

# SPEAK OUT

Newsletter of the Survivors' Network (Sussex)  
for women who were sexually abused as children  
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**INSIDE**

WHICH THERAPY TO CHOOSE.  
A WOMAN COPE WITH VAGINISMUS.  
BOOK REVIEWS, POETRY, ARTWORK, etc.



Taken from an original by Mary Cassatt

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WHICH type of therapy will be most effective for you?

This is one of the most frequently asked questions by women who have been referred to the Survivors Network, or who have sought out our services for themselves.

In this issue of Speak Out, we attempt to give a run-down of some of the types of therapy available and being used by women survivors of child sexual abuse.

The definitions of these therapy types have been written by counsellors and therapist working within the doctrines of that therapy.

The examples of therapy included in this issue are provided as an information service only.

We do not recommend any one therapy above another. We are simply attempting to give a broad overview of the types of therapy available to enable you to make an informed choice.

While many members of the Survivors' Network have made enormous progress using therapy to heal themselves from the effects of child sexual abuse, others have encountered a variety of problems in finding a form of therapy that suits them, a therapist they can trust and difficulties over knowing when to stop having therapy.

We would be interested to receive comments from anyone who has been in therapy for child sexual abuse (as well as other forms of therapy not included in this issue). We hope to print as many of your responses as possible in the next issue.

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I agree with Rickford (January for the victims of abuse should be a at consideration ent, I am con- nentation was d for such hos- ims. ly dangerous : that most children are tly come from 'buse them- ffort is this 'u- vale an her ise

Therapy's hidden danger

ANGELA Neustatter's article Mind Over Matter (January 1) was excellent in drawing attention to the benefits of therapy. But while she reminded readers that they should research their proposed therapy, and that therapists chosen should be "properly trained", it should be pointed out that there is no general council governing their training, registration and conduct, although there are moves apace to set up such a body.

Of course a general council cannot eliminate abuse. Any profession will have its cow-boys — or delinquents, to use the therapeutic vocabulary. Therapy differs from other types of professional relationships in that the vast majority of clients are emotionally vulnerable from the outset. The therapist therefore has enormous power and there is a risk of sexual abuse, as well as the creation of dependency and no real evaluation of whether the therapy is working. Therapists have a financial interest in keeping their client tied; the cash nexus is destructive.

It would be hoped that therapy could be made widely available and free through the NHS; successive government policy has scotched that idea. Pioneering groups like the Women's Therapy Centre do offer subsidised services, but are generally under-resourced. A free service, with a general council, must be the right way forward. Rodney Hedley London SE5

on sexual har- 8), Michae'

\* A special thank you to Louise Pemble for her tremendous spirit and appropriate skills in launching the newsletter and running it to date. Good luck Louise!

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# How To Find a Therapist

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Where do they all hang out? Is there a list of 'bona fide' counsellors/therapists? What's the difference?

In this issue of Speak Out we have tried to define what the various kinds of therapy aim to do and so on. There are also lots that we have not covered. If you are trying to get in touch with a counsellor or therapist at the moment can we suggest a few questions you might like to ask her/him at the first meeting? (You will probably have arranged an initial interview over the telephone).

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What can I expect from therapy?

Do you have a particular approach? (e.g. Feminist)

Where did you train? Are you qualified now?

How much do you charge per session? Do you charge if I am ill or on holiday? Do you operate a sliding scale if I can't pay the full amount?

Do we agree in advance about when we take breaks?

Can I telephone you if I have a crisis?

Can we review how it is going for both of us after a few sessions?

Do I have to commit myself to a long term programme?

Have you experience of working with Survivors?

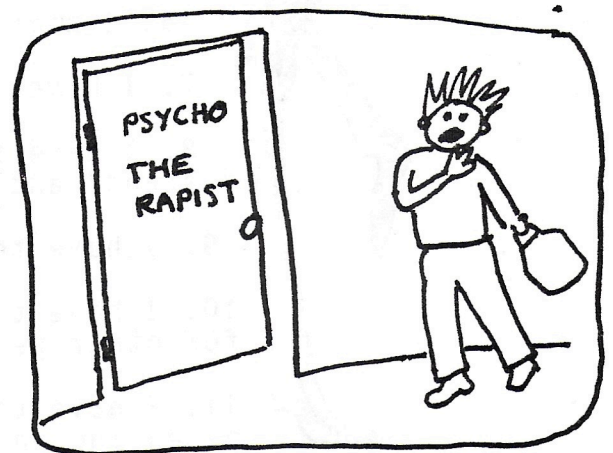
Do you have supervision? Do you record sessions? What does 'confidentiality' mean in this context?

There may be other issues which are important for you personally, especially if you want help with a specific problem. For example you may want to know if your counsellor will tell you things about herself/himself - is s/he a survivor too?

If you have difficulty locating someone to help you please let us know.

If you send us a stamped addressed envelope we can forward a list of recommended women counsellors. Similarly if you would like information about self-help groups please write to the Box Number.

WHAT IS A PSYCHOTHERAPIST?

