Career Themes in the Lives of Sexual Abuse Counsellors

A Qualitative Inquiry into Therapists' Responses to Stress and Trauma

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Abstract

This paper, which draws on material from a larger study, focuses on the career trajectories of counsellors who specialise in sexual abuse work. The initial aim of the study was to assess whether the vicarious traumatisation literature underpinned by constructivist self-development theory was relevant. Twenty-two counsellors were interviewed using a qualitative research design and method. In individual interviews, counsellors' motivations for entering the field of sexual abuse therapy were explored, as well as the ways in which their practice experiences had modified their earlier expectations of the work, and the counsellors' subsequent diversification into other roles. The participants in the research, hereafter referred to as the counsellor-participants, described developments in their thinking about sexual abuse that influenced the theoretical approaches they espoused and their career development. Coming to terms with their own early traumatic material meant that many of the counsellor-participants developed knowledge of their own healing processes that they could use constructively in assisting other trauma survivors.

Keywords: sexual abuse counsellors, trauma, vicarious traumatisation, professional growth, career development

Sexual abuse counsellors who witness accounts of trauma take on the role of healer in a manner similar to members of the medical profession and other health professionals. They are thus mutually involved in a moral as well as therapeutic endeavour. The effects of hearing daily accounts of sexual, emotional, and physical violence can include an

erosion of trust and esteem of others, as well as disruptions to helping professionals' own sense of the world as a safe place (Cunningham, 2003). These shifts in belief and worldview have been connected to the experience of working intensively with trauma disclosures, and more specifically, with work involving interpersonal violence (Huffam, 1999; Moulden & Firestone, 2007). When one's initial training is challenged by the day-to-day experience of working with sexual assault survivors, existing frameworks or foundations for practice can seem not to "fit," and as a consequence practitioners may experience a sense of disjuncture out of which they can find themselves practising in unknown territory or "liminal spaces" (Myerhoff, 1982). Within such transitional zones, a search for alternative theories and lifestyles is generated in an attempt to make meaning of experience.

Liminality

Liminality is a term used to describe the gap between the known and the unknown, where meaning is attached to experience and in which creative change occurs. Cultural anthropologist Barbara Myerhoff's classic work *Number Our Days* (1982), building on the earlier work of cultural anthropologist Victor Turner, used the concept of "liminal space" to depict the process of adjustment experienced by migrants entering into a new culture who meet, subsequently and regularly, to share narratives of the "old country." When self and other interact in such spaces, new life-enhancing narratives and meanings are created (Myerhoff, 1982). Liminal spaces also exist when practitioners move to a new field of practice and are challenged to evolve their unique styles and ways of working with complex issues, paralleling this movement from one professional culture to another (Pack, 2004, 2007, 2009).

Within such discursive spaces, practitioners experience an immersion in the unknown that is akin to the "creative void" or "impasse" in psychotherapy. Out of this void, creative strategies and solutions to challenges are actively evolved through interaction between the self and the practice environment, and through professional associations (Pack, 2004, 2007, 2009). Therefore, liminal spaces are seen conceptually as transitional zones that exist between the known and the unknown, where belief structures are challenged and a search for meaning is evoked. Aligning with the vicarious traumatisation framework (Pearlman & Saakvitne, 1995) out of their search for alternatives, new meaning becomes attached to experience. This challenge, and the search evoked by this process, sits at the interface between the personal and professional aspects of a counsellor's worldview and experiences. Therapy itself represents a liminal

zone of "betwixt and between" in which personal dilemmas and experiences can be deliberated upon. Experimentation with new strategies and ways of being can be evolved and tested for relevance in personal therapy, peer review, and clinical supervision in cycles of action and reflection.

Regardless of whether or not a practitioner is new to a field, however, one could argue that being confronted with trauma itself offers an opportunity to step into the unknown. In the process, empathetic engagement with traumatic disclosures from clients evokes a practitioner's own traumatic experiences in life. While this occurrence is challenging, such experiences provide opportunities to interact in liminal spaces to reflect on one's life and career development.

In this state of liminality, Herman's (1992) notion of "witnessing" as a political act fitted the experiences of the counsellor-participants interviewed for this research more closely than did the psychodynamic discourse in which much of their initial training was grounded. To understand this search for meaning, the founding work of Pearlman and her colleagues on vicarious traumatisation was used to see if this was relevant to understanding the counsellor-participants' experiences as a starting point.

