

Exposure as Disclosure: Anonymity Versus Safe Space for Adult Survivors of Childhood Sexual Abuse

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ABSTRACT

Living in silence is a significant characteristic of adult survivors of childhood sexual abuse that prevents them from seeking help. Lack of disclosure has been associated with long-term adverse effects. Yet, less than 50% of survivors ever disclose the abuse. This exploratory paper examines the willingness of adult survivors to participate in online discourse about childhood sexual abuse. The metrics of a social media support page, Talking Trees, were studied to determine adult survivors' willingness to seek help without anonymity. The "Talking Trees" Facebook page's objectives were to build community, remove isolation, and provide information to empower survivors to live openly. In addition to collecting engagement data on individual posts, page insights were collected. During a 24-month period, 889 "Talking Trees" posts came across Facebook members' pages 2,418,563 times. According to these descriptive statistics, the lack of anonymity in this support group did not deter engagement for 7,109 followers. Nearly 60% of the posts reached more than 1,000 people. The Facebook community engaged with Talking Trees' posts 146,126 times over the two years. The conclusion is that safely engaging adult survivors of childhood sexual abuse may override the need for anonymity.

Keywords: Adult survivors of childhood sexual abuse, Disclosure, Online help-seeking, Social media help-seeking, collective identity of adult survivors of childhood trauma

Introduction

There is no denying the epic number of 60 million adult survivors of childhood sexual abuse (CSA) (Kloppen et al., 2016; Stoltenborgh et al., 2011; Sumner et al., 2016). Yet, survivors of CSA continue to conceal the abuse and live in isolation (Mansfield et al., 2017; Singh et al., 2014). Most survivors do not disclose their abuse before age 18, and nearly half of survivors never tell anyone (Hébert et al., 2009). Andalibi et al. (2018) researched the online disclosure of and responses to sexual abuse in the online community Reddit, and based on 2,139 identified and 234 anonymous accounts, they concluded that anonymity was essential in navigating online support. Investigations of help-seeking in other areas of mental health, such as suicide prevention, yielded similar conclusions about the

importance of anonymity (DeAndrea & Anthony, 2013; Notredame et al., 2018).

While no two survivors of CSA experience the exact same harm, there are patterns of victimization that influence the likelihood of disclosure. Numerous factors contribute to survivors' decisions to remain silent. 1) The age of onset affects memory. 2) The relationship to the violator impacts the likelihood of disclosure and being believed. 3) The level of physical contact provokes shame that elicits silence. 4) The genders of the violator and victim affect the willingness to identify as a survivor (Collin-Vézina et al., 2009; Jonzon & Lindblad, 2004; Marudan Sivagurunathana et al., 2019; Ogle et al., 2013). Research has identified psychological and physical disturbances among CSA survivors who live in silence, including PTSD

symptoms and autoimmune compromises (Ehring et al., 2014). Adult survivors who do not disclose during childhood typically have poorer health outcomes than those who do (Somers & Szwarcberg, 2001). Quality of life indicators are also compromised, including educational attainment (Hardner et al., 2018) and parenting success (Wright et al., 2012).

However, caution must prevail because in a study by Swingle et al. (2016), disclosure during childhood did not result in better outcomes for all survivors. Instead, the long-term benefits of disclosure were mitigated by the outcome of the disclosure. In cases where childhood disclosure led to the abuse stopping, long-term adverse effects were minimized. However, when the abuse continued after disclosure in childhood, these adults experienced more severe symptoms than adults who did not disclose in childhood. Unfortunately, of the adult survivors of CSA who disclosed as children, only 10% experienced an end to the abuse (Swingle et al., 2016). CSA survivors who disclose as adults may also experience more psychological distress than benefits (Farber et al., 2015). They share persistent fears of consequences and negative responses. Family rejection, strained personal relationships, and further shaming and blaming by the community have been documented (Andalibi et al., 2018; Farber et al., 2014; Fox, 2018; Tener & Murphy, 2015).

