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Coping with an Experience of Child Sexual Abuse: Perspectives of Young Female Survivors in South Africa

Nareadi Phasha
University of South Africa
South Africa

1. Introduction

An experience of sexual abuse in childhood is known to be associated with negative emotional, psychological, health/physical, and educational repercussions. Internationally, research suggests that the repercussions may be immediate and/or long term (Finkelhor, 1979; 1984; 1988, 1984; Sgroi, 1982). Similar findings were evident in South African studies (Russell, 1995; Collings, 1995, Madu & Peltzer, 2001, Human Rights Watch, 2001). Studies have gone further to reveal that some survivors turn out to be resilient (Barbarin, Ritcher & de Wet, 2003; van Rensburg & Barnard, 2005). The suggestion thereof is that survivors cope with the problem in different ways which may or may not be detrimental to their development.

This chapter will focus on strategies which some of the young survivors of child sexual abuse utilised to cope with their experiences and emotions associated with it. Coping strategies warrant a deeper understanding for the sake of helping survivors heal the wounds created by an experience of child sexual abuse, to prevent chances of re-victimization, and to facilitate wellness. For the purpose of this chapter, coping refers to a conscious process for managing a problem and regulating the attendant emotion (Gipple, Lee & Puig, 2006).

2. Coping strategies

Different coping strategies which could be classified under two broad categories were noted in the literature consulted, namely: emotion-focused and problem-focused. According to Gipple *et al.* (2006), emotion-focused coping strategies include purposeful attempts to retreat from unpleasant stimuli, or individuals' attempt to regulate their emotions in dealing with the stressor; while problem-focused strategies entail manipulation, reflection and application of instrumental responses of the stressor.

Studies suggest frequent tendencies to use emotion-focused. This was so in the study that involved female incest survivors as participants (Brands & Alexander, 2003). In particular, avoidance was the most preferred coping strategy, which participants indicated to have

used in childhood when the abuse was occurring and later in adult life when the feelings resurfaced. Also, Sigmond, Greene, Rohan, and Nichols (1996) revealed that whether the abuse was recent or had occurred a long time ago, participants' preference for emotion-focused coping strategies remained evident, and even at the time of the study participants were still using those strategies.

Csoboth, Birtas and Purebl's (2003) findings obtained from women with histories of physical and sexual abuse, revealed tendencies to indulge in heavy eating, drinking and smoking habits in comparison to their non-abused counterparts. Interestingly, women with experiences of sexual abuse consumed larger amounts of alcohol than those with physical abuse histories and their non-abused counterparts. In addition, sexual abuse by an important person, such as one's close relative, and a fear of someone in the environment contributed to increased alcohol consumption. Tendencies to resort to high consumptions of alcohol and substances in order to dull and numb painful emotions were also identified amongst male survivors of sexual abuse (Valente, 2005). Alongside such tendencies were also suicide and self-mutilation which surfaced when feelings of anxiety and self-loathing were overwhelming. Resorting to self-injurious behaviours and suicidal ideation and attempts were common coping strategies amongst younger males (16 years) and female survivors who were highly depressed as a result of feeling despair and lacking a sense of hopefulness (Swanston, Nunn, Oates, Tebbut & O'Toole, 1999). Dissociation was adopted amongst participants with intense feeling of shame (Talbot, Talbot & Tu Xi, 2004). Instances of resorting to dispositional optimism were noted in a sample, whose experiences of traumatic events, including sexual abuse, yielded intense feelings of depression (Brodhagen & Wise, 2008).

Some male survivors coped with the experience of sexual abuse by assuming the role of a passive victim syndrome, becoming angry avenger especially if they believed someone has to pay for what had happened to them, seeking emotional ties with people of the same age as their abuser with the hope of rebuilding the disrupted emotional ties, and/or becoming conformists to cover up their insecurities by blocking out the memories of the abuse and so creating a persona of the 'normal guy next door' (Valente, 2005). Frazier and Burnett's (1994) study revealed four types of coping strategies, namely: (a) seeking social support, (b) talking about the rape, (c) getting counselling and (d) keeping busy. The most commonly used strategies included taking precautions and thinking positively. According to Falloot and Heckman (2005), there are some tendencies to resort to religious/spiritual coping among women survivors with mental health substance disorder. Unfortunately to most survivors of sexual abuse such religious strategies were more negative than positive. Also, there were reports of various positive resolutions such as: a learned experience, personal growth and development, spiritual, moral/religious growth, increased knowledge of sexual abuse, improved relationships with others, interpersonal sensitivity, such as being more accepting and less judgemental of others (Wright, Crawford & Sebastian, 2007).

