Trauma Counseling for Child Victims of Sexual Abuse: A Christian Reflection

Rev. Rosemary Cook, Ph.D., LCSW-C and Crystal Buffington, BA, M.Div. (candidate)

Introduction

The New Testament writings of Jesus include passages that specifically promote the well-being of children and offer dire consequences for those who cause harm to them. In Jesus' teaching to his followers, he invites a child to sit in their midst. He instructs them by stating, "It will be terrible for people who cause even one of my little followers to sin. Those people would be better off being thrown into the deepest part of the ocean with a heavy stone tied around their necks! The world is in trouble because of the way it causes people to sin. There will always be something to cause people to sin, but anyone who does this will be in for trouble." [1]

[1] Matt. 18:6-7, Contemporary English Version.

The health and well-being of children is often a barometer for measuring the health of a society. The Masai tribe of Southern Kenya and Northern Tanzania has a traditional greeting, “And how are the children?”[2] The Masai place value on the well-being of children. They take great pride and responsibility in making sure that the young are cared for and provided safety and security. They answer with the greatest sincerity "The children are well.” If we were posed this question in 2024, how would we as a nation and global society respond? How would our faith communities respond? How would members of communities with vulnerable groups respond? [3]

The purpose of this article is to provide a pastoral and psychotherapeutic reflection on the prevalence, consequences, and treatment for survivors of child sexual abuse. It will offer a holistic approach that is consistent with biblical teachings that promote wholeness defined as the alignment of mind, body, and spirit.

[2] “And How Are the Children?” *Wikipedia*, Westat Health Communications, June 20, 2017, https://fb.watch/re-af-Ra7W/?mibextid=w8EBqM. Accessed 8 April 2024.

Defining Trauma

Trauma is defined as a person's unique individual experience of an event that poses a threat to life, bodily integrity, or sanity. "When a child is abused, he loses his freedom to savor what is most precious in childhood: wonder, awe, joy, and freedom from adult knowledge and responsibility." [4]

Sexual abuse survivors often present with symptoms of posttraumatic stress disorder (PTSD). The Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-V) outlines diagnostic criteria for persons who have been exposed to traumatic events including child sexual abuse. Survivors of child sexual abuse often meet the following criteria for PTSD:

A. Exposure to actual or threatened death, serious injury, or sexual violence through direct experience, witnessing, in person, or learning that the traumatic event(s) occurred to a close family member.
B. Presence of recurrent, involuntary, and intrusive distressing memories of the traumatic event(s) beginning after the traumatic event(s) occurred:

1. Recurrent, involuntary, and intrusive distressing memories of the events, distressing dreams.
2. Dissociative reactions (flashbacks).

[3] Disadvantaged and vulnerable groups." *Social Protection and Human Rights*, https://socialprotection-humanrights.org/key-issues/disadvantaged-and-vulnerable-groups/.

[4] Day, Jackson H. *Risking Connection in Faith Communities: A Training Curriculum for Faith Leaders Supporting Trauma Survivors*. vol. pg. 8, Sidran Institute Press, 2006.

3. Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble aspects of the traumatic event(s), marked physiological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s)

C. Persistence avoidance of stimuli associated with the traumatic event(s):

1. Avoiding distressing thoughts, memories, or feelings about the traumatic event(s).
2. Avoiding external reminders (people, places, conversations, activities, objects, situations) that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s).

D. Alterations in cognitions and mood associated with the traumatic event(s):

1. Inability to remember important aspects of the traumatic event(s).
2. Persistent and exaggerated negative beliefs or expectations about oneself, others, or the world.
3. Persistent or distorted cognitions about the cause or consequences of the traumatic event that leads the individual to blame himself/herself or others.
4. Persistent negative emotional state (e.g. fear, horror, anger, guilt, or shame).
5. Markedly diminished interest or participation in significant activities.
6. Feelings of detachment or estrangement from others.

7. Persistent inability to experience positive emotions (e.g. inability to experience happiness, satisfaction, or loving feelings).

E. Marked Alterations in arousal and reactivity associated with the traumatic event(s):

1. Irritability and anger outbursts, reckless or self-destructive behavior.
2. Hypervigilance, exaggerated startle response.
3. Problems with concentration, and sleep disturbance. [5]

Meeting the criteria for PTSD does not have to include every symptom above. However, survivors must indicate 1 or more symptoms from each category.

Defining Sexual Abuse of a Child

Sexual abuse is a comprehensive term used to describe sexual acts that deprive a person of bodily autonomy. Bodily autonomy is the fundamental right for a person to maintain full governance over their own body without external influence caused by violence or coercion. [6] Sexual abuse is comprised of several different types of aberrant

[5] American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders: DSM-5*. American Psychiatric Association, 2013, pp. 271-272.

[6] Nienow, Shalon. "Seven Steps to Teaching Children Body Autonomy." *Rady Children's Hospital*,

[*Footnote continued on next page …*]

sexual behaviors which include but are not limited to non-consensual sexual touching of genitals or other intimate body parts, oral copulation, indecent exposure, pornography, lewd acts, and penetration of any kind. The Keeping Children and Families Safe Act of 2003 defines sexual abuse of children as:

> "The employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children." [7]

Prevalence of Child Sexual Abuse

https://www.rchsd.org/2019/12/seven-steps-to-teaching-children-body-autonomy/.

[7] "The Child Abuse Prevention Center - Sexual Abuse and Exploitation." *Child Abuse Prevention Center*, https://www.thecapcenter.org/why/types-of-abuse/sexual-abuse. Accessed 1 April 2024.

An unfortunate statistic in America is that of the prevalence of child sexual abuse. "Every 9 minutes child protective services substantiate or finds evidence for a claim of child sexual abuse." [8] Sexual abuse cases involving children and adolescents are one of the most underreported crimes. Statistics show that one in 9 girls and 1 in 20 boys under the age of 18 experience sexual abuse or assault.

The American Academy of Pediatrics conducted a study to examine the disparities between transgender and cisgender adolescence who have been sexually abused. They discovered that 19% of transgender children who participated in this study reported being sexually abused. Their qualitative research revealed that transgender adolescents were sexually abused at a higher rate than cisgender adolescents. [9]

[8] "Children and Teens: Statistics." *RAINN*, https://www.rainn.org/statistics/children-and-teens.