Jonzon and Lindblad (2004) reported that less than a third of survivors disclosed their abuse during childhood and that, on average, disclosure occurred 21 years after the abuse stopped. While disclosure takes up a significant portion of the literature on adult survivors of CSA, it has a notably limited impact on producing positive outcomes for survivors (Ahrens et al., 2012) and can put survivors at risk of emotional setbacks. Collin-Vézina et al. (2015) mapped several barriers to disclosure and categorized them as internal, relational, and societal. Internal barriers focused on self-blaming, relational barriers included family power dynamics and dysfunctional social networks, and societal barriers included inadequate services and cultural ignorance (Collin-Vézina et al., 2015). These barriers exist for both male and female survivors (Marudan Sivagurunathana et al., 2019; Romanoa et al., 2019). Given the barriers to disclosure, survivors may need support rather than anonymity (Lorenz et al., 2018; Parry & Simpson, 2016). Anonymity may be overvalued in help-seeking, and social support may be undervalued. This paper suggests that offering adult survivors of CSA a safe way to identify as survivors may be a gateway to disclosure and help-seeking (Parry & Simpson, 2016).

Talking Trees Platform

The “Talking Trees” Facebook group supported adults who wanted to address issues of CSA. This author created the page in 2010 as part of their nonprofit empowerment organization for adult survivors of CSA. Every post on Talking Trees’ page was written to and for adult survivors of CSA. All dialogue centered around survivors’ experiences. Support spaces outside of Talking Trees typically focused on adult sexual assault victims, child victims, or adult survivors of various adverse childhood experiences while scarcely addressing adult survivors of CSA. Sexual assault hotlines seemed untrained to address flashbacks and triggers of adult survivors of CSA who were not seeking protection or legal support.

The literature that influenced Talking Trees’ posts extended beyond CSA trauma and symptoms. Information disseminated on the page focused on wholistic healing, including human development, body image, sexuality, intersectionality, mindfulness, and well-being. A wholistic approach was used to support survivors, including the six elements of trauma-informed service identified by Bein (2011): safety, trust, choice, collaboration, empowerment, and cultural relevance. The page administrator wrote daily posts meant to strengthen survivors’ resilience. The posts validated emotional responses, offered information about healthy development, and encouraged risk-taking for healing. Validation posts assured survivors that their challenges and obstacles on the healing path were common and familiar. Information posts based on research focused on helping survivors understand the patterns of victimization and healing. Risk-taking posts drew attention to the areas of healing that survivors may have been less inclined to work on.

Since most survivors live in silence, they have few options for seeking help. The goal was to create a space to disseminate information that survivors could access without barriers. Most advocacy and support platforms require disclosure. By contrast, the Talking Trees platform was open access. Instead of disclosure, Talking Trees’ mission was to support survivors in “living openly,” a term and healing invitation for survivors of CSA coined by this author. Because all content was available to the public, including participants’ comments, any survivor who participated on the platform was considered to be living openly. No specific degree of openness was required or encouraged for participation. Survivors were neither encouraged nor expected to disclose details about their abuse or demonstrate that they were living openly in any way. While the page was closely monitored several times a day for inappropriate or insensitive comments,

no expectations about conduct were ever posted. Open access, the distinctive characteristic of the page, allowed survivors to find support.

The Talking Trees page invited survivors to engage in the healing journey alongside others. Living openly attempts to neutralize the effects of victimization through collective consciousness. Engagement with the page could be as passive as occasionally reading posts or as active as commenting daily. Participants were responsible for maintaining personal boundaries of privacy. They could take months or years to reveal their presence to others while still receiving support because no restrictions were placed on who could view posts or comments. Page followers found validation in their identity as survivors and used the exposure as disclosure. Passive disclosure by association offered a gateway to formal mental health care (Notredame et al., 2018).

Talking Trees offered a space to explore healing aspects without being required to identify a specific problem. Some participants hesitated to consider themselves survivors, uncertain if their childhood experience qualified as abuse. Where the literature frequently associates the word “trauma” with survivors, not all survivors identify their experience as traumatic (Anguelova, 2018). Talking Trees’ served survivors without needing them to identify with trauma. The platform was not associated with any clinical services or referrals. Survivors who wanted to support other survivors or were already seeking professional services were welcome. Others with no further access to service and survivors with multiple adverse experiences were also welcome to receive support.