3. Method

The coping strategies reported in this chapter were obtained from a qualitative study conducted in South Africa. Being qualitative in nature, the study endorsed an

interpretative epistemological assumption which holds the view that research should attempt to grasp or understand the meaning of social phenomena (Schwandt, 1994), referring to interpretation in terms of participants' own beliefs, history and context (Babbie & Mouton, 2009). For that matter, data was collected in the form of words and the presentation of findings took the form of description (Neuman, 1994). The study followed an iterative process, which resembles the features of grounded theory in generative questions were posed, core theoretical concepts were developed and tentative relationships were developed by constantly comparing data throughout data collection (Glaser & Strauss, 1967).

3.1 Participants

This chapter presents the views of a fraction of the 22 students who took part in a study conducted in South Africa for the purpose of understanding the implications of childhood sexual abuse on school functioning. Their selection for this study was on the basis that interviews with them revealed information covering coping strategies. In addition, they participated in interviews on more than one occasions, and this afforded me an opportunity to probe and tease out emerging issues. Participants were 12 young female participants belonging to three racial groups in South Africa: White (4), Coloured/mixed racial parentage (4) and Blacks (4).

Participation was voluntary following a thorough explanation of the study and research ethics, namely: benefits of the study, the rights to withdraw from the study at anytime without negative consequences. Participants were assured confidentiality by explaining that raw data will not be shared with anyone, including institution-based social workers. However, I indicated my intention to share the research findings during conferences and in peer-reviewed journals. I assured them that their names will be protected by replacing them with fictitious names. Before data collection, I cautioned participants about uncomfortable emotions that could be evoked by the interviews, and also, mentioned that there would be therapeutic support. I also provided them with a list of psychological services in their areas, should they prefer to use them.

Participants' ages range between 16 and 23 years. Recruitment was by means of referrals, which began with social workers based at the institutions. The sample increased as participants invited others to the study by means of invitation letter prepared by the researcher. In the letter, I made it clear to them that I did not know them but the person who is handing them the letter was of the opinion that they might share views which are relevant to the study. Included in the invitation letter was a self-addressed stamped envelop to use when responding to the researcher. The referral strategy generated a quick sample in a relatively small time because it came out that they knew about each other's experiences as they often talk to one another about reasons for being placed at those institutions. They also meet during group session therapies and attend school together. Participant-perpetrator age gap was more than 5 years, and the abuse involved penetration of the private parts. Participants' detailed descriptions are provided on Table 1. To protect their identity the names used in this study are fictitious and different from those appearing in the main study.

Student	Race	Perpetrator	Age of abuse	Duration
Cathrine (15)	White	Neighbour	13 years	2 years
Izora (18)	White	Biological father	6 years	6 years
Reetha (16)	White	School principal	14 years	1 year
Violin (16)	White	Biological father	10 years	4 years
Patricia (15)	Coloured	Stepfather	10 years	4 years
Shawa (16)	Coloured	Stepfather	12 years	4 years
Galata (16)	Coloured	Biological father	13 years	4 years
Mighty (16)	Coloured	Biological father	14 years	2 years
Hippy (23)	Black	Uncle and	6 years	6 years
		Mother’s boyfriend	16 years	2 years
Nachos (18)	Black	Abducted and gang-raped by four men	16 years	7 days
Pheladi (15)	Black	Abducted and raped	14 years	Two weeks
Moirra (16)	Black	Biological father, and	7 years	3 years
		Foster father	12 years	1 year

Table 1. Description of participants

3.2 Instruments

The in-depth interview was a sole method used to collect data. The interviews took place with each participant at a private office specifically allocated for this purpose by each social welfare institution. The only student who was not living at any of the institutions was interviewed at her home when her mother was at work and her sister was at school. In-depth interviews facilitated openness on the part of participants because they did not have to worry about what the next person would say about their views. Data were collected in bits, guided by categories identified in the previous interview with the same or different participant. Interviews were tape-recorded with the permission of participants and the social workers who acted as a legal guardian (in case of participants younger than 18 years), following a detailed explanation about the study and adherence to research ethics. To enhance the credibility of the study, all participants were interviewed on more than two occasions. In this way, I was able to verify data collected in the previous interview with participants.