Vicarious traumatisation

Vicarious traumatisation is a process that occurs when psychotherapists' sense of self and worldview are negatively transformed through empathetic engagement with traumatic disclosures from clients (Pearlman & Saakvitne, 1995). The effects are considered to be cumulative, permanent, and irreversible. The basic premise of "cognitive self-development theory" underpinning the concept of vicarious traumatisation is that individuals "construct their own personal realities through the development of complex cognitive structures which are used to interpret events" (McCann & Pearlman, 1990, p. 137). Self-constructivist development theory explores the effects of exposure to trauma on five fundamental psychological needs: safety, dependency, trust, esteem, and intimacy. In later writings, "frame of reference," "independence," and "imagery systems of memory" were added to this list of five (Pearlman, 1997; Pearlman & MacIan, 1995; Pearlman & Saakvitne, 1995). The hypothesis of constructivist self-development theory is that the therapists' cognitive constructs relating to these "fundamental needs" will be altered, often permanently, by continued involvement with traumatic material. These ideas are congruent with those of Dutton (1992), who discussed some of the common changes in belief that therapists routinely encounter when working with domestic violence survivors. Huffam

(1999) and Moulden and Firestone (2007) discussed vicarious traumatisation in relation to the impact of work with sexual offenders.

The negative orientation of the vicarious traumatisation framework has been challenged more recently as it has been discovered that, over time, sexual abuse counsellors evolve ways of being that are protective of their personal well-being and professional effectiveness. For example, previous research had suggested that psychotherapists' effectiveness in working with survivors of sexual abuse is dependent on the quality of personal and professional support they access (Rasmussen, 2005; Sabin-Farrell & Turpin, 2003; Steed & Downing, 1998). Guided by Pearlman and Saakvitne's (1995) original framework of constructivist development theory, intimacy, esteem of self and other, safety, worldview, and cognitive structures were identified as areas potentially affected by engagement with traumatic disclosures. It was the impact in these areas that originally motivated this research.

Research aims

The aim of this research was to investigate whether the vicarious traumatisation framework was meaningful for counsellors registered to undertake therapy with sexual abuse survivors. Due to the wide availability of public funding at the time for counselling for sexual abuse assault survivors, an increasing range of counselling professionals, including clinical psychologists, psychotherapists, and social workers, had chosen to register to provide this specialised service nationally. A further aim of the research was to explore the possible connection between the original motivation(s) for becoming a sexual abuse therapist and the ways in which counsellors maintained their effectiveness for continuing practice in the role.

One hypothesis was that with increasing experience of working in the field of sexual abuse therapy, counsellors would have developed a greater awareness of their own potential for vicarious traumatisation, and the possible ways in which their own biographies and life events might influence this potential (Pearlman & Saakvitne, 1995). In addition, I hypothesised that through this awareness, counsellors may have developed their own strategies for dealing creatively with vicarious traumatisation to determine what ameliorated it. Permission to undertake the research was sought and obtained from the Humanities and Social Sciences Research Ethics Committee of Victoria University of Wellington.

Research method

Sampling

The participants in this research were selected using a strategic, purposive sample of 22 counsellors who were registered Accident Compensation Corporation (ACC) trauma therapists. Every third counsellor listed in the ACC Register of Approved Counsellors was systematically selected and then approached to ascertain if they would be interested in participating in the research. The sampling frame became more strategic after the first ten counsellors were selected, to ensure that counsellors with a range of professional backgrounds, genders, and cultures were represented—including, for example, male counsellors, counsellors who worked with children, counsellors who worked with perpetrators of abuse, and counsellors who specialised in working with Māori or Pacific clients. Three counsellors initially agreed but later declined to be interviewed due to the constraints of time or personal circumstances.

The interview process

Prior to being interviewed, each counsellor was sent a copy of McCann and Pearlman's (1990) foundational article on vicarious traumatisation which established the framework using constructivist self-development theory. During in-depth individual interviews, I asked the counsellor-participants why they had decided to become sexual abuse counsellors initially, in order to frame the broader findings of how they continued to practise effectively in this challenging field. I also asked whether the article by McCann and Pearlman resonated with their own experiences.

