How Can Marriage and Family Therapists Help Couples Navigate The Effects of Prior Childhood Sexual Abuse?

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**BACKGROUND**
- Sexual abuse is prevalent in 8-31% of the female child population and 3-17% of the male population worldwide
- Self-report studies show that in adults 20% of females and 5-10% of males can remember at least one incident of childhood sexual abuse (CSA)
- There is a greater chance of sexual abuse during adolescence and adulthood for those who experienced CSA than for those who did not
- Given the high prevalence of CSA, it is likely that these individuals will show up in therapy as individuals or as part of a couple system, and thus it is imperative that Marriage and Family Therapists are prepared for treatment

**OBJECTIVE**
- Examine the relationship between childhood sexual abuse, changes in neurobiology, and attachment later in life
- Identify opportunities for intervention for couples in which one or both partners have experienced childhood sexual abuse
- Create a resource including a flowchart and script with appropriate language for providers to use with clients for psychoeducation of neurobiological effects of trauma

**CHILDHOOD SEXUAL ABUSE**
- Exhibitionism, touching, or penetration by an older child or adult from birth through age 17
- Associated with increased risk of suicide and suicide attempts, PTSD, anxiety, depression, sleep disorders, eating disorders, substance abuse, sexual problems, social impairment, interpersonal problems, functional gastrointestinal disorders, obesity, and chronic pain conditions

**REPROGRAMMING OF HPA AXIS IN SEXUALLY ABUSED INDIVIDUALS**
- In individuals who have experienced sexual trauma, the HPA axis is reprogrammed to respond to any form of intimacy (anything from a touch on the arm to emotional closeness to sexual intimacy), which is the exact opposite response for individuals who have not experienced sexual trauma
- Short term, hyperactivity of the HPA axis leads to the amount of cortisol in the body being very high (hypocortisolemia) compared to levels in those who have not experienced sexual trauma
- Over time, the production of cortisol is downregulated
- Hypocortisolemia (low cortisol levels) is associated with high stress sensitivity, fatigue, pain, impaired peer intimacy, inhibited sexual arousal responses, and impaired affiliative and attraction behaviors between a woman and her child

**ATTACHMENT IN INTERPERSONAL RELATIONSHIPS**
- Originally from Bowlby (1973), Attachment Theory is the theory that proposes that children develop an emotional and physical bond with a primary caregiver based on whether their needs are met and whether they feel safe and secure
- In cases of CSA, these children develop thoughts and behaviors detrimental to the formation and maintenance of positive interpersonal relationships later in life
- Women with a history of CSA are more likely to have an insecure attachment and are also more likely to report higher levels of anxiety related to attachment

**COMMON COUPLES PROBLEMS IN WHICH ONE OR BOTH PARTNERS HAS A HISTORY OF CSA**
- Issues with communication
- Problems with sexual intimacy
- Heightened emotional reactivity
- Domestic violence
- Lack of secure attachment

**TREATMENT MODALITIES FOR COUPLES**
- Emotionally Focused Therapy (EFT) for couples
  - Integrates both experiential and systemic approaches to couples therapy, placing emphasis on the role of affect and emotion in the change process
  - Following EFT, 50% of couples reported increases in relationship satisfaction
  - 30% of couples reported decreased relationship satisfaction and terminated their relationships following EFT
- Collaborative Change Model (CCM)
  - Designed specifically for CSA
  - Helps clients move from a “therapy is something that is happening to me” survival mindset to a more engaged mindset of collaborative care

**SUMMARY**
- Childhood maltreatment by a family member or close other has a cascade of effects including irreversible changes in neurobiology
- Compounded by changes in neurobiology, child maltreatment has a negative impact on attachment in intimate later in life
- It’s important to assess for stability within the couple relationship before proceeding with Couples Therapy to avoid damage to either partner

**FUTURE DIRECTIONS**
- Multimodal approach to Couples Therapy
- Research with homosexual couples
- Treatment of couples with a history of CSA and present violence
- Early intervention with families with a child who has experienced sexual abuse

**EVIDENCE-INFORMED CLINICAL APPROACH**
- Proposed Multimodal Approach
  - Screen for violence
  - Communication skills
  - Psychoeducation for couple on the neurobiological effects of early trauma
  - Normalization of emotional reactivity for both partners and connection back to neurobiological effects of trauma for the partner with a history of CSA
  - Interventions for emotional reactivity such as taking breaks

**SELECTED REFERENCES**