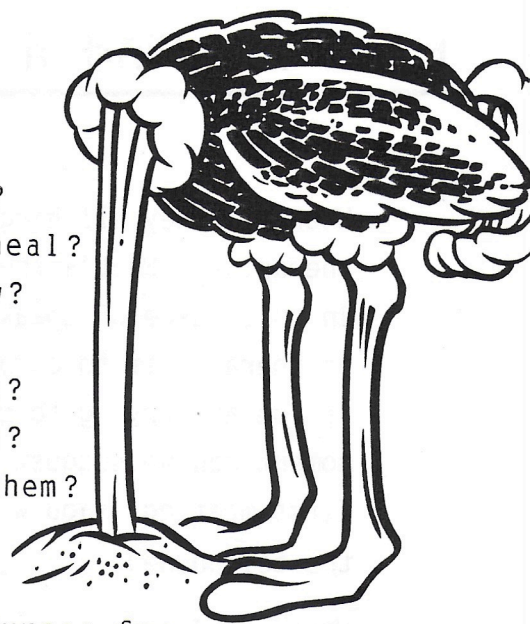


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Questions to ask if you are in therapy:-

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- Do I feel listened to?
- Does my therapist believe what I say?
- Do I get a clear feeling that my therapist likes me?
- Do I think my therapist believes in my capacity to heal?
- Does my therapist respect my ideas and point of view?
- Do I trust my therapist?
- Is my therapist respectful of my personal boundaries?
- Does my therapist respond well when I am in a crisis?
- When there are problems in therapy, can we discuss them?
- Does my therapist admit to making mistakes?
- Does my therapist help me find my own answers?
- Does my therapist encourage me to utilize other resources for healing?
- Have I made any progress since I began therapy?
- Things I like about my experience in therapy:

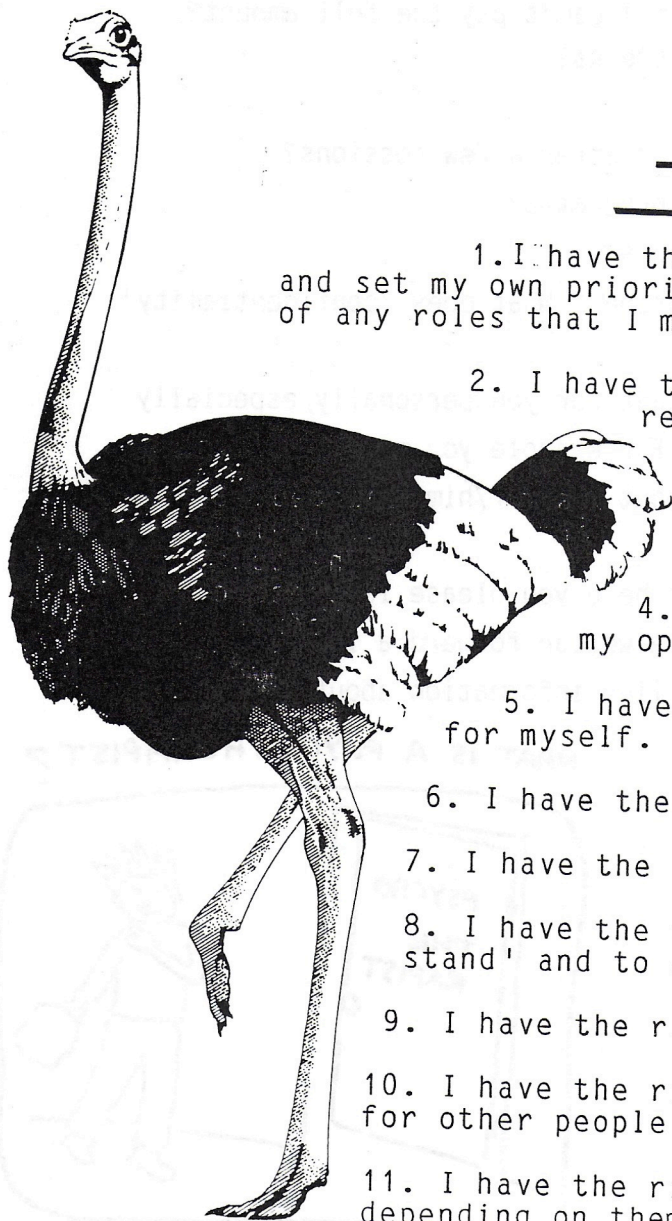


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YOUR BASIC RIGHTS

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1. I have the right to state my own needs and set my own priorities as a person, independent of any roles that I may assume in my life.
2. I have the right to be treated with respect as an intelligent, capable and equal human being.
3. I have the right to express my feelings.
4. I have the right to express my opinions and values.
5. I have the right to say no or yes for myself.
6. I have the right to make mistakes.
7. I have the right to change my mind.
8. I have the right to say 'I don't understand' and to ask for more information.
9. I have the right to ask for what I want.
10. I have the right to decline responsibility for other people's problems.
11. I have the right to deal with others without depending on them for approval.





Person-centred counselling has its origins in the pioneering work in the 1930's and 1940's of Dr Carl Rogers, an American psychologist and therapist.

During this time, Rogers was developing his own personal style of therapy and breaking away from the traditional school of psychoanalysis.

Rogers was convinced that it was the client who knew what was hurting and the client in the end who would discover for themselves the way to move forward. In the light of his insight, he named his way of working 'non-directive counselling', thus emphasising that the counsellor's job is to help the client get in touch with their own inner resources to solve their problems, in preference to guiding, advising or influencing the client as to the direction to take.

Person-centred therapy prizes the uniqueness of the individual and the importance of their inner world. It encourages clients to take responsibility for themselves and trust their own inner resources to guide them towards what is best and right for them. Too often we seek answers from those around us, when we need only to turn and look inside.

This approach suggests that self-concepts can be changed, attitudes and behaviours modified or transformed so that individuals can move towards and realise their full potential. The counsellors task is to create a relationship where the growth process can be encouraged and damage repaired. The quality of this new relationship environment and the counsellor's ability to create it, is central to the whole therapeutic endeavour.

