

**This is a draft of the published article:**

**Wong, P. T. P., & McDonald, M. (2002). Tragic optimism and personal meaning in counselling victims of abuse. *Pastoral Sciences*, 20(2), 231-249.**

Tragic optimism and personal meaning  
in counselling victims of abuse

Paul T. P. Wong, PhD and Marvin J. McDonald, PhD  
Graduate Program in Counselling Psychology  
Trinity Western University

Key words: Tragic optimism, trauma, abuse, violence, hope, meaning, faith, spirituality

Direct correspondence to:

Dr. Paul T. P. Wong

Graduate Program in Counselling Psychology

Trinity Western University

7600 Glover Road

Langley, BC V2Y 1Y1

Email: [ptpwong@shaw.ca](mailto:ptpwong@shaw.ca)

Fax: 604-513-2010

Phone: 604-513-2056 (Office)

604-552-0345 (Home)



Tragic optimism and personal meaning  
in counselling victims of abuse.

Abstract

This article examines the scope of abuse in religious settings and Christian families and reviews its impact. It also clarifies the concept of spiritual abuse and discusses its implications for the victims' beliefs and well-being. After reviewing major models in treating victims of abuse and post-traumatic stress disorder, the paper introduces Wong's existential model of tragic optimism and meaning-centred counselling. It is proposed that a focus on future-orientation and positive personal meaning can help victims to move beyond mere survival to a new level of resilience and vitality.

Paul T. P. Wong, PhD and Marvin McDonald, PhD  
Graduate Program in Counselling Psychology  
Trinity Western University

The Christian faith can be a double-edged sword in dealing with abuse and violence. On the one hand, faith gives rise to hope and meaning in overcoming personal tragedies. On the other hand, faith can inflict spiritual suffering in addition to physical and psychological injuries, when one's faith in God is shattered by traumatic events. Such a double jeopardy is clearly illustrated in the Book of Job. A major part of Job's painful struggle is spiritual in nature: How can a loving and just God deal him so many devastating blows? His inner agony prompts him to search for new grounds of hope and meaning in the face of tragic reality.

The deadly terrorist attacks against the World Trade Center Towers on September 11, 2001 have brought to the fore once again the duality of faith. On the one hand, many people have returned to their faith, looking for comfort, security and hope from God. On the other hand, many are struggling with the same age-old questions that once tormented Job. It is likely that the stronger one's initial faith in God, the more painful the inner struggle once faith is shattered by traumatic events.

Victims of violence and abuse often go through the same kind of agonizing inner struggles as trauma victims. How can pastoral counsellors minister effectively to individuals who are coping not only with the horrific losses, but also with the painful shattering of their presumptive world?

This article provides a framework of tragic optimism for counselling victims of trauma and abuse. More specifically, it will address the complex relationship between spirituality and abuse in three ways. Firstly, it defines the scope and nature of spiritual abuse as any kind of abuse perpetrated in a religious setting, in a Christian home or by a spiritual leader. Spiritual abuse is especially destructive to the extent that it undermines faith, hope and meaning – the “blood” that sustains spiritual life.

Secondly, it discusses the negative impact and spiritual implications of abuse, violence and trauma, especially with respect to victims' concept of God. Thirdly, after reviewing major models of treating victims of abuse and post-traumatic stress disorder, it will introduce Wong's existential model of tragic optimism and explain how the positive triad of spirituality (faith, hope and meaning) can play a key role in counselling victims of trauma and abuse.

#### The scope of abuse in religious settings and Christian families

Abuse can happen to anyone, but it is most likely to happen to those who are least able to defend themselves. Children, being vulnerable and helpless, are likely to suffer at the hands of adults in general and caregivers in particular. Child maltreatment includes physical and sexual abuse, emotional abuse, neglect, and neglect of medical care (**Hi Marvin, need a reference here.**)

In addition to child abuse, domestic violence includes spousal abuse, elder abuse, and a prevailing family atmosphere of conflict and anger (**reference for this definition here**) When abuse and violence occur in religious settings and Christian families, the victims are wounded spiritually in addition to psychological and physical injuries (**reference here**) Estimating the scope and nature of violence and abuse perpetuated by Christian leaders has been hampered by a conspiracy of silence. However, some relevant statistics may shed some light on this issue.

The U.S. National Centre on Child Abuse and Neglect Information has completed several national incidence studies, estimating the overall scope of child maltreatment and the relationship between maltreatment and various demographic variables (Sedlak & Broadhurst, 1996). The overall U.S. rate for maltreatment of children in 1993 was about 23 per 1,000 children under the age 18. The proportions of children affected by different forms of maltreatment varied widely (e.g., neglect – 50%; physical abuse – 25%; sexual abuse – 14%; emotional abuse – 5%). Similarly, accounts of institutionally-based abuse and neglect of children in Canada have emerged in the last decade (Law Commission of Canada, 2000). For example, reports on sexual abuse in denomination-sponsored residential schools for aboriginal children have been unfolding in tragically dramatic fashion.