While anyone could comment on posts, only the administrator could create posts. Irrelevant or insensitive comments were deleted to maintain safety and trust, including permanently banning authors of egregious comments. Members occasionally sent direct messages from the platform to the administrator, and those messages remained strictly confidential. Any responses from the administrator were offered as an informed peer and advocate. Scheduled and long-term help-seeking interactions were denied, and members were reminded that the platform did not serve any clinical purpose. The administrator had no control over members’ ability to message each other. However, if a member reported a user’s abuse of privilege through messaging, the reported participant was banned.

Descriptive data was exported from Facebook to assess the efficacy of Talking Trees in engaging survivors. Data

was drawn from posts between December 11, 2016, and December 12, 2018. Metrics included information about 889 original posts by the administrator. More than 85% of posts (759) were paragraphs of 25 – 250 words. The remaining posts included 13 announcements, 69 links, 24 images, and 24 videos as supplemental material to the daily posts.

Insights

Metrics provided by Facebook included “post reach” and “post engagement.” Post reach reported how many times a post came across a Facebook user’s page. Several factors contributed to posts’ reach, but the main factor was user engagement. The more users clicked “Like” or “Share,” or commented on a post, the more Facebook would show that post to other users. Page administrators also had the option to pay for Facebook to “boost” a post’s reach. Page metrics distinguished between the reach of boosted and unpaid posts. Facebook’s metrics also identified how often people gave negative feedback to posts. Negative feedback indicated that a Facebook member either reported a post as a scam, clicked to unlike the page, hid a single post, or hid all posts from the page.

Demographics

Facebook metrics reported that the 7,109 members resided in 45 countries, with 82.36% of members represented by only five countries. The United States represented 59.69% (4,244) of members. Four additional countries accounted for 22.67% of the members: the United Kingdom (530), Australia (408), India (351), and Canada (323). The remaining 17.67% were spread among an additional 40 countries. Consistent with the literature on CSA, 82% of members identified as female, and 15% identified as male. Forty-seven percent of members were over age 44. Fifty-two percent were between the ages of 18 and 44. Facebook allowed people to rate their preference for a page on a scale of 1 to 5. At the time of this writing, the page had been rated by 68 members with an average rating of 4.9.

Alignment

The content of the 100 most engaged posts was aggregated into a single file for study. All posts were ranked from the most engagement to the minor engagement. To substantiate that the Talking Trees content aligned with the literature on adult survivors of CSA, 109 recurring

words in the literature were identified. Each of the 109 words was searched for among the written posts using the Microsoft Word "Search in Document" tool. All forms of the word counted as the same word. Each word's appearance added to its frequency, even if it appeared in the same post more than once. All 109 identified words from the literature on adult survivors of CSA were found among the 100 top engaged posts.

Reach

Talking Trees posts came across Facebook members' feeds 2,418,563 times during the 24-months. Nearly 60% (519) of the posts reached more than 1,000 people; 134 posts reached more than 2000 people; 55 posts reached more than 3,000 people; and 37 posts reached 4,000 people. Seven posts reached 5,000-6,000 people; four posts reached 6,000-7,000 people; five posts reached 7,000-8,000 people. Thirteen posts, all boosted for \$5.00, reached over 8,000 people. The greatest reach for a \$5.00 boosted post was 9,390. It read as follows:

Too many survivors have lived their entire lives without anyone ever saying the kindest words a listener can offer, "I'm sorry." Instead, we are often peppered with curious questions about who, when and how. We are sometimes challenged in our perception of intent of the violator. We are advised on how to heal. Usually, none of these responses are helpful. So, for all the tears you never cried, I am sorry. For all the silence that you have endured, I am sorry. For the world that we live in that ignores your signs of pain and are intolerant of your occasional wince that sneaks out because you can no longer hold it, I'm sorry. I'm sorry that you were molested, assaulted, raped, coerced by a relative or stranger or date or authority figure. Whatever pain brought you to this page today, yesterday or seven years ago, I am sorry. And, I am so glad that you are here. (September 18, 2017)

The greatest reach for a post without being boosted was 7,526. It read as follows:

The experience of CSA leaves some survivors with a high tolerance for pain. Dysfunctional environments require endurance and thick skin. Child survivors sometimes have to commit to sticking things out in order to survive. This pattern of tolerance follows you into adulthood. Instead of using pain as a signal to evaluate and change direction, you may use pain as a signal to try harder. Try harder to please someone. Try harder to control your children. Try harder to be a good friend. Try harder to be successful at a job that you hate. You remain in survival mode that you picked up as a child. Your high tolerance for pain keeps you committed to dysfunctional experiences and relationships

that recycle pain from the past. Sometimes, the only way out of this cycle is time in isolation to learn what peace feels like. Sometimes you have to be willing to let go of everything in order to learn how to hold onto anything. (July 14, 2017)

The lowest reach for a post was 354 people. It read as follows:

Trust is internal, not external. When we keep our hearts open, we will hear the heart's whispers that tell us "do this." Fear closes the heart to avoid falling. Love, self-love, assures the heart that it has all it needs to survive. So, the only requirement to live our destiny is to go within. The work is simple; be the best that we can be today. If there is more for us to do, destiny will find us. (August 8, 2017)

Engagement

Members engaged 146,126 times with Talking Trees posts over the 24 months. To engage with a post, Facebook members had to click anywhere in the post for more information, select an emoji reaction, make a comment, or share the post. A member's response was counted as one engagement per post, no matter how many times an individual responded to the same post. The highest engagement on a single post was 3,821 clicks, comments, reactions, and shares. The least engagement on a written post was 32 clicks, comments, reactions, and shares. The average engagement for the 889 posts was 164 clicks, comments, reactions, and shares.

More than 100 engagements were reported for 548 of the 889 posts. Out of the 2,418,563 times a Talking Trees post came across a Facebook member's feed, 869 (less than half of one percent) engagements were negative feedback. The greatest negative feedback for a post was 12. Half of the posts received zero negative feedback, 440 of the 889 posts. Approximately 75% (667) of posts received one or no negative feedback.

Conclusions

Social media has revolutionized disclosures of sexual abuse in a way that challenges previous assumptions about the value of anonymity in help-seeking. With the top three social media platforms (Facebook, Twitter, and Instagram) each drawing over one billion monthly users, social media presents an unprecedented opportunity for help-seeking (Andalibi et al., 2018). The robust engagement of adult CSA survivors requires reconsidering the role of anonymity in disclosure and help-seeking.

Anonymity may be a safety net when there is a high potential for insensitivity (Leonard et al., 2015), but anonymity may also be a barrier to feeling accepted. Analysis of engagement offers a new understanding of survivors as support-seekers. Consistency of engagement and low attrition suggests that anonymity may be less important in help-seeking than previous research suggests. Moreover, disclosure does not have to be a telling (Moors & Webber, 2012). Survivors may be more likely to risk exposure than disclosure. Association with survivor activities may be the only disclosure some survivors are willing to experience. Future research should look at the benefits of exposure, or disclosure by association, compared to disclosing details of the abuse.

Researchers must consider how adult survivors of CSA choose to approach the healing journey, and the mental health community should offer options not bound by anonymity. Invitations to adult survivors of CSA to live openly have been marginal at best. The value of a collective identity is its potential to manifest collective change, although it does not negate individual needs.

The metrics for engagement on Talking Trees were limited, as posts shared outside the Talking Trees page could not be tracked. Each time a post was shared from the Talking Trees page, its metrics were available to the administrator. However, no tracking was available when someone outside the page saw and responded to the post because it was shared. Any subsequent metrics for the post were not associated with the Talking Trees page. Metrics were also unavailable for posts copied from the page and posted outside the page.

This descriptive inquiry was limited to reporting engagement and, therefore, cannot be used as evidence of any negative or positive outcome related to the engagement. No content of the participants' comments was considered. Moreover, the nature of open access meant that the exact number of participants who were survivors was unknown. However, given the content of the posts, the reasonable explanation for the consistent growth of the audience and engagement is that it reached its intended audience.