The creator of a growth enhancing climate and therapeutic relationship requires the counsellor to 1. Be genuine and congruent, this means being real, no mask or facade, allowing thoughts, feelings and behaviours to be in tune with each other; 2. Offer unconditional positive regard and total acceptance (accepting the client as a person does not mean that the counsellor necessarily condones an accompanying behaviour or attitude); 3. Feel and communicate a deep emphatic understanding, experience the client from their shoes, suspending preconceived ideas and judgements, really being with the client. These are the 'Core Conditions', which Rogers believed necessary for therapeutic change to take place. The success of this form of therapy will depend on the client's belief and desire to change and the skill and empathy of the therapist.



## What is Psychodrama?

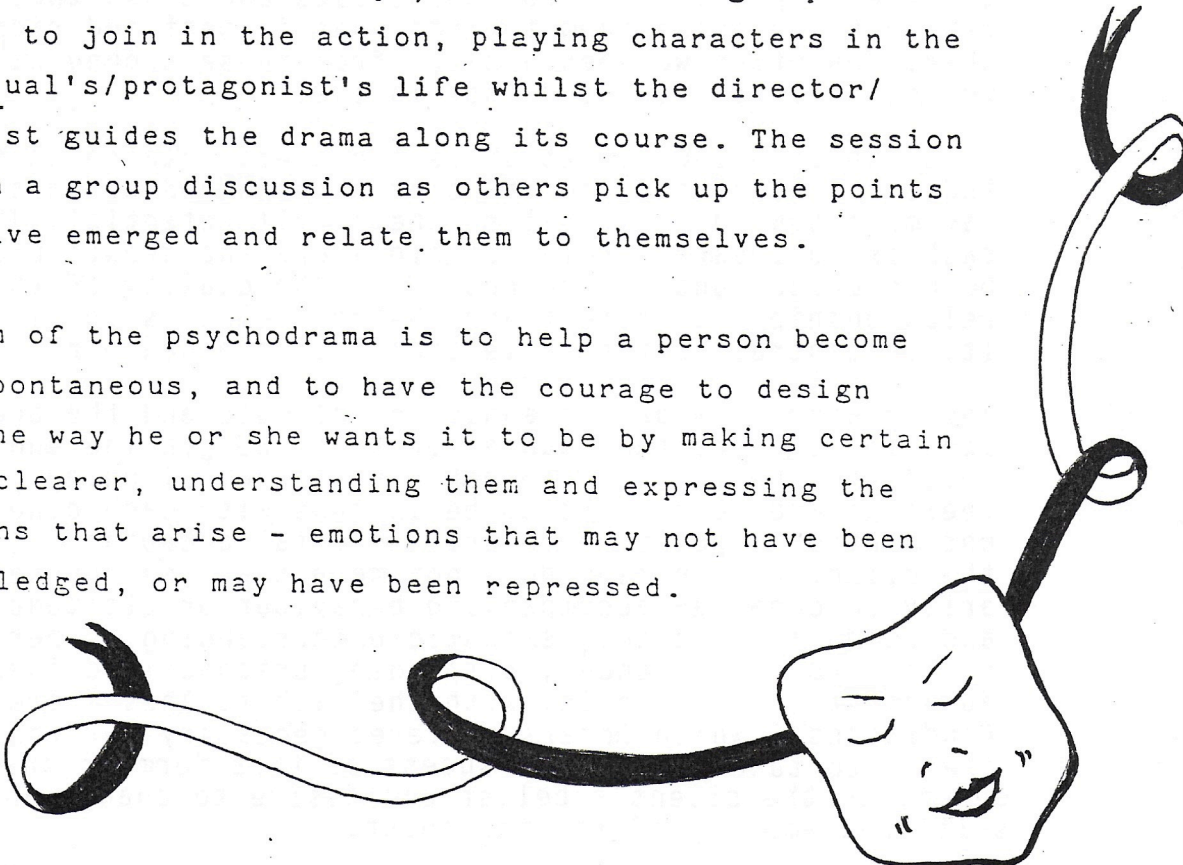
Psychodrama is derived from two words - psycho meaning mind - and drama meaning action - together meaning action of the mind.

Psychodrama uses dramatic methods to give people a chance to act out events in their lives, sometimes real events, sometimes imaginary ones. It is a unique way of helping people to look at their relationships not in the abstract but in terms of actual situations.

There is no script, all participation is spontaneous working towards what is emotionally true in one's own life. Scenes of the past, present and future may be enacted. Realism, symbolism or fantasy may be presented.

Each session starts with a warm up, an exercise designed to bring the group together. Out of this comes a theme, and one or more volunteers for the psychodrama that follows. As each psychodrama develops, members of the group come forward to join in the action, playing characters in the individual's/protagonist's life whilst the director/therapist guides the drama along its course. The session ends in a group discussion as others pick up the points that have emerged and relate them to themselves.

The aim of the psychodrama is to help a person become more spontaneous, and to have the courage to design life the way he or she wants it to be by making certain areas clearer, understanding them and expressing the emotions that arise - emotions that may not have been acknowledged, or may have been repressed.





Before



After!

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### A Brief Definition of Art Therapy

Though a relatively 'young' discipline, Art Therapy is becoming widely practiced within Special Education, the psychiatric services, and more recently in Social Services. It is recognised as valuable in working with people who have been abused.

Like other Creative Therapies, Art Therapy has a commitment to affecting change. It recognises that fundamental thoughts and feelings, deriving from the unconscious, may be expressed more readily in powerful images rather than words.