[9] Thomas, PhD, Brian C., et al. "Disparities in Childhood Abuse Between Transgender and Cisgender Adolescent." *American Academy of Pediatrics*, vol. 148, no. 2, 2021, pp. 1-11.

When, Where, and How Does Sexual Assault Against Children Occur

Sexual violations of any kind against a child signifies a breach in a community. There are no precise specifications surrounding where or the types of communities in which a is child sexually assaulted— sexual abuse of this kind, knows no bounds. Thus, there are no barriers related to when, where, how, or how frequently a child might be sexually abused. These exploits take place within family systems and in various institutions and communities. Though there are no distinct indicators that pinpoint when or where child sexual abuse will occur, there are, however, distinctions that determine who have the potential to become victimized.

The manifestations of child sexual abuse are most likely to be found within social structures and within interpersonal relationships where there is an imbalance of power or lack of moral integrity. Individuals in communities who lack moral integrity or misuse the influence and power they possess are likely to prey on and take advantage of people who are more vulnerable and susceptible to manipulation and or domination. Unfortunately, the most

marginalized and vulnerable people in any type of community are children. Individuals who prey on the most vulnerable members of communities are methodical in their thought process— they move with the intent to cause harm for the sole purpose of self-gratification.

This imbalance of power is sometimes referred to as an asymmetrical power dynamic. The term defines a relationship between two or more individuals where there is an unsymmetrical or unequal differentiation of power. An asymmetrical flow of power in relation to sexual child abuse is usually obscured to others within the community but apparent to the child. Children and adolescents are more likely to be abused by individuals who are consistently near them. In the eyes of the child, these individuals may be someone who they know to be a trusted adult. These trusted adults normally can be identified as parents, caregivers, neighbors, extended family members, teachers, coaches, religious leaders, and family friends.

Unfortunately, in most communities, these individuals are people other members of the community are least likely to suspect of sexually assaulting a child, mainly because they are in care of the child. Thus, this makes it possible for the abuser to mask their sexual

predatory behavior. When children find themselves in an asymmetrical power dynamic with a trusted adult, they often more times than not also view that person as an authority figure. In instances like this, the child is likely to view themselves as powerless. It is this belief that makes it easy for the child to become victimized. In such circumstances, the adult is the one perceived as having most or all the power— rendering the child powerless.

Vulnerability and Lack of Capacity to Consent

The Child Prevention and Treatment Act also known as the CAPTA was officially written into law on January 31, 1974, and was reauthorized in 2010. It is considered the largest body of legislation concerning the maltreatment of children. This legislative act essentially serves as a binding covenant to protect children and adolescents from psychological, physical, emotional, and sexual abuse. [10]

[10] "Child Abuse Protection Laws." *Darkness to Light*, https://www.d2l.org/get-help/reporting/protection-laws/.

The CAPTA consists of federal standards and guidelines for all citizens to follow concerning the treatment of children. However, these laws written into the CAPTA are governed by state laws and regulations. Thus, every state within the U.S. provides specifications regarding how child sexual abuse is both classified and or defined. The definitions and laws may vary; but the overarching purpose of these laws across all states exists to keep children free from exploitation, harm, and danger.[11]

What is not synchronized state to state are laws concerning the appropriate ages of consent. The age of consent is the minimum age at which an individual can go through the cognitive decision-making process of agreeing to participate in sexual activity. [12] The minimum age of consent between states ranges from the ages 16 to 18 years of age. Adolescents under the age of 15 are unable to consent to sex. Children and adolescents between the ages of 0-15 years are protected

[11]"Child Abuse Protection Laws." *Darkness to Light*, https://www.d2l.org/get-help/reporting/protection-laws/.

under federal legislative law that prohibits sexual misconduct or sexual acts initiated by an older person. However, when defining sexual abuse of a child the World Health Organization hones- in on a child's developmental status and cognitive functioning when determining the appropriate age of consent. By doing so, the emphasis is not placed on a child's physical development or age but rather on their capacity to comprehend the sexual act. WHO defines child sexual abuse as:

"the involvement of a child in sexual activity that he or she does not fully comprehend is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society." [13] The phrases "fully comprehend" and "developmentally prepared" are

[12]Goodyear-Brown, Paris. *Handbook of Child Sexual Abuse Identification, Assessment and Treatment*. 1st ed., Hoboken, New Jersey, John Wiley and Sons Inc., 2011

[13] World Health Organization. (1999). Report of the Consultation on Child Abuse Prevention, 29-31 March 1999, WHO, Geneva. Geneva, Switzerland: World Health Organization.

critical points to understanding how the age of consent is measured based on child and adolescent brain development.

The human brain begins to take from three to four weeks after conception. Throughout the fetal stages of development, up to the point of birth, a child's brain is formed but does not reach full maturity for another 25 years. [14] During the lifespan periods of childhood, adolescence, and young adulthood the human brain undergoes critical growth spurts. Each distinctive stage of the brain's development contributes significantly to a person's cognitive processing abilities as well as their perception and understanding of the world. [15] It is between the ages of 10 and 25 that the frontal lobes shift from functional efficiency to cognitive and emotional brain development. Children's functional efficiency skills are strengthened between the ages of 5 and 10. It is during this stage that the child grasps a deeper understanding of what it means to be self-sufficient

[14] Blow, William T. "Child Brain Development." *Nursing Times*, vol. 99, no. 17, pp. 28-31.

[15] Blow, William T. "Child Brain Development." *Nursing Times*, vol. 99, no. 17, pp. 28-31.

through mastery of daily self-care routines, safety awareness, socialization amongst peers, as well as various motor skill development. [16]

The prefrontal cortex is part of the frontal lobe region of the brain. This portion of the brain remains incomplete until mid to late teens and sometimes into young adulthood. [17] The prefrontal cortex is vital to the expansion of one's executive functioning skills. It is the last part of the brain to develop and oftentimes does not reach full maturity until young adulthood. This region of the brain allows an individual to engage in higher-level cognitive skills such as controlling one's impulses, regulating emotions, an enhanced working memory, and overall, a strengthened sense of metacognition—this is one's awareness and understanding of thought processing. Brain development is important to consider when understanding how sexual trauma alters a child's brain.

[16] Tierney, Adrienne L., and Charles A. A. Nelson, III. "Brain Development and the Role of Experience In the Early Years." *National Library of Medicine*, vol. 30, no. 2, 2009, pp. 9-13.

