Exploring the Effects of Early Life Sexual Abuse in Later Life among Catholic Women Religious

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ABSTRACT

This paper explores the variety of associated responses in later life to early life sexual abuse reported by aging Catholic nuns (heretofore referred to as women religious). Specific attention is given to current effects and the strengths and resources these participants identify when integrating their personal histories of sexual abuse. The roles of spirituality and Catholic religious life are explicitly explored as factors in addressing unwelcome effects in later life, which research participants associate with sexual abuse.

Research on sexual abuse and its effects is extensively due to a growing awareness and concern about the prevalence of sexual abuse against children and sexual violence against women (Koss et al., 1994). However, investigating sexual abuse rates and its effects among aging populations and specifically Catholic women religious is severely limited. In response to this limitation, Saint Louis University's School of Medicine conducted a study to advance knowledge about "the consequences of sexual trauma among Catholic nuns in the United States and to compare the child sexual abuse experiences of Sisters with these figures for lay women" (Chibnall, Wolf, Duckro, 1998, p. 4). Twelve participants were recruited from the original study who were sexually abused before the age of 18 and are 65+ years of age. Contacts were made only with those who provided information in the original study stating they were willing to participate in future studies.

Biography

Gary Urban Behrman, PhD, LCSW, M.Div., is an educator, administrator and therapist with clinical expertise in trauma and grief work following loss. His published research interests are with aging populations and the role of spirituality and religion in recovering from trauma and loss. Currently he is serving as Associate Dean of Admissions at Saint Louis University's Graduate School and teaches in the School of Social Work. Exploring the Effects of Early Life Sexual Abuse in Later Life among Catholic Women Religious

PURPOSE OF THIS STUDY

In 1995, the U.S. Bureau of Health Professions commissioned a White Paper on geriatric education for social workers (Berkman, Damron-Rodriguez, Dobrof, & Harry, 1995), identifying theoretical challenges and the expanding role of social work in serving older adults (Abramson & Halpain, 2002). Because of society's rapidly expanding aging population, the findings in the White Paper call social workers to engage in responsible and credible research with older adults that will positively influence healthcare practices and policies for an aging society (Dill, 2001).

This research addresses three gaps in the literature. First, the bulk of empirical studies on childhood sexual abuse are based on work with children, adolescents and younger adults. The literature contains relatively few studies involving the impact of childhood sexual abuse among older adults (Graziano, 2003; Luthar & Cushing, 1999). The limited research that does exist, only indirectly refers to aging adults who have experienced early life sexual abuse (Beitchman, Zucker, Hood, DaCosta, & Akman, 1991; Browne & Finkelhor, 1986; Cahill, Llewellyn, Pearson, 1991; Finkelhor, et. al. 1990).These findings suggest a need to explore if effects of early life abuse re-emerge and/or are exacerbated in later life in the voices of those affected (Granziano, 2003; Lantz & Buchalter, 2001).

Secondly, much of the post childhood sexual abuse research focuses upon pathogenic outcomes (Kaplan, 1999). Robert Peck's research into aging focused upon geriatric populations (mostly male) and their positive ability to adapt, shifting research away from focusing upon maladaptation (Peck & Berkowitz, 1964). There is relatively little in the literature about adults who do not exhibit negative outcomes in old age (Glantz & Sloboda, 1999). Borrowing the term "salutogenic" from Aaron Antonovsky's research on resiliency, this study's perspective "makes a fundamentally different philosophical assertion about the world than does pathogenesis. It directs us to study the mystery of health" (Antonovsky, 1987, p. 5). This approach guides the interview away from what caused or will cause disease within a person or maladaptation with their relationships following sexual abuse. Interviews explore what strengths are operating effectively and efficiently in managing sexual abuse from the perspective of participants, and in particular if spirituality and religion are perceived and utilized as strengths (Cole, Benore, & Pargament, 2004). This approach to interviewing aligns with social work's strengths base perspective (Saleeby, 1997).

Thirdly, there is comparatively little empirical research directed at female religious professionals with histories of sexual abuse (Leadership Conference of Women Religious (LCWR), 2005). Dr. Margaret Miles of Harvard University notes in her forward to Sipe's (1995) book, *Sex, Priests and Power: Anatomy of a Crisis* that research with this population is waiting to be done. The number of women religious is dramatically decreasing. Today there are approximately 63,500 Catholic religious women in the United States, with the vast majority over the age of seventy (LCWR, 2008). Recording these women's stories offer insights into their lives and the legacy they created. For social workers, their stories are critical when identifying our profession's earliest efforts to serve populations marginalized due to socio-economic, health, gender and race status. Catholic religious women have been initiating, maintaining and providing social and health services since the late 18th century in the United States (U.S.) from a faith based mission. The findings of this study beckon for more research in the arena of spirituality and religious beliefs as a strength based resource following crisis events.

SPIRITUALITY & RELIGION

Research that explores the effects of childhood sexual abuse upon a person's religious beliefs and spiritual life indicate a diminished trust in God's love and acceptance and a disconnection from formal religion (Blazer, 1991; Cole, Benore, & Pargament, 2004; Hall, 1995). Other studies denote that childhood sexual abuse influences adults' perceptions of God as being more distant and disapproving (Kane, Cheston & Greer, 1993). Koenig, McCullough, & Larson (2001) analyzed the data findings from 850 studies that sought to correlate the potential benefits of religion upon health. The overwhelming majority of studies indicate that persons who self-identify as being religious and participated in religious activities exhibited and/or self reported higher levels of well being than populations with no religious identity, affiliation or belief in God. Most scholars agree that religion and spirituality become increasingly important in old age, especially following trauma producing events (Bianchi, 1984; Koenig, 2000; Moberg, 1990; Stokes, 1990; Schultz-Hipp, 2001; Moeller, Bachmann & Moeller (1993).

With few exceptions, research with numerous Americans has shown that the levels of religious beliefs, behavior, and experiences that reflect the positive influences of spirituality increase with age (Kimble, McFadden, Ellor, Seeber, 1995; Koenig, 1994; 1995; 1997; Ferraro, 1997; Koenig, McCullough, Larson, 2000). When religious resources are readily accessible it is anticipated that religion will play a prominent role for addressing trauma (Pargament, 1997). It appears that religious resources matter for older adults when interpreting and addressing the challenges of multiple losses that aging poses in later life.

These participants self-identify as women religious and it is assumed their spirituality and religious experiences are integrally intertwined in both their interpretations of the effects of sexual abuse and the role of spirituality in managing unwelcome effects. The working descriptions of spirituality and religion used when presenting and analyzing data from this study are based upon research in this field. For many older adults, understandings of religion and spirituality are closely related and separating the two does not make sense to them (Zinnbauer, et. al., 1997). Because of immense religious diversity great care must be taken into making generalizations about how religion is distinguishable from spirituality. "The generalizations about religion used in research vary widely and are not necessarily consistent with each other and the measures and indicators of religiousness used in research are numerous, each viewing its object of study from a somewhat different perspective" (Moberg, 2001, p. 9).

