



Seventh Day Adventists and Sexual Child Abuse

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In this chapter, I will discuss some of the reasons I believe that Seventh Day Adventists (and by inference, other evangelical religions) have high rates of sexual child abuse. I will also describe some of the factors that maintain secrecy around sexual abuse in our community, treatment issues, and ways of strengthening the community for prevention and healing. Background information about the church and Adventist culture will be followed by suggestions for prevention and treatment, as well as case histories that shed light on relevant issues.

Adventist History and Culture

I am a Seventh Day Adventist Christian, a convert. I have chosen to belong to a church that believes in the divinity of Jesus and an active Satan who leads the forces of evil. We celebrate the seventh day Sabbath, await the imminent return of Jesus to the earth, and abide by a long list of suggestions for physical

Authors' Note:

This chapter results from a collaboration between Catherine Taylor, L.I.C.S.W., and Lisa A. Fontes, Ph.D. The first person "I" used here refers to Catherine Taylor, and most of the victim stories and clinical anecdotes are hers.



Adventists Child Abuse

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N FONTES

Some reasons I believe that Seventh Day Adventists (and other angelical religions) have high rates of child abuse are some of the factors that maintain their community, treatment issues, and ways of thinking and healing. Background information and culture will be followed by suggestions for prevention and case histories that shed light on the issue.

Adventism and Culture

I am a convert. I have chosen to belong to the Seventh Day Adventist Church. I believe in Jesus and an active Satan who leads us into sin. We await the imminent return of Jesus on the seventh day Sabbath, await the imminent return of Jesus. I have a long list of suggestions for physical and mental health.

Written by Catherine Taylor, L.I.C.S.W., and edited by N. Fontes. This article refers to Catherine Taylor, and most of the information is hers.

health and well-being. The church has a modern-day woman prophet, Ellen White, and a world organizational structure. The church was founded in the early 1840s as part of the Millerite Movement, preaching about and waiting for the return of Christ to the earth.

We have a larger Protestant parochial school system and give more offerings per capita than any other denomination in the world. We are not officially fundamentalists. Fundamentalists believe that God dictated each and every word of scripture. Our church believes that, with specific quoted exceptions, God gave women and men prophets concepts to share with His people, and these prophets did the best they could in conveying these to others.

The Seventh Day Adventist church is international and houses a great deal of variety in terms of race, social class, and degree of orthodoxy. When working with Adventists, it is important to inquire about their observance. Some sectors of the Adventist church follow a literal adherence to the writings of the Bible and Ellen White, which leads to highly prescribed lifestyles where even the smallest action must follow church teachings. Others have a more flexible interpretation of church teachings. Inside the Adventist church, there are people who eat meat and those who are vegan. There are women who will not speak aloud in the sanctuary, believing it is not their place, and some who are pastors. There are people who use only natural remedies, and those who use modern Western medicine. Some Adventist women will wear only skirts and dresses, but most wear a range of modern clothing. Some households are completely patriarchal, and some gender equal, but most are in the middle.

According to anecdotal research by Wilma Hepker of Walla Walla University and a study presented by Bayley Gillespe of La Sierra College, Andrews University, Berrien Springs, Michigan, Seventh Day Adventist students report a higher rate of sexual child abuse than the general population of the United States.

I am a family therapist specializing in multigenerational sexual child abuse, and I work in a public nonprofit agency. For many years, most of my work with families who had experienced sexual child abuse had nothing to do with my church. Six years ago, the regional church organization asked me to do a series of workshops on self-esteem during the annual retreat called "campmeeting." In those campmeeting sessions, I began to hear stories about the abuse that church members had experienced as children and had never been able to discuss. I also had an opportunity to talk with Seventh Day Adventists who run a national drug and alcohol treatment center. The stories of their clients, many of whom were children of officials in the national and international organization, reminded me of the stories shared by sexual abuse survivors. The program directors confirmed my suspicions.

In recent years, I have spoken with hundreds of Seventh Day Adventists about sexual abuse both as a workshop leader and as a therapist. Most have been women, but many have been men. I have spoken in individual churches, weekend intensive workshops for survivors, campmeeting retreats, daylong classes and seminars, women's retreats, and "town meeting" discussion groups. I helped design the sexual abuse reporting policies for the Southern New England Conference, and I have served as consultant to pastors, teachers, and other church members who encountered sexual abuse in their communities. Clients have been referred to me by pastors, Bible workers, church members, teachers, and friends. I have encountered the continuum of abuse among church members, from voyeurism to ritual and cult abuse.

Writing this chapter is both a professional and personal challenge. When I talk about the responses of the church to sexual child abuse, I am frequently talking about my own experiences. As I present these issues and stories to the public, I personally face the loyalty binds I describe. I have felt the grief and the denial. I have struggled with many of the reasons other Adventists give for not disclosing their abuse. I understand why many people will avoid therapy or drive 3 hours each way to see a Christian or Seventh Day Adventist therapist. In this chapter, I am both a Seventh Day Adventist and a professional who is dealing with an organization that profoundly affects my own life.

I am a clinician, not a researcher. My stories emerge from my experience. When I use the term *spiritual*, I am referring to a person's relationship with God. When I use the term *religion*, I am referring to an organized church structure.

Cultural Issues in Disclosure

Forgiveness and Denial

Several themes common to Seventh Day Adventists affect how individuals, families, and the organization handle sexual child abuse and other kinds of relational trauma. Children are taught from infancy that their relationship with God depends on their ability to forgive those who have hurt them. Stories of Jesus saying, "Father, forgive them, for they do not understand what they are doing" as He was being nailed to the cross, David weeping for his traitorous son Absalom, and the phrase in the Lord's Prayer, "Forgive us our debts as we forgive our debtors," are taught regularly in Sabbath school

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classes. Many people who have experienced sexual abuse report to me that the first thing their pastors said to them when they came for counsel was, "Remember the importance of forgiving those who have hurt you." When I talk about the need to separate adjudicated offenders from responsibilities involving children, I have been told, with all good intentions, that our job as Christians is to forgive those who have done wrong and let them go on with their lives.