The focus group

A focus group of four counsellors met monthly with me as researcher. In addition, three counselling advisors participated in the project to provide individual feedback as experts in the field. The focus group and counselling advisors were drawn from the researcher's own professional networks. The counselling advisors were nationally recognised for their individual contributions to the field of trauma counselling in New Zealand. They therefore acted as consultants to the project and the focus group As each person in the focus group and each of the advisors became interested in participating in the individual interviews, I included their individual as well as collective contributions to guide the direction of the research. The counselling advisors and the focus group provided a "sounding board" for each phase of the research by commenting on the emerging themes from the literature review, fieldwork, and data

analysis. These comments were summarised, acknowledged as a contribution by the focus group or an advisor (anonymously), and included as an integral part of each section of the final report.

Writing from reflection

A central dilemma of this research involved the question of how to write richly about the participants' experiences in order to retain their individual voices alongside the central themes that emerged, while avoiding identifying them. The participants gave me permission to share their narratives in the hope that they would illuminate a "common" experience from which others might learn. To distinguish between the counsellor-participants' individual voices, I asked each to nominate a pseudonym to be used with the presentation of their contributions.

The involvement of the focus group and the counselling advisors as individuals in ongoing reflection and feedback at each stage of the research process was one way of accomplishing the aim of gathering rich data. I provided the members of the focus group and the advisors with a summary of emerging themes at each stage as I kept notes on each focus group meeting. The discussions I initiated amongst the counsellor-participants, advisors, and the focus group constituted the research into vicarious traumatisation through their critical-reflective process. Through discussing their own experiences of vicarious traumatisation and specific practice dilemmas, their combined practice wisdom provided insights that I used to formulate my own original theories about the counsellor-participants' awareness of vicarious traumatisation and their development of strategies to ameliorate it over time with their increasing professional experience. I then fed these back to the group and to the advisors for further comment and insights.

Data analysis

As the interviews were conducted and patterns began to be discerned, these were discussed with the focus group. The insights of the focus group members shaped my efforts and influenced the direction in which the analysis moved.

Broadly, thematic analysis was applied to the data from the interviews. Braun and Clarke (2006) defined "theme" in thematic analysis as "a patterned response or meaning within a data set" that "theorizes language as constitutive of meaning and meaning as social" (pp. 79–81). Thus, themes and stories within the data were sought, using the theoretical orientation of the vicarious traumatisation literature. I explored

the discourses that the counsellor-participants developed themselves, drawing from their own examples illustrating their practice wisdom. My reading of critical-reflective approaches to social work practice research suggested the fruitfulness this line of inquiry (Fook, 1996; Fook & Gardner, 2007; Fook, Ryan, & Hawkins, 2000; Napier & Fook, 2001).

Napier and Fook (2001) had earlier interviewed social workers about defining moments in their practice. They discovered that while involving participants in an extended reflection on their most difficult practice scenarios, the participants came to view these practice experiences more positively. In a similar way, a critical incident approach asks participants about practice experiences that were interpreted as difficult at the time and then allows perceptions of the work to be examined (Lewis, 2008). As I was interested in the impact of these experiences on the counsellors' career trajectories and life course, the vicarious traumatisation literature provided an entry point to this discussion. I hypothesised that the intensity of the emotional impact of working with sexual abuse disclosures over time would explain the development of strategies that served to protect practitioners from the nature of the work.

Results

Five main themes were identified from the interviews. First, the motivations of counsellors for entering the field were based in family and personal biographies of trauma. Second, experiences of successful personal therapy informed clinical experiences. Counsellors actively developed their own strategies that continued to guide their therapeutic work with clients throughout their careers. Third, immersion in sexual abuse work in the early 1980s meant that the counsellors were "trail blazers" in the field, creating their own theories about sexual abuse recovery to assist clients effectively in the absence of established theory at that time. Fourth, once the participants were established as expert practitioners in the field, personal and professional beliefs and theories were refined by practice wisdom, peer and supervisor support, and personal therapy. In this process, personal beliefs changed as different things came to matter, such as quality of life, relationship and spirituality. Fifth, a movement into alternative lifestyles and careers occurred while counsellors practised in the field of sexual abuse therapy over a number of years.