To facilitate prompt follow-up of interesting issues, I carried data collection and analysis simultaneously. I listen to each tape on number of occasions to identify what was emerging. This was followed by full transcription of the recorded tape. Transcribed data were sent back to them for verification. Data were then coded and categorised according to themes. Comparisons of categories and sub-categories occurred throughout data analysis, relationships and sequences of events were also established (Dey, 1993; Charmaz, 2006). To minimised researcher bias, a critical friend was asked to check the analysed data.

4. Results

In dealing with emotions created by an experience of child sexual abuse, participants adopted three forms of strategies, namely: (a) detachment from the sexual abuse or its

impact, (b) distorted beliefs about the experience and (c) acknowledgement of sexual abuse. In presenting the results, participants' quotes were used. Readers should be aware that as English was not the home language of most participants, marked deviations from the standard forms of expression should be expected.

4.1 Detachment from sexual abuse or its impact

Detachment describes tendencies to dissociate from thinking about the experience of sexual abuse. A total of eight participants reported that they had achieved such a state by engaging in either one or two of the following strategies: (a) keeping busy at all times, (b) using drugs, (c) engaging in unhealthy eating habits and/or (d) self mutilation, so as to obliterate the memories of their experience.

Three participants, namely Pheladi, Mighty and Galata indicated keeping themselves busy in different ways. Pheladi (15), a Black girl, was raped on two occasions by different males. Her first experience of abuse involved abduction and rape for a week by a local young man when she was 13 years old. She mentioned that none of her relatives was supportive, but rather that they laughed at her and told her that she deserved it. Her second experience occurred when she was 14 years, and it involved being used for prostitution by a friend for a period of two weeks. She indicated that when the memories of sexual abuse surfaced, she kept herself busy by *"avoiding sitting alone because I know exactly that (the memory of sexual abuse it is going to come back to me. So, I'll rather be with other people and play, laugh and make jokes with them. Similarly, a 16 year-old Coloured girl, Mighty, whose sexual abuse by her biological father began when she was 14 and lasted for 2 years, indicated that:*

Playing with other children stops the thought about that man (her father). I just feel like a child again, and in that way, I forget for a while because we are talking about parties and other interesting things.

Also, Galata (16), a Coloured girl who had been abused by her biological father for 4 years since the age of 13, highlighted that *"I just get up and walk around the class. Sometimes, I initiate a conversation with whoever is around me and this stops my mind from thinking about the abuse"*.

Evidently, actions to keep themselves busy were initiated when it was neither appropriate nor necessary, and the idea was to escape being quiet as such an opportunity could trigger memories of the abuse. It was common for their minds to wonder about the abuse during lessons, as that was the time they were required to be silent and attentive. However, any action taken to keep busy subjected them to punishment, as they were seen to be disturbing the lessons or their classmates.

Another strategy for detaching themselves from abuse involved indulging in unhealthy eating habits, whereby participants starved themselves or overate. Two survivors, Patricia and Hippy, adopted such a tendency when their thoughts about sexual abuse became intense. Patricia, a 15-year old Coloured girl who had been abused by her stepfather for 4 years since the age of 10, and later raped by a stranger in her own neighborhood, indicated that she had starved herself. She particularly highlighted coping by

"Vomiting and making sure that everything I eat does not go down my throat. Food just came out when I was trying to eat".

In contrast, Hippy, (23) a black survivor, resorted to over-eating. She was abused by her uncle from age 6 – 12 when she moved to live with her aunt in another village. She indicated that the abuse by her uncle was frequent (almost every day). Following her parents' divorce at age 14, she moved from her aunt's place to stay with her mother, whose living-in boyfriend also abused Hippy frequently. She explained that:

I overate and I still do. If I do not have anyone to speak to, I eat a lot, and that is why I became this big. I consoled myself with food and I still do. I just eat and eat.

