



Conscious Life presents

Healing From Childhood Sexual Abuse

Guest - Dr Mariya Ali

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[00:00:09] Alex Howard

Welcome, everyone, to this interview, where I'm super-excited to be talking with Dr Mariya Ali. And we are talking about childhood sexual abuse. We're talking about some of the reasons why there can be shame, the things that can get in the way of people asking for help, but also some of the practical things that one can do.

And so either if you yourself have experienced childhood sexual abuse or you're supporting someone who is, or you're working as a clinician, Mariya is immensely experienced. And this is a really important interview.

To give you a little bit of Mariya's background... Dr Mariya Ali is a licensed social worker with a career spanning over 30 years, helping those who have been affected by trauma at policy, programmatic and therapeutic levels. Her approach is a unique blend of conventional psychological and social work approaches, somatic and various healing techniques.

Her policy work is with international NGOs such as UNICEF and the World Health Organization, and her healing work with individuals and for companies seeking to make their workplace more compassionate. Dr Ali is an Honorary Knowledge Exchange Associate of Oxford Brookes University, where she continues to research and publish in the area of women and children's rights.

So, Mariya, firstly, welcome. Thank you so much for joining me.

Dr Mariya Ali

Thank you so much for having me.

Alex Howard

It's my pleasure. I think a good place to start would be some of your background and interest in this area. It feels like one of those areas that we don't spend our teenage years thinking about when I grow up, what I'm going to do is specialize in. And so I'd love to hear the journey that's brought you to this point where you are now, and particularly your interest in this work.

[00:02:09] Dr Mariya Ali

Yeah. So it all started with a conversation with my dad when I was five years old. It was my birthday, and he said, "What do you want to become?". And I said, "What do you want to become?".

Alex Howard

Great question for a father to ask a daughter.

Dr Mariya Ali

Yeah, and so I asked him and he said he really wanted to be a doctor, but he didn't get the opportunity to. And so I said, I'll become a doctor, but not knowing what type of doctor, I just agreed. But he was taken away from me and my brother when I was eight. There were political issues, and he was sentenced for life when I was about eight. But he's come back now.

Growing up, I didn't have a voice because we were children. And I thought, I'm going to dedicate my life to giving a voice to children. And that's how it all started. And I started working at the Unit for the Rights of Children, straight after school, actually. And that's how it all started.

Alex Howard

And I'm interested in more of why that path. Talking to you briefly before we started recording and reading a bit of your background, you've been a real force for good of protecting children and advocating for children. I'm really curious as to that drive in you.

Dr Mariya Ali

First of all, as I said, I wanted to be the voice for children who didn't have a voice, and they're so vulnerable. And when I started working, there were children who were coming in and sharing their stories. And one of the stories that really stuck with me was this little girl who was six years old. And I had just started. I didn't have any training at that stage, and so I was there mainly as a translator, but also to learn how to work with children.

And there was a VSO, which is an English volunteer, a social worker. She's a clinical social worker. And she was sitting with me asking questions to this child. And she said, I can't sleep at night because this man seems to be coming with fire in his hands, and he was going to throw this fire at me. But then we asked more questions and then found out that she was being sexually abused by the health worker.

And I just couldn't control myself, and I had tears in my eyes. And that was the day that I decided that I really need to know how to protect these children. And really, that determination and combined with my experience, it just became my whole purpose in life.

[00:05:48] Alex Howard

We're talking in today's interview about childhood sexual abuse. And this feels like an area where there's so little conversation around it. The lack of conversation seems to be part of the problem, in a way. And it seems to be that there's a lot of shame. There's a lot of denial that goes on. I'm interested in your thoughts before we come deeper into this, around those layers of defensiveness and denial and why they're there and the impacts that they have.

Dr Mariya Ali

It is talked about a lot more these days, even where I'm from, which is the Maldives, and it is a 100% Muslim country. The first time that child sexual abuse, the words were used, was in 1999, and that was the efforts of then the manager of the Unit for the Rights of Children. I had just come back from my studies from Australia, and we managed to talk about it.

But it was a challenge even back then, because it was more seen as a damage to the honor of the child rather than a trauma causing abuse, resulting from abuse. Because people want to protect the honor, they just don't talk about it. The silence around it and people not believing and victim-blaming just makes people who have gone through it deny the experience.

Alex Howard

It's interesting you make the point around protecting the honor of the child. It also strikes me that another element here can be in families protecting the family and a sense of shame, and particularly if that abuse is from a family member. Then again, the protectiveness around that.