How Child Sexual Abuse Damages Children

The question to ask victims of sexual abuse is not what's wrong with you but what happened to you? The act of child sexual abuse causes a rupture in the victims' entire world. There will be changes in the brain, changes in their views of themselves, their views of the world, their views of others, and their views of God. The earlier the abuse and without intervention the greater the chances of psychological, emotional, physical, relational, and spiritual damage.

Psychological Damage

Any unwanted or unexpected act of sexual intrusion will subsequently have inimical effects on the victim's psyche. It is not unusual for a survivor's body to become a "holding place" for the trauma. It is important to note that trauma is not the initial breach nor does trauma manifest at the point of a life-rupturing event itself. Hence, trauma begins to appear and take root in one's body while living through the experience. The residual effects of sexual abuse vary from person to person. Though the effects may vary, the

[17] Blow, William T. "Child Brain Development." *Nursing Times*,
[*Footnote continued on next page …*]

commonality among all survivors is that they experience a disruption in their emotional, physical, and mental health.

This disruption is a severing of the unity of mind, body, and spirit. Lisa Wimberger (2015) describes how trauma creates a misalignment of mind, body, and spirit. [18] Before any sexual trauma occurs, a child's mind is open to new experiences with a sense of curiosity and wonder. There is no memory of events that would interfere with the anticipation of positive experiences. The body is free from painful memories that are somatically stored, and the child can easily integrate sensory experiences. The spirit is not weighed down as there is a sense of freedom to explore one's environment. The spirit is defined as "the nonphysical part of a person which is the seat of emotions and character: the soul." [19]

How Child Sexual Abuse Distorts Core Beliefs

vol. 99, no. 17, pp. 28-31.

[18] Wimberger, Lisa. *Neurosculpting: A Whole-Brain Approach to Heal Trauma, Rewrite Limiting Beliefs, and Find Wholeness*. Sounds True, 2015.

[19] (Oxford Languages #)

In addition to the disconnect between mind, body, and spirit, dysfunctional beliefs are developed as a survival response. These are often referred to as core beliefs. Core beliefs are those cognitive adaptations that are the direct result of our experiences. Child sexual abuse survivors develop dysfunctional beliefs to make sense of the traumatic event.[20] When abuse occurs at the hands of someone that the child trusts, looks up to, or is related to by birth, he/she will try to make sense of it in their mind by distorting, denying, minimizing, or owning responsibility for the event. Children desire and need to remain connected to the adults in their world including maintaining a connection to God or their faith leader. When abuse breaks the healthy connection, the child will believe that there is something wrong with them rather than risk losing the attachment to the adult figures in their lives. This becomes their core belief. Some examples of core beliefs that develop because of child sexual abuse are "I am

[20]Kerstin Wenninger, Anne Ehlers. *Dysfunctional cognitions and adult psychological functioning in child sexual abuse survivors.* 2005 Journal of Traumatic Stress, Vol.11, Issue 2, pages 281-300 Wiley Online.

unworthy", "I am damaged", and "I am unlovable". Negative beliefs about God are developed as well, "God is absent," "God doesn't care about me", or "God is weak".

False Identity Related to Self and God

Kristy and Bill Gaultiere (1989) write about how we assign to God qualities that he does not have which result in attributing false and projected identities onto God and self. For illustrative purposes, imagine a center circle where God is placed in the child's mind. Next, imagine an outer circle that shows the true attributes of God. For a non-abused child, God is seen as present, kind, loving, faithful, protective, and strong. Imagine another outer circle that represents the people who nurture, lead, and influence the child early in life. These are the people who represent God in the mind of the child. They include parents, spiritual leaders, teachers, coaches, and others. These persons are the manifestation of God in the verbal and nonverbal messages they send and the care and modeling they provide. Early caretakers may be unfair, critical, demand perfection, unprotective, unavailable, untrustworthy, and abusive. The next outer circle would

describe the characteristics of God developed out of the child sexual abuse survivor's abusive experiences at the hands of their caretakers/representatives of God. Child sexual abuse survivors develop thoughts, emotions, and behaviors because of the early damaging influence of caretakers. The child sexual abuse survivor's thoughts about God are not necessarily accurate but are distorted and are based on faulty childlike reasoning and projection. If a child sexual abuse survivor lived with unloving people that he/she looked up to, these people become an internalized bad parent. The child will reason that "God is unloving too" and "If God doesn't love me then I must be unlovable." [21]

These distorted thoughts shape the child sexual abuse survivor's self-concept. If psychological and spiritual intervention does not occur, he/she will make decisions and hold onto beliefs about God and himself/herself that are inaccurate. Likewise, exposure to kind, loving, and dependable people that the child sexual abuse survivor can look up to creates an internalized good parent.

[21] Gaultiere, William, and Kristi Gaultiere. *Mistaken Identity*, pg.
[*Footnote continued on next page …*]

When negative life events occur, survivors will not attribute fault to God or to self but will acknowledge His identity as good, kind, and loving, despite the challenges. Out of this experience, a true and healthy self-concept and identity can be developed. “I know that I am lovable,” “I am fearfully and wonderfully made.” [22]

Treatment for Child Sexual Abuse Survivors’ Images of God

Image of God (IOG) refers to the cognitive and affective dimensions of a person's concept of God. “IOG is an internal psychological model that an individual imagines God to be. IOG is not something within the mind but a collection of memories from various sources that are associated with God. An individual's representation of God is founded upon the relationships a person has had with primary caregivers. In other words, a person's God-image has both psychological and interpersonal origins.”[23] [24]

62, Power Books, 1989.

[22] Psalm 139:14 NRSV 19

[23] Rizzuto, Ana-Marie. *Birth of the Living God: A Psychoanalytic Study*. University of Chicago Press, 1979.

I once worked with an adolescent client who had been sexually abused by a relative. This child believed in God and had parents who were active in the church. When asked, "Where do you think God was when you were being abused?" She responded, "He was busy helping somebody else." My task was to offer different characteristics of God through the use of cognitive behavioral therapy techniques coined by Aaron Beck.[25]

This client was able to see that her image of God (IOG) was shaped by her direct experience of sexual abuse by someone she trusted. Persons who face sexual trauma need to be reminded that we are created in God's image and God is not created in man's image.[26]

Psychotherapy As Cognitively and Spiritually Corrective

[24] Loyola University Maryland, and Rosemary Cook. *Father Absence Correlates of Wellbeing*. Dissertation. Columbia, 2003, p. 8.