Art Therapy, using a wide range of materials, provides the chance to explore difficult or unacceptable feelings in a safe way, relating to the therapist through a 'third party'. The artwork itself can be the focus of subsequent discussion, the images equating to experiences, feelings, thoughts and fantasies. Art Therapy has an advantage over psychotherapy in being able to look back on the artwork over a period of time - an important part of the therapy.

However, the process - the involvement in the work, the perception of it, and the realisations brought about through the making of an image - forms the basis of change.

This process is not magical, - it is actually very hard work! - but it can help to establish some inner organisation.

There can be a number of aims in Art Therapy - assessment, development of self-worth, personal growth, improvements in communication, motivation, and personal relationships, as well as self-expression especially after trauma. Many psychosomatic symptoms also respond well to art therapy techniques.

It is very useful to those who are not always sufficiently articulate or confident to discuss their needs. Art therapy can be largely non-verbal in approach, and is not concerned with aesthetics or artistic skill, so is not intimidating.

The therapist may work individually, or in open or closed groups for a fixed or open ended number of sessions. The contract, the relationship with the therapist, the room, and the materials, set the safe boundaries of an environment in which the client can give expression to inner feelings. The therapist's role is to facilitate self-expression in any form that is not dangerous or damaging.

During the session the therapist observes how materials are used, the manner of making an image, the content of the work, the responses of the client to the work, use of space, posture, if boundaries are acknowledged and so on. She also monitors the relationship between the client and herself over the contracted period.

There are not many qualified Art Therapists in this area but for more information please contact Carole Shaw.

## THE ALICE MILLER APPROACH TO THERAPY

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The institute for self analysis is for people who work therapeutically with the abused child within the adult. Their work is inspired primarily by the work of Alice Miller.

Why 'the institute for self analysis'?

All good therapy is self analysis.

Who is Alice Miller?

A therapist who through her own abuse broadened the definition of abuse to include any actions and attitudes which satisfy the needs of adults over children. Different from traditional Freudian views, centre to her training is that children are born innocent, knowing how to be loving and trusting and that it is through the actions of adults that that trust and love is abused. Over the time this happens, the child shuts down a little more until she is no longer able to trust that there is a safe place for her.

Alice Miller does not believe people in therapy should work towards forgiving their abuser as other therapies advocate in order to assist the healing process.

Therapists with the institute aim to provide recognition for the hurt child in the adult and make contact with that child. This abuse can range from sexual and violent abuse to emotional abuse, including being ignored and left alone at times of great suffering and despair.

Books written by Alice Miller include: 'The Drama of Being a Child,' 'For Your Own Good' and most recently and well worth reading even as a first taste of Miller is 'Banished Knowledge'.

Jane Parkinson  
Therapist.

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“ All my life I've been carrying a battered ten-year-old child inside me. Some days she's quiet, but some days she kicks and screams and makes my life hell.

Survivor, 25, of Brighton

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## ANALYTICAL BODY PSYCHOTHERAPY

This form of therapy offers the client the healing experience of allowing traumatic and stressful events from the past repressed in the mind and body to be expressed and come to terms with.

It is a therapy that recognises the whole nature and strength of mind and body and the duality of the therapeutic experience. Just as we try to block out painful memories by 'forgetting' them in our heads, so do we experience blocks and stresses in our bodies. So we need to work on both.

For instance, if we look at the following phrases, we can see that how we are in our bodies can reflect how we really feel - "stiff upper lip, clenched teeth down in the mouth, pain in the neck, hollow inside, sick of it all."

Another important part of the therapy is enabling the client to understand the nature of her relationships to the people in the world of her making.

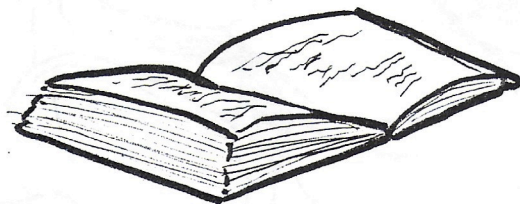
For a person who has been physically and or sexually abused, some of the key issues may be centred around learning to trust or accept a care-giver, learning to take pleasure in her body, to cope with areas of unreality and disbelief, possibly to come to terms with the abuser.

The therapy can take many months and only the client and the therapist will know when it is completed.

If you want to know more about the therapy, please contact Eve Ashley on 553922 (Brighton).



HELLO?  
IT'S YOUR FATHER HERE.  
HELLO?  
I DON'T WANT THE PHONE TO RING.  
HELLO?  
THERE'S NO ONE HERE TO ANSWER YOU.  
HELLO?  
DON'T YOU GET IT?  
THE SIGNAL IS ENGAGED.  
HELLO?  
HEAR THAT TONE?  
I'VE HUNG UP ON YOU.  
DO YOU HEAR ME FATHER?  
GOODBYE.  
DON'T CALL ME.  
FOR I MAY NEVER  
CALL YOU  
AGAIN.



The following poem is an illustration to a sculpture by Tertia Longmire. It will be shown from February 11-22, 1991, at the Brighton Polytechnic, Foyer Gallery, Grand Parade, Brighton.

I have to ensure that by making others feel helpless before the fragility of glass objects, the negative forces assume demonic character.

'Digging up the past'

Strung up on air into which there is no escape.

Non-titilation, abuse stops here.

Combine in the suspension a sense of light weightlessness and tugging memory of tension.

Oblique and obvious at the same time.

Digging can be both earthy and mercurial.

