IMPROVING THE CAREER RESILIENCE OF A SURVIVOR OF SEXUAL ABUSE

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This study examined whether life design counselling can enhance the career resilience of a sexual abuse survivor. One participant was selected through purposive sampling. Five life design sessions occurred over a period of three months. Various (postmodern) qualitative and quantitative techniques were used to gather data while data analysis was done using thematic content analysis. Following the intervention findings from a qualitative perspective indicate that the narrative career counselling intervention was successful. We conclude that various narrative techniques can be used to enhance a childhood sexual abuse survivor's career resilience. Future research should assess the value of life design counselling in group-based contexts to help survivors of sexual abuse (re-)construct career-life narratives for their future selves and careers. (132 words, 6 sentences)

Keywords: *Career resilience, career counselling, sexual abuse, survivor, life design, mixed-methods design*

Introduction

The number of sexual abuse cases involving children under the age of 14 years in South Africa is rising annually. Moreover, research reports that Africa has the highest childhood sexual abuse (CSA) rate in the world, estimating the number at 34.4% (Singh, Parsekar & Nair, 2014). Not only is sexual abuse becoming increasingly prevalent among girls, but more and more research points to the fact that sexual abuse of boys is also increasing – both nationally and internationally (Venter, 2016). Research done by Raabe *et al.* (2015) on the effectiveness of trauma-focused cognitive-behavioural therapies (CBTs), particularly those used in the case of prolonged exposure to childhood sexual abuse, found that these approaches are lagging behind. Research furthermore indicates that immediate trauma-focused treatment may not be effective and claims that there is a clinical need for suitable treatments for patients with pathology related to child abuse (Dorrepaal *et al.*, 2013). As a result, clinicians first engage in stabilising treatments such as psycho-education, affect regulation skills and cognitive restructuring on trauma-related and

interpersonal issues before they start with trauma-focused CBT (Dorrepaal *et al*., 2013). Although these stabilising treatments are effective with child abuse-related Post-Traumatic Stress Disorder (PTSD), some studies cannot prove the validity of such results (de Jongh & Ten Broeke, 2014), which reemphasises the need for an alternative intervention strategy.

A major movement within the field of psychology and counselling is towards a postmodern approach that takes into consideration people's subjective experiences and the meaning they assign to such experiences (Savickas *et al*., 2009). Savickas *et al*. (2009) and Maree (2013) agree that the postmodern approach to career counselling strongly highlights people's social identity and their sense of self-worth; viewing them as infinitely more than merely the sum total of their 'test scores'.

The fundamental changes that have taken place in the world of work over the past few decades, and the associated need for people to become more adaptable, encapsulate the central theme and concept in the life design paradigm (Di Fabio & Maree, 2013).

Life design counselling

Nota and Rossier (2015) assert that life designing is a collaborative process that includes a holistic and contextual consideration of the various experiences and influences within a person's life, highlighting activity, intentionality (the ability to meaningfully enact one's own life story), adaptability and narratability (the ability to coherently tell one's own story) (Di Fabio & Maree, 2013; Nota & Rossier, 2015; Savickas *et al*., 2009;). In life design counselling, career counselling and vocational guidance no longer occur in a vacuum and the various influences of the surrounding systems on the person are considered (Maree, 2010). Guichard *et al*. (2012) contend that to support clients in designing their lives, career counsellors should integrate new knowledge into their already existing intervention models. Underpinning life design counselling is the goal of assisting people to design and reshape their lives, and in the process to adapt and become more resilient to changing needs, interests and experiences (Maree, 2012).

(Career) resilience

Pearce and Morrison (2011) define resilience as the ability to adapt successfully despite challenging circumstances. Spaccarelli and Kim (1995) state that resilience in survivors of sexual abuse is influenced by the severity as well as the duration of the abuse, the closeness of the

relationship to the perpetrator, as well as the responses of significant people within the child's life. Studies done on depression following CSA indicate that resilience curbed the effects of depression later on (Wingo *et al.*, 2010), while increasing self-esteem, social relationships, ego resilience, coping skills and the development of a positive future orientation have been positively correlated to resilience after CSA (Marriot *et al.*, 2014).