Dr Mariya Ali

Yeah, definitely. A lot of the time we know that it is someone who is trusted and it is someone from the family. So they just don't want... because that person could be the only breadwinner for the house as well. So if that person goes, then unlike systems where the social protection system is very strong and has other means of getting income, they lose the only income that they have. So that's another layer of complexity that plays into this, especially somewhere like Maldives.

Alex Howard

It also strikes me that often the conclusion that children draw when there's abuse - be it physical abuse, sexual abuse, mental abuse, or so on - is that on some level, it's their fault. On some level, they are the architect or they deserve it, and it feels like another layer that then gets in the way of appropriate action to move forwards.

Dr Mariya Ali

Yeah. So I have been working with children as a social worker in this country and also abroad. And what I hear a lot from children is that during the grooming process, the perpetrator might say things like, "This is happening to you because you are not behaving or you're misbehaving, you are too active, you are clumsy". There is some level of blame on the child because of his actions or her actions. So that's something that I hear as well.

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We find a lot of children also have been exposed to abuse through, say, the Quran teacher. So the teachers who teach religion and also help children recite the Quran, they have abused the children, which then, for them, becomes very difficult to understand why a religious leader or a religious person is doing this to them. So that becomes, again, another layer of shame.

And also for a person who's working with children or even adult survivors, they then have a very difficult relationship with even religion or even, "Why did this happen to me? Am I being punished for something bad I did?". And so there's that sense of badness inside of them that keeps repeating and repeating into adulthood.

So that when you work with children, you need to unpack that understanding of where the faith sits. Because especially in our religion. It's a way of life, and it's not separated from the state even, so it's all very enmeshed. But then sometimes it is also a source of healing, but sometimes that relationship needs to be healed or understood and processed.

Alex Howard

And yes, it strikes me. I was just thinking, as you're talking, Mariya, that there's obviously... I know a lot of your work has been with Islam, but there's also a very well-documented history with the Catholic Church. A good friend of mine has been part of some of the movement around abuse in boarding schools, and himself was a victim of that.

I think part of what's so difficult here is that often the places that one would go for safety and solitude seem to be the places where abuse is happening. And, and as you're pointing to, that makes the asking for help and the calling out of what's happening and the place that one might go to for safety and solitude is then cut off. And, yeah, it makes the situation much more difficult.

Dr Mariya Ali

Yeah. And that's part of the reason that I really wanted to understand was how do we help children who are in this system? How do we help them understand the boundaries of the law and how to heal as well? Because a lot of the time cases might go to court and they might be substantiated or not, but yet the healing remains.

And that healing part, again, is very complex because a lot of the counselors or a lot of social workers don't study Islamic law, for instance. And so they don't really know how far they can question or how we explore this very sensitive, very complex relationship that we have with God and what trauma does to that relationship. And without healing that, it's going to be really hard for anyone who is trying to come out of the abuse that they have suffered.

Alex Howard

Yeah, I want to come back to that in a little bit. Something else I wanted to touch on as well is how often when one experiences abuse, and again, be it physical, emotional, sexual or mental abuse, that there's somewhat of a normalization to the experience of what happens.

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And one of the things that strikes me is that often the reason that people come and seek help is not necessarily the core trauma of the abuse. It's the coping strategies they've then developed to try and survive the abuse.

And I'd love you to speak a bit to that, and particularly people that may be watching or listening to an interview like this that maybe have not really fully thought about things that had happened, but what they're noticing is all of these other challenges that are happening in life that may be linked.

Dr Mariya Ali

Yeah. So one of the main things that I have been noticing with clients that come in is that a lot of them have a lot of gut issues. A lot of them have gut issues and back pain. So a lot of somatic experiences and also affect dysregulation and so not so much talking about it, but they are really suffering.

And some of them have actually just felt disgust. Some are having trouble eating. And so they're presenting themselves to GPs and doctors, but with the gastritis and not being able to hold food down. And so they have gone through all the checkups and they've just come up with, there's nothing physically wrong. And then when we then dive into the disgust, it's about being sexually abused.

And one of the things also is about not being believed and really, the fear of not being believed. And then again, there's also the dynamics that happens post-sexual abuse for some people. They start engaging in sexual relationships a lot more. They could become more promiscuous, which is a result of trauma. But with our religion, any sexual contact outside of wedlock is prohibited. So again, the child who has been sexually abused has gone through trauma and is now again being misunderstood instead of them being allowed to heal from this.