The term "spiritual is broader than any religious group and it takes into account the diverse pluralism of today's world... (someone can speak) very positively about their own personal spirituality and still not clearly be connected to any religious group" (Friberg, 2001, p. 183). A holistic approach to understanding how religion and spirituality are related "focuses less upon the countless analytically separable physical, mental and social dimensions than upon how they all come together and cannot be separated in real life" (Moberg, 2001, p. 14).

The working description used in this study is that religion organizes spirituality into institutional practices and theistic beliefs by which individuals and communities self identify and create meaningful relationships with each other (Zinnbauer, et. al, 1997). Although spirituality is a widely used word "precise definitions are rare in professional circles and there is no universal definition that can be operationalized and measured" (Koenig, 1997, pp. 70-71). There are many approaches to identifying characteristics of spirituality (Hodge, 2003). Certain characteristics of spirituality are repeated in the literature (Zinnbauer, Pargament, Cole, Rye, Butter, Bleavich, Hipp, Scott, Kadar, 1997). In general, these characteristics can be described as a means to achieving a deep sense of wholeness, connectedness, and openness to ultimate meaning (Canda & Furman, 1999).

This study supports an understanding of spirituality as a core function of human life, which supports wholeness and meaningful relationships and nurtures the possibility of creating ultimate meaning in life as each person defines this. "The spiritual is not one dimension among many in life; rather it permeates and gives meaning to all of life. The term spiritual well-being indicates wholeness in contrast to fragmentation" (Thorson & Cook, 1980, p. xiii). Spirituality is an innate human quality that is a central force keeping us whole and also is our experience of that unifying life force (Faiver, Ingersoll, O'Brien, McNally, 2001).

This study explores how the religious structures, rituals and symbols, which comprise these participants' Catholic religious life, both sustain and challenge their relationships with self, others and their understanding of God and how their religious beliefs and practices support wholeness and/or fragmentation when addressing their early life sexual abuse. The interview questions elicit their interpretations of what their experiences of sexual abuse mean to them today and how they perceive their religious institutions diminishing and/or supporting their interpretations and strategies that promote health in old age.

In this study spirituality is not a biological substance to be measured, but rather understood as an interpretative act, created by participants as they seek wholeness and meaningful relationships in their environments at this time in their lives (Cowley, 1996). "Spirituality has also come to hold a non-religious meaning, a tendency for one to strive for those values and purposes that express whatever the individual feels is ultimately meaning to him or her" (Paloutzian, Emmons & Keortge, 2003, p. 124). The working description of spirituality, which I have organized my data analysis is *spirituality is that which connects these participants to self, others and God in meaningful, responsible and purposeful ways*. This description is grounded in the cited literature (Fukuyama & Sevig, 1999; Moberg, 2001) and comprises both the functional (relationships with others) and substantive (relationship with God) dimensions of spirituality (Pargament, 1997). "Listing the characteristics of any given phenomenon is not the same as defining it" (Moberg, 2001, p. 4). Utilizing this working description also assists in organizing the effects of sexual abuse and the strengths which assist in mitigating unwelcome effects.

Obviously, religion plays a key role in these participants' lives. Religion is "an enduring institution providing an identity and belonging in the majority of societies in the world today" (Rizzuto, 1993, p. 17). The working description for this study is that *religion is the institutionalizing of meaningful connections (relationships) and provides the authority, tradition, rituals and guidelines that inform and inspire people how to be spiritual.* In other words, at the core of religion are the guidelines in how to be connected to self, others and God in meaningful, responsible and purposeful ways.

SILENCING THEIR STORIES

Consideration is given to why this elderly subpopulation is being studied and for what reasons. This sample is chosen because these participants' stories offer a critical window into the lives of early 20th century women, not because of their unique religious status, but because their early life sexual abuse experiences are perhaps representative of other women of this time. Although these religious women served in many public capacities, their personal stories of sexual trauma, like so many other women of their era, demanded silence. Ecclesial and socio-political-economic structures defined the limitations of women's voices in telling their stories of abuse and patriarchal structures limited how and if women could address, interpret and speak about their sexual abuse. Catholic cultural-religious institutions greatly influenced these women's lives and provided a particular frame of reference for their interpretations of what sexual abuse and their Catholic faith means to them today.

Sources of moral and religious authority within Catholic women religious environments were strictly defined by the Roman Church. During their formation and early professional lives prior to Vatican II reforms (Bondy, 2008), minimal personal authority existed. Group cohesion was highly valued and reinforced. There are dominant themes of personal authority and external authority that are juxtaposed in these interviews, a tension that often operates in many people's lives. It is important to be sensitive to the difficulties these participants report in claiming personal authority when interpreting their sexual abuse. The impervious parameters that exist within cultures, religions, and/or societies can be difficult to scale by individuals whose early life formation and training occur in myopic, colloquial environments, where minimal alternative perspectives are introduced or tolerated. These structures often negate and/or silence interpretations and meaning that individuals assign to their relationships (Rossman & Rallis, 1998; Becker, 1997).

"It is through social participation that the perspectives shared in a group are internalized...Variations in outlook arise through differential contact and association. Thus people develop different modes of life and outlook not because of anything inherent but because similarity of occupation and limitations set by (their environments) dispose them to certain restricted communication channels. Those in different ethnic groups form their own distinctive cultures because their identification inclines them to interact intimately with each other and to maintain reserve before outsiders" (Manis & Meltzer, 1978, p. 112).

All of the research participants of this study managed their early sexual abuse in silence and isolation for several decades within and outside of their religious communities, where to speak of sexual abuse was shunned and avoided. In the Chibnall (1998) study the mean time from the sexual abuse event to disclosure was 54 years. For this study, the mean time of disclosure was 40+ years excluding the two participants who reported their abuse for the first time to me. For these two participants disclosure with me took place 55 and 75 years after the sexual abuse. These numbers may be normative for many women of their era considering societal and patriarchal restrictions and paltry psychological services for women prior to the 1970's.

PARTICIPANTS

Dr. John Chibnall, PhD, psychologist and professor at Saint Louis University's School of Medicine, originally surveyed 1212 nuns regarding sexual abuse (Chibnall et al, 1998). The majority of them are represented in the Leadership Conference of Women Religious (LCWR), consisting of a systematic random sample of 2,500 women religious selected from 29,000 names in order to obtain prevalence estimates for sexual abuse within a margin of error of $\pm 2\%$. A total of 1,210 women responded to the survey.

Data outcomes reveal prevalence estimates for sexual abuse among this population within a margin of error of $\pm 2\%$. About 19% of respondents reported some type of sexual abuse and various levels of subsequent trauma. Twelve women agreed to participate and met sample criteria, which falls within normative standards for qualitative research (Creswell, 2007; Marshall & Rossman, 1999; Miles & Huberman, 1994). Twelve religious communities were represented, with each participant belonging to a different community. Participants reside in ten

different states, ranging from the east to west coasts and the northern and southern boundaries of the U.S. Only one Sister is fully retired, while four are partially retired and the remaining seven are actively engaged in professional ministry.