The focus on forgiveness and letting "bygones be bygones" helps create situations that leave children vulnerable to sexual abuse. Seventh Day Adventists have their own scouting organization, Pathfinders. Several members of one church approached me because a man who served time in prison for sexually abusing children was to be elected Pathfinder leader for that year. When I talked to the pastor, he told me the man had served time before his conversion, he had been baptized, and he had asked God's forgiveness for his sins. Why shouldn't he be allowed to work for God in this position? I used the alcohol disease model and said that even after conversion, I didn't think it was a good idea for an alcoholic to tend bar or for someone addicted to narcotics to be responsible for a pharmacy. I emphasized the responsibility of the church to protect its most vulnerable members.

Another woman told me she had been abused by a foster child whom her family had raised. As an adult, she disclosed this abuse to her parents. They apologized and told her they had thought the teen would be a safe person to have around because of his conversion when they became his foster parents. Other parents have told me that the person who abused their children was kind, caring, spiritual, preached, was a member of the world conference, or came from a good home. They had trouble discerning that outside appearances can mask a propensity to abuse power.

Seventh Day Adventists see themselves as examples to a world in trouble, and so they are concerned about their public image. Many of my Adventist clients and workshop participants describe difficulty in talking to non-Adventist therapists because of their concern that those clinicians will think poorly of the church and of its mission to help less enlightened people.

High value is placed on loyalty to the Adventist world community. Observations and feelings about hurtful events that happen inside our community and might be heard by the outside world are often considered with trepidation. Exposure of failings is considered a betrayal of a trust. As I write this chapter, I find myself worrying about the damage I may do to my church by sharing my observations.

Church as Family

Adventists focus on family and on church community as family. We have often heard that those who have lost father, mother, or siblings because of their belief in God will be rewarded a hundredfold family members in the church. The need for the comfort of the church family is powerful, as is the fear of losing that support.

Church members often have concerns about using "outsiders" to address issues exposing personal or corporate vulnerabilities, preferring to employ Adventist lawyers, dentists, doctors, insurance offices, schools, hospitals, and therapists. This gives us both the strength of self-sufficiency and the danger of insularity. We believe that our idiosyncratic beliefs and lifestyle make it difficult for others to respond to our needs and make us vulnerable to their ridicule or judgment. Some of us think that non-Adventists do not have as easy access to our health message, our values, or the throne of God where we leave our petitions.

We rarely encourage children or women to talk to people outside the family or the church if they are scared or confused by behavior directed toward them. Recently, three students at an Adventist boarding academy were having their breasts and genital areas fondled by one of their teachers. They reported these events to their houseparents. Nothing was done to confront or dismiss the teacher. The girls were given my name and called me, even though I was out of state, because they were concerned that no one in the school or local church community would take action to protect them. These high school students weren't even sure if this kind of touching constituted abuse. They were afraid that by calling me, they were betraying their school, their house parents, and their church. I had some of the same concerns about betraying the church as I dialed protective services. These were overridden by my desire to protect the children.

Seventh Day Adventists can be insular. Many families school their children at home. More send their children to church school to protect them from outside influences. After-school activities and weekend events often center around the church. Adults and especially children have difficulty separating family from church. We develop a closed family and community system, the perfect environment for sexual abuse to develop and be contained. At camp-meetings, workshop participants often tell me I am the first person they've heard speak about the issue, about dysfunctional families, self-protection, and boundaries.

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Patriarchy, Sexuality, and Church Teachings

The church is a patriarchal organization. Currently, most pastors are men, and women pastors are not ordained. Most organizational positions are filled by men. Most of the articles in the periodicals for adults are written by men. Most of the professors who train seminarians are men. In some adult Sabbath school lessons, emphasis is placed on the subjugation of woman and children to the man of the house. This is an apparent paradox; our church has an acknowledged woman prophet who encouraged women to become doctors and fill other positions that service women.

Our historical tendency to emphasize the subjugation of women to men and children to adults has set up an unhealthy power dynamic. It is common to hear a children's sermon emphasize unquestioning obedience to the commands or wishes of parents because parents and other adults want only to protect them. Survivors of sexual abuse and their therapists have hypothesized that valuing children's unquestioning obedience to authority both increases the likelihood of compliant behavior to sexual abuse and reduces the likelihood of disclosure (Fontes, 1993b). Cross-cultural research is needed to determine the applicability to Adventists of assertions that patriarchal family structures and paternal dominance contribute to father-daughter incest and increased damage to women from sexual abuse (Edwards & Alexander, 1992; Herman, 1981).

Our church originated in the Victorian era, and we usually do not talk about sex openly in religious or educational forums. Seventh Day Adventists believe sex, sexuality, and sex education belong in the home. If a healthy sexual climate is not established at home, we often have no other venue in which to educate children. Survivors of sexual abuse have often told me that their perpetrators were "just teaching me about sex" or "teaching me what kinds of things I shouldn't do." Children and young women have been told by nonoffending church members that they were abused because their dress was immodest.

In the church, we have only recently begun to talk about the difference between marital privileges and marital rape. We do not discuss reproductive choice. Historically, as an organization, we have not acknowledged the possibility of abuse or talked about ways that children can protect themselves. We have not educated children and adults about appropriate body boundaries.

Adventists and Mental Health

Seventh Day Adventists comprise a literate organization focusing on education, science, health, family development, and Bible study. This educational orientation offers great promise for preventive interventions in a variety of spheres, including sexual abuse.