The growing awareness of abuse has spawned a wide range of groups offering resources for combating abuse. The Centre for the Prevention of Sexual and Domestic Violence in Seattle (<http://www.cpsdv.org/index.html>), the Associates in Education and Prevention in Pastoral Practice (<http://www.aeppp.org/>), and the Interfaith Sexual Trauma Institute (<http://www.csbsju.edu/isti/>) all have underscored problems of child maltreatment and family violence in faith communities.

Although accurate statistical estimates of prevalence in religious communities are difficult to obtain, clinical evidence, media reports, and professional observers consistently agree that these problems are widespread. For example, Bottoms, Shaver, Goodman, & Qin (1995) surveyed mental health professionals regarding religion-based abuse in the areas of (a) physical abuse (e.g., in attempts to exorcise evil influences), (b) medical neglect (in the service of faith healing), and (c) sexual abuse by those in trusted positions as religious leaders. Such retrospective reports by adults in therapy clearly provide some evidence of the scope and impact of religion-based abuse. Unfortunately, we cannot know for sure to what extent these results reflect religious justifications as convenient rationalizations, and to what extent they reflect actual abuse based on religious ideology. As a result, Fortune and Hertz (1991) have recommended ways to address misinterpretations of Jewish and Christian traditions in the context of family violence. **(Hi Marvin, the editor wants to know whether we could provide incident rates for the materials in this paragraph. If we don't have it, just let him know)**

Over the last 15 years, the widespread nature of abuse by clergy has been substantiated both by clinical evidence and by surveys of clergy themselves. Although clergy acknowledge sexual misconduct in rates from 10% to 39%, the percentage of clergy indicating they have encountered a parishioner who was abused by other clergy is as high as 69% (Grenz & Bell, 1995; Kaiser, 1996). The growing awareness of abuse by clergy has led to efforts to prevent clergy abuse (Friberg & Laaser, 1998).

Coercive religious groups (such as cults) appear to be a major source of spiritual abuse (e.g., Langone, 1993). There is growing evidence that fundamentalist practices and religious rigidity have a negative impact on believers' mental health (Enroth, 1992; Hartz & Everett, 1989; Moyers, 1994; Stifoss-Hanssen, 1994). The abuse of power by religious

leaders has resulted in both wounded workers and believers in Christian organizations (cf. Farnsworth, 1998; Shupe, 1998).

In faith communities, issues related to abuse and violence take on a new dimension, which may be broadly referred to as spiritual abuse. Broadly speaking, spiritual abuse includes both the negative spiritual impact of sexual and physical abuse, as well as psychological manipulation and exploitation of believers' faith and trust by religious leaders (**Reference is needed here, unless this definition comes from us.**)

Concerns regarding spiritual abuse typically include (a) abuse of children and spouses by Christians; (b) abuse of religious adherents by leaders through rigid belief systems, authoritarian leadership styles, or destructive spiritual practices; (c) psychological manipulation and economic exploitation of vulnerable members of faith communities (e.g., the elderly) by religious leaders such as clergy and televangelists; (d) manipulation and exploitation of members by cult leaders through various forms of coercion and separation from family and friends; and (e) abuse of clergy and their families, including emotional and economic exploitation, by members in their faith community (**some references are needed** )

To clarify aspects of spiritual abuse frequently omitted in professional discussions, we will define spiritual abuse as any form of abuse initiated by a religious leader, that leads to (a) existential crises regarding life's purpose, (b) distortion of personal meaning and values systems, (c) betrayal of trust, (d) corrosion of one's respect for self or others, or (e) the shattering of beliefs and assumptions regarding God, the church, and people.

Spiritual abuse often results in disillusionment, despair, alienation, inhibited spiritual growth, or relationship disturbance, in addition to other abuse-related psychological and physical symptoms. That is why counsellors and researchers need to pay more attention to victimization of believers, especially when it is perpetrated by Christian leaders and Christian parents.

#### Impact of abuse and violence

The impact of abuse and trauma can be both direct and indirect. Direct impact stems from the experience of trauma itself, and it encompasses physical, psychological and spiritual injuries and the shattering of one's assumptive world. Indirect impact is

mediated by secondary effects such as the loss of community support, loss of caring relationships and difficulties in personal relationships.