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Competing interests

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References

- Ahrens, C. E., Stansell, J., & Jennings, A. (2010). To tell or not to tell: The impact of disclosure on sexual assault survivors' recovery. *Violence & Victims*, 25(5), 631–648. <https://doi.org/10.1891/0886-6708.25.5.631>
- Andalibi, N., Haimson, O. L., De Choudhury, M., & Forte, A. (2018). Social support, reciprocity, and anonymity in responses to sexual abuse disclosures on social media. *ACM Transactions on Computer-Human Interaction*, 25(5), 1–35. <https://doi.org/10.1145/3234942>
- Angelova, L. (2018). *Working with Adult Survivors of Childhood Sexual Abuse*. Routledge.
- Bein, K. (2011). *Action, engagement, remembering: Services for adult survivors of child sexual abuse*. National Sexual Assault Coalition. https://www.nsvrc.org/sites/default/files/Publications_RSP_Action-engagement-remembering-services-for-adult-survivors-child-sexual-abuse.pdf
- DeAndrea, D. C., & Anthony, J. C. (2013). Online peer support for mental health problems in the United States: 2004–2010. *Psychological Medicine*, 43(11), 2277–2288. <https://doi.org/10.1017/s0033291713000172>
- Collin-Vézina, D., De La Sablonnière-Griffin, M., Palmer, A. M., & Milne, L. (2015). A preliminary mapping of individual, relational, and social factors that impede disclosure of childhood sexual abuse. *Child Abuse & Neglect*, 43, 123–134. <https://doi.org/10.1016/j.chiabu.2015.03.010>
- Ehring, T., Welboren, R., Morina, N., Wicherts, J.M., Freitag, J., & Emmelkamp, P. M. G. (2014). Meta-analysis of psychological treatments for posttraumatic stress disorder in adult survivors of childhood abuse. *Clinical Psychology Review*, 34(8), 645-657. <https://doi.org/10.1016/j.cpr.2014.10.004>
- Farber, B. A., Feldman, S., & Wright, A. (2013). Client disclosure and therapist response in psychotherapy with women with a history of childhood sexual abuse. *Psychotherapy Research*, 24(3), 316-326. <https://doi.org/10.1080/10503307.2013.817695>
- Fox, L. (2018, July-August). It's Not Your Fault: 'It broke me down'. *This Magazine*, 52(1), 18.
- Hardner, K. L., Wolf, M., & Rinfrette, E. S. (2018). Examining the relationship between higher educational attainment, trauma symptoms, and internalizing behaviors in child sexual abuse survivors. *Child Abuse & Neglect*, 86, 375-383. <https://doi.org/10.1016/j.chiabu.2017.10.007>