Relate the objects to each other by playing with the space in between. That is, the area

seen doing nothing but invading the quiet rumblings of the pieces as isolated objects.

Don't make a mockery of the rope, twine, string, cable, line, chain, cord.

Exhaust plus glass breaths.

Clay tank.

Bucket and head.

Iron and ball.

Breast and phallus.

Plug and feather.

Glass assortment of jars.

White glass piece.

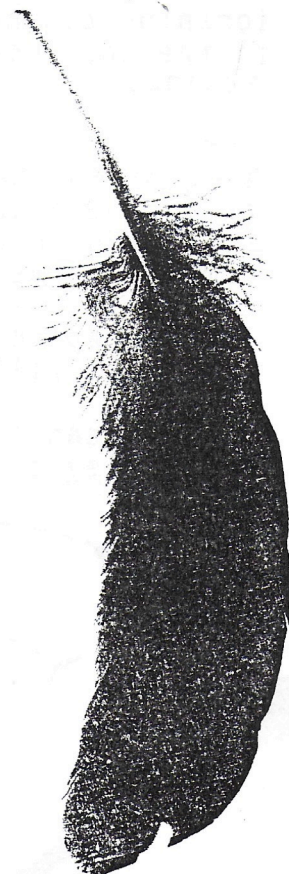
Thermometer piece.

Bucket and fanny and bread ring thing.

Wire nest and bell top with cylinder.

Forks.

Pre-conscious relationship is the one with our mother.



Mama can't you see  
I'm soiled goods  
Fellas know me  
As soiled goods  
Faulty stock  
damaged produce  
battered  
shattered  
wasted  
lost in transit  
Please don't handle  
the merchandise  
It's no longer for sale.

Louise

TO MUM

I only want peace and quiet,  
a bit of harmony in my life.  
I hate your shouts.  
I hate your insults.  
I hate you telling me I am mad.

I only want to understand,  
what did I do to deserve this pain?  
Say: I am dirty.  
Say: I am cheap.  
Am I paying for his sins?

I only want to be myself,  
though you insist I musn't dare.  
Say: I am nothing.  
Say: I am sin.  
What you see it's just not me!

I wouldn't like to be like you...  
prayers... prayers... to keep you safe.  
I want to fly.  
I want to escape.  
Why do you always take me to hell?

I only want to know the truth.  
You knew all along didn't you?

Begoña 8/10/90

Everybody knows what you're like

Father crept in room  
drove stake through soul  
gave child crucifix  
to drag to school

Everybody knows what you're like

Struck whilst irons hot  
burnt hand  
carn't protect  
too sore

Everybody knows what you're like

Father enters head  
reads mind  
clearly labels lier  
to torture more

Everybody knows what you're like

Child shouts too loud  
peers in face  
won't go away  
carn't keep secret

Everybody knows what you're like

Child hates words  
sinks at meaning  
Child wrong  
father right

because

Everybody knows what you're like



## Vaginismus - How it has effected me.

When did I realise I had a problem?

I was fourteen going out with a boy who wanted sex. Because of abuse in my childhood I realised that it was going to lead to something awful. I thumped him when he wanted more than what I wanted to give.

At fifteen I had a relationship with Jessica which worked well though I avoided penetrative sex. After that there was a series of one-night-stands - again no penetrative sex - then I met Claire for four years everything was great for us but I still would not have penetrative sex.

By this time I had blotted out my abuse so I did not link it to vaginismus. It was just something uncomfortable that I did not want to participate in or think about. At this time I had accepted and was happy with my sexuality. It was not because I didn't want penetration that I am a lesbian. It is because men can not offer me what I want from a relationship. I was conscious that attempted penetration made me feel sick but I did not regard it as a problem. Within a relationship it did not prevent sexual contact but it did limit it. I also did not think of my partner's feelings.

At what point did I do something about it and why?

I became aware of my partner's feelings. She was frustrated and upset so we had some lengthy discussions. At first I worked things out on a head level - it was something I could not just avoid or dismiss anymore. I rationalised about the benefits of that relationship - the pros and cons and I knew I could trust her. The relationship was gentle and non-violent and somewhere I realised that the experience could be pleasurable for me since I could see it was for my partner. By this time I was having very clear flashbacks of the abuse in my childhood which became stronger the more sexual I got. I was determined to do something about it.

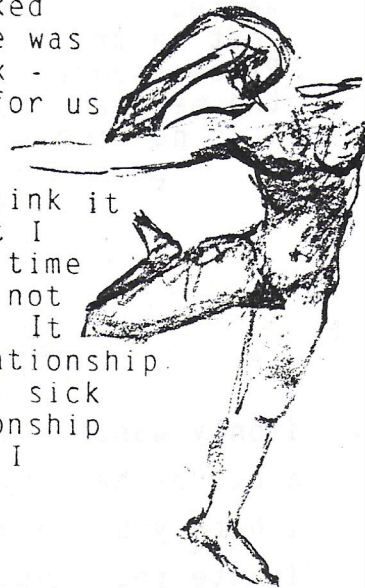
What was my first experience like?

Scary. strange. I had to be in complete control. It was slow and gentle. I had to be sure I was present all the time and kept reassuring myself that it was nothing to do with my abuse. It was a joint venture. We talked it through. I was tense at first but as time went on I got more relaxed. After that it got better and better-making love became more exciting and pleasurable.

Do I think there are long term effects and is there a cure?

It takes two people - you and your partner - to work it out. From my point of view because my relationship has finished I am back to square one. It takes a lot of trust and understanding. It just takes time.