All participants in this dissertation were sixty five years and older, with the oldest participant being eighty nine years old with the mean age of seventy four. All self report sexual abuse before the age of eighteen with various levels of accompanying self identified disruptive effects. In order to ensure goodness of fit with the Chibnall (1998) study, the same criteria for early life sexual abuse was used. "Any sexually-orientated contact with a person of the same or opposite sex, including hugging and kissing (with clear sexual intent), genital fondling, disrobing, genital contact, and/or sexual intercourse, where the target of the sexual behavior is less than 18 years of age" (p. 5).

Participants reported a variety of sexual perpetrators. Four participants reported older male siblings; three reported a father or stepfather, one a grandfather, two older neighborhood boy(s), one a janitor, one a brother-in-law, one a priest, and one reporting an older religious Sister who was her immediate Superior. Some participants reported more than one sexual abuser.

RESEARCH FINDINGS: EFFECTS OF SEXUAL ABUSE

In general, sexual abuse in early life affects each participant differently today, however, there do exist some dominant patterns that reappear in the data. These patterns consist of low self-esteem, lack of self-confidence, depression and anxiety, misplaced anger, disassociation from one's body and the inability to trust feelings. These data emerged from the data when asked how their early life sexual abuse influences their relationship with self today.

Yeah, yeah and just very anxious and just always like nervous and, like, I'm still very work oriented, that's still a piece of me. I think that's just part of me too. But, I'm a lot more, I would say, easier to speak with, you know, one time, I think at one time I was like, well even with the kids, I was, like, real strict and now I'll, like, laugh and it's, like, they're easier to stay in my classroom. "How do you connect that, excuse me, but how do you connect that with the childhood sexual abuse, the tension, anxiety?"

Well, that's very easy to know because when, it was with my brother and I was all, like, kindergarten and so like, sometimes I didn't know exactly when it was going to take place. And he would just ask me, you know, then . . .

"So, you were that young?"

Yeah, I was. I was very young.

"And was he older than you?"

He was older than I was, uh huh, and so that, in spite, I've gone through therapy too, so it has taught me that, I was so young and he already showed me that sexual piece.

"So, he was somewhat older than you then?"

Yes, and so, so I think, I just wasn't ever sure when it was going to happen so that brought me tension within my own personhood and not feeling relaxed. So, anxiety, well, I do feel, even though I feel like I try to bring peace, there is a sense of turmoil that sometimes I feel like that I'm not always at ease. I really have to work toward trying to be myself and I'm very tense. I'm very intense.

This participant connects her present anxiety of being on guard for the unexpected with

her early life sexual abuse. For her, it is difficult to be at ease with self and others in the present

because of her history of sexual abuse. Other Sisters reports similar effects.

I have, still have a feeling that there is always something going on that's harmful to me but I'll never know and I can't really, some of the stuff that bothers me because I might make everybody mad. I mean, that's still there and I'm sure that's why in my childhood, I believe the world's not a very nice place and they're out to get you and I'm sure that's the atmosphere. For a while, I felt I was weak because I was sexually abused.

Yes, I did have some illness and it was mental illness and that was very, very, very hard time in my life, you know, and I had come through that and it was a very hard time for me to go through that and I never thought I would recover, but I did. So if anything scares me, it's that, that that would come back to me and I don't think it will but I still am under the care of a psychiatrist who knows me very well and the medication works well for me and I've been very open with her and I use to have fears about it (sexual abuse) but now I'm resolved, pretty much resolved that I'm going to be okay with that.

The fact I was like angry, always fussing at something. I was never really at peace. I myself cannot see how the connection is there, but there must have been something. I felt like an empty shell just functioning. You know, teaching doing my job, but nothing inside.

These participants all express how the sexual abuse disconnects them from self and others, with one using the metaphor, *empty shell*, to capture her experience. She interprets this for me.

So, I think the most difficult piece of, like, trying to heal completely is that sometimes this depression comes in and it makes me stop trying to, I just have to, I have to use all my energy towards just trying to be okay, you know, so then it doesn't help me concentrate on trying to be better myself, as a person, so, well, I think that the part that troubles me is, I think to myself once in a while, 'now if I didn't have it (sexual abuse) happen,' okay, 'if I didn't have it happen? Would I have so much trouble with the Sisters I live with?'

"Did you at one time?"

I did. Sometimes I get feeling so sorry for myself and I say if people only knew me, how could they say this to me that I'm important to them. So, but that doesn't last very long, it used to. I used to go for days without talking to anybody and that has not happened to me in years. I have just decided that it's not going to define me and I'm more than that and I have good friends along the way

For the above Sister, her sexual abuse has created a disconnect between her and others,

which threatens the meaning of her life as a religious woman. Another Sister reports abusing

alcohol as a way to deal with the disconnect from self and others.

I was into some alcohol abuse and I think that triggered a lot of that because I resolved, 'Well, I'll just stop drinking alcohol.' And what I was left with was this terrible condition.

"After you quit the alcohol?"

And I don't know if that brought it on or if it (sexual abuse) was just dormant and it just came to light then.

"What did?"

The, the mental breakdown or nervous breakdown whatever you want to call it. This diagnosis is depression and anxiety and I was told right from the get go that the prognosis was good, that I could get through this and I said, 'I don't believe you. I don't believe you' to my first doctor, so . . .I had talked to a medical doctor about it. I told him I had been drinking but I had taken myself off of that. He said, Well you have been self medicating yourself. I said, well I guess so. And I think I worked too hard and it got to the point that I just, I just lost it, I couldn't go on.

"You felt that dark . . .?"

I had to come to believe it, you know, but through a lot of therapy and a lot of good people, I couldn't tell you how many people reached out to me to help me and would go on walks with me and take me someplace to get ice cream or go to dinner or ride with me, 'Come ride with me.' You know, it was just incredible. I knew, I knew people but I didn't know I had that many friends, you know, so, so probably all of that has some bearing on the abuse that I had as a child, a young child. It certainly gave me a sense of guilt, shame and guilt, until someone did tell me, 'You know, you were a child and you didn't have the power to resist that' or someone said to me, 'you know that person was a son of a bitch,' you know so I had to work through that because you always 'Gee it was pleasurable,' and maybe I brought that on and it was fun and all that and so, but it also put an awful lot guilt on me and a lot working through that until someone said, 'Hey, you were a child,' so . . .

Through professional help from the medical community the above participant is able to connect with people in a meaningful way. With the assistance of alcohol she kept the shame and guilt of early life sexual abuse buried and suppressed. When the numbing was no longer effective, the emotions associated with the abuse emerged. She was able to work through this with significant help from her community members. Another participant sought treatment for her alcohol abuse and during her treatment she confronted her early life sexual abuse.

And then I also had treatment for alcoholism . . . and, and they, they also had a little sexual abuse piece in the treatment so, I've had plenty of help.

She reports a history of family alcoholism, which she interprets as being connected to sexual abuse in the family.

So it's very hard for me to separate out the effects of child abuse with the alcoholism that was going on in the family. And so it made a lot of sense to me in the way, the way emotional or sexual abuse gets passed on when it's not addressed.