I discovered that over the length of their careers, spanning some five to 30 years, these sexual abuse therapists developed strategies for understanding their clients' trauma by reflecting on their own healing from traumatic events as well as from their experiences of working with clients who had been sexually abused. These integrated insights were drawn upon as a resource to guide therapeutic processes and assist in maintaining their own resilience and their on-the-job effectiveness. This awareness enabled them to continue to practise with sexually abused clients and to cope with disclosures that were "hard to hear" as they integrated experiences from their earlier careers and from personal therapy, as well as insights from practice.

Initial motivations: A call to service?

The counsellor-participants had worked in a range of occupations prior to entering the field of counselling and psychotherapy. Three had trained as ministers of religion before becoming counsellors. Other occupations given included cook, talk-back host, soldier, clerk, bus driver, ambassador/public relations consultant, nurse, accountant, teacher/adult educator, and secretary. With additional training, the group had become social workers, counsellors, psychologists, and psychotherapists, reflecting the composition of the professions registered as trauma counsellors. Only three of the participants were men, reflecting the predominance of female therapists in the ACC Register of Approved Counsellors, which forms the largest register of trauma-related specialist counsellors in New Zealand. Once trained, the professional divisions among counsellor-participants seemed less relevant as working in the field of sexual abuse/trauma established a connection among colleagues. I will therefore use the terms counsellor and therapist interchangeably, as these terms are the generic categories for the groups working with sexual abuse survivors. A common scenario was for a social worker, general counsellor or psychologist to train subsequently to become a psychotherapist. Therefore, it seems artificial to impose one professional label when membership in more than one professional grouping applied.

Later career progression

A theme for the counsellor-participants was a gradual progression into sexual abuse counselling. For the majority of those interviewed, after gaining some insight into the inadequacies of their existing work or lifestyle, in addition to some personal experience of trauma and recovery from trauma, different personal and career priorities emerged in their lives. Some had entered counselling and moved into managerial, supervisory, and training roles. Four participants had published as a way of bringing their experience of particular issues they had encountered during their years of clinical practice into broader public awareness.

The participants' initial motivation for becoming counsellors was to be helpful to clients in some way. Looking back on their careers with the advantage of hindsight, they often recognised and acknowledged an unconscious motivation to work through some residual personal or family-of-origin issues that had not been dealt with previously. These included family issues in which the counsellor had played a helping role within their family of origin which was later professionalised; a variety of traumatic experiences that they had survived and which they now wished to assist others through; and the development and expression of various humanitarian and altruistic values. Hayley (her chosen pseudonym), one of the counsellor-participants, discussed the connections between her personal philosophy and her own personal experiences of trauma, and the ways in which these related to her decision to train as a social worker and, later, to become a sexual abuse counsellor.

I think about wider social issues: about injustices between men and women there. I have strong feelings about equity and justice; that's why I work in the field that I do. And I think that this inequality is reflected in a nuclear family as well. So I think that people's histories have a huge impact on why things happen...

So for me, too, like my individual experience of abuse early on, I'm sure, is one of the reasons for getting into the area. I have been involved in this sense. As well I feel that people have a higher chance of resolving issues for themselves if they have the right kind of input. So I guess I have greater faith in people's abilities to change and develop if they are enthusiastic about being part of the counselling process. That involvement in counselling others had been a good thing for me.

Family and personal experiences

The counsellor-participants who specialised as therapists in middle age often felt a sense of calling or mission as they matured in their professional experiences. For the two selfidentified Māori counsellors interviewed, the counselling role was one that their whānau had seen them assuming, as they were part of a lineage of healers. The strength drawn from this prophecy and the presence of ancestors within whānau, hapū, and iwi sharpened their resolve to pursue a career in one of the healing professions. Becoming a counsellor was seen by whānau, and by the individuals interviewed, as the fulfilment of a prophecy for their lives. Key moments were described as being pivotal to making this transition from the previous occupations listed, to counselling and psychotherapy.

Maxine had made the transition from accountancy to psychology after her grandmother's funeral and reading Māori creative writing, including the novel *Tangi*

by Witi Ihimaera (1989). This novel and the creative writing course Maxine was enrolled in put her in touch with the presence of her grandmother, who had prophesied her entry into the healing professions to carry on a family tradition of involvement in healing others. This prediction became a self-fulfilling prophecy as she then returned to university to study psychology.

