



## Short Communication

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# From Victim to Survivor: A Case Study of Resilience

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## Introduction

In late 2016 the first author was asked by attorney Jeff Anderson to evaluate his client, the second author, to address the question as to whether she had sustained psychological injuries as a result of having been sexually abused by her parish priest, Father Joseph Palanivel Jeyapaul, on multiple occasions when she was 15. She was suing the Diocese of Crookston since the assaults had occurred at the Blessed Sacrament Church in Greenbush, Minnesota, where her family worshipped. Criminal charges against the priest were on hold because shortly after Megan disclosed what had happened, with his arrest pending, Father Teyapaul had left the US to travel to his native India, reportedly to be with his ailing mother.

Megan, then age 21, presented her evaluation in a manner suggesting that she was uncomfortable talking about her experiences. She reported that she was the second of four children born to their father who worked for an energy company, and their mother, a middle school cook who had to spend much of her time and energy with Megan's seventh-grade brother who had autism. Her older sister was in nursing school, and her younger sister was a high school senior. By Megan's account, she had been a "tomboy" who enjoyed sports and playing the saxophone and had solid relationships with both of her parents, as well as her grandparents and great-grandparents.

As a pre-schooler, Megan had been touched inappropriately by one of her father's friends, both before and after he was in prison on similar charges and who later "sold" her to other men for sexual acts. When she was seven, her 11-year-old cousin began sexually abusing her for six years, until she finally told her parents. Although the encounters then stopped, the adults did

not take legal action, and it was not until she was 15 and another cousin made similar allegations against the then 19-year-old, that he was arrested, pled guilty, sent to jail, and forced to register as a sex offender. Since some of her relatives did not believe her claims, Megan became uncomfortable at family gatherings and estranged from her paternal grandmother with whom she had been so close.

While in junior high, Megan had decided to devote her life to God and began spending a lot of time at church, a safe haven from the dysfunction that she had begun experiencing at home. This resulted in her having frequent contact with Father Jeyupaul, who had been informed by her father of her history of sexual abuse. When she was in ninth grade, the priest began touching her inappropriately and ultimately raped her. Although she tried to report the incidents to a victims' advocate at the church, her allegations were rejected. Months later, after she entered a psychiatric unit, due to the deterioration of her mental health and her disclosure to a school counselor, law enforcement became involved. At that point, she did not feel supported by her parents, especially her father who questioned why she had not pushed the priest off.

As she later came to see, Megan had responded to her abuse by the priest by "going numb;" she began cutting herself and attempted suicide. She was repeatedly hospitalized and had two out-of-home placements. From her perspective, high school "sucked;" she was depressed and often fought with her classmates who teased her for having been "in the looney bin." As a sophomore, Megan was physically assaulted by a male peer, and two years later, she was sexually mistreated by another boy at a party. She began drinking to excess and experimenting with other substances.

After graduating from high school, Megan worked at a group home until she enrolled in the local community college and started receiving SSI payments. It took her an extra semester to earn her AA degree. She had continued to work with the individual therapist she had met in high school and to use anti-depressant and anti-anxiety medications but still struggled with sleep disturbance, stomach complaints, and loss of hair, as well as bouts of Herpes (which she had contracted, she believes, from Father Jeyupaul). Those outbreaks triggered memories of the priest, which, in turn, affected her already fragile emotional state and interfered with her ability to become involved with the males to whom she was attracted. Also, significant, in her view, was her loss of faith, her inability to believe in a deity, after having been “obsessed with God” when she was younger.

It was Megan’s father who filed a lawsuit on her behalf. While she had not initially comprehended what that entailed, she came to view the publicity surrounding her case “a relief - since it felt good not to hide.” When seen for her evaluation by the first author, Megan was planning to use any settlement she won to cover the costs of her ongoing therapy and to allow her to pursue an education in art therapy. She noted that having not anticipated living past age 18, she had not given much thought to her future, but then aspired to having an art studio and traveling as far as Italy. She had become active with Survivors Network of those Abused by Priests (SNAP) and was considering speaking publicly on the topic of surviving childhood sexual abuse.

Megan’s results from the psychological tests administered by the first author supported the diagnosis offered by her psychiatric and therapy records of Posttraumatic Stress Disorder. She also shared with the evaluator two paintings that she had recently done. One, she noted, showed her body, beaten and broken, along with a noose and the ghostly figure of the man who had harmed her. The second, which she saw as created after her subconscious mind had taken over, involved an image of herself from a photo taken at one of her darkest points with two anatomical dolls like those used by forensic interviewers and pages from the Bible, scratched with the word “why.”