The long-term adverse effects of sexual abuse have been well documented (e.g., Briere & Runtz, 1988; Browne & Finkelhor, 1986; Courtois, 1988; Vredevelt & Rodriguez, 1987; Wyatt & Powell, 1988). These consequences include psychological problems, such as anxiety, depression, substance abuse, eating disorders, sexual promiscuity, low self-esteem, and dissociative disorders. Various sorts of relational difficulties include isolation, distrust of people, and fear of intimacy. Physical complaints include chronic headaches, muscle tension, high blood pressure, somatization, gastrointestinal and respiratory problems.

According to Finkelhor (1988) the experience of sexual abuse is a traumagenic dynamic “that alters a child’s cognitive or emotional orientation to the world and causes trauma by distorting child’s self concept, world-view, or affective capacities” (p.68). Finkelhor’s Traumagenic Dynamics Model recognizes four traumagenic dynamics: (a) traumatic sexualization, (b) betrayal, (c) stigmatization, and (d) powerlessness. Feldmeth and Finley (1990) propose that Finkelhor’s model can be readily applied to understand the negative impact of abuse on the victim’s concept of God. Traumatic sexualization may distort the victim’s belief that God has created her to be sexually exploited by others. The dynamic of betrayal may result in the distorted belief that God had left her and betrayed her trust. The dynamics of stigmatization may involve the belief that she was to blame and God allowed abuse to happen to shame her and punish her “badness.” The dynamic of powerlessness may result in the distorted view that God is powerless to protect her.

When God the Parent is identified with the abuser, it is inevitable that the victim’s concept of God is distorted. Feldmeth and Finley (1990) raise these pointed questions: “How can a child feel cherished by a Parent God when she was molested – particularly if the perpetrator was her father or mother?” (p. 80). “How can she have confidence in an all-powerful God, who did not rescue her?” (p. 88).

The spiritual impact of abuse is under-researched and less understood. However, there is increasing evidence regarding its negative impact on one’s concept of God. Kan, Cheston, and Greer (1993) found that female victims of sexual abuse by a father-figure



experienced more anger towards God, and used more negative adjectives to describe God, as compared to women who have not been abused. Imbens and Jonker (1992) found that in church settings, incest victims who had been taught to be submissive to men might lack the power to resist incestuous advances and also felt that God was punishing them for being “bad”. Hall (1995) found that sexual abuse victims from churches and Christian counselling agencies had more difficulty trusting God for their future and felt less accepted by God as compared to women who had not been abused.

More recently, Heal (1998) also reported that Christian women who had experienced sexual abuse had a more negative concept of God than women who had not experience sexual abuse. More specifically, abuse victims were more likely to believe that God is distant, not interested in their personal lives, and powerless to protect and interact with individuals. They also viewed God has being harsh in judging and punishing humanity.

Violence and abuse often undermine victims’ sense of self worth. In her existential quest for an explanation, she may attribute the abuse to God’s punishment of her sin (Heggen, 1990; Imbens & Jonker, 1992; Vredevelt & Rodriguez, 1987). She may also blame God for the abuse and lose confidence in God’s ability to help her (Allender, 1991). Consequently her relationship with God suffers ( Feldmeth & Finley, 1990; Heggen, 1993).

Francis and Turner (1995) have argued that the close connection between sexuality and spirituality may imply that spiritual consequences of abuse are easily foreseeable. When coupled with the tendency in some religious communities to ignore sex, the negative consequences are magnified.

A key strength of religious groups as caring communities is often compromised or even inverted by the consequences of abuse by a religious leader. This is an indirect impact of abuse. Consequently, abuse within religious contexts and especially by religious leaders carries with it multiple shocks: the immediate experiential trauma, the spiritual damage, and the collapse of intimacy and social support (Francis & Turner, 1995; cf. Cooper-White, 1991). The cumulative impact can undermine one’s capacity to experience God, basic trust in others, sense of self-worth, or willingness to risk close relationships.

### Major treatment models

There is a growing acknowledgement of the relevance of spiritual issues in counselling and psychotherapy (Miller, 1999; Richards & Bergin, 2000). The faith factor becomes critical in dealing with spiritual abuse.

This article will focus on the role of tragic optimism, personal meaning and faith in the process of healing. Pastors or pastoral counsellors may not feel well equipped to provide full-fledged therapy for abuse victims who suffer from post-traumatic-stress-disorder (PTSD). However, they can be of enormous help in restoring the victims' hope, meaning and faith, especially in dealing with spiritual facets of abuse (Capps, 1995).

Herman (1992)'s stage model. Her three stages consist of: (a) Establishing safety, (b) Remembrance and mourning, and (c) Reconnection. This model has become an important standard for treating PTSD.

