we move on in recovery involves a deeply personal journey. NAPAC simply exists to help people along that journey, and to share what we have learnt with whoever wants to listen. And we have all learnt a great deal, which these pages now offer to the reader. Our healing journeys go on. We learn that the vast majority of people are not abusers, and that we can trust others, slowly at first and then more fully. We learn that identity is not defined by abuse, we are not just survivors but also complete individuals with normal lives to lead.

There are some big questions for survivors which remain hard to answer. Unfortunately it remains a fact that the most of people who rape and beat children never face justice. This is despite great improvements in policing and prosecution. It is just very difficult to prove a crime which usually happens in secret, especially if it was many years ago. What is a survivor supposed to do when the police or prosecutors say there is not enough evidence, or if a defendant is found not guilty? All such survivors can do is seek the support needed to make an emotional and psychological recovery for themselves. In any case, no amount of criminal compensation scheme money will on its own make the nightmare stop.

Some people ask why survivors said nothing when the crimes were being committed. We hope we have answered that question in this book. Abuse persists because of secrecy, fear, intimidation and unwillingness by sections of society to really engage with these issues. We believe that we make it more difficult for abusers to hurt children today by talking about what happened to us. We know that it is difficult for many people to hear our truth, but we cannot cease to be vigilant when it comes to protecting our children, and one of the most powerful things we as survivors can do now is speak out. Thankfully we do seem to be moving in the right direction and at long last survivors are being given a voice. The media has a huge role to play in this respect, and NAPAC has been very fortunate that we now have many friends and supporters throughout the media.

All this publicity has made it easier for people to talk about childhood abuse they suffered. That is what many thousands of people who have found the strength to contact NAPAC have already done. They have spoken out and struck a chord for their own personal freedom. They are also alerting
society to this scourge in our midst. Most children grow up safe, sound and lovingly nurtured, and long may that continue. But many don’t, and our hearts go out to them and to the millions who have suffered in the past.

One journalist said, in respect of the terrible cascade of revelations in recent times: “This (abuse) isn’t just a news story. This is about how we have collectively failed our children in the past.” That is sadly true, but we do now have the opportunity to change that, and we believe that NAPAC has a huge and vital role to play. It was always going to be a difficult task requiring much courage and persistence, and though we have made some massive strides there is still much to do.

We need now to take the process further, to take a global perspective and realise wider responsibilities. Our website gets visits from all over the world and we get e-mails from all over the world. We know that every country needs to be able to support survivors of childhood abuse more effectively. We hope this book gives a model of how to start doing it.

We need to extend the service provided by our unique Support Line. We need to set up Support Groups wherever they are needed. And we must do this in our prisons too, as we know that they are places teeming with survivors. We have a lot to do! A Chinese philosopher once said, “a journey of a thousand miles begins with a single step”. Please support and join us at NAPAC as we continue this journey.
Bibliography

Jon Brown et al 2011 Sexual Abuse – A Public Health Challenge NSPCC

Cadman et al 2012 Barriers to cervical screening in women who have experienced sexual abuse: an exploratory study Journal of Family Planning and Reproductive Health Care 38: 214-220 (jfprhc-2012-100378)

Lorraine Radford et al 2011 Child Abuse and Neglect in the UK today NSPCC

Council of Europe 1 in 5 campaign http://www.coe.int/t/DG3/children/1in5/default_en.asp

Donald Winnicott 1973 The Child, the Family, and the Outside World Middlesex

Judith Herman 1992 Trauma and Recovery Basic Books
Useful contacts

BACP British Association for Counselling and Psychotherapy [www.bacp.co.uk] Government accredited psychological therapists’ register

ChildLine [www.childline.org.uk] Support for young people under 19 years of age 0800 1111

Counselling Directory [www.counselling-directory.org.uk] List of practitioners who are members of a recognised professional body or who have shown copies of their qualifications and insurance cover

Elefriends [www.elefriends.org.uk] Supportive on-line community

Emergence [www.emergenceplus.org.uk] Personality disorder website

First Person Plural [www.firstpersonplural.org.uk] Survivor led association for dissociative identity disorder and similar complex dissociative conditions

MIND [www.mind.org.uk] Mental health charity 0300 123 3393


NAPAC [www.napac.org.uk] Support and signposting for adult survivors 0808 801 0331

NSPCC [www.nspcc.org.uk] Report any concerns about a child 0808 800 5000

Survivors UK [www.survivorsuk.org] Support for male adult survivors 0845 122 1201

Samaritans [www.samaritans.org] Listening support for anyone struggling to cope 08457 90 90 90