So that becomes, again, another factor that the parents could be saying, "Because you're behaving like this, you might not be able to get married". And that, again is another layer of shame. And so some of the clients are coming in with so many layers of shame and not being able to cope. And the only way they're able to is just put everything in and not out. So the body is completely rejecting food, for instance, and so it's an automatic reaction. The body is finally saying no because they couldn't say no.

Alex Howard

Yes. How important, in your experience, is acknowledging and talking about what's happened? Because I think one of the things that I think goes on is because one somewhat normalizes. They think, "Well, it's happened in the past, I can't change it". And then they think, "Well, there's nothing to be gained apart from being seen as dirty or being rejected or not being believed".

And so it strikes me that that often then leads to this silent suffering that goes on. And I'd love you to speak a bit to the importance and the value of talking and obviously choosing carefully who one speaks to. But yeah, why is that important?

[00:18:49] Dr Mariya Ali

So we talked about not being believed and exactly that. Yes, because they fear that they're not going to be believed because the perpetrator might have also said, "Even if you said that, nobody would believe you". And then when they do share, they don't believe you. And if they did believe, if the child was heard, then that actually is quite healing for the child because they were believed. Even though they have suffered the trauma because they were believed, then there were interventions that happened.

So when someone hears that and acknowledges the pain, that opens the door to parts of them that are so scared to come out. Parts of them that are saying, "I don't know if I opened up, I don't know if I can cope", and the other part is saying, "I really want to heal", and then the other part is saying, "I don't want to heal, I don't want to face this".

And to really show them that there is someone in the room who is going to be able to hold space for them to share safely. But it also takes time sometimes for clients to trust. So it is really important to hold that space for them and allow them to share those two sides. And acknowledging those two sides as well, that there is a part that is too scared. But really finding out what is the intention of that side that doesn't want to change, that is too scared. And then we find out that the two sides, the ultimate goal is to protect and to be safe, and then they go, "Aha, oh okay". And so that really helps.

Alex Howard

So someone that is watching this or listening to this, that... I have two scenarios. Scenario one is they recognize that they have their own childhood sexual abuse that hasn't been really spoken about or spotlighted. Or another scenario, perhaps someone knows who, maybe is even a child, but someone that has that experience, and perhaps they become the confidante of that person.

What's the first step? Where does one go to find someone to talk to? How does one begin? Particularly in your work over the years, I imagine you've been early in the exploration of these cases. Given that's the piece where often there's the most fear and also the place where, once one's taken that step, there's hopefully then other things that will help move it forwards. But it's that beginning bit which I imagine is so difficult. So I'd love you to speak a bit to that stage. And what helps one navigate through that.

Dr Mariya Ali

I think a lot of the times when people do come to seek help is because they are at a point where something has gotten desperate. They're having trouble with finding a partner, or they've had two partners and their relationships have fallen through, or they're having difficulties with intimacy and they're just not able to even get into a relationship, or they are so angry that people just cannot communicate with them. Well, so there's a point of desperation that then takes the person to seek help. That's what I have found.

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But there might be other reasons. If they're children, then child protection services would be referring or health services. But if they're adult survivors, usually there's a point where they say, "Okay, well, I'm ready now to deal with it".

Because it is very scary to go and seek help because you constantly think, "What if they think badly of me?" or "I could do this by myself". A lot of the time people say that as well. They say, "Oh, I run all the time and that helps", or "I paint and that helps". So these are all sorts of things that I've heard.

Alex Howard

I think also sometimes people fear that if they speak to it, it makes it real. It's almost like if "I don't ever tell anyone, I can pretend it didn't really happen". Right?

Dr Mariya Ali

Yeah. There is a level of denial, and I guess with my work with UNICEF and also in the government, you see this at a different level as well. In terms of policy-making or even laws or procedures. There is a level of the laws made from probably a victim-focus.

And this is what I understood, because when I did a lot of healing work, I realized that even some of the procedures that I had written came from a very victim-focused rather than thriver-focused. So I do now, when I do consultancy, make the effort to make policies, or to draft policies and procedures that focus on thriving instead of surviving.

Alex Howard

I'm going to be careful not to go in a whole rabbit-hole, because I find this is a really interesting point, because it's a delicate balance, isn't it? Because on one hand, it's true that someone is a victim of something that's happened, and then it's also true that over-identification with that place is actually perpetuating the impact.