The first stage is intended to restore some measures of personal safety and security before serious therapeutic work can take place. The remembrance and mourning stage allows the victims to confront and accept the reality of their traumatic loss and abuse. During the reconnection stage, the victims need to re-integrate their negative experience with their present life situation and future plan. During the last reconnection stage, a sense of tragic optimism is needed because their hope has to be born from a painful past and a difficult present situation. They need to discover a new purpose for their lives. Furthermore, they need to make sense of their traumatic experience in order to reconnect it with their positive life experiences and positive expectations. Thus, hope and meaning play a key role in the process of recovery.

Horowitz's (2001) stage model of reschematization. According to Horowitz, everyone fears the trauma of capricious disasters. These stressful life events may shatter one's schemas or inner working models of the world. Succumbing to traumatic stress may result in feelings of helplessness, hopelessness and meaninglessness. Control processes, which help the survivors modulate their stress responses, involve altering dominance hierarchy of available worldviews and revising schemas, and practising new modes of thinking and acting.

Victims of traumatic stress must revise their inner working models in order to accommodate the new situation. Such reschematization may lead to positive changes

(Taylor, 1983; Tedeschi, Park, & Calhoun, 1998). “Growth as a response to stress may occur when people are able to reach new levels of adaptation to the personal meanings of the dire events” (Horowitz, 2001, p.144). The stages of treatment are as follows: (a) Evaluation, (b) Support, (c) Exploration of meanings, (d) Improving coping, (e) Working through, and (f) Termination.

Evaluation includes diagnosis, formulation, and initial treatment planning. This stage is followed by providing support to the patient. Psychological support may take the form of establishing a therapeutic partnership. Social support may involve providing opportunities for positive connections with friends and family.

Once the patient is secure enough for confronting intense, unpleasant emotions, then the meanings of the traumatic event can be examined. The presence of an empathetic, competent clinician can be very reassuring during the exploration of meaning.

After a reformulation of meanings about the trauma, the therapist then can help the patient to improving coping effectiveness. For example, coping can be improved by reducing defensiveness and increasing adaptive conscious control. The most commonly used technique is to ask the patient to retell the experience of the traumatic event.

During the “working through” phase, the major work of reschematization takes place. It usually involves exploration of prior beliefs and their association with processes about the traumatic event. The therapist attempts to deepen the focus of attention and levels of interpretations. For example, focus of attention is shifted to effective coping and future life plans. Success in working through, which leads to termination, involves differentiating between reality-based expectation and fantasy-based hopes. “During termination, the goals are to work through emotions about separating and to reinforce corrective beliefs and attitudes” (p.203). Thus, meaning plays an important transformational role in the recovery process.

Janoff-Buman’s model of restoring shattered assumptions. Ronnie Janoff-Buman and her colleagues have developed a treatment model surrounding the impact of trauma on the basic beliefs and assumptions people hold about life (Janoff-Bulman, 1992; 1999; Janoff-Bulman & Berg, 1998; Janoff-Bulman & Berger, 2000; Janoff-Bulman & McPherson Frantz, 1997). An important part of the process of recovery is coping with

shattered assumptions regarding benevolence of the world, meaningfulness of the world, and self-worth.

“Overwhelming life events deal victim a double dose of anxiety. Their fundamental assumptions have been shattered, and they not only perceive a frightening universe in which they are unsafe and unprotected, but their disintegrated inner world has left them without any road map for negotiating daily living” (Janoff-Buman, 1999, p. 312). The task, therefore, is to reappraise the traumatic experience so that the survivors can rebuild their assumptive world and maximize perceptions of benevolence, meaningfulness and self-worth within the new reality of traumatic experiences.

After overcoming traumatic life events, survivors’ assumptions about the world become less positive and less optimistic. “Yet, their new assumptive worlds, reconstructed over time, are typically not wholly negative and threatening. Instead, they are generally positive, but allow for the real possibility of misfortune” (p. 318). “It is through knowing the fragility of human existence and the real possibility of loss that survivors arrive at a new understanding of life’s values” (p. 318-319).

Their positive reappraisals of life occur not only “in spite of” their experiences of victimization, but also “because of” them (Bowman, 1997; Collins, Taylors & Skokan, 1991; Janoff-Bulman, 1992; Janoff-Bulman & Berger, 2000; Thompson & Janigian, 1988). After going through tragic circumstances, many survivors are able to develop new levels of appreciation for life and re-orient their personal priorities. More importantly, they have learned to live with vulnerability and mortality as the basis for personal significance. They have discovered their own hidden strengths and have grown personally and spiritually.

In the end many survivors of trauma are able to find ways to integrate a greater sense of vulnerability with a greater appreciation of life’s purpose, and meaning (Bowman, 1997). They have developed tragic optimism to the extent that their new positive views of life have been tempered by a tragic past and the expectation of possible misfortunes in the future.

