



As the issue of childhood sexual abuse dominates the news cycle, interest in the area continues to grow within mental health services. With increasing recognition that psychiatric diagnoses are often discursive fig leaves covering up underlying childhood trauma, psychology is revisiting it's troubled past with victims of childhood sexual abuse. However, the models available to the psy

disciplines often further confuse the issue through a range of methodological and theoretical limitations.

It is in this context that I consider my own perspectives on the topic. I am a survivor of institutional childhood sexual abuse who has suffered from intermittent mental health problems ever since, a clinician working with victims of similar forms of abuse and an academic interested in the ways in which these experiences can affect people. On the one hand these multiple perspectives offer the possibility of an illuminating triptych through which the perspective of each can clarify and sharpen the image of the others, even offering the possibility of a synthesis of views into a coherent whole. However this tripartite perspective also risks alienating me from the different vested interests of which I am member. On the one hand taking up a survivor perspective risks rejection from academic enquiry that emphasises objectivity, while on the other the authenticity of the survivor voice may be compromised by the privilege afforded through professional status. This risks illuminating nothing and being situated nowhere. What conditions need to be met for these multifaceted perspectives to be utilized in a way that can be helpful both to victims of sexual abuse and those charged with helping them?

The diagram that I offer as a part answer to the above question can be considered in a number of ways. Firstly, it is a modification of an actual poster that was used as a prop for what is so euphemistically referred to as 'grooming.' The Christian Brother who abused me took certain boys to his office for sex education, a poster just like this one was used to illustrate his lectures. A second meaning behind the poster is that it was what I did to my mind to get away from the horror of what was happening to me. I put myself in the picture to get away from what was happening in my body. The genius and resourcefulness of this never ceases to strike me. To call it dissociation seems dismissive. It was life-saving, it was escapology, it was a little boy's magic. The final meaning that this image has is the ways in which psy practices at their worst mimic the objectification and anatomical dissection represented here. What is most concerning is that they risk inadvertently mirroring the very fetishisation of parts of my being that must have been part of what allowed that Christian Brother to do what he did to me and my peers. Breaking us down into little parts of symptoms or deficiencies in order to satisfy the needs of a categorical methodology risks missing the totality of our experience and ignoring the fact that as we are being observed and delineated, we are in there, in our bodies, looking out and making meaning of what is happening to us. The lack of imagination that allowed that Christian Brother to do what he did cannot be allowed to foster in the very disciplines that are supposed to help people like me recover from these experiences. We must develop methodologies of enquiry that give victims of abuse their own minds, active minds, meaning making minds and not just ones to be passively studied by outside experts.

This is the point whereby my own critical reflections on the subject of research in this area links to the emergent discipline of Mad Studies. I am not suggesting that the harm caused by the theoretical and intellectual limitations of psy models of human distress are comparable to the harm caused to children by sexual

abuse. In my experience as a psy clinician and service user, mental health professionals mostly are well intentioned but work within quite limiting paradigms, in a context of fear and do not in the main have sufficient self-knowledge to untangle their own process from those of the people they are paid to serve. This in my view is what leads to the majority of the failings, rather than conscious malevolent intention. However, I can appreciate that this is not the case for everyone.

Nonetheless there are processes of dehumanization and categorization that occur in some psy research into victims of abuse that is too close for comfort to the relational characteristics of the abuse itself. The most glaringly obvious one is that our experience of abuse is denied in the first place by both the abuser and then later the mental health system. We are not called survivors of human rights abuses; we are labelled schizophrenics, borderline, manic-depressive and personality disordered. That way we can be safely hidden away in real or virtual psychiatric silos where we will not trouble civil society with the unpleasant reminder that we exist and we know how thinly veiled our illusions of civility can be. As Judith Herman says; these crimes are unspeakable and too often we psy professionals collude to render this so.

Furthermore, in separating out our reaction to the underlying trauma and in labeling it in such a divorced and alienated fashion, there is a risk that we get dissected in an anatomical way similar to this diagram. This means that we suffer a sort of epistemic injustice whereby our experience is no longer our own, but the preserve of others with externally validated expertise. It is for them to know, for us to be told. Now on the one hand, medicine and associated disciplines have been cutting people up into little segments, labeling and dissecting them for centuries. Why would we expect the psy disciplines to be any different? However what needs to be pointed out is that these are not only physical and psychological injuries; they are moral, social and relational injuries too. They pervade every aspect of our being. There is no escape or straightforward recovery from them. In trying to relay the specificity of psychological as opposed to physical trauma I am at a loss to compete with the late psychologist Peter Sedgwick who in his seminal book psycho-politics says (1981); "Trauma and resistance to trauma can in the human case be understood not in the analogy of a physical force striking a more or less brittle object nor on the lines of the invasion of an organism by a hostile bacteria, but only through the transformation of elements in a persons identity and capacity to relate to other persons and social collectives."

In other words mental health problems and the traumas that often underlie them are in essence social and interpersonal problems that infect all aspects of our sense of who we are and how we relate to each other. It is for this reason that alternative paradigms are needed and for this reason why they need to come from within survivor movements.

What this all means from a research vantage point is interestingly open ended in my view. On the one hand the call for epistemic justice in mental health research is clear and for the reasons discussed morally above reproach. However the

means of working towards this are likely to be pluralistic. For this paper, Anastacia and I have presented my data in visual and verbal form to try to grasp the complexity of my experience in the context of what has been described as a 'hermeneutical lacunae' by Mad Studies scholars. In other words the available psy discourses available are inadequate and if anything part of the problem in me trying to relate a complex subjectivity. We have used our respective strengths to try to frame an age old problem of childhood sexual abuse in a novel way to offer a qualitatively distinct sense of what it might be like to be objectified in this way as a young child. In this dynamic Anastacia becomes the artist as researcher, trying to piece together and disseminate my fragmented subjectivity in a way that can be understood, thought about and given an epistemologically congruent name. She has helped me make the unspeakable nameable, or in this case visible. These creative collaborations with all their attendant complexities might offer one way forward.

One final point relates to not the producers of these new forms of Mad Studies but rather some of the intended recipients. Fricker refers to the sensitivity of hearers being necessary for epistemic justice to be reached. I would concur that we are right to ask a lot of the psy professions in order to promote restorative practices. However, all of us can only hear what we can hear. The late Senegalese novelist and filmmaker Ousmane Sembene said "We do not tell stories for revenge, but to find our place in the world." The challenge for me in writing about mine and my fellow survivor's experiences of institutional sexual abuse in childhood is how can I develop the critical reflexivity to ensure my intentions are to educate and liberate and not to seek revenge against misguided 'experts'. For it is then this more ethical intention, to do differently to what often my body and mind tell me to do, that I can transcend the moral quagmire of sexual abuse, the clutches of that sick man who did those terrible things to me and become a more fully moral person with something better to offer my fellow citizens.