[25] Beck, A.T., & Kovacs, M. (1977). A new fast therapy for depression. Psychology Today, 10, 94-102.

[26] Loyola University Maryland, and Rosemary Cook. *Father Absence Correlates of Wellbeing*. Dissertation. Columbia, 2003, p. 104.

A pastoral psychotherapist's task involves helping the child sexual abuse survivor develop an adaptive narrative regarding self, others, God, and the overall experience of the abuse. The development of a new narrative doesn't always have to be verbal. As a clinician, I have found that reciting the old trauma narrative can be harmful. It can be harmful if there's no new or adaptive learning. Simply retelling your trauma story can be a reliving of those old emotions that feel the same as when you first experienced the trauma. Retelling the story and not having adequate coping and self-soothing skills can leave survivors emotionally flooded. For small children there may not be a verbal memory at all but only somatic and emotional memories.

I assert that the use of techniques that integrate mind, body, and spirit promote the greatest healing of all parts of the self that have been disconnected because of the trauma. I have found that Eye Movement Desensitization and Reprocessing (EMDR) is one such technique. EMDR was developed by Francine Shapiro in the late

1980s.[27] EMDR has been proven to be effective in treating a wide range of issues including post-traumatic stress disorder, PTSD, anxiety, depression, and addictions to name a few. [28] [29] EMDR has been found to be effective for traumatized children as young as 2 years old. Random controlled trials also reported positive EMDR treatment effects for traumatized children.[30] EMDR is an evidenced-based technique and psychotherapy that operates on the principle of adaptive information processing and promotes associative learning. [31]

> "One of the main tenets of EMDR therapy is that activating the processing of the trauma memory will naturally

[27] Shapiro, Francine. "Efficacy of the eye movement desensitization procedure in the treatment of traumatic memories." *Journal of Traumatic Stress*, vol. 2, no. 2, April 1989, pp. 199–223.

[28] *Maxfield, Louise. "A Clinician's Guide to the Efficacy of EMDR Therapy." Journal of EMDR Practice and Research, vol. 13, no. 4, 2019, pp. 240-246.*

[29] Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, p 523 2017

[30] Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, pg. 543, 2017.

[31] Solomon, Roger M., and Francine Shapiro. "EMDR and the Adaptive Information Processing Model." *Social Work Journal*, vol. 39, October 2012, pp. 191–200.

move it toward the adaptive information it needs for resolution." [32]

EMDR as a technique and type of psychotherapy approach, accesses the memory networks where the trauma narrative resides. The memory can be verbal, somatic, or emotional. With child sexual abuse survivors, the memory is stored in the brain and the body with varying levels of intensity. In addition, the memory is stored with maladaptive meanings and harmful interpretations. Through the process of bilateral stimulation of the brain through eye movements, tactile devices, or tapping both sides of the body, the trauma memory loses its intensity and new adaptive learning can take place.

Preparation for EMDR Treatment

Internal and external resource development is the first step before addressing traumatic memories. EMDR is relational and is only effective when adequate trust and rapport have been established as is true for any therapeutic intervention. Once rapport has been

[32] Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, pg. 28 2017.

built, the EMDR clinician can strengthen the child's internal resources by helping them identify their strengths, identify protective factors, teach positive coping skills, and connect them with supportive people in their lives. These supportive people can include parents, teachers, counselors, and clergy. Trust is often damaged in child sexual abuse, and this requires adequate time to be built. Inviting parents into the sessions can provide an enhanced sense of safety and promote increased trust in the therapeutic process. Additionally, when parents are involved during the processing of traumatic memories of abuse, a corrective emotional experience [33] can take place as the parents/caregiver offers a nurturing and loving presence to counter the painful and intrusive impact of their abuse.

When working with children, calming techniques such as relaxation, breathing, safe place/safe person visualization, distress tolerance, and grounding help decrease arousal, promote safety, and

[33] American Psychological Association. www.dictionary.apa.org.

reduce anxiety. This is called resource development and installation (RDI) which is used to help the child with affect regulation. [34]

Once the child sexual abuse survivor is properly resourced and ready to process the painful memories, there is an opportunity for profound positive changes to occur in the realms of beliefs about self, God, and others. The pastoral psychotherapist instructs the child to bring up aspects of the abuse that are stored in the memory. When the memory network is activated, the child is asked to formulate a negative belief he/she has about self as it relates to the memory of the abuse. He/she is next instructed to formulate a positive belief that he/she would rather have about himself/herself today. The information processing phase is where adaptive beliefs and positive changes take place in the child's beliefs about self, God, and others.

"The information-processing system is adaptive when it is activated: Abuse victims begin EMDR treatment with a negative self-

[34] Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, pg. 248 2017.

concept about the event and consistently end with a positive sense of self-worth." [35]

Attachment and Object Relations Theory

The pastoral psychotherapist serves as the healthy attachment object and provides a corrective emotional experience throughout the therapeutic process. Attachment theory[36] and Object relations theory[37] posits that "early relationships with caregivers contribute to a child's feelings of security versus insecurity in relationships, and the development of healthy versus unhealthy attachments in those relationships."[38]

Survivors of child sexual abuse will often present with insecure attachment and unhealthy object relations. A caring pastoral psychotherapist can serve as a positive attachment figure and a

[35] Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, pg. 28 2017.

[36] Bowlby, John. *Attachment and Loss*. vol. 1, New York, Basic Books, 1969.

[37] Glickhauf-Hughes, C., and M. Wells. *Object Relations Psychotherapy*. New Jersey, Jason Aronson, Inc, 1997.

healthy attachment object. The client can then begin to trust and rely upon the therapeutic relationship as a safe place in which healing of traumatic memories can occur. In this relationship, the development of positive core beliefs about self in relation to God can take place. Where the core belief was once, "I am damaged", the pastoral psychotherapist helps the child sexual abuse survivor to see themselves through the eyes of God and can affirm, "I am fearfully and wonderfully made…and that I know very well." [39] Where there was the belief "I am shameful", it becomes, "I am honorable." Scripture affirms in Isaiah 61:7 "instead of your shame, you shall have double honor, and instead of confusion, they shall rejoice in their portion."