- Hébert, M., Tourigny, M., Cyr, M., McDuff, P., & Joly, J. (2009). Prevalence of childhood sexual abuse and timing of disclosure in a representative sample of adults from Quebec. *Canadian Journal of Psychiatry, 54*(9), 631–636. <https://doi.org/10.1177/070674370905400908>
- Jonzon, E. M. C., & Lindblad, F. (2004). Disclosure, reactions, and social support: Findings from a sample of adult victims of child sexual abuse. *Child Maltreatment, 9*(2), 190–200. <https://doi.org/10.1177/1077559504264263>
- Kloppen, K., Haugland, S., Svedin, C. G., Mæhle, M., & Breivik, K. (2016). Prevalence of child sexual abuse in the Nordic countries: A literature review. *Journal of Child Sexual Abuse, 25*(1), 37–55. <https://doi.org/10.1080/10538712.2015.1108944>
- Leonard, K., Quesenberry, A., & Lindsay, J. M. (2015). Moderated social media support groups for patients. *Journal of Consumer Health on the Internet, 19*(3-4), 219–232. <https://doi.org/10.1080/15398285.2015.1089397>
- Lorenz, K., Ullman, S. E., Kirkner, A., Mandala, R., Vasquez, A., & Sigurvinsdottir, R. (2017). Social Reactions to Sexual Assault Disclosure: A Qualitative Study of Informal Support Dyads. *Violence Against Women, 24*(12), 1497–1520. <https://doi.org/10.1177/1077801217732428>
- Mansfield, Y., Meehan, T., Forward, R., & Richardson-Clark, F. (2016). Asking the Question: Childhood Sexual Abuse in Adults with Mental Illness. *Australian Social Work, 70*(3), 363–371. <https://doi.org/10.1080/0312407x.2016.1213873>
- Moors, R., & Webber, R. (2012). The dance of disclosure: Online self-disclosure of sexual assault. *Qualitative Social Work, 12*(6), 799–815. <https://doi.org/10.1177/1473325012464383>
- Notredame, C. E., Grandgenèvre, P., Pauwels, N., Morgiève, M., Wathélet, M., Vaiva, G., & Sèguin, M. (2018). Leveraging the web and social media to promote access to care among suicidal individuals. *Frontier in Psychology, 9*. <https://doi.org/10.3389/fpsyg.2018.01338>
- Ogle, C. M., Block, S. D., Harris, L. S., Goodman, G. S., Pineda, A. S., Timmer, S. G., Urquiza, A. J., & Saywitz, K.J. (2013). Autobiographical memory specificity in child sexual abuse victims. *Development and Psychopathology, 25*(2), 321–332. <https://doi.org/10.1017/s0954579412001083>
- Parry, S., & Simpson, J. (2016). How Do Adult Survivors of Childhood Sexual Abuse Experience Formally Delivered Talking Therapy? A Systemic Review. *Journal of Child Sexual Abuse, 25*(7), 793–812. <https://doi.org/10.1080/10538712.2016.1208704>
- Romanoa, E., Moormana, J., Ressel, M., & Lyons, J. (2019). Men with childhood sexual abuse histories: Disclosure experiences and links with mental health. *Child Abuse & Neglect, 89*, 212–224. <https://doi.org/10.1016/j.chiabu.2018.12.010>
- Singh, M. M., Parsekar, S. S., & Nair, S. (2014). An epidemiological overview of child sexual abuse. *Journal of Family Medicine and Primary Care, 3*(4), 430–435. <https://doi.org/10.4103/2249-4863.148139>
- Sivagurunathana, M., Orchard, T., MacDermid, J. C., & Evans, M. (2019). Barriers and facilitators affecting self-disclosure among male survivors of child sexual abuse: The service providers' perspective. *Child Abuse & Neglect, 88*, 455–465. <https://doi.org/10.1016/j.chiabu.2018.08.015>
- Somer, E., & Szwarcberg, S. (2001). Variables in delayed disclosure of childhood sexual abuse. *American Journal of Orthopsychiatry, 71*(3), 332–341. <https://doi.org/10.1037/0002-9432.71.3.332>
- Stoltenborgh, M., Van IJzendoorn, M. H., Euser, E. M., & Bakermans-Kranenburg, M. J. (2011). A Global Perspective on Child Sexual Abuse: Meta-Analysis of Prevalence Around the World. *Child Maltreatment, 16*(2), 79–101. <https://doi.org/10.1177/1077559511403920>
- Sumner, S. A., Mercy, J., Buluma, R., Mwangi, M., Marcelin, L. H., Kheam, T., Lea, V., Brookmeyer, K. A., Kress, H., & Hillis, S. D. (2016). Childhood sexual violence against boys: A study in 3 countries. *Pediatrics, 137*(5). <https://doi.org/10.1542/peds.2015-3386>
- Swingle, J. M., Tursich, M., Cleveland, J. M., Gold, S. N., Tolliver, S. F., Michaels, L., Kupperman-Caron, L. N., Garcia-Larrieu, M., & Sciarrino, N. (2016). Childhood disclosure of sexual abuse: Necessary but not necessarily sufficient. *Child Abuse & Neglect, 62*, 10–18. <https://doi.org/10.1016/j.chiabu.2016.10.009>
- Tener, D., & Murphy, S. B. (2014). Adult Disclosure of Child Sexual Abuse: A Literature Review. *Trauma, Violence, & Abuse, 16*(4), 391–400. <https://doi.org/10.1177/1524838014537906>
- Wright, M. O., Fopma-Loy, J., & Oberle, K. (2012). In their own words: The experience of mothering as a survivor of childhood sexual abuse. *Development and Psychopathology, 24*(2), 537–552. <https://doi.org/10.1017/S0954579412000144>

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