My grandmother was a healer comfortable with spirituality. She would have been called a matakite [healer]. So, for me, it [counselling] was normal. She told my mother in Māori, because she didn't speak English, what I would be doing when I was eight years old. Of course, resistance was my forte; my first profession was accountancy until I returned to high school and studied Māori poetry (Tangi and the poetry of Hone Tūwhare). And my direction changed completely. Spirituality is one of the only reasons I would do this work. Rather than a profession, it was a calling directed by my elders.

In contrast, other counsellor-participants described their involvement in sexual abuse work as happening more by accident than by choice. However, on closer reflection, this progression was related to a barely realised acknowledgement that there were personal issues acting as a motivating force for entering the work—and for staying in it. Often, the counsellor-participants also had social connections with those already working in the sexual abuse field. Thus, they were well positioned to hear about job vacancies. In this excerpt from an interview, Rebecca spoke of a series of fortuitous coincidences that led her into a full-time position in a sexual abuse agency. She had already worked in this agency as a student while completing her clinical psychology training.

I saw doing psychology as a way out of sexual abuse work. No, it [movement into sexual abuse work] wasn't a choice at all. It was just through my course; I had a placement. I went and did a little bit of voluntary work at the sexual abuse agency because I knew some of the people there and I needed a bit of money. Things fell together at the time they set up their programme and here they were looking for staff and here I was looking for a job. And it happened and it fitted my placement, the placement criteria, and I just decided to do it and I stayed. If I had seen the job in the newspaper then, I wouldn't have applied.

Formative experiences

Early expectations of the work usually failed to meet the day-to-day realities of it. Few felt adequately prepared for the situations they were confronted with on the job.

Working in the sexual abuse field in the early 1980s was experimental, both in New Zealand and internationally. The publication *The Courage to Heal* (Bass & Davis, 1988) quickly reached New Zealand and the focus group members and counselling advisors confirmed that it was heralded as one of the main self-help guides referred to by clients and counsellors in New Zealand (Huffam, 1999).

Working in the absence of established systems, knowledge, and protocols hampered the counsellor-participants' efforts to provide what they considered to be effective and appropriate services. They also described the backlash encountered from the public over their involvement in bringing abuse to wider attention. This backlash mirrored the subsequent litigation and legal proceedings that Davis and Bass themselves encountered in the United States following publication of *The Courage to Heal*. Later such publications were brought into the "false memory" debate and criticised for encouraging disclosure prior to adequate skill building (Briere, 1996; Herman, 1992).

The gap between initial expectations, learned theory, and practice-based experiences fuelled a search for alternative responses to working within agency structures. Sally, one of the counsellor-participants, described this critical-reflective process as guiding her own practice as an addiction counsellor within a female prison. A process of deconstruction and reconstruction assisted her in dealing with her own sense of being "overwhelmed" by the people she encountered who had been abused. Through such processes, Sally acknowledged the contradictions in her role as an addiction counsellor when trying to do what she thought would most benefit her clients:

I used to think about it [sexual abuse] far more when I first went into the work but I was also dealing with a large number of people who had been abused. My first work in the trauma field was when I was working at the prison, and so about ninety-five percent of the people I was seeing were abused in some way.

They [clients] were coming to me because I was an addiction counsellor there presently and they were coming to me for their addiction problems and I was then realising that it [sexual abuse] was an underlying problem. Maybe one could fix the addiction problems but it was just putting like a sticking plaster on a huge wound. And the huge wound would weep. It was then that I realised I needed to get some skill in dealing with abuse. In those early days, some of those stories really blew me away. I think they don't blow me away any more.

Beth, one of the counsellor-participants, was led to specialise as a trauma counsellor in order to respond to a need her clients had identified: I was very enthused about starting out as a counsellor and I saw myself as a general counsellor working on general issues, personal life stresses, life changes, grief and loss, and it was only within the first few months of working as a counsellor that I had requests from clients, from potential clients, saying they wanted to do sexual abuse work and was I able to do it with them and was I registered. And, so, in the course of supervision, I realised that sexual abuse work didn't have to be a foreign category; it was a logical extension of working with grief and self-esteem. And so, therefore, I decided I could be competent with it and then I decided I didn't like being on the end of the phone saying to people, "No, I can't do sexual abuse work because I'm not registered," so I went through the process of becoming so, and so then I was a sexual abuse worker and that's how it happened. It was because of this need that came to me and so I responded to it.