While the holistic approach of EMDR is a combination of cognitive, psychodynamic, and somatic approaches, a pastoral psychotherapist integrates faith to repair the child sexual abuse survivors' distorted image of God and self. This is where the

[38] Loyola University Maryland, and Rosemary Cook. *Father Absence Correlates of Wellbeing*. Dissertation. Columbia, 2003, p. 18.

[39] Psalm 139:16 Revised Standard Version

psychotherapist skillfully suggests healthy corrective images of God in the treatment while the adaptive information processing system is at work. Using the earlier example of my client whose distorted image of the abuse was that God was busy helping somebody else, she could begin to see God as present. In other words, her view of God changes as her view of herself is corrected through therapeutic intervention and adaptive learning.

For there to be continuity of care and consistent messaging around restoring the child sexual abuse survivor to wholeness, the faith community must be an active participant in the healing process.

The Church's Role in Upholding Justice for Children and Adolescents

When there is discontinuity between governing law and the justice and mercy of God it becomes the church's responsibility to uphold standards that reflect the righteousness of God. These standards steer the church to shepherd with compassion and appeal for justice that is firmly anchored and aligned to the imago Dei— that

is to bear the image of God and to act in the likeness of God.[40] This is especially true when considering the ways the church is accountable for protecting and covering the lives of children and individuals who are vulnerable. God has mandated the church to protect the infinite value of every human being by honoring the imago Dei that resides within them. Any act of assault that is inflicted upon another with the intent to exploit, dishonor, pervert, or wound disregards and defaces the image of God. Thus, we must provide purposeful care for the "least of these" the way we revere God. The church is commissioned to do so by upholding justice and giving voice to individuals who are voiceless or whose voices are not heard. This is accomplished by presenting a moral response in instances where there is a break in justice. Proverbs 31:8-9 reads: 8 Speak out for those who cannot speak, for the rights of all the destitute.[a] 9 Speak out; judge righteously; defend the rights of the poor and needy. [41]

[40] Jones, David Wayne. *An Introduction to Biblical Ethics*. Edited by Daniel R. Heimbach, B&H Publishing Group, 2013, (pg.23)

[41] Proverbs 31:9, New International Version

These are the words inscribed by King Lemuel— words that were impressed upon him by his mother, a virtuous woman. Thus, Lemuel's mother was an ethical woman. She stood for righteousness and was morally good. By exuding these qualities, she raised a righteous king who was cognizant of using his authority and power to defend the defenseless and not cause harm.

Exerting this level of care for others requires an in-depth examination of oneself. It requires a thorough check of our own moral compass. In doing so, we take the time to acknowledge our power, recognize our influence, and question both our intentions and desires. If at any point during this examination, one discovers that their power compromises the autonomy of another, silences the voice of the vulnerable, or asserts their power for the sole purpose of self - gratification, then one should consider this thought— what is lawful may not always be expedient.

"All things are lawful, but not all things are expedient. All things are lawful; but not all things [a]edify. Let no man seek his own, but each [b]his neighbor's good."[42]

1 Corinthians 10:22-24

Modeling Our Care For Children After The Teachings Of Jesus

[42] 1 Corinthians 10:22-24, Revised Standard Version

Throughout the New Testament, we find teachings where Jesus explains the significance of children and how they are also crystallized into God's plan for expanding the Kingdom of God. Not only does Jesus make the Kingdom inclusive for children, but He also models the appropriate conduct for caring and nurturing children. The juxtaposition of children and the Kingdom of God is lifted in Luke 18:15-34. In this pericope Jesus demonstrates how to honor the infinite value of all humanity. In his example, He places children at the center and recognizes their human value through thoughtful interaction, compassion, and respect.

The text describes a scene where people appear to be desperate for children (even infants) to be held by Jesus for them to receive a blessing. What happens next is an indication that the disciples overlooked the value of the children in this text. The disciples hindered the interaction between Jesus and the children by asking the people to stop bringing their children to Him.

Luke does not provide any explanation regarding why the disciples would want to prevent children from having contact with Jesus. However, their actions at this moment suggest that the needs of these children were irrelevant. The disciples' thoughtlessness and lack of care also indicate that they could not see the significance and infinite value of these children.

Jesus responds to their lack of acceptance and error through corrective actions— Jesus asks for the children to be brought to Him. **"**But Jesus called for them and said, "Let the children come to me and do not stop them, for it is to such as these that the kingdom of God belongs" (Luke 18:16). In this text, the teaching of Jesus centers around the well-being of children. His message is clear and unmitigated.

The Old Testament also provides informative teachings surrounding the appropriate care for children as well as their value in the eyes of God. In Psalms 103:13 God is depicted as a father who extends compassion to His children and in Psalms 127:3-5 children

are presented as a blessing. The psalmist writes that children are the heritage of the Lord. Each of these Psalms illustrates some level of care for children. Through this sacred literature, we are encouraged to cherish, value, and love children honorably, as one of God's beloveds.

However, outside of the teachings of Jesus and scriptures like the ones mentioned above, one may notice the ambiguity concerning the care for children throughout the majority of biblical narratives that include the stories of children who have been abused and or victimized.

Jesus addresses the maltreatment of children and harmful acts against the vulnerable with clear rebuke, exemplification, and correction. Through Jesus' example, He provides a model for implementing restorative justice when children and vulnerable people are harmed. Restorative justice is a crucial element in the recovery and healing process of a person who has been harmed or violated. One of the primary purposes of restorative justice is to validate the

voice and experience of the person who has been victimized. [43] By making space, justly defending, and seeing children as a reflection of God's heart and image, Jesus amplifies the voices of this muted demographic of people found throughout the Bible.

Examining Biblical Narratives Through Childist Interpretations

Throughout the Bible are narratives of children who have been subjected to some form of sexual violence as well as many other violations against their human rights and or dignity. Their stories may often go overlooked because (1) their voice or perspective is absent from their own narrative, (2) the historical and societal norms existing during the time their stories took place deprived them of humanity as a result of their low social status (3) children in the ancient world played intricate roles within their families, economics and had various societal responsibilities. [44] This could sometimes cause the differentiation between childhood and adulthood to become

[43] Wemmers, Jo-Anne, et al. "Restoring victims' confidence: Victim-centered restorative practices." *International Review of Victimology*, vol. 29, no. 3, 2023, pp. 466-486.

entangled. Thus, the child is not seen as a vulnerable member of society.