Ungar (2012) defines resilience as "a set of behaviors over time that reflect the interactions between individuals and their environments, in particular the opportunities for personal growth that are available and accessible" (p. 14). Liebenberg and Ungar (2008) contend that the emergence of resilience in career studies helped to shift the focus from stress and dangers to designing interventions that aim to enhance strengths and build capacity in individuals. Ebersöhn (2010) agrees that resilience is becoming more and more prominent in career counselling as people need to deal with adversity. Career resilience therefore refers to a sense of overcoming barriers and adversities that influence one's self-confidence, need for achievement and independence (Paul & Garg, 2014).

Goal of the study

The goal of this research study was to investigate the possibility of enhancing the career resilience of a survivor of sexual abuse through life design counselling. The primary question that guided this study was as follows: *In which ways can using narrative career counselling potentially enhance the career resilience of a survivor of sexual abuse?*

Method

Research design

The study in hand was a qualitative one with an intrinsic, single case study design. The study is of an exploratory nature, which implies that qualitative techniques and information will receive priority which means that this study will be based on a QUALITATIVE+quantitative approach. A qualitative research paradigm provides a good foundation for the collection of data, considering important factors and dominant themes that unfold as the research proceeds.

Participant and setting

A single participant was selected through purposive sampling on the basis of certain characteristics which he/she had to possess. The participant had to meet specific selection criteria, namely he/she had to be (a) between the age of 9 and 14 years (b) still in primary school (c) residing with the family where sexual abuse occurred (c) a survivor of sexual abuse; and (d) motivated to engage in life design counselling as this would increase the personal enrichment experienced by the participant, which is intrinsic to the study.

The research was performed at a non-profit organisation (NPO) in an urban part of Gauteng. The organisation was easily reachable by the researcher as well as the participant. The NPO also had all the necessary facilities to provide a safe environment where the research could be conducted. Using these facilities meant that the participant did not have to undertake any unnecessary travelling.

Data gathering

The data collection process entailed the utilisation of various sources which include qualitative and quantitative techniques. Based on the six steps of life design counselling, certain postmodern qualitative data collection techniques were implemented which include: conversations; observations; family constellation; genogram; early recollections; memory box; sandtray; collage; lifeline; life chapters (future narrative); success experiences and drawing ("*What will help me overcome my obstacles*?").

The *Resiliency Scales for Children and Adolescents (RSCA)* (Prince-Embury, 2007) was used to collect quantitative data. The psychometric results obtained in a recent study by Pienaar (2015) convinced the researchers about its reliability in South African contexts and confirmed that it can be used with confidence in this research project. In addition, it was used qualitatively only to confirm the presence of dominant themes and subthemes and, more importantly, to assess whether transformation and/or change had occurred in the participant during the course of the intervention.

Data analysis

Data analysis in this study was done using thematic content analysis. The aim was to identify themes and subthemes within data that are descriptive rather than interpretive in nature (Braun &

Clarke, 2006). Advantages of this approach (according to Braun and Clarke (2006)) are the flexibility that thematic content analysis offers and the fact that it is compatible with a constructionist paradigm. Using thematic content analysis allows for the interpretation and organising of information in such a manner that the primary research question will be answered effectively.

Triangulation/ Crystallisation

To ensure the trustworthiness and validity of the themes and results that emerged the researcher implemented triangulation and crystallization methods. Triangulation according to Di Fabio and Maree (2012) involves an in-depth exploration of different sources of information as well as methods which can minimize faulty interpretations or associations (Di Fabio & Maree, 2012). Merriam (1998) posits that crystallization of the research findings will be accomplished through using various data collection methods which implies that researchers should consider various interpretations and perspectives when analyzing data. Richardson (2000) states that crystallization gives marked advantages as it allows you with more ways in which to analyze data.