And so I'm really curious as to, particularly on a one-to-one level, how you manage that balance and hold someone in that place of something has been done to them, but also move them to that place of agency. Yeah, it's a really interesting area.

Dr Mariya Ali

So I got trained as a social worker initially in Australia, where we do two years of counseling work. So I used to work with drug clients, and they would also come and share their stories that they've been sexually abused. That was really scary when I first started working.

Alex Howard

A lot of self-medication of that abuse using drugs, right?

[00:26:15] Dr Mariya Ali

Yes. Now, after I went through healing myself, I realized that just counseling sometimes doesn't have that spiritual or faith aspect to it. And so for me, the faith aspect was a really big part of it. And so really connecting with, I guess in the western world, people call it the higher self or spirituality. And just knowing that there's a higher power that loves you completely and protects you completely. That connection is really healing and gives them that sense of agency through that connection.

And also, when you're working with, like I mentioned before, there's this one side that comes in and just wants to stop the person from healing. A lot of Dr Peter Levine's work, you know, that the body needs to heal, and also Dr Bessel van der Kolk's work. So a lot of the times when the body just shuts down, if they do exercises or if they do any martial arts or Pilates, and then also some level of sound healing, they then start coming more into their body.

They can start being more comfortable in their bodies. In that way they then become more present in the session, which means that you can deeper dive, and they feel a lot safer in their bodies because if they don't, then they get dysregulated.

And a lot of the times when people get dysregulated, also non-experienced counselors can get really scared. But it is when you can hold that space of dysregulation and then guide them through, that's when they become confident and they calm down as well.

Alex Howard

I want to come back to something you said a little bit earlier, talking about the role of religion and spirituality within this. You made the point that when a religious leader is the source of the abuse, and I think another perspective on that is, a religious leader is the source of covering up abuse, is another piece of the jigsaw here as well.

It makes the relationship that one has with God, a higher power, whatever words we use, all the more complicated. The place that we go for solitude and for healing is perceived as the source of the wound and of the suffering. And so I'm really curious as to what helps one to unpack that and to separate out what's happened. Yeah, it's really tricky.

Dr Mariya Ali

Yeah. It's really important for us to not make a judgment. It's really important for us to listen to what their understanding is. How did they first learn the religion? Was it through a very compassionate way? So they knew from the beginning that it was compassionate. But whereas some other people could have learnt it in a very harsh manner. So those early foundations really help as well. So really understanding the foundations of when they studied, when they learned about the religion.

And then also unpacking. "Well, how do you think God helped you survive this? How do you think, what were the strengths that you found? What were the conversations you were having with God? How were you understanding it when it was happening? And how do you understand it now?"

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So it gives this distance for them to observe as well. And sometimes they do take time when you ask those questions, because the first answer is, "I don't know". And then you help them. You ask more focused questions, so you're not making a judgment, you are observing and they then have that space to go, "This is what I think, and this is how I feel".

And there have been some clients who say, "I think God is really angry with me because this was out of wedlock and it was a bad act". And then they cognitively understand that they were a child and they didn't have the power to say no. But somatically and in the body, in visceral, they still hold that "God is angry with me. That's why I was punished, and how do I get out of this?".

These are the times that really helps when they can get in touch with someone who is a religious leader that they can trust, or an imam that they can trust to talk about how God is very forgiving and protective and is continually supporting them, because then they get acknowledged of how they're feeling.

So it's not just one person who is going to be helping them. There's going to be many people from different disciplines that could help them to come to terms with how they are feeling and also then heal that relationship with God.

Alex Howard

Actually, to bring another piece in here, one of the things that is often also the case is sexual abuse can be passed down through generations, that though one that is abused is statistically more likely then to become an abuser, for example. And so I'm interested in some of the things that we can do to break that cycle of transmission.

And again, it goes back to this, another interesting ethical, moral dilemma, that when one has experienced significant abuse as a child and then they become a perpetrator. Of course their acts still have to be taken at face value. But there's also a place where they've been a victim. Again, giving you some of the toughest questions at this conference. But I'm interested in how you help unravel that.

Dr Mariya Ali

Yeah. So the discourse on perpetrators is very tough, but if we think about taking them to their childhood and what they've suffered. It's awareness on, like what you said, that they could become abusers if we don't give them the right help when it happens.

So really understanding the public health aspect of child sexual abuse, rather than a more rights or legalistic point. A lot of the time people don't understand how damaging it is for the body. And some of the great works from Dr Bessel van der Kolk. They do talk about how the body and the muscles of the sexual organs even hold anger.