When navigating through biblical narratives of children whose stories include sexual abuse or any other fundamentally inhumane act of violence that causes harm and or jeopardizes the overall well-being of the child should never be ignored, minimized, or rationalized. Like Jesus we have a spiritual, moral, and ethical responsibility to address the neglected parts of the vulnerable individuals—this absolutely includes children.

Thus, as we read through their stories, we address the neglected parts of the text by reimagining the text through a restorative lens. The term childism is a theoretical framework and movement presented by scholars who seek to ensure the universal rights of children. They examine the lived experience of children and implement progressive strategies that empower children by respecting

[44] Fewell, Danna Nolan, editor. *The Oxford Handbook of Biblical Narrative*. Oxford University Press, 2018., pp. 425

them as fully human. [45] Childism scholars accomplish this by identifying historical and present-day insistence where a child's experience has gone unnoticed or has been underappreciated. [46]

The work of a childism scholar is very similar to what occurs when biblical scholars utilize a childist interpretive approach when examining biblical narratives of children. The childist interpretation enables the biblical scholar to expose neglected parts of the text that have caused the child to become marginalized.[47]

As we begin to engage with biblical narratives of children who have been sexually abused and or exploited, we'll closely examine their stories through a childist interpretation. As we read through the

[45] Russell, Dalton W. "Engaging Childist Biblical Interpretation and Reading Studies to Enhance Children's Bible Lessons." *The official journal of the Religious Education Association*, vol. 119, no. 1, 2024, pp. 31-42.

[46] Fewell, Danna Nolan, editor. *The Oxford Handbook of Biblical Narrative*. Oxford University Press, 2018., pp. 425

[47] Dalton, Russell W. "Engaging Childist Biblical Interpretation and Reading Studies to Enhance Children's Bible Lessons." *The Official Journal of the Religious Education Association*, vol. 119, no. 1, 2024, pp. 31-42.

[*Footnote continued on next page …*]

selected narratives we must identify (1) the setting (2) identify the child as the central character, (3) pinpoint the plot to understand the overarching purpose of the narrative, (4) seek to deepen an understanding related to the historical and cultural context of the narrative and how it influences the harm that is caused to the child (5) identify connections that can be made to narratives in the past as well as present-day experiences. (6) We must understand restorative measures that should be implemented to validate and heal the experience of the child.[48]

Working through this type of theological interpretation enables us to better understand how to see the personhood of children. While also facilitating restorative healing responses that positively and effectively support children who have survived sexual abuse.

It is important to note that the biblical narratives introduced in this article present narratives of girls who have been the victims of

sexual abuse. As previously stated, child sexual abuse has no bounds. Sexual abuse against children is not limited to any gender — it crosses gender identities.

Biblical Narratives of Child Sexual Abuse and Exploitation

The Rape of Tamar Princess of Israel

Tamar's story is one that has the potential to be engulfed by the presence of powerful and dominating men. Integrated into every segment of her narrative is a man who was responsible for her care. Regretfully, the men in her life would each have a hand in the tragedy she experiences.

The exposition of her narrative is a precursor to understanding how Tamar is regarded by the narrator and the men who participate in her story. Before revealing details about Tamar's story, it should be noted that every major player in this narrative is a member of King David's royal family. The narrator notes that Ammon and Absalom,

[48] Fewell, Danna Nolan, editor. *The Oxford Handbook of*
[*Footnote continued on next page …*]

Tamar's brothers, are the sons of King David. Jonadab who serves as Ammon's advisor is also recognized as King David's nephew. Though not explicitly stated, Tamar is the royal princess of Israel. She is the only daughter of King David. It is also important to note that Absalom and Tamar's mother Maacah, is the royal daughter to Talmai, King of Geshur, a Transjordan king.[49] Thus, Tamar came from two royal bloodlines. However, the distinction of her royal status is never acknowledged.

Biblical scholars suggest that Tamar's story takes place sometime around 990 B.C. During this time Ammon, Daivd's first-born son, heir to the throne, and half-brother to Absalom and Tamar would have been around the age of 21. Absalom the full-blood sibling to Tamar would have been around the age of 19 and Tamar would have been between 15 and 16 years old.[50]

Biblical Narrative. Oxford University Press, 2018., pp. 425

[49]Newsom, Carol A. *Women's Bible Commentary, Third Edition: Revised and Updated*. Edited by Carol A. Newsom, et al., Presbyterian Publishing Corporation, 2012., pp. 451.

[50] Muneja, Musa. "Cakes, Rape and Power Games: A Feminist Reading of the Story of Tamar." *Boleswa Journal of Theology Religion and Philosophy*, vol. 1, no. 1, 2006, pp. 81-97.

It was around this time that Ammon, Tamar's half-brother became excessively infatuated with his sister to the point that it caused him to become ill. Ammon claimed and believed he had fallen in love with his sister. When Jonadab, Amnon's advisor and cousin took notice of Amnon's condition he began to devise a plan to have Tamar brought to Amnon's private quarters—Amnon agreed to his plan. Even though Tamar was a princess, unlike her brothers, she had no power. This is especially true in comparison to Amnon who was highly esteemed as King David's first-born son.

Jonadab's plan consisted of Amnon pretending to be ill and convincing his father to allow his sister Tamar to assist in "aiding" him back to good health. Amnon asks his father to have Tamar prepare a meal for him. Once his sister arrives at his quarters, he dismisses everyone else who is present. Without hesitation, Amnon begins asserting his physical strength to overtake Tamar's body. Despite her pleading and reasoning with him, Amnon is unable to hear.

In her desperate attempts to stop her brother from violating her, she even begins to recite the laws of Israel to Ammon [51] Deirdre Brouer, a Hebrew biblical scholar, suggests that once Amnon heard Tamar's refusal, he was obligated to honor her request. She writes, "By calling Amnon "my brother," Tamar confronts Amnon with his brotherly obligation to protect her sexuality, status, and wellbeing."

In this moment his need for self-gratification deprives Tamar of her inherent right to have autonomy over her own body. Amnon dismisses Tamar's personhood and precedes to rape her.

Even after her rape, Tamar continues to try and reason with her brother. She asks her brother, who is now also her rapist, not to throw her out but to marry her. Tamar begs her brother not to put her out because this would be worse than the violation itself. Again, Amnon disregards her pleas and throws her out anyway.