Ethical issues

This study upheld the ethical guidelines delineated by Orb *et al*. (2001), who predicted that a balanced qualitative research relationship would foster and encourage awareness of possible ethical issues, disclosure and trust. Informed consent and assent was obtained from both the participant as well as the parents of the participant. Privacy, anonymity and confidentiality were assured by using a pseudonym throughout the study and ensuring that the participant's identity would not be made known during the different stages of the study.

To ensure the wellbeing of the participant, the researchers arranged for counselling to be provided by the relevant professionals should this be required.

Results

Quantitative results

Considering the sense of mastery scale (MAS), we can derive that only marginal differences occurred with regard to the descriptive categories between pre- and post-intervention testing.

This conclusion is made based on the scores as depicted in table 1 which indicates no substantial change in the scales, both before and after intervention. Based on these descriptive categories it can be concluded that the life design counselling process did not have a substantially positive impact on Suzi's personal characteristics of optimism, self-efficacy or adaptability.

Information from table 1 (below) furthermore indicates that Suzi's level of trust and comfort remained the same, but that there had been an increase in her perceived access to support and/or the availability of support. This increase in her access (whether real or perceived) could possibly increase her ability to thrive through adverse circumstances and ultimately her psychological well-being in adulthood as well. Suzi's interpersonal relationship dynamics seems to bode well for Suzi's career development future.

Table 1. Comparison of resiliency scales and scale descriptions

	Scale descriptions	Before intervention	After intervention
Sense of mastery (MAS)	Optimism	Low	Low
	Self-efficacy	Below average	Below average
	Adaptability	Low	Low
Sense of relatedness (REL)	Trust	Low	Low
	Support	Low	Below average
	Comfort	Below average	Below average
	Tolerance	Below average	Low
Emotional reactivity (REA)	Sensitivity	Above average	Average
	Recovery	Average	Above average
	Impairment	Average	Above average
(A substantial overall increase in the REA scale was noted (10 points).)			

Her level of tolerance declined, which could indicate apprehension from Suzi's side to engage in assertive behaviour. These results possibly indicate that her level of tolerance towards family members is high but low towards strangers and/or people she doesn't know well.

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Quantitatively this may indicate that her ability to engage successfully in assertive behaviour within social relationships that are external and not inclusive of the home environment declined. We can therefore hypothesize that her tolerance of other individuals in a social system has declined which can lead to Suzi having an impaired ability to experience difference or separateness from others while maintaining a healthy social relationship with them, leading to less conflicting life transitions. Her possible inability to engage in assertive behaviour could possibly lead to impaired social functioning which could be harmful towards her future relationships, both social and personal.

The findings furthermore indicated a decrease in Suzi's sensitivity score but an increase in her recovery and impairment scores. Whereas Suzi's threshold for reaction and the intensity of her reactions had increased, her ability to bounce back or recover from emotional adversity and return to normal functioning had decreased. This indicates an elevated degree of vulnerability. The degree to which her daily functioning was impaired due to emotional arousal, too, had decreased[1], suggesting an elevated degree of vulnerability. Suzi's elevated score on the overall scale seems to suggest that her emotional reactions towards experienced trauma's and perceived (current) threats are so overwhelming that it inhibits her natural ability to self-regulate, thereby causing her to experience overwhelming feelings of anxiety and emotional arousal.

