

# **Surviving the Sexual Effects of Childhood Sexual Abuse**

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Sexual abuse is, sadly, more common than many people realize. About 1 out of 4 girls and 1 out of 6 boys are thought to have been sexually abused. (The number of boys may be underreported due to greater stigma.) Most sexual molest is inflicted by someone whom the child and / or family knows or trusts, not by a stranger. Pedophiles (adults who see children as possible sexual partners) are often very good at understanding what children like or need. Sometimes they will pick on a child who is a little bit lonely or vulnerable in some way. They may also make the child feel special or needed. On the dark side, though, they may threaten a child with punishment if they divulge the secret of the molest, or threaten to hurt the child's loved ones, or even pet.

Having been sexually abused is a terrible burden. Because the person is often known to the child and / or family, there may have been trust in the abuser, making the betrayal very confusing. The acts performed on the child or that the child performed on the adult may have felt good physically, but when the child learns the behavior was wrong, they may feel deep disgust or shame about their body and about sex.

## ***What Causes the Effects of Abuse?***

The reason abuse causes PTSD is complex. One theory is that when the abuse occurs, there is a great deal of stress, which causes the adrenal glands to release stress hormones to the brain, specifically the amygdala, an almond-shaped structure in the brain. When the amygdala receives these stress signals, it tells the brain to make stronger memories. The memories are stored all over the brain, not just in one area. This makes the brain hypervigilant, or overly watchful, for anything that resembles possible abuse. The brain may also create flashbacks of the abuse as well as nightmares or even night terrors.

How people cope with the abuse differs. Some individuals are fortunate to have supportive families. They may have felt secure about telling their parents about what happened. They may have seen the loving adults in their family do what was needed to protect them, like informing authorities. They may have gotten treatment soon after the abuse, which mitigated the effects.

Even with good coping skills, people may find that their ability to enjoy sexual experiences has been compromised. Remember how the brain intensely remembers experiences that are stressful? Your brain is connected to nerves throughout your body. Your skin, especially, is rich with nerve endings, and no more so than in the erogenous zones (skin especially sensitive to sexual arousal). Sometimes all it takes is a very slight movement, even a breath, from a partner during love-making to trigger a so-called body memory of abuse. The survivor may experience the body memory without any actual memory of the abuse. He or she just knows that whatever their partner did bothered them, and they pull away.

But hypervigilance doesn't only occur during love-making. The fear response can generalize to any situation that the survivor senses is sexual. For example, a woman who has been abused may pull away when her partner approaches her to initiate sex. A man who has been abused may have difficulty performing, or avoid sex and intimacy altogether.

Conversely, sometimes people who have been abused act out sexually. In order to feel psychologically strong and in control, a survivor may try to master feelings about sex by being with many partners. Other behaviors, like watching internet pornography or turning to paid sex may be the result of experiencing childhood sexual abuse.

### ***How Can Therapy Help the Survivor?***

Therapy can help overcome the effects of childhood sexual abuse by using many types of treatment modalities, including:

- Cognitive reframing to put the abuse in perspective and begin the process of changing the way the survivor thinks about the abuse.
- Shame reduction to help the survivor realize that he or she was not responsible for the abuse, and that he or she is not alone
- Individual therapy to overcome the psychological effects of abuse
- Guided imagery to help with unwanted fantasies or imagery
- Relaxation training to help with hypervigilance
- Becoming assertive in order to have appropriate boundaries within relationships
- Learning ways to make touch safe
- Specific touching exercises designed to begin making sex pleasurable again
- Addressing specific sexual issues such as painful intercourse or delayed ejaculation
- Working with the survivor's partner to help him or her understand the effects of abuse and his or her role in healing

Childhood sexual abuse in itself is treated by many psychotherapists using many modalities. Sometimes they do excellent work in helping the patient feel less guilty and ashamed, and to relieve depression and / or anxiety. And not every patient who has been sexually abused experiences problems with sex.

For patients who have been sexually abused and have problems with sex, psychotherapy may only take them so far. It is not unusual at The Buehler Institute for us to see patients who have had several months of therapy, but still not be able to function sexually. That is because, unfortunately, many psychotherapists are not trained or are uncomfortable talking about sex. We are comfortable, and we not only talk, but we listen.

Whether you contact us, or someone else in your area, please ask the therapist if he or she is comfortable talking specifically about the sexual problems caused by the abuse. To find a referral, contact AASECT at [www.aasect.org](http://www.aasect.org).

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