She leaves Amnon distressed and deeply anguished by her brother's actions. By her response, Tamar is also grieving what she

[51] Newsom, Carol A. *Women's Bible Commentary, Third Edition: Revised and Updated*. Edited by Carol A. Newsom, et al., Presbyterian Publishing Corporation, 2012., pp. 451.

lost, who she was, and what she could never be because of her brother's violation against her body.

Absalom, Tamar's full-blood brother, discovers what has happened to his sister. He asks her to remain silent about what Amnon had done to her. The narrator informs us that Absalom never speaks a word against Amnon though he hated Amnon and what he had done to their sister. Though we no longer hear Tamar's voice throughout the narrative, the narrator writes that Tamar seeks refuge in the home of her brother Absalom. Where she lives out her days as a "desolate woman". Absalom two years after the assault of his sister plots revenge against his half-brother Amnon. Absalom has Amnon killed before fleeing to Geshur.

Clinically speaking, the sexual abuse of Tamar has the potential to change her view of God, self and others. Tamar was described as living her life as a "desolate woman". Her brother Absolam stands as a non-protective bystander who does not seek justice on her behalf and tells her to remain silent. Tamar's core belief possibly becomes, "There's something wrong with me." Her image of God becomes "God is not helpful." Her view of her brothers' lack of

help and minimization of her experience can lead to her internalization of self as "unworthy of love and protection". This internalization is a survival strategy children use to stay connected to those you love even when they are your abusers. Tamar's God image and identity is shaped by the response of her brothers following her abuse. With therapeutic intervention of the caring pastoral psychotherapist, Tamar would grow cognitively and emotionally to be able to make appropriate attributions in the realms of assigning responsibility to the correct perpetrator, viewing God through a healthier lens, and seeing herself as worthy of protection and love. Through this restored perspective, Tamar can begin to speak for herself and make healthy decisions that are in her own self-interest.

The Slave Girl

Another narrative that can be examined when reading from a childish lens is the story of the slave girl. As we read through the slave girl's narrative, keep in mind she has been identified as unnamed, a slave, is female-gendered, and alludes to the fact that she is more than likely an underage child.

This narrative begins with Paul and Silas who are traveling through Philippi. While traveling, they are approached by a slave girl who was known throughout Philippi as the slave girl who is possessed by a spirit of divination. The spirit that had taken possession of her body is sometimes referred to as a "python spirit". This spirit is contrary to the spirit of God, it is both restricting and controlling. The spirit that possessed the slave girl manipulated her into fortune-telling.

The narrator informs readers of the fact her owners used this to their advantage. We do not know who the owners are but what is explicitly stated is that her owners made a great deal of money from her being spiritually bound. The unidentified girl in this text was being exploited for someone else's gain. It may appear as if the slave girl just inserts herself into the story as this narrative begins with details concerning Paul and Silas' expedition through Philippi. The narrator of this pericope describes how the slave girl begins to follow Paul and Silas crying out, "These men are slaves of the Most High God, who proclaim to you the way of Salvation."

Children's outbursts are often misinterpreted as acting out or oppositional behaviors. In the book Trauma - Informed Children's Ministry, Robert, and Lori Crosby (2022) highlight a statement made by a pastor, "So often, that kid who is acting out in a way that we think is socially unacceptable, they don't know how to verbalize what's going on with them. So they're communicating to us through their behavior." [52]

The narrator states that this loud cry and chant continued for several days until Paul became so annoyed that he turned to the spirit that held the girl in bondage, ordering it to come out in the name of Jesus Christ. That very hour the spirit left the girl. When the slave girls' owners discover she can no longer be exploited, they have Paul and Silas thrown into prison. After having the spirit cast out, we hear nothing else about the slave girl as the narrator expeditiously writes her out of the text, placing the focus back on Paul and Silas.

The narrative of the slave girl is an example of how children sometimes face compounding marginalization which make them more

[52] Crosby, Robert G., and Lori A. Crosby. *Trauma-Informed*
[*Footnote continued on next page …*]

vulnerable to sexual abuse. It is more than likely these children become targeted because they are often isolated and lack the capability to report.

The narrative of the slave girl does not explicitly name child abuse or sexual abuse as a problematic theme found within the text. However, if reading from a childish perspective, it will become our responsibility to investigate parts of the narrative that aren't explicitly stated to better understand her marginalization. Though she may not have been sexually violated, as we read through her narrative, we should pay attention to the lack of autonomy she has over her body, her inability to advocate effectively for herself, and how she was both manipulated and exploited.

The parallels between the slave girl's experience and the plight of children facing sexual abuse today mirror the same contributing factors. In both contexts, there is a child who is susceptible to abuse because of their vulnerability and inability to advocate effectively for their personhood. In both instances, there is

Children's Ministry. Wipf & Stock Publishers, 2022. pp, 27

someone who asserts an asymmetrical power dynamic to use the child for self-gratifying purposes.

Like the slave girl, children who are victims of sexual abuse need someone who will take the time to understand the adverse effects of their sexual trauma. If this is done, those who advocate on behalf of a sexually abused child are better prepared to nurture that child back to a place of healing and wholeness. Sexually abused children require an advocate who is willing to interrupt the plot of a trauma-filled narrative like Paul and Silas did.

Child sexual abuse survivors are at risk of living in desolation like Tamar if their voices are silenced. They are often reluctant to disclose for fear of retribution, fear of being shamed or fear of not being believed. Their vulnerabilities make them susceptible to exploitation, limits their choices and leads to a misunderstanding of their cries for help like the slave girl. It is therefore imperative that safe environments are created to support their sharing and to amplify their voices. We urge the faith community to take the lead and model the example of Jesus found in Matthew's gospel. "When He saw the

crowds, He was moved with compassion and pity for them, because they were dispirited and distressed, like sheep without a shepherd." [53]

A Model to Support Survivors of Child Sexual Abuse

The Faith Trust Institute (2022) has developed a model to support victim-survivors in disclosing sexual abuse. Their emphasis is on violations that occur within the faith community. However, this model can be adapted to any setting where child sexual abuse has occurred. The following is a checklist for centering survivors' voices.