Qualitative results

Although the aforementioned quantitative results did not indicate any notable enhancement in Suzi's resiliency levels, the qualitative results of the study suggested that some intrinsic changes occurred. Qualitative data suggest that the personality characteristics of optimism, self-efficacy and adaptability exist intrinsically within the participant in relation to a) her positive attributional style and approach to the future, b) her intrinsic belief that she can overcome obstacles in her environment, and c) her different conceptualisations of problems and how to overcome such challenges. As can be seen from the qualitative results, it does appear as if the participant's optimism, self-efficacy and adaptability improved somewhat during the intervention. Qualitative findings suggest that Suzi was able to gain a sense of mastery over the experienced traumatic event, and this could possibly have a positive influence on her emotional stability and future

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[1] Contradictory to the first two scales of the *RSCA*, a high score on the overall emotional reactivity scale indicates vulnerability, while a low score is indicative of resilience within an individual.

career resilience. Suzi commented that "I made the scene safe because I added a door to my room which can lock. I also made it happy again" (4;4;70)[2]. Our findings furthermore indicate some improvement in Suzi's adaptability as regards her thought processes and behaviour relating to her school work and future success. She communicated for instance that "I need to behave myself at school and study in order to get my matric. This would help me become an air hostess one day" (10;11;278). "I need to study hard to ensure that I pass my test. I must have good marks and make sure that the teachers do not give me negative merit points for my behaviour." (10;11;280).

The findings further indicate some improvement in Suzi's adaptability in respect of her emotional responses toward emotional distress and trauma, which may have positive implications for her career resilience. When asked what she needed to do to ensure that she was emotionally healthy, Suzi for instance commented: "I need to be positive, forget all the negative things around me and rather think of butterflies or flowers. Everything that makes me happy. I must not be sad or angry because that will not work." (10;12;292)

Suzi was finding it difficult to trust other individuals as she preferred to be independent in her actions. She chose not to engage in a trusting relationship with any individuals outside of her family circle. Suzi towards the end of the research made the comment that "I don't like to ask for help as I like to do things myself"(11;15;385). Our findings suggested that Suzi's future career resilience was not bound to improve without due intervention. Findings also depicted Suzi as continually engaging in avoidance behaviour as a coping mechanism in order to come to terms with a painful past. Suzi's interpersonal relationship dynamics seems to bode well for her career development related future. However, it should be emphasised that Suzi's trust and her perception of being supported only applied to a small number of people (family members), namely her mother and sister. Suzi communicated that: "I feel that my sister is someone I can really talk to and someone whom I can trust" (2;2;24). As discussed above, we can hypothesize that this inability to trust other individuals external to her family system can negatively influence her future career resilience.

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[2] The three-digit coding system that was used to reference data works as follows. The first number refers to the data collection technique that has been used. The second number refers to the page number and the third number refers to the line number. This was done in an attempt to ensure more effective referencing in relation to the transcripts that were created throughout the research.

Nine main themes were identified next each with its own subthemes (see Table 2 for a summary). The table below is a summary of the main themes and subthemes.

Table 2. Summary of main and subthemes

Main themes	Definition	Subthemes
Personal characteristics	Personal characteristics of the participant refer to aspects that make up her personality and that predict how she would react in a certain situation. The participant would communicate that "I can learn from my mistakes but it depends what mistakes these are" (1;1;4).	Optimism, Self-efficacy, Adaptability
Personal Values	Personal values are people's internal conceptions of what is good, beneficial, important, useful, desirable and constructive – such values can increase their life satisfaction and help them to live a meaningful life. An important value in the life of the participant includes her mother which she confirmed by communicating that "I love my mom a lot and I always want to stay with her" (3;2;40).	Work ethic, Love/intimate family relationships, Pride
Interpersonal skills	Intrapersonal skills in this context refer to the foundations of a successful career. They refer to emotional intelligence, the ability to know, understand and manage one's own emotions. The participant exhibited good interpersonal skills with good insight into her emotional choices and the impact such choices have on her life. The participant mentioned that "Like when I choose sad, I cry and my	Self-actualisation, Self-insight, Self-knowledge/self-awareness