Currently, the church structure provides little information about emotional health, the psychological processes of grief or trauma, or constructive outlets for troubling feelings such as anger, fear, and confusion. Many Adventists have shared with me their guilt at having emotions that are not sanctioned or understood by other church members. There is little support for addressing deep-seated anguish, confusion, shame, rage, fear, or ambivalence. The medical focus is on physical, not emotional, health.

A strength in the church is our real love for children and our commitment to their welfare. Good touch/bad touch education has been added recently to some curricula. We are beginning to talk about the difference between an abuse of power and appropriate sexual behavior.

Sexual abuse affects individuals, families, and communities. I also believe that the stages of grief touch those individuals, families, and communities. Denial, bargaining, anger, and confusion all contribute to the church's response to sexual abuse.

Church Doctrine and Offending Behaviors

Church doctrine in no way supports sexually offending behavior. However, sexual offenders sometimes use alleged jailhouse conversions as "proof" of their rebirth as nonoffenders. Some of these conversions are genuine and heartfelt, and some are undoubtedly a smoke screen meant to help the offenders regain legitimacy. (A local therapist who works at an agency with an offenders' program said she could always spot the offenders in the waiting room because they had a Bible in one hand and a rosary in the other.) Because evangelical Christian groups, including Adventists, proselytize in jails, some of these offenders will inevitably present themselves as members of our church. When faced with people who have offended sexually and who are Adventists, it may be worth asking the history of their beliefs.

A recent study (Elliot, 1994) concludes:

Mental Health

A literate organization focusing on prevention, and Bible study. This educational organization provides preventive interventions in a variety of ways.

There is little information about emotional distress, grief, or trauma, or constructive outlets for anger, and confusion. Many Adventists experience emotions that are not sanctioned or encouraged. There is little support for addressing depression, shame, or ambivalence. The medical profession is often unhelpful.

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Sexually Offending Behaviors

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Parents' endorsement of conservative Christian beliefs, without the integration of these beliefs into family life, appears to increase the risk for sexual abuse. Without further research, the reason for this is not clear. One hypothesis, however, is that conservative Christians who do not integrate their beliefs into their lifestyle may use their religious beliefs to control family members, setting up a rigid authoritarian stance to child rearing. In such families, children may be less likely to question authority and therefore less able to protect themselves from potential perpetrators of sexual abuse. (p. 105)

I work with church members to develop a dynamic philosophy of child rearing that integrates the protection of children with our family values. I suggest that sermons avoid telling children to obey adults unquestioningly. I mention our patriarchal tendencies and our insularity. I encourage us to learn to look out for behaviors that might be signs of a child or adult in need of help—not a slide from spiritual progress.

Firm church beliefs regarding proper sexual behavior can lead to a puritanical home environment. In some families, watching soap operas and reading popular magazines are prohibited because of their lascivious content. In such a climate, children may not even know names for their body parts and may feel they have no language or context to discuss sexually abusive events. In one study (Fontes, 1992), a Puerto Rican woman who grew up in an Adventist family realized that what her father did to her was sexual abuse only upon seeing diagrams in a health class in high school. She said she could not have disclosed the abuse to her family—all words pertaining to sexuality were considered smut.

In an exploratory study of 68 child molesters in therapy (Simkins, 1993), those who were labeled sexually repressed (as defined by delayed psychosexual development and sexually conservative attitudes) showed the slowest and poorest progress toward goals and the poorest attitudes toward therapy, and were rated as most likely to recommit abuse after a year of treatment. They also had significantly less sex information and more cognitive distortions than other offenders, and admitted to fewer sexual interests and activities than the "normal" (presumably nonoffending) heterosexuals studied. Eighty percent of those offenders who were considered sexually repressed were classified as treatment failures.

Although the religious background of this sample is unknown, it is important to note that our church currently fosters an environment where

sexual repression is likely. This may contribute to sexual offending, to decreased likelihood of disclosure, and, if Simkins's research holds true for Seventh Day Adventists, lowered rates of treatment success for offenders who are members of our church. Perhaps offender treatment programs that in some way both acknowledge our church's teachings around sexuality and at the same time provide accurate sex education and reduce cognitive distortions would contribute to offender work with church members.

Our shame and judgment of "immoral" behaviors also make it difficult for men and women who act in unacceptable ways to seek treatment. A Seventh Day Adventist schoolteacher who had sexually abused one of my clients recently committed suicide. The local church community has had difficulty admitting that his death was self-inflicted or that he was capable of sexually abusing any of his students. Upon disclosure, there is always a chance that offenders will be suicidal. I think our rigid moral structures make that choice more likely.

I have never spoken to a group of Seventh Day Adventists about sexual abuse in our church without hearing someone plead a version of "Why us? We are supposed to have a special message and special blessings." I tell them I have clinical, political, and spiritual answers, and they usually ask to hear the spiritual context first. I tell them I believe spirituality is about relationships: our relationship with God and our relationship to each other. If the Evil Ones were to plan to destroy spirituality, what better way could they find than to create an environment where there is an abuse that can disintegrate a person's ability to trust, to be intimate, or to live without some form of substance dependence; an abuse that will give many of its victims suicidal ideation and coping mechanisms that are disparaged or condemned by their church? In this way, sexual abuse can be understood as a weapon in the war that Seventh Day Adventists call "the Great Controversy Between Christ and Satan."

Responses to Disclosures

A participant in one of my weekend intensive workshops for survivors of sexual abuse recently told her family she had been raped by her brother for several years. Her parents told her she should ask God's forgiveness for trying to ruin her brother's life and questioned her relationship with God. They told her she should pray about her issues and quit talking to therapists. According to members of the family, therapists only cause trouble and keep their clients from the true healing: prayer to God.

may contribute to sexual offending, to find, if Simkins's research holds true for rates of treatment success for offenders who attend offender treatment programs that in some ways reflect teachings around sexuality and at the same time provide support and reduce cognitive distortions among church members.