A feature common to both these participants was that their perpetrators were close relatives other than their biological parents. Again, their abuse involved frequent episodes which occurred over a lengthy period. They were abused by more than one perpetrator. In addition, they both reported having received no support from their mothers. For example, Patricia's mother asked her to remain silent because the family depended on her stepfather for financial assistance. Also, Hippy's mother dismissed her disclosure of abuse by her uncle, and warned her that it would cause "trouble in the family". She was also accused by her mother and her other aunt of being a liar when she disclosed the abuse by her mother's boyfriend. These factors could have caused intense feelings of anger from being betrayed by a trusted parent who could not protect them from further abuse, and led the body to respond to the sexual demands of the perpetrator. As a way to escape the feelings that had been bottled up for long, they resorted to unhealthy eating habits.

To some participants, detachment from abuse was achieved by being involved in self-injurious behaviours. This was reported by two White students, namely, Cathrine (15) and Izora (18), who reported that they hurt themselves to suppress the overwhelming memories of sexual abuse. Cathrine had been sexually abused by a neighbour who babysitted her. The abuse went on for 2 year without being disclosed, and it occurred alongside threats to kill her mother if she ever attempted to disclose. Izora was abused by her biological father for a period of 6 years, when she and her three sisters were finally placed at a Safety Home for neglect. None of her relatives, including her mother, knew about the abuse. She only disclosed it to the social worker following her placement at a Safety Home. Unfortunately for her, she rarely discussed it, and the opportunities for therapy were not afforded to her. Cathrine indicated that "*I bite myself, and sometimes I cut my wrist to make myself feel better*". Similarly, Izora highlighted that:

A lot of times I bite myself on my hand because of this thing keeps on coming back and because I am feeling so stressed out. It is terrible. I think I hit my head once against the wall. But, otherwise I bite myself when I am tips up.

A lack of space to share one's frustrations could trigger self-blaming attitudes, which could in turn manifest themselves in a sense of guilt. This is because speaking up enables one to release emotions which could have been bottled up for a long time. In addition, a person could get positive feedback to help him/her realize that the abuse was not her/his fault.

To Patricia and Reetha, drugs helped them repress the memories of sexual abuse. Reetha, a 16 year old White girl was molested by the school principal who acted as an adoptive parent during the time she and her sister were living in a Safety Home. The school principal often invited her (and her sister) to his farm during weekends and holidays, with the permission of the Safety Home (The Safety Home did not know about the abuse). Both Patricia and Reetha mentioned using one or more of the following: drug, cigarettes, dagga, benzene,

glue, nail polish remover and alcohol. Patricia started using drugs and drinking liquor when she was 11 years old, whereas Reetha began at age 12. Patricia smoked dagga and cigarettes at home and at school. While she confessed that she smoked dagga every day, she also mentioned that:

I smoked glue and I was also smoking benzene, nail polish remover and drinking beers with my friends just to make myself feel happy, but I won't feel happy.

Similarly, Reetha mentioned that:

I started smoking dagga and all sorts of things because I thought it will take my problems away. But if you are out of that thing, you will still remember what happened to you again.

It is evident that both Patricia and Reetha started using drugs when abuse was occurring, which could imply that the strategy was motivated by the need to numb their feeling of powerlessness to stop it. As indicated in the previous section, Patricia's mother dismissed the disclosure on the basis that if it could be reported to authorities, her husband would be jailed and the family would lose their only source of income. Also, with Reetha, she feared losing the love and care of the principal who her and her sister had come to trust and regard as a parent figure. Moreover, her sister did not know about the abuse. The Safety Home saw the school principal as giving the girls an opportunity to be in a real home environment. Such a situation could have instilled feelings of anxiety stemming from frequent anticipation that the abuse could happen again. Also, an awareness that there was nothing they could do to stop the occurrence of abuse could render the victimized person powerless, and leave them with no choice but to respond to the sexual demands of the perpetrator. Feelings of powerlessness and anxiety could even heighten depressive feelings. Desperation to numb overwhelming depressive feelings and to avoid facing up to problems causing those feelings could easily push a person to use drugs as the quickest remedy (Leigh, 1998). It is therefore not unusual for sexually abused participants to use drugs when dealing with the emotions caused by such an experience.