	eyes hurt and I am just angry the whole time and I hit people. But when I choose happy, I do things that make me happy like watch television" (7;8;197).	
Coming to terms with a painful past	This theme concerns the participant's past and refers to physical or emotional trauma that is causing emotional distress. The participant was able to verbally express her sadness in relation to past events. Her feelings towards her grandmother were expressed by her communicating that "I was extremely sad when my aunt died because I was very close to her. I do miss her a lot…" (8;9;216).	Expression of sadness, Denial/Escaping/Avoiding Behaviour
Interpersonal relationship dynamics	This refers to the participant's relationship with others and her motivation to interact with other people. The participant would clearly communicate that her relationship with her family is characterised by a strong bond and she would communicate that "I feel that my sister is someone I can really talk to and someone whom I can trust" (2;2;24). The participant's relationship towards other people however was more selective and she would communicate that "I can feel calm around others depending on who they are" (1;1;8).	Feelings of acceptance, Trust, Support, Comfort, Tolerance
Personal motivators	This theme refers to intrinsic personal values or goals that activate, guide and motivate the participant's behaviour. The participant communicated that "I can forgive people who let me down but	Need for security/protection, Longing for/Need to experience happiness, Conditional forgiveness,

	it depends on what they did wrong" (1;1;12). She would also communicate that "When someone hurts me, I will strike back depending on who hurt me" (1;1;14).	Unforgiving/Vindictive
Thinking style that influences the participant's decision-making style	This theme indicates the manner or thought process that the participant uses to make decisions in her life. During the session the participant indicated a very concrete style of thinking and her focus was very much on the physical and how this influenced her happiness. She communicated that "all my friends were there and we swam. My mom also took me to buy some clothes and I got a piano" (10;10;238).	Concrete thinking pattern
Future orientation	This refers to the participant's perspective on the future and how to achieve future goals and/or dreams. The participant, on various occasions, expressed her preference towards her current behaviour by stating that "I need to be positive, forget all the negative things around me and rather think of butterflies or flowers. I must not be sad or angry because that will not work" (10;12;292).	Internal locus of control/taking control of her feelings
Coping strategies	This theme refers to the participant's efforts, both behavioural and psychological, to reduce or minimise stressful events and/or traumatic memories. The participant communicated that she would have rules for a better life which she stated as "The rules would be like to never think	Anxiety, Sensitivity, Recovery, Impairment, Creativity

you are better than others or think that other people are better than you. Nobody is perfect" (9;8;338). "I don't have respect for people who don't have respect for me" (9;13;343).

Discussion

Working from a strictly quantitative perspective, our observation was that narrative career counselling had not been successful in its attempt to enhance the career resilience of a survivor of sexual abuse. Quantitative results indicate some change in certain constructs that pertain to resilience but change was not comprehensive enough to affect Suzi's overall resiliency levels. In a study involving 1073 adult woman and survivors of CSA, Cambron *et al.* (2014) posit that childhood sexual abuse will not only have a detrimental long-term impact on the quality of interpersonal relationships, but also cause difficulty in forming healthy relationships. Our findings seem to confirm and extend the above results and would appear to predict a possible negative impact on Suzi's future career resilience.

From a qualitative perspective, however, we believe that the narrative career counselling intervention was successful in bringing about change in Suzi's thought processes concerning herself, her current emotional functioning and the manner in which her existing behaviour could be expected to influence her future success. Suzi actively engaged with the process and as a result came to new insights regarding her current behaviour. The observations and qualitative findings of the current study subsequently suggest that CSA does influence survivors' intrinsic representations about themselves as well as about others. Simon, Smith, Fava and Feiring (2015), however, state that long after the occurrence of CSA, survivors still seek to derive meaning from their experiences – which most of them incorporate into their sense of self, the world, as well as other individuals. The study indicated that Suzi became cognisant of the impact that her experiences had on her perceptions about herself and her current decision making. As a result, she started to become the author of her own story (a new, healthier story), which was evident in the way she began to take ownership of her actions (school, social, emotional) and her life by making better choices to ensure a better future for herself. The results of our study therefore concur with Simon *et al.* (2015) on the effects of CSA on survivors of sexual abuse. A study by