"Rigid moral structures also make it difficult for people to find alternative ways to seek treatment. A Seventh Day Adventist client who had been sexually abused one of my clients who had been sexually abused in a church community has had difficulty finding a way to seek treatment or that he was capable of sexually abusing others. In the absence of closure, there is always a chance that rigid moral structures make that choice

Seventh Day Adventists about sexual abuse often plead a version of "Why us? We are blessed with special blessings." I tell them I have heard that they usually ask to hear the spiritual message and that the spiritual message is about relationships: our relationship with God and with other. If the Evil Ones were to plan to do something to them they find that to create an environment that would grate a person's ability to trust, to be free of substance dependence; an abuse that would interfere with coping mechanisms that are available. In this way, sexual abuse can be understood. Seventh Day Adventists call "the Great

intensive workshops for survivors of sexual abuse who had been raped by her brother for several years. They would ask God's forgiveness for trying to maintain their relationship with God. They told me they had quit talking to therapists. According to me, the cause trouble and keep their clients

Seventh Day Adventists take pride in their high moral values and ethical codes. Members who indulge in substance abuse, promiscuity, stealing, adultery, or gambling are subject to having their names removed from the official church books. There is little understanding of mental illness, suicide, dissociation, or chaotic lifestyles, which are some of the common ways in which people cope with the experience of sexual abuse. People who engage in coping mechanisms that are eschewed by the church are especially likely to face rejection and disbelief:

An adolescent client who had been sexually abused by a teacher while in elementary school disclosed his abuse to his parents. They believed him and reported the abuse to the school to protect other children. The school officials said they had heard no reports from other children of abuse by this teacher, and therefore the report must not be true. Other members of the church community asserted that because this adolescent had shown undesirable behaviors since elementary school, he was not believable, failing to recognize that these behaviors might stem from the abuse itself! He had been abusing alcohol and drugs, had run away, had been angry at the church, and had even been known to steal to obtain drugs. They did not think such a disreputable source should be allowed to tarnish the career of a respected teacher. This young man has since been placed in an out-of-state drug treatment center and has been suicidal. His parents, who had been central figures in the local Adventist medical community, are being shunned by their compatriots for "spreading rumors that are ruining the reputation and family of this good church school teacher."

Once, when I spoke at an Adventist town meeting about organizational responses to sexual abuse, some older church members said that these abuses must have been "committed by converts" or against "women who don't dress according to our standard."

As a whole, the church tends to be homophobic. Boys and men who have been abused sexually by men are afraid to disclose because they believe people will think they are gay. The church supports "change" programs designed to turn gay men and lesbians into heterosexuals. Several young gay men who were sexually abused by the director of such a "change" program were afraid to disclose because they believed the church would denigrate their validity, fail to protect them, and dismiss their allegations. After they disclosed,

the church closed that center. However, the director never publicly addressed his part in the abuse of his clients. Several years later, individual members of the church are supporting this same director as he opens a new center for "change."

Many families respond to disclosures of sexual abuse with denial, hinging on the notions that we are Christians and therefore protected from relational abuses. The occurrence of events is denied, and their severity is minimized. One client heard the response, "None of us is perfect and we all have these little hurts now and then."

Responses may focus on protecting the family and the smooth corporate operations, not the victim or future victims. God is portrayed as a punishing parent who does not understand the plight of the abused. Victims are told, "You had better ask God's forgiveness for this."

Some Seventh Day Adventists had an early market on the false memory movement. I have heard many workshop participants and clients tell me stories of being questioned about the possibility that Satan may have made up their memories and placed them in their mind as a plot to ruin the good name of the church. Severe dissociative conditions such as multiple personality disorder have been used as additional proof that a client is demon possessed. Although this is not a universal church response, it undoubtedly silences many victims. The stories of disbelief and denial have made some clients reticent to confront members of their Adventist family or church.

"Who am I going to tell?" "Who will believe me?" "Who will protect me if I tell?" The close Adventist community can be extremely supportive, but members may find themselves isolated and alone when family and church fail to protect them.

Although I have heard few reports of abuse in Seventh Day Adventist home school settings, there are no structures in place to ascertain if home schools are treating the students appropriately. In this context, children's isolation from outsiders is total, the silence is complete.

Integrating Interventions With Church Beliefs

In this discussion of interventions with members of the Seventh Day Adventist community, I will discuss the issues that prevent church members from engaging in therapy or protective services, ways of developing contexts for effective intervention, styles of treatment I have seen used by Adventists, and some of the ways that being a member of the community affects my work as a therapist.

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Any clinician or protective worker interacting with a Seventh Day Adventist client would find it helpful to understand some of the unique beliefs and aspects of the culture that leave Adventists feeling vulnerable to "outsiders" and to each other. One client is afraid her therapist will think she is crazy if she discusses the amount of money she donates to the church. Other clients have shared their fear that protective workers will take their children from their homes if the children are on a vegetarian diet. Wariness of a professional "not of the faith" or hesitancy to acquiesce to the placement of children in a non-Adventist foster home is not necessarily a way of being defensive or resisting help. These are best seen as reflecting a cultural value, not a means of interfering with the service plan.

Clinicians are often suspect, seen as humanists who have no qualms about destroying the family. In a church known for its far-flung medical facilities and internationally acknowledged research on health, many members are chastised for seeking psychological help. They are told they should take their troubles to the Lord in prayer and lean on His healing arm. This stance requires victims to make a difficult choice between being isolated from therapeutic supports or from their church community.