The move to private practice

Over the time that they had been registered as trauma therapists, many of the counsellor-participants had, for a variety of reasons, moved from working in an agency to working in private practice. For some, this movement was seen as a way of resolving conflicts with agency politics and protocols, by either establishing a private practice or entering a group private practice with colleagues. Group practices were helpful for developing a shared ethos and for organising the workplace administratively to suit those working together. Having greater control over the way in which the workplace was organised was considered important.

Another background theme behind the movement to private practice was the rapid change occurring in the helping professions in New Zealand during the 1990s, which has continued into 2010 with revisions to the ACC funding protocols. Workplace change, including widespread restructuring and reorganisation within the public, charitable, and voluntary helping sectors, meant that two of the counsellors interviewed had been made redundant from their employing agencies after ten to 15 years of service, due to the changing focus of the agency. Both individuals were in the process of finding other work, which included some component of private practice. Having greater flexibility for organising work systems and greater control over the work setting were among the motivations behind the move into private practice. This movement into private practice as a result of disillusionment with agency work following restructuring has been discussed in the research literature (Van Heughten, 1999) in order to account for the movement of social workers into private practice in New Zealand. For the counsellor-participants, this movement into private work may also reflect the nature of their specialisation in the sexual abuse/trauma fields. Due to the public availability of funding directly to providers registered to undertake sexual abuse therapy with clients who had sexual abuse claims, this specialisation seemed to lend itself to private work.

Intergenerational patterns

The intergenerational patterns of abuse that the counsellor-participants witnessed day by day suggested that societal factors were often discussed as a significant component in sexual abuse. The writings of theorists who combined this kind of sociopolitical or structural analysis were among the resources the counsellor-participants found the most useful to draw upon. Awareness of sexual abuse as a prevalent phenomenon, particularly for women and children, came as an uncomfortable realisation for some of the counsellor-participants. In this context, they discussed a growing awareness that those in their social networks, close friends, or family members had been either victims or perpetrators of abuse. This realisation brought with it a more personal awareness of the effects and repercussions of abuse. It was difficult to separate these more personal experiences from the day-to-day work, and inevitably they had an impact on counsellors' routine functioning.

In small rural communities, awareness of the identities of victims and/or perpetrators increased. Supervision support from those not involved in the immediate situation was of assistance in dealing with such scenarios. Once abuse within a counsellor-participant's social network was disclosed, particular flashpoints of stress often began to affect the counsellor's general health and well-being. Learning to live with this knowledge, while challenging, enabled one of the counsellor-participants and her partner to emerge with strategies for dealing with abuse that was "close to home."

In fact, I think I have less impact [from the work]; no, that's not true. There's not less impact. I am less bothered by it now than I have ever been. I have had this personal stuff as well. Family members disclosed abuse within the family and I was abused. So there has been lots of fallout from that. And now the next bit of fallout will be what is life going to be for the next generation?

Experiences of trauma

Many of the counsellor-participants interviewed described some early or formative experiences of trauma as children, including sexual and physical abuse. This theme is similarly reflected in the literature of helping professionals disclosing traumatic personal histories (Follette, Polusny, & Milbeck, 1994; Martin, McKean, & Veltkamp, 1986; Pope & Feldman-Summers, 1992). When facilitating therapy with clients, the counsellor-participants described drawing on a vast pool of intuitive wisdom and knowledge to guide their work. I often heard from those who were survivors that they could not envisage knowing how to guide therapeutic processes were it not for this knowledge. Their experiential insights, arising from their own knowledge, were often described as being more important than any of the conventional theories propounded in psychology textbooks.