King, Wardecker and Edelstein (2015) investigated CSA and personal mastery in a sample of 265 women, and found that personal mastery or sense of mastery in survivors of childhood sexual abuse successfully prevents a variety of unwanted psychological effects. It actually enables these individuals to better cope with various stressors (King et al., 2015). Our findings support the above in that Suzi was able to gain a sense of mastery over the experienced traumatic event, which could possibly have a positive influence on her emotional stability and future career resilience.

Suzi's resilience mainly involved a focus on emotional resilience as she could successfully recover emotionally from the trauma she had experienced. She managed to retain a sense of control over her environment while moving forward in a positive manner (Jackson, Firtko & Edenborough, 2007). The findings indicate some improvement in Suzi's adaptability in respect of her emotional responses toward emotional distress and trauma supporting a study done by Arora and Rangnekar (2015) who state that emotional stability is positively related to and a strong predictor of career resilience.

During the study undiagnosed physical symptoms were present, indicating possible vulnerability to psychosomatic illnesses, which supports the results of a study conducted by Sigurdardottir and Halldorsdottir (2013). Their sample of seven women was comprised of survivors of sexual abuse who all displayed various degrees of symptoms that could be linked to psychological trauma. Our observations also support Fortin and Jenny's (2012) report on the psychosocial issues of sexual abuse, in that children who have been survivors of sexual abuse may be vulnerable to non-specific physical or emotional distress, such as abdominal pain. The findings seem to confirm the impact of CSA on survivors, highlighting previous research on CSA and its influence on future development (personal and emotional), as well as future career resilience and career adaptability.

We tentatively state that life design counselling can be used as a useful qualitative intervention model for survivors of sexual abuse with the aim to enhance their future career paths and future selves. Our observation accentuates Savickas's (2011) belief, namely that life design counselling allows individuals to successfully reflect on a problem and ultimately engage in the necessary actions to build new future selves.

Limitations

Possible limitations could potentially have had an impact on the results were (a) Suzi's parents divorcing (b) the removal of Suzi's best friend by the welfare to a place of safety, which had a devastating effect on her and (c) the questionnaire (*RSCA*) was administered in English, despite the fact that Suzi's mother tongue is Afrikaans.

Conclusion

This study involved the use of the narrative approach to enhance the career resilience of a survivor of sexual abuse which proved that various narrative techniques can be used to enhance a CSA survivor's career resilience. Qualitative results could however not be confirmed and the study findings were not supported by quantitative results. Nonetheless, once the results had been critically analysed, it appeared that our findings agreed with the opinion of Di Fabio (2016), who suggested that life design counselling appears to be a useful intervention modality. We found it to be a useful strategy for dealing with a survivor of sexual abuse. It shows promise as a possible strategy that aims to construct, deconstruct, co-construct (collaboration between client and counsellor) and reconstruct (Savickas, 2011) experiences and associated meanings that may influence career adaptability and resilience when choosing and constructing future careers and designing successful lives. Our observation accentuates Savickas's (2011) belief, namely that life design counselling allows individuals to successfully reflect on a challenge and ultimately engage in the necessary actions to build new future selves.

Notes

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Disclosure statement

No potential conflict of interest was reported by the authors

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Kobus Maree is an educational psychologist and a professor in the Department of Educational Psychology at the University of Pretoria. He holds doctoral degrees in Education (Career

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Cobus Venter (MEd (Education Psychology)) is an educational psychologist with a passion for children. He specializes in helping survivors of abuse deal with trauma by enabling them to narrate better, healthier stories. Cobus has over eight years' experience of working with children that are trying to deal with the lingering after-effects of traumatic life events. He has a particular interest in enhancing people's career resilience and (career) adaptability.

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