The Bible says there is wisdom in a multitude of counselors (Proverbs 11:14, 15:22, 24:6). Our church prophet, Ellen White, has written "Oh, for generals, wise and considerate, well balanced men, who will be safe advisers, who have some insight into human nature, who know how to direct and counsel in the fear of God" (E. White, 1893, p. 362). Despite this spiritual counsel, I commonly hear people say, "Everyone tells me I should just pray. If I believed more in God, I would let Him heal these issues that have haunted me all my life." Clients have felt guilty that prayer did not end a wide variety of emotional suffering, that they still live with the coping mechanisms originally used to survive being abused and are unable to have the kind of intimate, healthy relationships to which they aspire.

When they do decide to seek treatment, church members tend to be wary of therapists who are not Seventh Day Adventists or at least members of a Christian denomination. They are concerned that a humanist will encourage them or someone they love to engage in "immoral behavior," such as masturbation. They worry that feminist therapists will destroy the family by telling women who have been in hurtful relationships to leave their husbands or by not expressing shock if someone chooses a gay or lesbian relationship. They see Christian and especially Seventh Day Adventist therapists as being people who would uphold their moral standards, or at least not be judgmental of a religious stance.

This suspicion of outsider therapists creates some difficulties. There are few Seventh Day Adventist therapists, and even fewer who have considerable experience knowingly working with issues connected to sexual abuse. I have had Seventh Day Adventists drive 3 hours one way to see me. I have had church members call and ask if they could drive 8 hours one way for a consultation with me. This is not because I am an extraordinary therapist. Unfortunately, it is because for them, I am the only one in New England.

When Adventists have found me, they have been afraid that I would judge them for their behaviors that do not coincide with church values. This illustrates a painful double bind. They want a therapist to support values they aspire to; yet they fear being honest with me because I might judge them disparagingly according to those values.

I have been working with my local church organization to develop a context for the possibility of seeking therapeutic interventions. When I gave the first campmeeting workshop on self-esteem, I talked about the ways in which emotional traumas affect our physical health and ability to function. I discussed ways in which relational injuries affect our ability to relate to God. I shared with workshop participants some concrete ways that they could begin to recover, including professional supports. I received a letter from the conference about an unprecedented volume of positive responses to the workshop and asking if I would return.

The next year I gave a workshop on sexual child abuse. The average workshop attendance for campmeeting is 20 to 30 people. Each afternoon, 50 to 80 people packed the meeting tent. I talked about the long-term effects of sexual child abuse, the ways in which people tend to cope with this kind of relational trauma, and the ways in which people can heal from it. This year, people began to talk about the shame they had felt because their feelings and behaviors conflicted with their relationship to the church. They began to ask questions about the use of therapy.

I speak with Adventists about the ways prayer and clinical modalities can complement each other. I draw analogies to our use of other experts. "If we are physically ill, first we pray, then we find the best physician available. If our cars are emitting black smoke, we pray and find a good mechanic." I discuss prayer as part of a package deal. Isaiah prayed to God and then applied a fig poultice to King Hezekiah. I emphasize that our psyches are no less important than our bodies.

Over the years, I have given campmeeting workshops on some of the issues faced by support people of survivors: anger, communication, and

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relationships; characteristics of dysfunctional families and how similar they are to traits of people described in the Biblical account of the Edenic fall; family life cycle patterns; and caring for caretakers.

A shift is occurring. Feelings and troubled human relationships are beginning to be discussed in our regional Seventh Day Adventist community. At the same time, we have begun to hear from West Coast church organizations about work they are doing to address sexual abuse.

In churches and educational institutions, Seventh Day Adventist family life educators are beginning to talk about dysfunctional families, substance abuse, and groups. "Recovery" programming has begun to be introduced into campmeetings and church workshops. The recovery programming has given validity to the place of feelings in the lives of individuals and organizations. It has also encouraged people to seek support for the challenges they face.

The needs of individuals, the parameters of the religious community, and the usual variations in how all human beings seek or avoid healing have led to creative uses of clinical supports by some Adventists. Some attend workshops, seminars, recovery intensives, and campmeetings regularly. I'm beginning to think of this as the intermittent psychoeducational group therapy model. Many of these people do not have regular individual or group therapy in any traditional sense of the word. Recently, some departments of the regional organized church have begun to offer weekend intensive groups for female and male survivors of sexual child abuse. Participants have said that other participants in weekends for Seventh Day Adventist survivors of sexual abuse in other parts of the country seemed to expect an end to their pain and confusion by the end of the workshop. We have told them that the workshops are part of a longer process that could be augmented by individual therapy, ongoing groups, and/or psychoeducational classes.

Some people see me for one or two sessions to talk about how they can work with their religious beliefs and their non-Adventist therapist. Some refer their therapist or pastor to me for consultation about religious or abuse issues. And of course, with some Adventist clients, I hold fairly traditional individual weekly therapy sessions.

Therapy

As therapeutic work begins, it can be useful to frame spirituality and religious structures as part of a healing network. It is important to understand the community as a family. Loyalty binds about exposing issues specific to Adventists can hinder therapy.

Seventh Day Adventism is a culture, not just a religion. Our culture touches every aspect of life, not just a day of the week or a season of the year. If you are not an Adventist, it might be helpful at some point in the therapy for your client to refer you to a "consultant" to help understand some of the more subtle issues, such as the uses and abuses of the writings of the church prophet, Ellen White. If no such consultant is available, your client may be able to serve this function.

During individual therapy, items that are usually "grist for the mill" take on special meaning because of the community context. Confidentiality is often a deep concern. The worldwide organization is known for having the gossip capabilities of a small town. I emphasize my commitment to confidentiality in workshops and in therapy. In an individual relationship, I also say that I know they cannot trust this aspect of my commitment without first experiencing it. Trust building may take time.