#### The positive psychology of tragic optimism

All the above major models of coping with PTSD recognize the central role of meaning and optimism. This section introduces an existential model of tragic optimism

and illustrate how pastors and counsellors can intentionally inspire hope in victims of abuse and traumas.

Optimism is as important as air and is critical in the Christian ministry to abuse victims. Ministers may be specially equipped to instil tragic optimism, the kind of hope against hope. Yahne and Miller (1999) point out that there is a kind of hope “that catches one when all else fails. Such hope is vested not in oneself or in another human being but in a higher power, in something more ultimate (Tillich, 1958).” (p. 220)

Optimism has become a major research area of positive psychology in recent years (Chang, 2001; Snyder, 2000). However, Wong (2001) has pointed out that the kind of optimism that is based on confidence in one’s own competence and generalized expectation of good things will not be helpful to victims of traumas and abuse. Wong has developed an existential model of tragic optimism. Frankl (1985) defined tragic optimism as “an optimism in the face of tragedy” (p. 162). It can also be defined as “the capacity to hope in spite of and because of tragic experiences.”

Wong’s (2001) existential model of tragic optimism postulates five main components: (a) Affirmation of the meaning and value of life, (b) Acceptance of what cannot be changed, (c) Self-transcendence in serving a higher purpose, (d) Faith in God and trust in others, (e) Courage to face adversity.

Affirmation of meaning is the basis for tragic optimism (Frankl, 1985; Yahne & Miller, 1999). The belief that there is positive meaning even in the worst possible situations gave Dr. Frankl the hope and motivation to live with dignity in a death camp. In fact, people struggle for survival because of their implicit or unconscious belief that life is worth living. Ultimately, in what does one place one’s hope? “This requires exploring her sense of meaning in life in general and in her life in particular through past, present, and future” (Yahne & Miller, 1999, p. 227).

Tragic optimism is meaning-oriented. It is not only predicated on our affirmation of the meaning and value of life, but is also based on the will to meaning, or future meaning to fulfil, according to Frankl (1985). The next section of this article will further examine the central role of meaning.

Acceptance is one of the major dimensions of well-being and happiness (Ryff & Keys, 1995; Wong, 1998). Tragic optimism is built upon acceptance of one’s past

traumas and the future possibility of tragic events. What differentiates tragic optimism from illusionary hopes and positive biases is that the former fully accepts the dark sides of life.

Tragic optimism is manifested in a purposeful, goal-oriented activity. Almost all faith traditions believe that we grow spiritually through transcending self-interests and serving a higher purpose (Richards & Begin, 1997, 2000). Self-transcendence enables one to feel worthy of suffering for a higher purpose (Frankl, 1985).

Faith is a major key to tragic optimism. Faith represents a flickering light at the end of the tunnel, the only positive expectation in an otherwise dark situation. Yahn & Miller (1999) refers to this kind of hope as “the net that catches one when all else fails. Such hope is vested not in oneself but in a higher power, in something more ultimate (Tillich, 1958)” (p. 220). For example, faith sustains Job’s tragic sense of optimism. In the midst of all his complaints about his misfortunes, he was able to declare: “Though he slays me, yet will I hope in him” (Job 13:15); “I know my Redeemer lives” (Job 19:25).

When one does not have theistic beliefs, trust in others become all the more important (Erickson, 1963; Capps, 1995). “Trust involves the tacit, unquestioning belief in the reliability of another – whether mother, father, friend, wife, husband, lover, daughter, son or mentor. Of course, this other person will fail and disappoint us, will frustrate and upset us. Trust does not depend on the other living up to our every expectation or meeting our every need. Yet, reliability is the *sine qua non* of trust.” (p.140) “The three strong allies of hope are trust, patience, and modesty. It is tempting to add, ‘And the greatest of these is trust,’ for without trust, we would not dare hope at all” (Capps, 1995, p.161).

Finally, in order to maintain tragic optimism, courage is needed (Frankl, 1985; Tillich, 1932). To Dr. Frankl, courage reflects the defiant human spirit in times of suffering (Frankl, 1985; Wong, in press). Dr. Capps equates courage with patience and endurance: “The essence of patience is not giving up, tenacious, courage” (Capps, 1995, p.154). Patience is what sustains us as we wait for our hope to be fulfilled.

The life of a Christian depends on patience and endurance. “You also must be patient” (James 5:7). “You have heard of the endurance of Job” (James 5:11). “Through him we have obtained access to this grace in which we stand, and we rejoice in our hope

of sharing the glory of God. More than that, we rejoice in our sufferings, knowing that suffering produces endurance, and endurance produces character, and character produces hope, and hope does not disappoint us” (Rom 5:2-5).

