



## Understanding and Managing The Impact Of Childhood Sexual Abuse On Adult Intimate Life

Child sexual abuse includes any sexual act performed on a child by an older person for their own sexual gratification above the well-being of the child. It also includes exposing the child to sexually inappropriate material or behaviour, exploiting the child, again, with the goal of sexual self-gratification. Childhood sexual abuse is known to cause problems of intimacy for some persons when seeking to participate in intimate adult relationships. As a result of sexually abusive experiences some adults may be sexually indiscriminant whereas others may seek to avoid sexual intimacy and otherwise find sexual expression difficult. It is not uncommon for adults who were sexually abused as children to have developed a discomfort or even repulsion to sexual intimacy.

Of those who find sexual expression or intimacy difficult, as a problem, this tends to surface in the context of a significant relationship where sexual intimacy is expected. As such, some couples turn to counseling with the presenting problem framed as lack of sex or limited frequency or discrepancies in libido (sexual appetite) between the couple or even communication problems and conflict.

It is remarkable the degree to which some persons are unaware themselves of the impact of childhood sexual abuse on current adult intimate life. Further, some persons may as yet be unaware that certain childhood experiences may in fact have been sexually exploitive and abusive.

In terms of the assessment phase of counseling, some therapists do not directly obtain full individual histories of their clients in favour of developing a therapeutic relationship with the client and then waiting for self-disclosure at such time as the client feels comfortable. Meanwhile, other therapists whose approach may be cognitive, behavioural or a combination thereof, may not view childhood history as significant to the assessment-treatment process as much as detailing the current circumstances of the problematic behaviour and intervening therein.

Hence to address problems of adult intimacy, it is important for therapist and clients together to discuss forthrightly pertinent experiences of sex and sexuality both historically and presently. Where childhood sexual abuse is assessed to have occurred, help must include education on the impact of such experiences on adult intimate life so that couples no longer frame the problem as a conflict between themselves, but an artifact of abuse experienced at an earlier age.

With clear and frank discussion and education on the matter, both persons can come to appreciate the impact of the childhood experience on adult intimacy. With a better understanding of these issues, adaptive strategies to improve intimacy difficulties can be suggested given this is an objective sought by both partners.

One such strategy is *permission-based intimacy*. Because issues of control and safety can figure large for persons who have been sexually abused, current partners are advised to ask permission before any intimate contact rather than guess or assume it may be acceptable. This puts control into the hands of the person having been abused and allows for discussion on the nature or form of contact requested, to assure comfort. Once control and safety issues are addressed and managed, discussion can move towards further improving intimate expression.

Thus, with direct discussion, education, instruction, patience and respect for personal issues and needs, intimate contact and relationships can be improved.

The process takes time and mutual support throughout.

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