She believes that the relationships between alcoholism and sexual abuse keep families emotionally unhealthy.

You know if my mother had been able to break her own secret of the shame of alcoholism, the shame of sexual abuse and get support from adults, she wouldn't have had to do that with her kids. But she did, she did it to all of us. And so we grew up with stuff that was very unhealthy in today's value system. In those days probably a lot of people did this. I don't know that we were much different than our neighbors, but the impact it has on kids who, especially I want to say myself, very sensitive, was very formative and it really....I want to say keeps you emotionally trapped.

The following participant uses a metaphor to describe the effects of her early life sexual abuse throughout most of her adult years until she received professional help.

I found that my whole, most of my life was very thorny, and I can't think of the name of the tree, but I brought it out for show and tell (while in group therapy). When we made our final vows they used to make a crown of thorns for us just for the day. And there's a tree that does this and has its thorns. I've been trying to think of the name of it. I think it has pretty leaves, but it has these big thorns.

"Is this your crown? (She shows me the crown) The original one? You saved it all these years?"

You didn't get pierced with it. It was just symbolic. So I said that tree symbolizes my life. And why it was so thorny because I got myself into like you know (sexual abuse).

Sister describes being trapped with 'thorns' that pierced her whenever she attempted to move away from the early life sexual abuse, creating a real disconnect from self. Only after she received professional help in later years did she replace the crown of thorns with a maple leaf. The severe thorns are replaced with a red maple leaf, which symbolizes her new connections with others.

I don't know if it is the abuse, but the fact that I was like afraid of adults. I have an expression, 'I always felt half-baked.' Like I was never a real mature adult. I took the courses, I got the degree but, I just never felt really, really comfortable, if it's someone I know real well then I am fine. A stranger I find pretty hard today, but it is much better. Some fearful adult encounters, and then the tree, the early life is the thorns, and right now during the fall when I was at my last place or one of the places (teaching assignment), across the street was the most beautiful maple tree. It was so red and so beautiful, and there was one on this property, too. I just picked this off as a reminder that I think in my later life, not that I am beautiful, but that I am at peace (she shows me the red maple leaf). Because all during my life I was filled with anger. I talked to different priests and psychologists and so forth. There is always like a civil war within me fighting within myself, but not just the civil war, the Vietnam War because in Vietnam they could not tell the enemy, he looked the same, the same as the good guys. So I did not know what the heck I was fighting, but something always was.

Sister uses powerful metaphors to describe the effects of her sexual abuse, a *civil war* in

which she did not know who the enemy was, thus she could not trust herself nor identify with

others. Her metaphor, of being half baked, describes a person who is becoming what she is

intended to be, but she is not there yet. She continues by further interpreting her metaphor of

the Vietnam War.

It is the fact that in my older season that I am more at peace. I am not fighting the Civil War. I am not fighting the Vietnam War.

"In that analogy, in the Vietnam War, you did not know who the enemy was?"

Yeah, I did not know who I was fighting, because they say in Vietnam they are farmers during the day and they are shooting you at night. Something was always bothering me. Then I had all of these crazy jobs. I worked hard as a teacher. I was always the last one in bed. I would kill myself working and studying and preparing. I used to envy teachers who could go to summer school, go to the ballgames, go to movies, do their work, get their papers written. All I did was study. I was just too intense. I think that is what they said about my intensive work habit. They sent me to a compulsive therapist, because I just do everything kind of like a perfectionist.

Sister reports that she is unable to trust adults because the person who sexually abused

her beginning in eighth grade until she graduated from high school was a Catholic priest, her

pastor.

But it (sexual abuse) kind of like deprived me of the joys of growing up. I had no, you know, no boyfriends. He told me don't wear lipstick probably so he could take advantage of me more. So it was, I keep loosing train of thought of where we are going. Which direction are we going?

"You are doing fine. You're doing fine."

Like I said I was in love with his priesthood. I loved the priesthood. The idea that you were close to God. So on one of the occasions when we were riding around the rectory, and he was newly assigned, yeah, and then we would see him out there and then we would sit on the porch...and then one time I must have been alone because he kissed me, and I thought the weather, it was like a lightening bolt. I thought what in the hell; I couldn't imagine what was happening. I had nobody to tell, nobody to run to. I was just amazed; you know just, I don't know how to describe it.

The metaphor, lightening bolt, captures her first experience of abuse in eighth grade that

would subsequently lead to a five year abusive relationship, only ending when she entered the

convent after high school.

Sometimes he'd get a hold of me alone in the office and kiss me and so forth. So the kissing I guess was minor compared to some of the other stuff, which we can get to.

And when the *lightning bolt* struck there was no one to tell what just had happened to

her until nearly fifty years later. Her isolation and disconnections were real.

"Does anything feel unfinished or left undone?"

No, I still sometimes feel uneasy with adults I do not know well. If I go to a banquet or something I want to sit by someone I know. Well, I am much better, and I can at least talk to some extent. Not too many, except the fact that I am not really, really comfortable with strange adults. I am not terribly critical, but I do read these articles on where priests do not consider themselves guilty unless it was intercourse. Well, what the heck was all of the rest of the stuff? I went through it and now I am at peace.

Other reported effects of early life sexual abuse are disassociating from one's body and

blocking many of the memories of adulthood.

First of all I disassociated. I cannot remember the next 18 years. I don't remember who I lived with unless they approach me. I don't remember the good times. I remember a lot of bad times, but I couldn't remember anything good. I didn't realize how bad it was until I got put back together. Then I realized, 'wow, all those years I missed for one woman (her abuser was an older religious Sister) who couldn't keep her hands to herself. People have told me this is how I was because I can't remember those years. Those 18 years I cannot remember. I said, 'You lived with me. What was I like?' I don't know what I was like. In my head I was always doing the thinking and the talking in my head and not doing a lot of talking to people. They said, 'What? You saved our lives. When things would get bad, you would get so silly. You helped us get through things.' I didn't know. Somebody told me 'don't you remember we went to the cottage together.' I said 'no, I didn't do that.' She said 'yes you did,' and she went and got a picture, 'you were there.' I had no memory of it.

This same Sister resolved not to succumb to the agonies of the abuse.

Well that is the separation I made. You can have my body but you will never, never get my mind and fortunately they never did.

Another Sister has a similar disconnecting effect from her body.

Well, as I say, my relationship with my body. I have, I have trouble walking and I have a lot pain in my hip and a lot of it is me ignoring my body, going past pain . . .and not paying

attention to it. And now, and now I'm going, and the medical model didn't help me at all. Well, you're old what do you expect. So, now I'm going to a chiropractor and start with an acupuncturist, I'm even going to a spiritual healer. I'm experimenting with taking care of myself and that the years of just how far can I push my body, the body is a tool that I need to keep in line so I can get things done. If it has pain, you work through the pain, if you're tired, you're lazy. And I'm sure part of that was the sexual abuse of being disengaged from the body."

"Ignoring the body, disengaged?"

I think disengag-, ignoring, disengaged? Maybe ignoring is better because I feel the pain I just push it down, where being disengaged I don't think you'd feel the pain.