The issue of boundaries, always complicated, is quite tangled in this small community. I happen to be a therapist who lectures, preaches, gives workshops, attends concerts, teaches classes, and is well known by the regional organization. This makes me accessible to local Adventists in a way not typically experienced by other therapists. This community thinks I belong to them. Through church directories, they have access to my personal phone numbers.

Clients have contact with me in a variety of roles. This variety has benefits and challenges. I am constantly trying to balance my personal limits with my understanding of my function as a member of the community. When Seventh Day Adventists meet me in my teaching role, they have a chance to assess my values, my grasp of the subject, my personality, my place in the community, and my commitment to confidentiality from a safe distance. Teachers are an integral part of the Adventist culture, but they have little privacy. Their services are available most hours of most days and weeks. In addition to the usual boundary issues, clients feel culturally betrayed and demeaned when I explain to them that it is not helpful for them to include me in their friendship or dinner circle.

Adventists gauge their interest in a cause by the amount of time spent working on it. Clinically, this accentuates the feelings of rejection if I stick to the 50-minute hour. As is usually true with other clients, however, sticking to the boundaries we have established also adds to the sense of safety.

When I consult with pastors or organizational leaders, Adventists come to trust me as a therapist because they see me supporting the church structure

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and they see the church structure acknowledging my worth. However, if a client has been abused in a religious context, having a therapist supported by that context can add to the transference confusion and fear that I will hurt or abandon him or her.

As a consultant, I give people information about referral and treatment resources. When church members want to ask me about ways to support people who are my clients, I find myself on a delicate walk in the realm of confidentiality. Being a therapist in the Seventh Day Adventist community is, in many ways, like being a family practitioner in a small town—everyone wants to know how George is feeling since his stroke.

While traveling, Adventists often visit churches other than the one they usually attend. Mine is in the middle of a tourist area. Clients have been known to see me at potluck lunches, praying, laughing, preaching, playing with my friends. I almost always handle their knowledge of me directly. "So, what was it like for you to see me fixing lunch for 50 people?"

One of the benefits of this shared context is the belief that we are family and have an obligation to support each other. Many clients have their seminar fees or therapy costs paid by other members of the church. These "sponsors" have told me that they believe they are members of a team. As team members, they occasionally want information about therapy that I will not give them. This boundary can be difficult for them to understand. The supports and difficulties of these "sponsorships" are an ongoing issue in the work. Recently, when one of my clients became suicidal and assaultive to his wife, several members of his church called and asked what they could do. I gently informed them that I couldn't tell them anything but that they could probably call my client or his wife if they wanted to know.

CASE HISTORIES

Leigh Ann

This case study concerns a client traumatized by ritual abuse. To date, I have had few cases of reported ritual abuse among my Seventh Day Adventist clients. I have included this case because it highlights issues that are relevant to all Adventist survivors. It may also be of interest to therapists working with non-Adventist survivors of ritual abuse.

Leigh Ann made an appointment to see me because of depression. She found herself crying uncontrollably for several hours each day. Her

local church Bible worker told her I would be a good person to speak with because I was a Seventh Day Adventist and also understood a variety of family issues. Early in treatment, I stressed my commitment to confidentiality. Leigh Ann also needed reassurance that her experiences and stories would be valued, even if there were things about her that did not make her a perfect Adventist.

Leigh Ann's mother's family have been members of the Seventh Day Adventist Church for three generations. Her father was raised Catholic and does not attend any church. She is the middle of three daughters. She attended a home school run by her mother's brother's wife for kindergarten through second grade, and then she attended an Adventist elementary day school and an Adventist boarding secondary academy. She was 3 months pregnant when she graduated. She is proud that she was the first Seventh Day Adventist to graduate pregnant from that school—other girls were expelled. Leigh Ann married the baby's father. They divorced after 4 years when Leigh Ann discovered her husband sexually abusing their daughter. He has no visitation rights. She moved back to her mother's home and lived there about 3 more years. She moved out because she repeatedly caught her mother touching her daughter's vulva in sexual ways.

She married Harry, a convert to the Seventh Day Adventist church, 1 year later, and he adopted the children. He told Leigh Ann that part of the reason he married her was because he wanted to be part of a "solid Christian family." He works for a denominational institution and is a deacon in the local church. Leigh Ann wanted to bar her children from seeing her parents, but they obtained a court order for regular twice-weekly visits with their grandchildren.

Leigh Ann told me her son was very upset after spending nights at his grandmother's house. He reported her insistence that he sleep in the same bed with her, while she wore short nightgowns with no underwear. Leigh Ann tearfully reported her concern and anger over the situation and felt helpless to prevent it because of the court order. After checking with our local protective services, I told her that if she did not do something about the visits, I would be legally obliged to report her, and I referred her to a reputable family lawyer. She thanked me profusely for having obligated her to seek help outside the family. This took the onus of breaching a family code of loyalty off her shoulders. Within a few weeks the visitation was stopped. Leigh Ann contracted for another 6 weeks of therapy.

She then began to talk about her own past and why she had felt so helpless about taking her mother to court. She said it seemed like she

had more memories: being told she was she was old enough having her mother's her down. Her mother was clean.

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... she was old enough to hide them and spit them down the toilet, and
... having her mother wiggle her fingers in her vagina while her father held
... her down. Her mother had told her she was checking to make sure she
... was clean.

... When I helped Leigh Ann define this treatment as sexual abuse, she
... began to cry. She said she thought that what she had experienced was
... sexual abuse, but she didn't trust her instincts because her family had
... always told her she was stupid.