It was the first author’s conclusion that Megan had presented as a classic victim/survivor in terms of the traumagenic dynamics that Finkelhor and Browne (1985), ascribed to childhood sexual abuse and of what the empirical literature (see, for example, Kendall-Tackett et al., 2006; Phipps-Yonas, 2012), indicated about the psychological fallout for individuals with histories such as hers.

In mid-2011 Megan’s lawsuit settled for \$750,000. Multiple newspapers articles at that point noted that the Diocese Crookston expressed “grave concern” at Father Jeyupaul’s “suitability for ministry.” There were mixed accounts about the priest’s whereabouts, with a CNN story in which he was interviewed and stated that he wanted to return to Minnesota to clear his name. However, he fought extradition for months. In September of 2011, Megan traveled to The Hague with SNAP leaders and their attorneys from the Center for Constitutional Rights (CCR) to present their complaints to the International Criminal Court, urging prosecution of the Vatican for crimes against humanity, involving cases of sexual violence committed around the world.

When the authors’ paths crossed later that year at a National Child Protection Training Center conference, a conversation followed about the possibility of collaborating on an article about how Megan, who was then pursuing her bachelor’s degree, had transformed her life.

It was not until 2014 that Father Jeyupaul was finally extradited. After he pled guilty to sexual conduct in May 2015 and served a one-year prison sentence, he was deported back to India where he was soon reinstated into the ministry. When Megan learned of this, she filed a federal lawsuit, and in late 2016 the Ootacamund Diocese removed the priest from ministry, as one of the requirements of the legal settlement that ensued.

Over the past seven years, the course of Megan’s life has been up and down. She chose to move from Minnesota to New York City to finish her education in art but struggled with relying on alcohol and other drugs. Now, in 2024, she is celebrating almost two years of sobriety, but sadly has experienced serious complaints related to auto-immune problems. Although she continues to enjoy creating art, her ability to paint has been compromised. That said, she is hopeful that the most recent reports from her doctors indicate that she will be able to be more active.

Asked about her perspective on her transformation from a fear-ridden, fragile youngster who did not believe she would “make it” beyond her teenage years and had never left the upper Midwest, to a competent spokesperson for herself and all victims of sexual violence, who traveled to Europe to advocate for their rights, Megan offers a thoughtful analysis of the factors involved. She sees herself as having been “born with a certain resilience” that allowed her to develop various coping skills, some beneficial, some not so much. Although she remained silent for a period, she came to find that art provided a means to relay her story and release her pain. From her perspective, she was fortunate to meet the right people at the right time for her recovery, fostering her ability to remove herself from the toxic environment in which her abuse had been allowed to continue. They included certain health care providers, and even more importantly, her attorney, Jeff Anderson, who, she described as “a huge part of my journey” and connected her with SNAP.

Years ago, Schofield and Balian (1959) demonstrated that the developmental histories of many “normal” adults include as many pathological circumstances as those of seriously disturbed mental patients and recommended that researchers look for “immunizing” experiences that reduce the effects of harmful events on adaptation. Terms such as “invincibility,” “coping,” “invulnerability,” and “competence” were first applied to the phenomenon, but the inadequacy of those constructs gave way to the discussion of “resilience” (Garmezy & Masten, 1986; Werner & Smith, 1992; Masten, 2001). Longitudinal research by the latter has shown that despite facing high levels of stress as children, many individuals have been able to thrive because of their personal attributes, aspects of their family-life, and characteristics of their wider social environments. It seems that resilience is not what one “has” but instead involves a multiply determined developmental process that is neither fixed nor immutable. There are “second-chance opportunities,” such as education, coping, religious involvement, military service, marriage, and work that may assist previously maladapted adolescents, which, clearly, was the case for Megan.

Studies of very different populations of youngsters with histories of childhood maltreatment and/or other adverse experiences (see, for example, Rutter, 2000; Luthar et al., 2000) have come to the same conclusion as Werner and Smith (1992): while there is considerable predictive validity from childhood to adult adjustment, resilience is a dynamic, non-linear process, and social support and opportunities for making new choices can significantly affect outcomes. As Megan herself noted, she seems to have benefited significantly after she disclosed what Father Jeyupau! had done and received support from her medical and mental health providers, and as stress as her lawsuit was for several years, it opened doors and established connections for her that appear to have played a major role in her recovery. In addition, as researchers (Cicchetti, 2010), have found, the capacity to confront one's fears directly, as Megan's lawsuit afforded her, has been shown to be associated with positive outcomes for individuals with trauma in their histories.

In the end, the story of Megan's life seems to exemplify much of what our clinical and research literatures have to say about how, with the proper supports, coincidental as they may be, individuals can emerge as strong and capable adults after suffering serious trauma during childhood.

### Acknowledgment

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### Conflict of Interest

No conflict of interest.

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