This existential model has made explicit the important keys to tragic optimism. Therefore, it enables counsellors to work with survivors more intentionally in developing their sense of tragic optimism. Such optimism not only can endure the blows of life, but also provides the energy to create a more meaningful future. According to Erikson (1964) “Hope not only maintains itself in the face of changed facts – it proves itself able to change facts, even as faith is said to move mountains” (p.117).

#### The positive psychology of personal meaning

Meaning plays a major transformative role in all the major models of treatment. Trauma therapists have also long recognized the central role of existential and spiritual dimensions of healing trauma (e.g., Herman, 1992; McFarlane & van der Kolk, 1996; Rothbaum, Meadows, Reick & Foy, 2000).

Clinically, the reintegration of traumatic events into one’s outlook on life involves working through personal meanings for past events, present situations and reintegration with a meaningful future (e.g., Aarts & den Veld, 1996; Janoff-Bulman, 1999). For example, van der Kolk and MacFarlane (1996) state that “the exploration of personal meaning of the trauma is critical; since patients cannot undo their past, giving it meaning is a central goal of therapy. It is important to deal with the existential issues evoked by the trauma” (p. 19).

After Job’s assumptive world about God and life was shattered, he was able to find new grounds of hope and faith through reframing (Capps, 1990). Reframing requires a transformation of meaning and perspective; it enabled Job to abandon his old assumptions and reach a higher level of understanding of God and suffering.

Meaning-centred counselling (Wong, 1998) recognizes the two important aspects of meaning: (a) the cognitive dimension of making sense and reappraising life events, and (b) the existential dimension of discovering meaning and purpose for one’s existence and future. Both aspects are important in working with victims of abuse. Research has shown that people are motivated to ask “why” questions, when negative things happen to them

(Wong, 1991; Wong & Weiner, 1981). Counsellors can work with clients to explore meanings and arrive at a positive yet realistic reappraisal.

Once the task of reinterpretation and re-integration has been accomplished, then the therapeutic goal is to inspire the hope of achieving meaningful life goals. Wong (1998) has identified seven major sources of meaning and personal significance: (a) Achievement, (b) Acceptance, (c) Relationship, (d) Intimacy, (e) Religion, (f) Self-transcendence, and (g) Fair treatment or justice. These pathways provide a road map as survivors struggle to find a new direction, a new purpose of life for the future.

### Conclusions

This article has identified the importance of tragic optimism and personal meaning in existing models of coping with abuse and PTSD. It extends prior work by introducing the importance of an existential model of tragic optimism and meaning-centred counselling.

It is clear from the above that tragic optimism and personal meaning are overlapping constructs, because the former is based on affirmation of meaning, and the latter is future-oriented. We have also shown that faith in God is a key component to both optimism and meaning. Spiritual abuse is so destructive because it undermines faith, hope and meaning.

Meaning-centred counselling, with an emphasis on tragic optimism, is uniquely suited for counselling abuse victims in religious settings, because it focuses on meaning, hope and faith as the positive triad in recovery. Through their warmth, support, and personal faith, pastoral counsellors can be agents of hope and instruments of meaning.

The present article advocates a very positive approach of counselling victims of abuse. By making the fostering of optimism and positive meaning an explicit therapeutic goal, pastors and counsellors have a better chance of equipping their clients to face the adversities of life with resilience and vitality.



## References

- Aarts, P. G., & den Veld, W. O. (1996). Prior traumatization and the process of aging: Theory and clinical implications. In B. A. van der Kolk, A. C. McFarlane & L. Weisaieth (Eds.), Traumatic stress: The effects of overwhelming experience on mind, body, and society (pp. 359-377). New York: Guilford Press.
- Allender, D. B. (1991). The wounded heart. Colorado Springs, CO: Navpress.
- Bottoms, B. L., Shaver, P. R., Goodman, G. S., & Qin, J. (1995). In the name of God: A profile of religion-related child abuse. Journal of Social Issues, 51(2) 85-111.
- Bowman, M. (1997). Individual differences in posttraumatic response: Problems with the adversity-distress connection. Mahwah, NJ: Erlbaum.
- Briere, J., & Runtz, M. (1988). Symptomology associated with childhood sexual victimization in a nonclinical adult sample. Child Abuse and Neglect, 12, 51-59.
- Browne, A., & Finkelhor, D. (1986). Impact of child sexual abuse: A review of the research. Psychological Bulletin, 99, 66-77.
- Capps, D. (1990). Reframing: A new method in pastoral care. Minneapolis, MN: Fortress Press.
- Capps, D. (1995). Agents of hope: A pastoral psychology. Minneapolis, MN: Fortress Press.
- Chang, E. C. (Ed.). (2001). Optimism & pessimism: Implications for theory, research and practice. Washington, DC: American Psychological Association.
- Collins, R. L., Taylors, S. E., & Skokan, L. A. (1991). A better world or a shattered vision: Changes in life perspectives following victimization. Social Cognition, 8, 263-285.
- Cooper-White, P. (1995). The cry of Tamar: Violence against women and the Church's response. Minneapolis, MN: Fortress Press.
- Courtois, C. A. (1988). Healing the incest wound. New York: Norton.
- Enroth, R. M. (1992). Churches that abuse. Grand Rapids, MI: Zondervan.
- Erikson, E. H. (1964). Human strength and the cycle of generations: Insight and responsibility. New York: Norton.