Unfortunately not many people are willing to try and understand about vaginismus even though it effects so many women. Even within the Survivors' Network there resistance to discussion and it is all too easy to joke and brush it off. There is no easy solution to this kind of problem.-The Network could be an ideal safe space to discuss such issues.

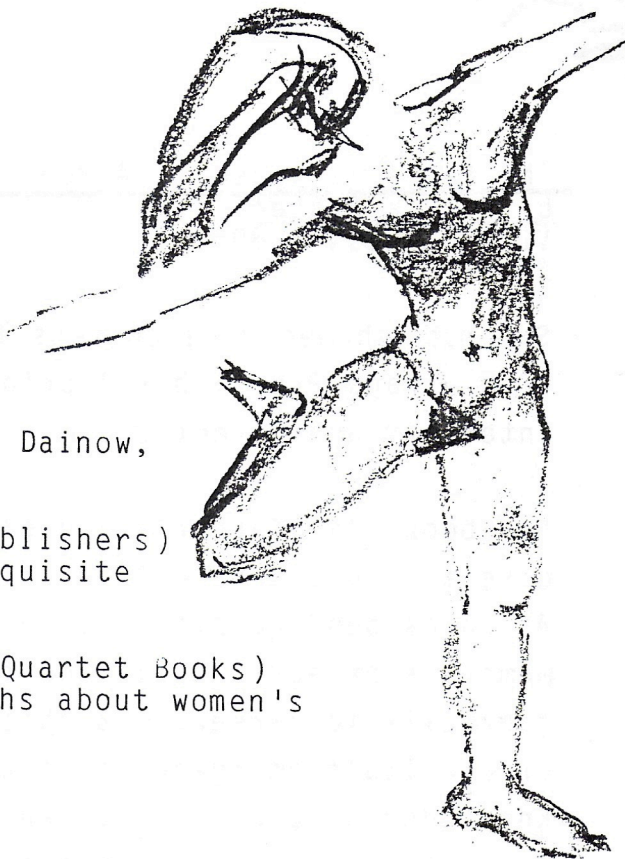


### What is vaginismus?

The medical dictionary defines vaginismus as: "painful spasm of the vagina due to involuntary contraction of the vaginal musculature severe enough to prevent intercourse; the cause may be organic or psychogenic."

### BOOKS RELATED TO SEXUALITY

1. Vaginismus - L. Valins (Ashgrove Press)
2. Treat Yourself to Sex - Self-help dealing with sexual problems and outlining graded exercises - Brown and Faulder (Penguin)
3. Making the Most of Loving - Cox & Dainow, (Sheldon Press)
4. Being Lesbian - Trenchard (GMP Publishers)  
A guide to enhance sexuality as a requisite to a contented lifestyle.
5. The Mirror Within - Ann Dickson (Quartet Books)  
Challenges basic assumptions and myths about women's sexuality.



### BOOKS RELATED TO THERAPY/SEXUAL ABUSE

1. Art as Therapy - Tessa Dalley (editor) Tavistock
2. The Courage to Heal - Ellen Bass/Laura David, Harper & Row
3. The Courage to Heal Workbook - Laura Davis
4. Surviving Child Sexual Abuse - Liz Hall/Siobhan Lloyd, Falmer
5. Child Sexual Abuse (A Feminist Perspective) - Emily Driver
6. Beyond Sexual Abuse: Therapy With Women Childhood Victims - Derek Jehu (very academic)
7. Integrated Treatment of Child Sexual Abuse - H. Giarretto
8. Healing the Incest Wound: Adult Survivors in Therapy - Christine Courtois 1988

A big thankyou to Sharon Benedict for the generous donation of books to the Network's library, increasing the stock by more than double!



'My Father's House' - A Memoir of Incest and of Healing  
by Sylvia Fraser

Virago Press 1989

£4.95

Somewhat ashamedly, I confess that this book is my first encounter with Virago Press, but I pride myself that it is Sylvia Fraser's integrity and direct writing skills with which I begin.

Her book, 'My Father's House', places the subject of incest directly into a rare literary genre of the autobiographical novel. At an astounding pitch, Sylvia Fraser's book traces her known memories of early childhood through teenager to a successful journalistic career. But this seemingly acceptable portrayal of a child's emergence into womanhood is underpinned with the knowledge of a deeply hidden secret.

"Somewhere around the age of seven, I acquired another self with memories and experiences separate from mine, whose existence was unknown to me."

Using a parallel text, the author subverts the acceptable lifestyle of her Canadian family life. Highly charged and dreamlike accounts of her 'other self' witness the crime committed against her by her father.

I would suggest when embarking on this brilliant novel, that the reader creates a safe space to begin and read it only at an appropriate time when healing can truly take place.

I thoroughly recommend this book to all survivors and especially to partners of survivors and friends and family who support survivors, as a direct and illuminating account of incest.

Tertia.

SCREAM QUIETLY OR THE NEIGHBOURS WILL HEAR, by Erin Pizzey  
(Pelican Books, 1979)

This book chronicles the growth of the battered wives' homes during the 1970's. Pizzey concisely documents the struggle to keep open the first refuge in Chiswick and describes how, despite some resistance from the social services, police and judiciary, the plight of these women and their children became recognised nationally. She analyses the legal system, highlighting the lack of protection afforded to these women, and details the indifference of the authorities to an ancient phenomenon which had, for so long, been conveniently neglected.

Although harrowing, Pizzey uses plain language to describe many of the cases which she encountered. The brutality faced by those seeking refuge is made clear. Both the psychological and physical effects of their ordeals are best understood in their own words, quoted throughout the book.