... Over a period of months, Leigh Ann shared more memories. She
... described being locked in a pantry and peeking out the window while
... adults in her family wandered in and out of her next-door neighbor
... aunt's house in various degrees of undress. She remembered resisting
... the forced administration of drugs and being relieved to go away to the
... academy because she didn't have to fight the pills any more. Leigh Ann
... mentioned a "strange black and purple quilt with odd markings or letters
... on it" that had been passed down through her mother's family. She asked
... me if it was normal for home schools to wrap children in burlap bags
... and stick them in the ground. Her abuse had happened at such an early
... age and her isolation had been so complete, she lacked a clear sense of
... normalcy. I told her that what had happened to her was not normal and
... was never acceptable behavior.

... Leigh Ann attended some of my classes on sexual abuse at a local
... church. She said she was tired of feeling isolated and wanted to talk to
... other women who had experienced sexual abuse. I told her about some
... of the professionally facilitated groups offered in the area. She insisted
... on attending the peer-facilitated Incest Survivors Anonymous group
... being held at a nearby Seventh Day Adventist college because it was
... connected with the church.

... About 4 weeks into the group, Leigh Ann came to the session pale
... and quiet. The night before, a peer facilitator had distributed a graphic
... article on ritual abuse to the group. Leigh Ann had highlighted several
... sections of the document and waved it in my face, saying, "This is my
... family! That happened to me!" More concrete memories emerged: red
... circles drawn on trees and cars, people dressed in white sheets, dead
... animals, and campfires with weird laughter. Leigh Ann was deeply
... disturbed that members of the local Seventh Day Adventist church were
... also present. "My family was crazy, but why would a church member
... be there?" She needed to be reminded that church members were human
... beings and quite fallible.

Leigh Ann began to experience more intense flashbacks, flooding, insomnia, and paranoia. She was afraid that her husband was poisoning her, that he somehow was part of her family and "the conspiracy." Harry called me and described Leigh Ann's increasingly erratic behavior. The children were disturbed when they came home from school and found her sitting in a rocking chair, speaking words they could not recognize. I told Harry that Leigh Ann might need to be hospitalized. Leigh Ann and Harry wanted to use the local Seventh Day Adventist hospital. I talked with them about the difference between services offered at the facility they were considering and treatment at hospitals with expertise in treating severe psychological trauma. They eventually agreed to try one of the trauma units I had recommended. By the time Leigh Ann saw me on her way to the hospital, she was expressing concern that I might be part of the conspiracy. I did what I could to allay her fears.

During her inpatient treatment, Harry asked me if I thought she was demon possessed. I said her symptoms were consistent with the mind's reactions to severe trauma. I suggested family therapy to relieve the children's stress. Although Harry would have preferred to bring them to an Adventist counselor, he accepted my referral to a trusted colleague who was familiar with Seventh Day Adventists. After their first session, he reported that my colleague seemed nice, although she wore makeup and jewelry. Harry refused to seek professional counseling for himself, preferring to turn to his friends in the church.

Leigh Ann left the hospital with a prescription for antipsychotic medication. She was upset both because Adventists rarely use psychiatric medications and because of the role of drugs in her own abuse history. I asked her if she would be willing to try an experiment: noting the differences between her use of medication as an adult and the way drugs were forced on her as a child. I emphasized her choice in the matter. I asked her if these medications were helpful to her, if she felt less scared and was more able to sleep. Leigh Ann agreed to try this medication for a while. The psychotic symptoms ceased. Leigh Ann is presently on low doses, and severely decompensates when she tries to wean herself entirely from the medications.

To help Adventists overcome a total rejection of psychoactive medications, I gradually educate them about biochemistry, the effects of trauma, and the potential for medications to relieve distress. I draw a parallel between use of psychological medications and medications for diseases such as diabetes and hypertension. However, I always respect their choices.

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Leigh Ann's adolescent children complain regularly about the changes in their mother. They long for the mother they used to have before she entered therapy, the mother who cooked elaborate meals for them and accompanied them unquestioningly to church.

Leigh Ann says she is not angry with God but is fed up with church and "churchy people." One of the few times she did go to church, her pastor gave a sermon exhorting members to "quit wallowing in their past and get on with their lives in Christ." Leigh Ann was furious. "Just how am I supposed to do that! These people just don't understand!" I encouraged her to talk this over with her pastor. She felt guilty about her anger, and she was relieved when I told her she had a right to be angry. This sermon was obviously ignorant of the level of injury she had experienced.

Leigh Ann says sometimes she wants to take her name off the church books as an official member. I tell her it's her choice, but that she might want to wait a year before she makes that major decision. She says that despite the church injunction against suits between members, she has decided to sue her mother for psychological damages.

Leigh Ann remembers using the symbol of the cross to feel safe during her childhood, painting crosses on all her fingers and toenails. Over the past few months, she has wanted to wear a cross despite the proscriptions of the church about jewelry and the concerns of her husband. The level of intensity with which she craved this symbol of safety overrode their objections. In recent sessions, Leigh Ann has arrived with a cross around her neck.

During some sessions, Leigh Ann would tense into a ball of psychotic terror. She asked for and was soothed and consoled when we sang a hymn about the protection of the cross. In several sessions, she requested that we sing the hymn repeatedly. The sounds of that hymn seemed to ease her terror and give her a dose of protection that helped carry her until our next meeting. Now she sings this hymn to herself when her anxiety levels increase or new memories surface.

Leigh Ann and I have been working together for about 2 years. She sleeps better and is able to work part time. She says Harry still "freaks out" when she tries to tell him about the abuse she has suffered. Leigh Ann is an artist and regularly talks about sculpting some of the events she has experienced. She longs for a "regular," relaxed summer. I cannot predict how Leigh Ann will grow and change, or what her relationship with the church or God will become. I have consistently admired her courage and her honesty in dealing with her own issues and with the ways these have interfaced with her church and religious community.