- Farnsworth, K. E. (1998). Wounded workers: Recovering from heartache in the workplace and the church. Mukilteo, WA: WinePress Publishing.
- Feldmeth, J. R., & Finley, M. W. (1990). We weep for ourselves and our children. New York: HarperCollins.
- Finkelhor, D. (1988). The trauma of sexual abuse. In G. E. Wyatt & G. J. Power (Eds.), Lasting effects of child sexual abuse (pp. ). Newbury Park, CA: Sage.
- Fortune, M. M., & Hertz, J. (1991). A commentary on religious issues in family violence. In Violence in the family: A workshop curriculum for clergy and other workers (pp. 137-151). Cleveland, OH: The Pilgrim Press. (Available online at <http://www.cpsdv.org/Articles/Commentary.PDF>)
- Francis, P. C., & Turner, N. R. (1995). Sexual misconduct within the Christian church: Who are the perpetrators and those they victimize? Counseling & Values, *39*, 218-227.
- Frankl, V. (1985). Man's search for meaning (Rev. ed.). New York: Washington Square Press.
- Friberg, N. C., & Laaser, M. R. (1998). Before the fall: Preventing pastoral sexual abuse. Collegeville, MN: Liturgical Press & Interfaith Sexual Trauma Institute.
- Grenz, S. J., & Bell, R. D. (1995). Betrayal of trust: Sexual misconduct in the pastorate. Downers Grove, IL: InterVarsity Press.
- Hall, T. A. (1995). Spiritual effects of childhood sexual abuse in adult Christian women. Journal of Psychology and Theology, *23*, 129-134.
- Hartz, G. W., & Everett, H. C. (1989). Fundamentalism religion and its effect on mental health. Journal of Religion and Health, *28*, 207-217.
- Heal, L. A. (1998). God concepts among women who experienced child abuse. Unpublished master's thesis, Trinity Western University, Langley, British Columbia, Canada.
- Heggen, C. H. (1993). Sexual abuse in Christian homes and churches. Scottsdale, PA: Herald.
- Herman, J. L. (1992). Trauma and recovery. New York: Basic Books.
- Horowitz, M. J. (2001). Stress response syndromes: Personality styles and interventions (4<sup>th</sup> ed.). Northvale, NJ: Jason Aronson.

- Imbens, A., & Jonker, I. (1992). Christianity and incest. Minneapolis, MN: Fortress Press.
- Janoff-Bulman, R. (1992). Shattered assumptions: Towards a new psychology of trauma. New York: Free Press.
- Janoff-Bulman, R. (1999). Rebuilding shattered assumptions after traumatic life events. In C. R. Snyder (Ed.), Coping: The psychology of what works (pp. 305-323). New York: Oxford University Press.
- Janoff-Bulman, R., & Berger, A. R. (2000). The other side of trauma: Towards a psychology of appreciation. In J. H. Harvey & E. D. Miller (Eds.), Loss and trauma: General and close relationship perspectives (pp. 29-44). Philadelphia, PA: Brunner-Routledge.
- Janoff-Bulman, R., & Berg, M. (1998). Disillusionment and the creation of value: From traumatic losses to existential gains. In J. H. Harvey (Ed.), Perspectives on loss: A sourcebook: Death, dying, and bereavement (pp. 35-47). Philadelphia, PA: Brunner/Mazel.
- Janoff-Bulman, R., & McPherson Frantz, C. (1997). The impact of trauma of on meaning: From meaningless world to meaningful life. In M. J. Power & C. R. Brewin (Eds.), The transformation of meaning in psychological therapies: Integrating theory and practice (pp. 91-106). New York: Wiley.
- Kaiser, H. (1996). Clergy sexual abuse in U.S. mainline churches. American Studies International, 34, 30-42.
- Kane, D., Cheston, S., & Greer, J. (1993). Perceptions of God by survivors of childhood sexual abuse: An exploratory study in an under-research area. Journal of Psychology and Theology, 21, 228-237.
- Langone, Michael D. (Ed.). (1993). Recovery from cults: Help for victims of psychological and spiritual abuse. New York: Norton.
- Law Commission of Canada (2000). Restoring dignity: Responding to child abuse in Canadian institutions. Ottawa: author.
- Miller, W. R. (Ed.). (1999). Integrating spirituality into treatment. Washington, DC: American Psychological Association.