This account is of interest to anyone concerned with the issues which surround violence towards women and children in society today. It has particular value for those working in the Survivors' Network as there are numerous parallels between the two organisations; such as the difficulties in finding funds, and the resistance in accepting that there is a "problem". Despite its subject matter, this is an optimistic book which can give inspiration and guidance to workers and members of the Survivors' Network. A copy of the book can be found in our own library.



PROGRESS ON THRESHOLD PLANS FOR A BRIGHTON WOMEN'S COUNSELLING AND THERAPY SERVICE OR CENTRE.

Almost since the beginnings of Threshold in late 1987, one of our aims has been to establish a base for women locally which would provide the sort of mental health services that they need and increasingly demand. Women's counselling and therapy services and centres already exist in London, Birmingham, Leeds, and Sheffield. Brighton is long overdue for such an initiative. It is hoped that free counselling and therapy can be offered, individually or in groups. Many women who contact Threshold have been involved in "mainstream" psychiatric treatment and, offered a choice, do not want to repeat the experience. Others are able to manage their lives without psychiatric intervention, but are seeking help with a particular problem or deep rooted emotional distress, in order to live better, more satisfying lives. Alternatives to "treatment" with drugs is often difficult to find, and expensive.

As always with voluntary charitable organistaions, the problem is funding. The NHS is underfunded, and scarce resources are overstretched. However, there is money available. It has been a priority for Threshold to pressure managers and planners of mental health services to recognise the urgent need to channel some money into services specifically for women. Not an easy task.

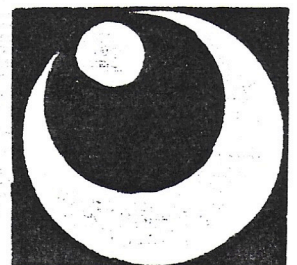
At present we are negotiating with, or more to the point, appealing to the Health Authority and East Sussex Social Services for help with setting up a pilot women's counselling and therapy project. We are having talks with the Brighton and Hove Women's Centre to see if their bulding could be utilised as the "Brighton Women's Counselling and Therapy Centre", managed and financed by Threshold, for two days a week. If, by the end of a year say, we can successfully demonstrate the need for the services we provide, and an ability to run this pilot scheme effectively and efficiently, we'll be in a much stronger position to bid for a 5 day a week, properly funded centre.

We don't yet know the outcome of our proposal for this pilot project, but even if all the money we've asked for isn't forthcoming, the general consensus in Threshold is that we'll do our best to go for it anyway. This will mean that we'll have to, once more, ask women who want to be involved with the project, to volunteer some of their time. We are compiling a list of counsellors and psychotherapists with a feminist approach, who might be able to give us one or two hours a week, to either run counselling and psychotherapy sessions, or offer assessment and/or supervision.

If anyone is interested, and would like to know more, contact Threshold and we'll send you a current draft of our proposal for a Brighton Women's Counselling and Therapy Centre. All comments welcome!

Sue Davis 14/1/91

**Threshold**



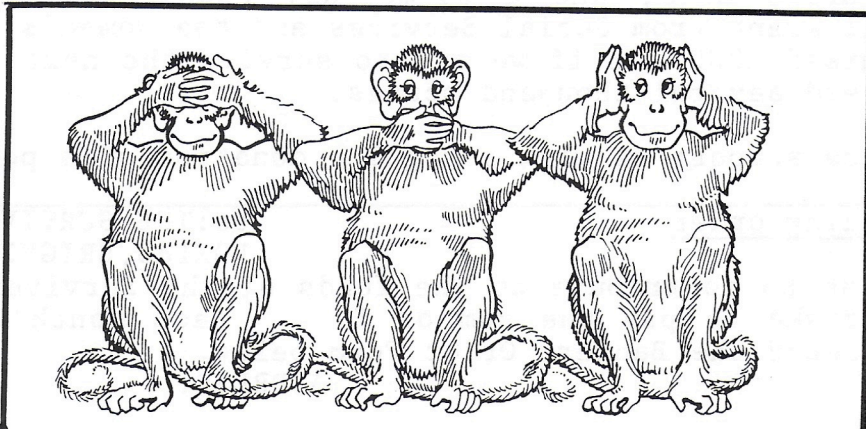


# "QUOTE... UNQUOTE"

Adult client:

Eventually you grow out of this self-hatred stage and start to make yourself forget that anything happened....The only problem being (that) in doing this you actually become devoid of any real feeling or real sensations. Most of the time you are and feel like an outsider in whatever is going on around you...All of the younger part of your life has been spent in hiding-hurt-hatred-love-anger anything at all that makes you appear real.

Anyway you do very well through your teenage years just being a little hard case, all bravado and show, because inside you cry and cry, why do people not see this? Eventually your feelings are gone completely and life is an act. You will fit into any situation - go along with what everyone wants and generally feel that life is too long...you just don't know how to be. I guess you feel afraid that you may really be the person your father hated after all.



"Whilst the victim needs a witness - INCEST REMAINS LEGAL."

- from a statement made by the group, Survivors of Child Sexual Abuse, at the First International Conference on Incest and Related Problems, held at Irchel University, Zurich, August 10-12, 1988. See 'Feminist Review', 28, (1988), 3.