This Sister believes that disconnecting from her body was a way to ignore the triggers

associated with her early life sexual abuse.

I'm sure part of that was the sexual abuse of being disengaged from the body. If it has pain, you work through the pain, if you're tired, you're lazy.

Another participant connects her current episodic masturbation with her sexual abuse.

"How does your sexual abuse affect you today?"

Worrisome. Because I've given into masturbation at times and that's very worrisome thing to me and that has only happened in the last maybe fifteen or twenty years.

"Do you see a connection between your abuse and that?"

Sometimes I do, yes. The pleasure.

For this participant there is a confusion that often is associated with minors who are sexually abused. Sexual activity before adulthood often is pleasurable even with an adult perpetrator. Associating this pleasure with the abuse can sometimes lead to a disassociation with the abuse as indicated in her following responses.

When I did think about it (sexual abuse), the picture's there very vividly, as far as the words and the actions, but, and that lack of feeling, emotional... every once in awhile something would come up and I knew that it was there, but as I said, for, I mean, I didn't even think that, that was something would be considered abuse until a couple of years ago or so when we had more education. But, and that lack of feeling, emotionally dead... Another Sister reports similar numbing physical effects from the sexual abuse.

And you know what, I tried to think about this before, I can't remember too much about that really. I don't remember too much of my childhood actually. My brothers and sisters can say all kinds of things and I, "that happened?" you know, I can't even remember what we had to eat, you know.

Low self esteem and the inability to take care of oneself are another participant's

interpretation of how the effects of early life abuse created this disconnect with self.

What are your needs?" I think that gets me into trouble a lot because I do not know that I have ever been my own person in a way. I am always taking care of a group, or I am always trying to make sure that the institution succeeds, or I am always trying to help the institution get over whatever problems we have, or my family, whatever problems we have. It is very difficult for me to stand up for myself when it comes to social justice issues. I let people just walk right over me and wipe their feet on me. So what? I guess I am used to that, but if it somebody else, boy can I stand up well. You know I can move a mountain if somebody else is mistreated. I still do not know how to take care of myself. I probably do a reasonably good job because I am intelligent enough, you know. As far as my emotions, my concern is taking care of myself emotionally and anxiety and all that, I probably do not do as good a job. I probably do not make as good of decisions as I could about taking care of myself emotionally and so forth.

She continues by making an association between her inability to stand up for herself and

protect herself with her abusive father and brothers.

I think a lot of it has to do with the fact that I never had a chance to really experience different kind of men growing up except for the kinds who were kind of out to get me.

Still another Sister describes the effects of the sexual abuse as entrapment inside of her

own body.

And it feels to me sometimes like I'm in a net and I'm just trying to get out of it because I've internalized some of the abuse too. I mean, me being abusive to my own body. So, where is it? The enemy is me. What made me accept it (sexual abuse)? Well, when I was a kid, I understand why I did not rebel against it.

These metaphors of *enemy* and *net* create a powerful image of adversary and entrapment as I listen to her description of her relationship with self. As a result of the sexual abuse, another Sister reports heart wrenching nightmares that lead to isolation.

I took myself away. I came home and had nightmares and everything. Just the thought of it (telling someone about the abuse). I was sitting down on the floor in the little chapel we had made, and I remember saying 'Lord, send somebody to love me. Just send somebody to love me.' I was at my wits end by then.

She continues by describing suicidal ideation associated with the abuse.

I already had the knife out. It was always there underneath that she (perpetrator) *had this control over me, and I was a bad person because of her, and I could never be good.*

Another participant also reports similar suicidal ideation.

I really didn't care for me at all, you know. It was pretty bad. I actually, in my own life, I did try to commit suicide, you know, so that was pretty bad. So that's when I got sent somewhere. I do suffer from depression so I had to take medicine and sometimes the medicine doesn't work, so then that come to be another problem at times and so, when I'm okay and I'm, everything's fine like now, everything's fine, I mean, I'm good within . . .

When she says I'm good within I hear someone who has created a new connection with

self. Four others report depression associated with memories of the abuse.

And I think I worked too hard and it got to the point that I just, I just lost it. I couldn't go on. So, then this medical doctor referred me to a psychologist, a psychiatrist and, oh I know what brought it to a head, I was supposed to do something for Mass, I was asked to read and I couldn't do it and I called the doctor and said, 'You know, I can't even get up and read.' He said, 'We've got to do something,' you know, 'I'm going to call this fellow.' So I started seeing this person and it wasn't getting better and so I went to a medical hospital for a couple weeks thinking that, well, I went away with some friends for awhile.' So, I did that and when I came home it just wasn't going to be good. So, then I went into a facility in another city and all I could say is I got worse instead of better and that's when I couldn't sit. I could not sit. I could lay down but I couldn't sit.

For the above participant, her disconnection from self was severe. Her journey of healing

from the early life sexual abuse began back at the Motherhouse. She continues.

So that began a very long struggle. I mean days and days and days. I was sent to a wing of this building who, the wing was designated for Sisters who had had psychiatric problems and there was one, that I said to myself, 'Oh my God! I cannot be like that the rest of my life.' So, I did everything I could do to get better, everything I could do. But it didn't come fast enough, you know. It just took a long a time.

Two Sisters reported being sexually abused as adults, interpreting this as being

connected to her early life sexual abuse.

It is the only thing I could think of. If I could never tell my parents as a child, how am I going to tell the nuns that I was sexually abused as an adult? I might as well just die. If this (sexual abuse) keeps happening to me, then there is something wrong with me. What is wrong with me? Why can't I relate to people? That was very upsetting. There were times when I wondered if God was really there or was he mad at me. I went into the chapel one time and said "if you are a good God, why is this happening, and if you're not a good guy, then why am I here?" It doesn't make sense. There were times when I felt very distant from God.

For this above Sister, her disconnections involve her self, others and God, which she

relates to her vulnerability as a child. She interprets her vulnerability.

Well what I just said, an abuse of power relationship with a vulnerable adult is not seen in its reality, it's seen as someone acting out or someone having an affair. I mean those are words people use and in my own mind it was kind of like 'what's happening to me, I don't want this and this is happening to me.' I was studying at the time, in the mid-west in a program for spirituality, and I learned that life or God gives us an opportunity to recapitulate our history. And I knew that because I hadn't integrated my sexuality in adolescence, that this was another opportunity to do it, but I didn't know what that meant

When I was younger, I was more judgmental because I thought that if you know better, you behave better. You can know better and still be vulnerable. What I've learned and I didn't know this about myself, that I was emotionally wounded and that's why I was vulnerable. I thought if I was smart, I wouldn't get hurt. But I was smart and I did get hurt but I got hurt because I was emotionally vulnerable and I didn't know anything about that. I didn't know what that meant.

"What does that mean to you today?"

That's a question I'll have to think through. If someone is physically vulnerable, you don't stomp on them if they're on the floor, you know. You hurt somebody who's powerless. When somebody is emotionally vulnerable, you don't go in like a predator and take advantage of them.