- Moyers, J. C. (1994). Psychological issues of former fundamentalists. Cultic Studies Journal, 11, 189-199.
- Ornish, D. (1998). Love and survival: The scientific basis for the healing power of intimacy. New York: HarperCollins.
- Richards, P. S., & Bergin, A. E. (1997). A spiritual strategy for counselling and psychotherapy. Washington, DC: American Psychological Association.
- Richards, P. S., & Bergin, A. E. (Eds.). (2000). Handbook of psychotherapy and religious diversity. Washington, DC: American Psychological Association.
- Rothbaum, B. O., Meadows, E. A., Reick, P., & Foy, D. (2000). Cognitive-behavioral therapy. In E. B. Foa, T. M. Keane & M. J. Friedman (Eds.), Effective treatments for PTSD: Practice guidelines from the International Society for Traumatic Stress Studies (pp. 60-83). New York: Guilford Press.
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. Journal of Personality and Social Psychology, 69, 719-727.
- Sedlak, A. J., & Broadhurst, D. D. (1996). Executive summary of the third national incidence study of child abuse and neglect. Available online at <http://www.calib.com/nccanch/pubs/statinfo/nis3.cfm>.
- Shupe, A. (1998). Introduction: The dynamics of clergy malfeasance. In A. Shupe (Ed.), Wolves within the fold: Religious leadership and abuses of power (pp. 1-12). New Brunswick, NJ: Rutgers University Press.
- Stifoss-Hanssen, H. (1994). Rigid religiosity and mental health: An empirical study. In L. B. Brown (Ed.), Religion, personality and mental health (pp.138-143). New York: Springer-Verlag.
- Symonds, M. (1982). Victims' response to terror: Understanding and treatment. In F. Ochberg & D. Soskis (Eds.), Victims of terrorism (pp. 95-103). Boulder, CO: Westview.
- Snyder, C. R. (Ed.). (1999). Handbook of hope: Theory, measures, and applications. San Diego, CA: Academic Press.
- Taylor, S. E. (1983). Adjustment to threatening events: a theory of cognitive adaptation. American Psychologist, 38, 1161-1173.

- Tedeschi, R., Park, C. L., & Calhoun, L. G. (Eds.). (1998). Post-traumatic growth: Positive change in the aftermath of crisis. Mahwah, NJ: Lawrence Erlbaum.
- Tillich, P. (1932). The courage to be. New Haven, CT: Yale University Press.
- Tillich, P. (1958). The dynamics of faith. New York: HarperCollins.
- Thompson, S. C., & Janigian, A. S. (1988). Life schemes: A framework for understanding the search for meaning. Journal of Social and Clinical Psychology, 7, 260-280.
- van der Kolk, B. A., & MacFarlane, A. C. (1996). The black hole of trauma. In B. A. van der Kolk, A. C. McFarlane & L. Weisaieth (Eds.), Traumatic stress: The effects of overwhelming experience on mind, body, and society (pp. 3-23). New York: Guilford Press.
- Vredevelt, P., & Rodriguez, K. (1987). Surviving the secret. Grand Rapids, MI: Baker.
- Vahne, C. E., & Miller, W. R. (1999). Evoking hope. In W. R. Miller (Ed.), Integrating spirituality into treatment (pp. 217-233). Washington, DC: American Psychological Association.
- Wong, P. T. P. (1991). Existential versus causal attributions: The social perceiver as philosopher. In S. L. Zelen (Ed.), New models, new extensions of attribution theory (pp. 84-125). New York: Springer-Verlag.
- Wong, P. T. P. (1998). Meaning-centred counselling. In P. T. P. Wong & P. S. Fry (Eds.), The human quest for meaning: A handbook of psychological research and clinical application (pp.395-435). Mahwah, NJ: Lawrence Erlbaum Associates.
- Wong, P. T. P. (2001, October). Tragic optimism, realistic pessimism, and mature happiness: An existential model. Paper presented at the Positive Psychology Summit, Washington, DC.
- Wong, P. T. P. (2002). Logotherapy. In G. Zimmer (Ed.), Encyclopaedia of Psychotherapy. New York: Academic Press.
- Wong, P. T. P., & Weiner, B. (1981). When people ask why questions and the heuristics of attributional search. Journal of Personality and Social Psychology, 40, 650-663.
- Wyatt, G. E., & Powell, G. J. (1988). Lasting effects of child sexual abuse. Newbury Park, CA: Sage.