The counsellor-participants also used this knowledge to engage in social and political action to address the societal myths about abuse and to work actively toward greater social equity. Balancing work in the therapy field with working towards social change has been recommended as an antidote to vicarious traumatisation (Pearlman & Saakvitne, 1995). The counsellor-participants concurred with this recommendation. Therapists' personal experiences of sexual abuse or other trauma seemed to sharpen their resolve to pursue political action promoting social change. For Hayley, counselling survivors was seen as a natural outworking of her values and personal philosophy:

In terms of the trauma work, as I say, the personal experience was one of the pieces and the positive experience I had in terms of receiving counselling. If I go back even further to think of why I was so much into the rights issue, then it would be, as well, living in different cultures and seeing at a young age people who had a lot more rights than other people, who were able to access their rights more than other people. So that has always been there for me in terms of rights and justice issues.

Consolidation and diversification

Pearlman and Saakvitne (1995) mentioned the need to diversify into a variety of roles as being important to ameliorating the impact of work in the sexual abuse field as therapists progressed in their careers. Diversification of roles was also seen by the counsellor-participants as important to remain "fresh" in their practice.

Sometimes changing the balance of one's work was enough to restore the balance in one's life and to remain professionally effective. Several of the counsellor-participants had made a decision to do less work in the trauma field and had commenced a plan for moving to the country to start a private practice in a rural location, combined with agricultural/horticultural projects. In practice, the counsellor-participants said it was difficult to reduce or change workloads, as they had gained a "niche" by specialising in particular kinds of work. The combined pressures of their commitment to clients and difficulties with securing continuing funding for therapy informed their decision to reduce work or leave the field completely for a new start.

An awareness of dissonance

Coming through periods of stress and fatigue often suggested the need for longer-term solutions to address counsellor-participants' stress and trauma. I have conceptualised the periods in which counsellors experienced stress evoked by the nature of sexual abuse counselling as "dissonance" as they grappled with the gap between the known and the unknown. This "between" place fits with the idea that counsellors dealing with trauma operate in a transitional zone where they actively make meaning of experience. Etherington (2000), for example, described her experience of existing in a "liminal zone" in experiencing vicarious traumatisation when researching sexual abuse survivors' personal narratives. She concluded that supervision needs to attend to the supervisee's strategies for self-care. Echoing the counsellor-participants' experiences, she recommended "a conscious positioning of self" to attach meaning to experience (p. 387).

This dissonance occurs when one's initial training and knowledge lack a sense of fit with the requirements of the job or practice setting, or when existing skills and knowledge are applied to a new field of practice, or when organisational reporting is required in particular formats and timeframes that are incongruent with maintaining a relational stance with clients. Such dissonance can itself be a condition of working with sexual abuse and other traumatic disclosures, in terms of the potential for vicarious traumatisation and burnout that are routinely experienced in trauma-related work (Pearlman, 1997; Pearlman & McIan, 1995).

Conclusion

Through a sustained reflection on their own experiences and a structural analysis of their own personal and wider socioeconomic oppressions, the counsellor-participants were brought into contact with a sense of dissonance in themselves and their practice. In liminal spaces, they integrated practice wisdom into their scheme of knowing. Through this process, the counsellor-participants found it easier to put their exposure to traumatic events into a framework that accounted for what had happened to them and their clients, and to place it within a broader sociocultural paradigm.

Contact with traumatic material, paradoxically, enabled them to move on with their own lives with a deeper awareness. This awareness was related to a number of variables.

Coming to terms with one's own experiences of abuse and trauma, along with a realisation of intergenerational family patterns, challenged existing belief systems. The counsellor-participants' experiences of personal therapy offered a way of understanding and managing their overidentification with clients' trauma and their own countertransferential responses. With adjustments to work and the workplace by way of a move to private practice and project work, the counsellor-participants felt they had more choices about the ways in which they worked. By restoring a better life-work balance through movement to rural locations and diversification into new roles, new options for a fulfilling, self-sustaining future became available.

These findings provide a "snapshot" and an historical context for understanding the experiences of some sexual abuse counsellors from the 1980s to the present. The counsellor-participants became involved in sexual abuse therapy when there was little theory available on trauma therapy. Therefore these early years were seen as a "rite of passage" in the development of their professional careers, and were the environment in which they learned to understand and work with vicarious traumatisation. By integrating these learnings holistically in their personal and professional lives through peer support, clinical supervision and working towards greater work/life balance, the stresses of the work were currently seen as more episodic than continuous, in contrast to the way they had experienced them earlier in their careers. What the next 20 years of publicly funded counselling for sexual abuse survivors holds, with the changes to ACC protocols and policies, is yet unknown.

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