Both Sisters grasp for personal authority amidst structures that are difficult to access, approaching this with sincere compassion and self acceptance. Another Sister speaks about her childhood being taken away from her because of the abuse and she links her early sexual abuse to thwarting her adult relationships.

Like I said, I have really had to work through a lot of different ways to just to be where I'm at and I think if the abuse wouldn't have happened that I wouldn't have had to work so hard at trying to be what it is I want to be, you know, and then I think to myself that, 'a child should never experience that,' that he took away my childhood, yeah.

The stories of these religious women indicate that early life sexual abuse creates significant bio-psycho-social and spiritual effects. There appears to be noteworthy language used by the participants in which these reported disconnections from self, others and God are related to their early life sexual abuse. The following data suggest that through professional and spiritual assistance they are able to establish new connections that are creating new meaning and purpose in their lives.

SPIRITUALITY AND RELIGION AS STRENGTHS

This study intentionally seeks salugenic outcomes in later life among this population. It is important to me to identify what these participants identify as furnishing their lives with meaning and strength in later life and that there is hope for those still struggling with the unwelcome effects of sexual abuse. All participants expressed that their spiritual needs were not being met during their medical care and that only entering deeply into a purposeful relationship with spiritual directors and religious community members did they discover the strength they needed to recover from the abuse. Along with this, prayer and a new connection to God also permeate their stories.

I faced this by listening to my feelings. I didn't run away from them. I delved into it by learning about relationships as a nun and by reading about family relationships and how they

affect us as adults. I do a lot of thinking and praying about it. I reflect during my prayer about life and people and why people do what they do.

You are praying all the time. It's got something to do with God. God has been very, very good to me. He got me through that. When I was going through it I didn't realize all those things. God saw me through that. When it was time, he put the right people there to ask the question and to say 'share the secret.' So part of me wants to say I am really, really grateful to this God

I attend community prayer every day and pray the liturgy of the hours. I am very conscious of the presence of God in my life. Being conscious of this is my prayer. Liturgy is just great and I love the daily mass and other rites that occur during the yearly cycle. I also practice a holy hour every day.

I think being a religious woman has helped me be able to have time to pray. So, in that part there, I find that the prayer helps you, helps your person, helps your spirit.

I'm glad it's over. And I think, I think when I look at the other Sisters, I think, how many of you have gone through this? How many of you...Is that why some of you are so unhappy, that you have not been able to ...? See, I've been blessed terribly much because Jesus has been very close to me all my life and I can see how this has helped all the way through, how he has protected me.

Prayer and Eucharist. It's very strong for me. I guess maybe it just boils down to keeping that relationship with God open and it happens through the Eucharist and prayer, private prayer. Oh yes, every day. We sing our prayer, (her fellow Sister) And then we talk during that, we have a reading and talk, reflect.

What becomes apparent are the new relationships with others and God that connects the

Sisters to themselves in meaningful ways.

There's always something there that was bigger than that and that's kind of the way my prayer is that the image I get or that I often have in my mind is somebody walking along the seashore and all this vastness around and that's how I feel with God, that I'm this person here and here he is, you know, in my life but in everyone else's life and I sometimes get just so overwhelmed with that and prayer isn't just, for me, which has grown, I don't know if this has anything to do with abuse or not but just in religious life, how you grow in your prayer. You know, prayer isn't just saying words, it's just being quiet and being in his presence and being aware. Now, we don't put God in our presence, we become aware of the presence that's always there.

This next Sister reports claiming her personal authority as key to connecting with God

and others.

You know, the more courageous I get, the more breaking silence with trusted people like this encounter, (our interview). I've been able to mentor other women. It's very helpful.

All of the Sisters report having a spiritual director/directress who guides and encourages

them in their relationship with God, which in turn assists in their healing.

The person who helps me, because I am not seeing a psychologist anymore, is the spiritual director. She is good in all areas. She is part of the program so she knows a lot more than just spirituality. I can tell her anything and she will listen and be helpful and so forth. So I have people to turn to and so forth

I picked a spiritual director at that time, a priest whom I knew. And suddenly, all this childhood stuff that I hadn't talked to anybody about, came out, and so I tried, I thought my, I've found that if something really bothers me, if I talk about it, with someone, I feel better. So I told him about it.

Oh, somebody was thinking that maybe we should have some spiritual companions, you know, maybe some of the Sisters would like that. They asked me to participate in that, and see, and so they had a series of counselors, and this Sister was one. And I went, I saw her, and we were trying to figure out some plan, so now the plan is in process. It's in operation. People are getting spiritual help.

"What has been most helpful then for you?"

Spiritual direction and talking about it.

The value of spiritual direction is repeated in every interview and reported as the most influential protective factor for creating and maintaining health in later life. Having a spiritual director/directress is normative for most women religious. A seasoned spiritual directress, Margaret Guenther (1992) talks about her relationships with religious women who were sexually abused and the role and function of religious community life in supporting women religious in their search for meaning and healing. "I have seen increasing numbers of women who have survived incest. These survivors seem drawn to religious life. Sometimes, they tell me, it was the only safe place in a nightmarish childhood. Sometimes they experience real grace through a sense of God's love in spite of everything. I would be reluctant to dismiss their devotion to religious life as denial or compensation, although it is undeniable that religion can be used to escape reality" (p. 133). The data in this study supports the premise that for these participants, their current religious communities provide an important protective factor when dealing with the effects of sexual abuse, with only one participant reporting that she entered religious life to escape the abuse. All clearly stated that contemporary religious life provides an important strength. I asked the following question.

"So what I am hearing is the friendships you have in religious life have been a source of strength for you."

Definitely. I said, if I don't have friends I will die. I will die of loneliness, you know not physically die but you just die, you know. I've got to do something about this, so then I started connecting with people. I would have to say that I've been blessed by good friends.

Other participants report similar gratitude for religious community resources.

Because of the fact that we have lots of opportunity to get help. We have lots of opportunity for education and conversation, input, we have time to read or we have time to discern. You have good friends and they help, they help a lot. It's the tangibles and so God puts people in our lives to help us get through. So, I am really grateful that it all happened. I'm grateful that I came through it.

I've had very good general superiors, very good ones, and each of them have been so very, very generous to me in my life. There was never, there was never a time in my life that they've said, 'now, I think you've had enough therapy. Let's quit,' you know, 'You've done enough. You've spent too much money of ours already,' you know, but they've never done that. They were always so giving. They were just very giving women, you know, so I'm very, very, I'm a very grateful person for that.

The gift is the community. I got the best of help. I got great doctors. I am grateful for the fact that I got to travel. Many religious experiences, I mean like annual retreats. There are many benefits of which I am grateful

Oh, yes and living together too has been not always easy. We've learned to be a community, you know, they always say, "community is being together," you know, those old times in religious life and it's not being together, it's, physically, it's just, we have to learn, well it's like a marriage I guess. You have to learn to, you have to learn to live together, that's it. I don't know how else to put it. Then you have to talk, you have to keep on talking and so when I'm down or something she'll (her fellow Sister) say, "C'mon, let's, you know, let's, what's going on?" or something. You know and I'll say, 'Oh, I'm feeling sorry myself,' or something you know and then I may talk about it

"Has there been any gift involved in all of this?"