When a survivor comes forward, spiritual leaders should attempt to:

- Listen attentively
- Express sympathy
- Bear witness to their suffering
- Apologize
- Help connect new victims to other survivors

[53] Matthew 9:36 Amplified Bible

• Invite victims to bring a friend / advocate to the next conversation

• If other victims come forward, help them network with one another

What to Avoid: Responses That Harm Survivors

The Faith Trust Institute (2022) asserts that "It is vital that you avoid responses which make survivors feel revictimized. These mistakes also risk damaging the credibility and long-term health of your broader spiritual community. If your goal is to nurture and protect survivors' voices, try to avoid:"[54]

• Minimizing the situation

• Justifying the harms they've experienced

• Asking survivors to recount the explicit details of their assault or rape

[54] Dratch, Rabbi Mark, et al. *Responding to Spiritual Leader Misconduct*. Handbook. Edited by Faith Trust Institute. www.faithtrustinstitute.org, 2009, 2022, pp. 163-164.

• Forcing victims to revisit the space where the misconduct took place

• Insisting on forgiveness, silver linings, or divine will

• Insisting on prayer or meditation

• Silencing or intimidating victims

• Shunning victims from your faith community [55]

The Churches' Response

As faith leaders, we must see the children who enter our spaces of worship as whole persons. It is imperative that we recognize that just like adults, there are children who sometimes carry with them extreme trauma.

The questions we should be asking ourselves are:

1. Am I knowledgeable enough to recognize the signs of a child who is being sexually abused?

[55]Dratch, Rabbi Mark, et al. *Responding to Spiritual Leader Misconduct*. Handbook. Edited by Faith Trust Institute. www.faithtrustinstitute.org, 2009, 2022, pp. 163-164.

2. Am I aware of how to properly report and where to report instances of child sexual abuse?
3. Are there procedures in place to create safe spaces for children who have been sexually abused?
4. Are our environments trauma informed and trauma sensitive in its practices?
5. Are there partnerships with secular and faith-based organizations that provide trauma resources?
6. Are we courageous and vigilant in our advocacy for survivors?
7. Are we morally and ethically fulfilling our roles as mandated reporters regardless of our proximity to the perpetrator?

Cited Works

Allender, Dan B. *The Wounded Heart: Hope for Adult Victims of Childhood Sexual Abuse*. NavPress, 2018.

American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders: DSM-5*. American Psychiatric Association, 2013.

American Psychological Association. www.dictionary.apa.org.

"And How Are the Children?" *Wikipedia*, Westat Health Communications, June 20 2017, https://fb.watch/re-af-Ra7W/?mibextid=w8EBqM. Accessed 8 April 2024.

Blow, William T. "Child Brain Development." *Nursing Times*, vol. 99, no. 17, pp. 28-31.

Bowlby, John. *Attachment and Loss*. vol. 1, New York, Basic Books, 1969.

"Children and Teens: Statistics." *RAINN*, https://www.rainn.org/statistics/children-and-teens. Accessed 20 April 2024.

Day, Jackson H. *Risking Connection in Faith Communities: A Training Curriculum for Faith Leaders Supporting Trauma Survivors*. vol. Pg. 8, Sidran Institute Press, 2006.

"Disadvantaged and vulnerable groups." *Social Protection and Human Rights*, https://socialprotection-humanrights.org/key-issues/disadvantaged-and-vulnerable-groups/. Accessed 20 April 2024.

Dratch, Rabbi Mark, et al. *Responding to Spiritual Leader Misconduct*. Handbook. Edited by Faith Trust Institute. www.faithtrustinstitute.org, 2009, 2022, pp. 163-164.

Ehlers, Anke, et al. "The nature of intrusive memories after trauma: the warning signal hypothesis." *Behaviour Research and Therapy*, vol. 40, no. 9, Sep 2002, pp. 995-1002.

Gaultiere, William, and Kristi Gaultiere. *Mistaken Identity*. vol. pg. 62, Power Books, 1989.

Glickhauf-Hughes, C., and M. Wells. *Object Relations Psychotherapy*. New Jersey, Jason Aronson, Inc, 1997.

Loyola University Maryland, and Rosemary Cook. *Father Absence Correlates of Wellbeing*. Dissertation. Columbia, 2003, p. 8.

Maxfield, Louise. "A Clinician's Guide to the Efficacy of EMDR Therapy." *Journal of EMDR Practice and Research*, vol. 13, no. 4, 2019, pp. 240-246.

Newsom, Carol A. *Women's Bible Commentary, Third Edition: Revised and Updated*. Edited by Carol A. Newsom, et al., Presbyterian Publishing Corporation, 2012.

Oxford Languages, translator. *Online Dictionary*.

Rizzuto, Ana-Marie. *Birth of the Living God: A Psychoanalytic Study*. University of Chicago Press, 1979.

Shapiro, Francine. "Efficacy of the eye movement desensitization procedure in the treatment of traumatic memories." *Journal of Traumatic Stress*, vol. 2, no. 2, April 1989, pp. 199–223.

Shapiro, Francine. *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic Principles, Protocols, and Procedures*. Kindle ed., Guilford Publications, 2017.

Solomon, Roger M., and Francine Shapiro. "EMDR and the Adaptive Information Processing Model." *Social Work Journal*, vol. 39, Oct 2012, pp. 191–200.

Tierney, Adrienne L., and Charles A. A. Nelson, III. "Brain Development and the Role of Experience In the Early Years." *National Library of Medicine*, vol. 30, no. 2, 2009, pp. 9-13.

Van der Kolk, Bessel. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. vol. pg 143, Penguin Publishing Group, 2014. Accessed 25 April 2024.

Van der Kolk, Bessel. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. Pg. 19 ed., Penguin Publishing Group, 2014. Accessed 26 April 2024.

Wemmers, Jo-Anne, et al. "Restoring victims' confidence: Victim-centered restorative practices."

International Review of Victimology, vol. 29, no. 3, 2023, pp. 466-486.

Wenninger, Kerstin. "Dysfunctional cognitions and adult psychological functioning in child sexual abuse survivors." *Journal of Traumatic Stress*, vol. 11, no. 2, 2005, pp. 281-300.

Wimberger, Lisa. *Neurosculpting: A Whole-Brain Approach to Heal Trauma, Rewrite Limiting Beliefs, and Find Wholeness*. Sounds True, 2015.

YouVersion, translator.

YouVersion Bible Translation. *Common English Translation*. Matthew 2:10. 10.3.2 RED3.9.11.7959.