## EARTHA KITT SPEAKS OUT

'I'm Still Here' (Sidgwick & Jackson) is Eartha Kitt's autobiography and includes her account of being sexually abused. Eartha was abandoned by her mother when she was very young, about four years old perhaps - Eartha does not know when she was born. She was left in South Carolina with a cotton picking family whose teenage grandchildren, Gracie and Willie, used frequently to beat her on her bare bottom until the blood ran. Gracie also more directly sexually abused Eartha. Later, in New York, when Eartha was a teenager living with her aunt, the landlord used to try to sexually assault her, but she was able to fight him off.

please support us!

SURVIVORS NETWORK

CHARITY NUMBER 1000961

Over one hundred women have contacted the Survivors' Network during the period March to December 1990 via the Telephone helpline (566555), the self-help groups, the monthly forums, or the newsletter.

The need for Women Survivors of childhood sexual abuse to have support, therapy and a voice at last, is undisputed. Indeed the statutory agencies who refer many women to our service, acknowledge that the need is ever increasing and that women deserve to be heard.

Currently the Survivors' Network is operating on a shoestring with the goodwill of many volunteers. In order to make the Network available to more women we need funding over a long period. So far we have initiated a telephone helpline, self-help groups, a partners' group, training for volunteers, a resources area, and a bi-monthly newsletter. We have had a small grant from Social Services and the Women's Committee has promised £200 but if we are to survive the next financial year we need several thousand pounds.

Please support us with a regular donation of a pound a month!

Standing order

to: THE SURVIVORS' NETWORK  
BOX188, BRIGHTON BN1 7JW

I wish to contribute to the funds of the Survivors' Network. I undertake to pay the sum of £ each month/year, and have completed the Bankers Order Form below.

NAME:

ADDRESS:

Bankers Order Form

The Manager.....Bank Plc  
.....

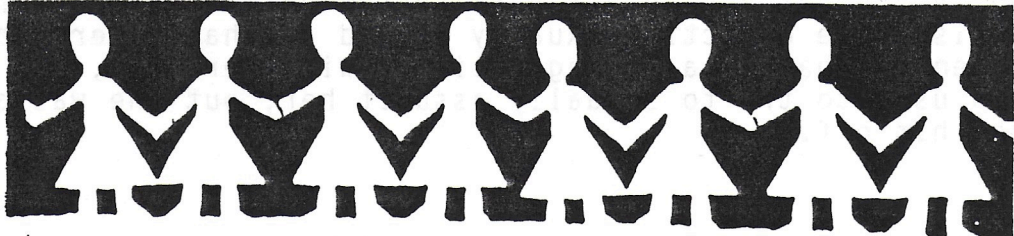
Please pay The National Westminster Bank, Castle Square Branch, 8, Pavilion Buildings Brighton, for the credit of the Survivors' Network ( Account Number 53646835 ) the sum of £ per month/year ,making the first payment on (date)

.....  
and subsequent payments on the same day of each month/year until further notice, debiting my current account number.....

name.....

address.....  
.....

signed.....



Telephone Helpline      566555

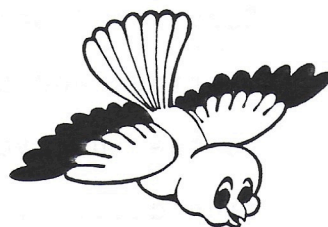


The helpline is available on Wednesday and Friday evenings 7pm - 9pm, and Sunday afternoons 4pm - 7pm for callers who want information or counselling. We can provide information about The Survivors' Network, other local agencies, National groups and so on. Some specific details, e.g. about legal or medical advice, we may be able to provide given time, or we can refer callers to the appropriate people.

Many women 'phone in times of crisis for immediate help and reassurance - particularly around issues relating to the long term effects of childhood abuse. The line is staffed by women counsellors who will listen and offer help as far as possible. (Calls may have to be time-limited in order for the line to remain open but callers can use the number on a regular basis if necessary).

If you have ideas about how we can improve the service please let us know. Unfortunately we can not operate the line more frequently at present, but messages left on the answering machine will be responded to as quickly as possible.

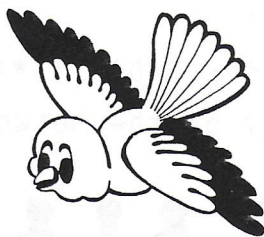
There is ongoing training for women to staff the helpline, and we should like to hear from you if you think you could offer time and skills in this area.



OTHER SERVICES WE OFFER

**PARTNERS' GROUP** - Male partners of women survivors meet every Wednesday night at 7pm at 251 Preston Road, Brighton, to discuss the issues of being involved in a relationship with women who were abused as children.

**WOMEN'S SELF-HELP GROUPS** - Women who were sexually abused as children meet in two separate self-help groups set up by the Survivors Network. Both groups meet every Tuesday night. If you are interested in joining, come along to next forum meeting on January 31, 1991 at 251 Preston Road, Brighton, or write to the Survivors Network at PO Box 188, Brighton, BN1 7JW.



**MOTHERS' GROUP** - A local child protection agency already runs a group for mothers of abused children. If you are interested in joining, please write to the Survivors Network for an application form, PO Box 188, Brighton, BN1 7JW.





BOX 188  
Brighton BN1 7JW

Tel: (0273)566555

APPLICATION FOR MEMBERSHIP

NAME.....

ADDRESS.....

.....

.....TEL:.....

OCCUPATION.....

I should like to apply for membership of the  
Survivors' Network, and receive information about  
meetings and projects. I enclose a cheque (payable  
to the Survivors' Network) for £15 or £5 unwaged  
signed.....



Thank You

THE GALBENKAIN FOUNDATION: an open cheque for £1000 \*!\*!\*!\*!  
TELETHON : have given us £750 for publicity of the Network\*!