The gift is the community.

All of the participants overwhelmingly report that their current religious environments

provide them with an abundance of healthcare and medical support in order to address their

sexual abuse in a confidential and professional setting. However, there exists a tension between disclosing this information randomly among the entire community. It appears that most feel safe discussing their sexual abuse histories with spiritual directors or community leaders but there is a hesitancy to be identified publicly among their entire communities.

It was very hard for me to break this secret the first time I told in a, it was a small gathering where we used to gather where none of us where...you know, professional counselors in that sense but we used to gather for sorority once a year, for like the under 50's group kind of, and I remember how hard, there was a group of twenty women there, and how hard it was for me. But I decided it's time for me to break the silence. And so I told them and I was weeping. And I got all kinds of sympathy, compassion, affirmation and, as luck would have it in terms of alcoholism, there were some other parallel disclosures from people saying, "well I too…" So I know that disclosure invites more disclosure. And so each time I share it, which isn't easy, cause I do it only with trusted people, because of the environment of religious life, some women are still underdeveloped and they're very judgmental about these things in the sexual area and I'm protecting myself psychologically for that to live in this community in terms of what I tell, who I tell and when I tell.

These participants self report that with adequate resources and effective interventions they have created hope for meaningful and joyful relationships in later life. One Sister sums up her salugenic perspective.

And so, there are times when you know, as I get older I think, you know, what is my life then, what is the meaning of my life and now I can say I leave the meaning of my life to God. Makes no sense to me, maybe. Hopefully it makes sense. The other thing I will say, that um, spiritually is that hope, is the virtue that most survivors cling to. It's not faith because sometimes faith has gone out the window but it's the virtue of hope. There's something resilient in that belief that there is something that's good going to happen. But you can't see it yet...you don't know it. And when somebody is in tears in front of you because they can't see it, but down here, what keeps them coming back to you, you know for therapy whatever is that hope.

This Sister's interpretation sums up her spiritual healing.

"Does God fit in, how does God fit it into your healing?"

Well, I think in the deepest part is the, how shall I say this, in the deepest part, God has allowed this for whatever reason and allowed my healing for whatever reason, so we can't say it's necessarily God's will but it did happen and again, there's still more gratitude to God. That I've come through it, you know. For these participants, prayer, spiritual direction and the resources in their religious communities as the primary strengths that enabled them to heal from early life sexual abuse. All report meaningful connections with self, others and God as a result of these resources. Their stories inspire hope for others who struggle in old age with memories of early life sexual abuse.

CONCLUSION

Many social workers lack specific knowledge about the impact of early life sexual abuse in old age (Graziano, 2003). It is critical to raise awareness among social work researchers, healthcare providers and policy makers that the crisis of early life sexual abuse may be traumatic for some people and may be noteworthy clinical issues in old age. There is a danger in assuming that early life sexual abuse no longer influences the quality of life for persons in old age. "Any disruption in a child's health and the consistent and supportive environment that (s)he needs to master this (sexual abuse) will skew or seriously impede these events. The consequences can be felt throughout a lifetime" (Flach, 1988, p. 99).

Secondly, creating conversations and studies about the significance of religious institutions and spiritual direction in later life as strengths for older adults when addressing stressors can enhance social workers' knowledge, values and skills when serving geriatric populations. Closely examining what the effects are for these particular women can lead to studies with other aging subpopulations whose various types of sexual abuse might be misunderstood, underreported and/or undiagnosed, leading to inadequate assessment and ineffective interventions. "Clearly, there is a need for further and ongoing research into the manifestation of earlier trauma in the elderly" (Graziano, 2003, p. 13).

The data in this study are focused upon a very specific population who experienced a common yet uniquely distinct human experience of early life sexual abuse. The findings of this study are not directly intended to be representative of other populations' experiences of sexual abuse. These self reports are intrinsically biased because of these participants' unique frames of reference. The complexity and diversity of aging cohorts, along with the purpose of this study,

make it difficult to apply these findings to other aging populations. However, these biases do not negate the meaning and value of these women's stories, rather this study's rich language and subtle textures may illuminate other's experiences of sexual abuse and provide insights into their own lives.

REFERENCES

Abramson, T.A., & Halpain, M. (2002). Providers of mental health services-now and in the future. *Generations: Journal of the American Society on Aging*, XXVI (1), 107-110.

Antonovsky, A. (1987). The salutogenic perspective: towards a new view of health and illness. Advances. *The Journal of Mind-Body Health*, 4, 47-55.

Becker, G. (1997). *Disrupted lives: How people create meaning in a chaotic world*. Berkeley, CA: University of California Press.

Beitchman, J., Zucker, K., Hood, J., DeCosta, G., Akman, D., & Cassavia, E. (1992). A Review of the long term effects of child sexual abuse. *Child Abuse and Neglect* 16: 101-118.

Bell, H. (2003). Strengths and secondary trauma in family violence work. *Social Work*, Vol. 48/4, pp. 513-522.

Berkman, B., Damron-Rodriguez, J., Dobrof, R., & Harry, L. (1995). Social Work, in: *A National Agenda for Geriatric Education: White Papers*, U.S. Public Health Service, Health Resources & Services Administration, Bureau of Health Profession.

Bianchi, E. (1984). Aging as a spiritual journey. New York: Crossroad Publishers Co.

Blazer, D. (1991). Spirituality and aging well. *Generations: Journal of the American Society on Aging*, *15*(1), 61-65.

Roman Catholic Women Religious and Organizational Reform in English Canada: The

Ursuline and Holy Names Sisters in the Diocese of London, Ontario, 1950-1970 Bondy, Renee

Retrieved on July 31, 2008 http://uwspace.uwaterloo.ca/handle/10012/3029

Browne, A. & Finkelhor, D. (1986). Impact of child sexual abuse: A review of the research. *Psychological Bulletin* 99:66-77.

Cahill, C., Llewellyn, S., Pearson, C. (1991) Long term effects of sexual abuse which occurred in childhood: A review. *British Journal of Clinical Psychological* 30: 11-130.

Canda, E.R. & Furman, (1999). *Spiritual diversity in social work practice: The heart of helping.* New York, NY: Free Press.

Chibnall, J., Wolf, A., & Duckro, P. (1998). A national survey of the sexual trauma experiences of Catholic nuns. *Review of Religious Research*, Vol 40,2.

Cole, B., Benore, E., & Pargament, K. (2004). Spirituality and coping with trauma. In S.Sorajjakool & H. H. Lamberton (Eds.), *Spirituality, health, and wholeness* (pp. 49-76). New York: Haworth Press.

Cowley, A.S. (1996). Transpersonal social work. In: Turner, F. (Ed.). (1996). *Social work treatment (4th Ed.)*. New York: The Free Press.

Creswell, J. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.

Dill, Michael (2001). *The aging of America: implications for the health workforce. Ce*nter for Health Workforce Studies, University at Albany, School of Public Health, NY.