Lacey

Lacey lives 2 hours from my office and has been an intermittent long-distance client for 18 months. She is married to an administrator of one of our denominational institutions. She met me 20 years ago when she was attending a boarding academy run by one of the most conservative branches of the Seventh Day Adventist church. Members of this branch eat a vegan diet, use only natural remedies for illness and injury, are highly patriarchal, are concerned about women having too much of a leadership role in church structure, believe women should wear only dresses, have their own medical and educational institutions, and are wary of the "worldliness" of the mainstream Seventh Day Adventist church. Both her parents are multigenerational members of the church and are well known in its national structure. She said she turned to me for help because she had known of me for many years, and she knew of my reputation as a "plain-spoken" clinician and educator.

Lacey said she was dealing with the effects of being repeatedly raped by her older brother during her latency years. Her sister had reported sexual assaults by the same brother and their father. Both women were ostracized by their family, who said these men were incapable of such behavior.

Lacey expressed outrage at her family, fury at a church that would shield an offender, and confusion with a God who would not protect her. It was important to her that I validated her anger, helped her articulate its sources, and underscored the truth that this anger did not mark her as a horrible person.

Lacey worried about jeopardizing her husband's career by disclosing her brother's abuse to the church organizational structure. Additionally, she no longer wanted to feel compelled to attend church, an unspoken requirement of dutiful denominational wives. I encouraged her to discuss these concerns with her husband, who said he loved her and emphasized that her safety and welfare were his priority. He said they would handle the consequences together.

Lacey called the international organization of the church when they were about to send her brother to a boarding academy post in South America and told them of his abusive history. They rescinded "the call" (job offer). For several months, Lacey was blamed by her family for his career difficulties.

Recently, during a visit, Lacey spent many hours talking with an older sister. This sister began to believe what she said and called together other members of the family. At Lacey's request, they called me long distance to consult. I encouraged them to develop new ways to respect

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their family members who had been abused. I talked with them about the variety of behaviors that can violate boundaries or fail to protect family members. Some of the older siblings decided to have a family gathering to discuss the abuse issues with their parents. Lacey and her sister chose not to attend. Their father denied all wrongdoing and said he was concerned about his son. Their mother was quiet. The siblings said they wanted to open up communication lines with the abused sisters and they were going to do it with or without their parents' approval.

Currently, Lacey is considering the ways she wants to be involved with her extended family. In this case, my role has been mainly that of a consultant to help Lacey handle larger family and systemic issues. She has begun ongoing individual therapy with a nearby non-Adventist clinician.

Mark

Mark is a convert to the church who met me during one of my seminars. He and his wife were separated because he had hit her and verbally terrified his children. He said he could not keep living this way; he wanted his home back and he needed to face the personal history that fueled his anger and inappropriate responses to his family.

Members of Mark's local church donated payment for 7 months of therapy and a place to live during the separation of his family. When he felt suicidal at one point in the therapy, his hosts said they were not equipped to deal with these kinds of issues, and they sent him home to his family. Other church members have provided short-term "time-outs" for Mark or his wife and children.

Mark was raised in a nonreligious home. He was physically abused by his father and sexually abused by his mother and foster father. He still lives in the area where he grew up. He does not see his parents, and he sees his brothers infrequently. He said the church has become his family. After 2 years of therapy that was mostly concerned with maintaining his stability in the here and now, he recently began addressing issues with his family of origin.

Russell (1986) has noted high rates of religious defection among women who were abused sexually in childhood. Research into the rates of sexual abuse among converts in evangelical churches like ours would be most helpful. I believe that Mark's entrance into the church, like that of many converts, was partially a search for family.

My work with Mark has included addressing his rage at his past and working on constructive ways to vent his feelings. He refused antidepressant medication for a year because he "didn't want to take drugs." He thought

he should be able handle his difficulties with therapy, prayer, and other supports. He has been hospitalized twice and separated from his family twice. He is now taking medication and structuring his time to manage past and present stresses. At this writing, Mark and his family are reunited.

Some members of his church have worried that I might be "too New Age" to be working with him, and wondered if anyone who believes in psychology can be biblical. He says it is hard for him to feel pulled between them and me, but decided for himself that I was safe to work with.

Mark adheres strictly to conservative church dietary beliefs. He grows angry with himself when he is less than perfect in this regard. A few weeks ago, he told me he had been bingeing. I asked him what that meant. He had salad at night, and Ellen White said we should not eat dinner. I reminded him that she said we should not fall "into one ditch or the other." Maybe the salad was better than the dozen cookies he had eaten in the past when stressed. Using a discussion of food as a vehicle for introspection, we worked on loosening up some rigid internal demands.

Mark has wanted to press charges against his foster father. However, he worried that this would conflict with his belief in the necessity of forgiving "our trespassers." I talked with him about the ways that both the Old and New Testaments address violations of power and relationship. I noted that this choice could serve to protect other children. After several discussions, Mark told me he believed he would not misdirect rage toward his family if he could concretely address his anger toward one of his perpetrators. Since his most recent hospitalization, he began the process to indict this man, and in fact this does seem to be contributing to a drastic reduction in rageful episodes in the family.

In sessions, I have directly addressed Mark's violence toward his family. I balance the need to do this with awareness of his intense shame around breaking what he considers to be a sacred marriage oath to protect and care for his family. It has been a delicate struggle to confront both the violent behavior and the person in Mark who was victimized. Mark feels both personal and religious shame. I quote the text, "We have all sinned and come short of the glory of God." I say it is the human condition. At the same time, we have a responsibility to change hurtful behavior.

Strengthening the Community

Breaking the silence is the beginning of prevention. Every Seventh Day Adventist schoolteacher, Sabbath school teacher, Pathfinder leader, medical

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