So if people understood that level of information, then I think they're more likely to seek help rather than just keeping it a secret, which then will prevent any huge damages, like becoming an abuser. And then also intergenerational transmission happens not only from just that.

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It could be that you are really angry all the time because of the shame, and because you're stuck in that shame and anger cycle, because you were not able to say no when it was happening. Because when it's happening, if it is a relative or trusted person, your body wants to fight.

Because as humans, we want fight or flight, and our body goes into fight or flight. But because we freeze, then the anger of not fighting, because "Why didn't I fight? Why was I so weak?". Then that anger is projected towards you, and then that is then stuck in this cycle. So every time you feel that, you then again stop, and then you freeze. So that's the anger-shame cycle, you're stuck in it. So when you break it. But these are, again, not fully understood that this is what's happening.

Alex Howard

I'm curious, Mariya. You've been mentioning a few things as we've gone through the interview, but I'm interested in some of the modalities that you've seen be the most effective and the most helpful. If someone comes to you and says, "This is my experience, what are some of the things that I should explore?". How would you answer?

Dr Mariya Ali

Yes, now that I've worked in this field for a long time, I started really with just counseling. But I've just seen that because of dysregulation and also the trauma being stored in the body, including the fascia layer, that you need so many different modalities for one person to be able to come to a place of thriving, so... A mixture.

So EMDR is helpful and also Internal Family Systems I am finding extremely helpful. And then also some of the alternative complementary therapies, like say, massage, deep tissue massage, is really good. Any martial arts, particularly for what I have seen, Qigong is very helpful.

And for some people, yoga, but trauma-informed yoga is really helpful because some of the positions could be quite difficult. Some of the postures could be quite difficult. And so it needs to be trauma-informed for survivors. And then also PSYCH-K has been particularly helpful. So it really is a mixture.

So I think therapists need to have different modalities at hand so that they can use it at different points in time. Because clients come with so many different complexities and you just need to be able to hold that space for them with these different modalities and what they offer.

Alex Howard

Yeah, I really want to amplify that point. Another way of putting it, is that often when people have experienced abuse, they've experienced things being done to them. And then sometimes people can almost normalize to that. And so when it comes to intervention, it's like, "Right, well, I'll do this" as opposed to really listening, learning to listen to one's experience and what helps and what doesn't help.

[00:39:19] Dr Mariya Ali

Yeah. Just being a witness as well as observing and helping them through. And also, a lot of the time they don't really come in trusting you because abusers have not come into their lives. They've been smiling and they've been playful. And so, we are smiling and we are therapists. We think that we're being helpful, but they probably take time to trust us. They're completely watching us, too. They're completely watching our faces, our muscles, what are the gestures? Are we getting shocked?

Because one client, I still remember this, had shared that when they told their story, that the therapist was so shocked, and seeing the therapist's expression, the client got really scared. So it's really important that we understand ourselves as therapists.

And how are we presenting ourselves? Are we healed enough to also be in that space? Because if we're not healed enough, then we are listening to our own stories. When people tell their stories to us, we think, "Oh, yeah, that happened to me", instead of being really present with them. And they pick it up because they're watching us as therapists.

Alex Howard

Well, in a way, of course, someone's greatest fear is that this is so bad and so dark that no one else can hold it. And so the one thing we don't want to do as clinicians is to reinforce that narrative.

Dr Mariya Ali

Yeah, definitely. And I think that this is the reason why I think we as therapists need to heal if we have anything. And most of the time we get into this field because we've also gone through something that is really tough and we carry that trauma. We think by helping others, we are helping ourselves and we are to some extent.

But we also need to take time to heal because clients can trigger, and then when we get triggered, we can transfer that to them. So countertransference happens. And so that's why there's supervision, clinical supervision. That's also, again, another part that we need to have to ensure that we're safe with our clients.

Alex Howard

Sure. Mariya, for people that want to find out more about you and your work, where's the best place to go and what's some of what they can find?

Dr Mariya Ali

So my website, which is mariyaali.co. You can find the details. You can find out what I've done in the past and my qualifications. And it's fairly new. So the website, so there aren't that many things in there. But you can also find me on Instagram [@healwithdrmari](https://www.instagram.com/healwithdrmari). So I do post there more regularly, but I also do lectures and publish as well.

[00:43:09] Alex Howard

Yeah. Wonderful. Thank you so much for your time. I really appreciate it.

Dr Mariya Ali

Thank you.