Faiver, C., Ingersoll, R.E., O'Brien, E., McNally, C. (2001). *Explorations in counseling and spirituality: Philosophical, practical, and personal reflections*. Belmont, CA: Wadsworth/Thomson Learning, Inc.

Ferraro, K. (Ed.) (1997). *Gerontology: Perspectives and issues*. New York: Springer Publishing Co.

Finkelhor, D. & Hotaling, G., Lewis, I.A., & Smith, C. (1990). Sexual abuse in a national survey of adult men and women: Prevalence, characteristics and risk factors. *Child Abuse and Neglect* 14:19-28.

Flach, F. (1988). *Resilience: Discovering a new strength at times of stress*. New York, NY: Ballantine Books.

Friberg, N. (2001). The role of the chaplain in spiritual care. In D. Moberg (Ed.) (2001a). *Aging and Spirituality: Spiritual dimensions of aging theory, research, practice and policy.* Binghamton, NY: Haworth Press, Inc.

Glantz, M. & Sloboda, Z. (1999) Analysis and reconceptualization of resilience. In: Glantz, M. & Johnson, J. (Eds.). *Resilience and development: Positive life adaptations*. New York: Plenum Publishers.

Graziano, R. (2003). Trauma and aging. Journal of Gerontological Social Work, 40, 4, 3-21.

Hall, T. (1995). Spiritual effects of childhood sexual abuse in adult Christian women. *Journal of Psychology and Theology* 23: 129-134.

Hodge, D. (2003). Spiritual assessment. Botsford: CT: NACSW.

Kane, D., Cheston, S. & Greer, J. (1993). Perceptions of god by survivors of childhood sexual abuse: An exploratory study in an under-researched area. *Journal of Psychology and Theology*, 21: 228-237.

Kaplan, H. (1999) Toward an understanding of resilience: A critical review of definitions and models. In: M. Glantz & J. Johnson, (Eds).*Resilience and development: Positive life adaptations*. New York, NY: Plenum Publishers.

Kimble, M., McFadden, S., Ellor, J., Seeber, J. (1995) *Aging, spirituality and religion*. Minneapolis, MN: Fortress Press.

Koenig, H. (1995) *Research on religion and aging: An annotated bibliography*. Westport, CT: Greenwood Press.

Koenig, H. (1997). *Is religion good for your health? The effects of religion on physical and mental health.* Binghamton, NY: The Haworth Press.

Koenig, H. (2000). Religion, well being and health in the elderly: The scientific evidence for an association. In James Thorsen, *Perspectives in spiritual well-being and aging*. Springfield, IL: C.T. Thomas.

Koenig, H.; McCullough, M., Larson, D. (2000) *Handbook of religion and health: A century of research reviewed*. New York: Oxford University Press

Koss, Mary, Lisa Goodman, Angela Browne, Louise Fitzgerald, Gwendolyn Keita, and Nancy Russo. (1994) *No Safe Haven: Male Violence Against Women at Home, at Work, and in the Community:* Washington, D.C.: American Psychological Association.

Lantz, M.S., & Buchalter, E. N. (2001). Posttraumatic stress: Helping older adults cope with tragedy. Geriatrics, 56 (12), 35-36.

Leadership Conference of Women Religious (LCWR), (2008). *About LCWR* Retrieved on July 31, 2008 from http://www.lcwr.org/

Luthar, S. & Cushing, G. (1999) Measurement issues in the empirical study of resilience. In: Glantz, M. & Johnson, J. (Eds.). (1999). *Resilience and development: Positive life adaptations*. New York: Plenum Publishers.

Manis, J., & Meltzer, B. (1978). *Symbolic interaction: A reader in social psychology*. Boston, MA: Allyn & Bacon, Inc.

Marshall, C. & Rossman, G. (1999). *Designing qualitative research* (3rd Ed.). Thousand Oaks, CA: Sage.

Miles, M. & Huberman, A.M. (1994). *Qualitative data analysis*. Thousand Oaks, CA: Sage Publications.

Moberg, D. (1990). Spiritual maturity and wholeness in later years. *Journal of Religious Gerontology* 7(1/2): 5-24.

Moberg, D (2001). The reality and centrality of spirituality. In D. Moberg (Ed.) (2001a). *Aging and Spirituality: Spiritual dimensions of aging theory, research, practice and policy*. Binghamton, NY: Haworth Press, Inc.

Moberg, D. (Ed.) (2001a). *Aging and Spirituality: Spiritual dimensions of aging theory, research, practice and policy.* Binghamton, NY: Haworth Press, Inc.

Moberg, D. (2001b). *Aging and Spirituality: Research, practice and policy*. Binghamton, NY: Haworth Press, Inc.

Moeller, T., Bachmann, G., & Moeller, J. (1993). The combined effects of physical, sexual, and emotional abuse during childhood: Long-term health consequences for women. *Child Abuse and Neglect* 17:623-640.

National Association of Social Workers. (1999). Code of ethics. Washington D.C.

Paloutzian, R. E., Emmons, R. A., & Keortge, S. G. (2003). Spiritual well-being, spiritual intelligence, and healthy workplace policy. In R. A. Giacalone & C. L. Jurkiewicz (Eds.), *Handbook of workplace spirituality and organizational performance* (pp. 123-136). Armonk, N.Y.: M.E. Sharpe.

Pargament, K. (1997). *The psychology of religion and coping: Theory, research, practice*. New York: The Guilford Press.

Peck, R & Berkowitz, H. (1964). Personality and adjustment in middle ages, in B. Neugarten, ed., *Personality in middle and late life*. New York: Atherton Press

Polusny, M. & Follette, V. (1995). Long term correlates of child sexual abuse: Theory and review of the empirical literature. *Applied and Preventative Psychology* 4:143-166.

Rizutto, A. (1993). Exploring sacred lifescapes. In: Randour, M.L. (Ed.) *Exploring sacred landscapes: Religious and spiritual experiences in psychotherapy*. New York: Columbia University Press.

Rossman, G.B. & Rallis, S.F. (1998). *Learning in the field: An introduction to qualitative research*. Thousand Oaks, CA: Sage.

Saleebey, D. (Ed.) (1997). 2nd Edition *The strength's perspective in social work practice*. New York: Longman.

Schultz-Hipp, P. (2001). Do spirituality and religiosity increase with age? In: Moberg, D. (Ed.) (2001). *Aging and Spirituality: Spiritual dimensions of aging theory, research, practice and policy*. Binghamton, NY: Haworth Press, Inc.

Stokes, K. (1990). Faith development in the adult life cycle. In Seeber, James J. (Ed.) *Spiritual maturity in the later years* (pp. 167-184). Binghamton, NY: The Haworth Press.

Stringer, E. (1999). Action research (2nd Ed.). Thousand Oaks, CA: Sage Publications.

Whyte, W. (1991). Participatory action research. Newbury Park, CA: Sage Publications

Zinnbauer, B., Pargament, K., Cole, B., Rye, M., Butter, E., Bleavich, T., Hipp, K., Scott, A., Kadar, J. (1997). Religion and spirituality: Unfuzzying the fuzzy. *Journal of the Scientific Study of Religion* 36(4): 549-564.