4.2 Distorted beliefs about the experience of sexual abuse

There was evidence to suggest that some survivors coped with their experience and memories of sexual abuse by creating distorted "positive" beliefs about their experiences. This was evidenced by their positive talks about the abuser, seeking positive reasons for the occurrence of the abuse and a perception of the abuse as a learning experience. Four students reported such beliefs, namely, Galata, Hippy, Patricia and Violin. Distorted beliefs diminished feelings such as anger, self-blame, guilt, and ultimately led to forgiveness, and the proper functioning of an individual. Galata indicated that when the abuse stopped and she was placed at the Safety Home for over a year, she could no longer cry when the memory of her sexual abuse by her biological father surfaced. Rather, she found herself talking positively about her father and the good thing that he did for them before the abuse occurred. In her own words, she highlighted that *"I just talk about my father as if we had a good relationship. In particular, I would focus only on the good things and never talk about the bad things."*

Speaking positively about the abuser facilitated survivors' forgiveness. Distorted "positive" thinking was common amongst participants who had been living in the Safety Home for more than a year. Interestingly, such a thought occurred when participants found themselves in the midst of peers who had good relationships with their families. These

included situations where their non-abused peers at school shared stories of activities they did with their parents during holidays, weekends and other times at their homes, and when parents had come to watch their children playing games at schools. In this way, it can be assumed that a longing to live in a real family situation facilitated distorted “positive” thinking about their abusive fathers.

Therapy and regular visits to home when the abusive parent was jailed for sexual abuse appeared to have facilitated a different perception about the abuser and the abuse itself. Two participants, namely Patricia and Violin provided good examples. Patricia, who was angry towards her mother who could not rescue her from the abuse by her father, indicated that when she started visiting home regularly, she realized that *“It is not right for a child to not talk to her mother or father because there are no parents who do not like their own child”*. On the same note, Violin (16), White and abused by her biological father for four years from the age of 10, she expressed being angry towards her mother for allowing her abusive father to come into their lives after abusing her for the second time. She particularly, mentioned that therapy had changed her negative thoughts about her father and made her believe and accept when her mother told her that she needed her father. She said:

After a while when my mum told me that she, my brother and I need my dad, I started thinking about that very seriously. I realized that a daughter cannot live without her dad and when I got to know my father better and went for therapy sessions, I learned a lot of things like, the daughter need a father for protection.

Although the impact of therapy cannot be dismissed in having facilitated positive thoughts about their abusive parents, nor can the impact of their non-abusive mothers and home conditions be underestimated, particularly as they started visiting home during the holidays and at weekends. The time spent at home permitted the bond between their mothers to strengthen and their trust in them grew, so they accepted their mothers’ plea to forgive their abusive fathers. In addition, as their non-abusive parents were not working, it might have been that when Patricia and Violin visited their homes, they realized that their families needed their fathers in order to survive. Clearly, the contribution all these factors might have contributed to Patricia and Violin’s distorted beliefs about their abusive fathers.

A distorted belief about the experience of sexual abuse took a form of finding a reason for it to occur. This was demonstrated by Hippy, who suffered multiple experiences of sexual abuse at different times in her life. She mentioned that when the memories of sexual abuse were too intense, she told herself that *“God does not let things happen for no apparent reason”*. She further indicated that she believed that God has allowed the abuse to happen to her so that one day *“when I know a little girl that is in the same situation as I was, then I would be able to help them”*.

Hippy’s perception of her experience made her stronger and even more hopeful of the future. She also realized that her uncle, who had abused her since she was 6, needed help, and indicated that she had forgiven her mother for failing to protect her from abuse.

4.3 Acknowledgments of the occurrence of abuse

In contrast to participants who created distorted “positive beliefs” about their experiences, some coped with the experience by coming to terms with its occurrence. Seven participants demonstrated this coping strategy in ways that reflected the following: (a) the perception of

the abuse as a learning experience, and (b) talking about it, and adopting an optimistic view about life. An 18-year old Black survivor, Nacho, overcame the negative impact of her two weeks abduction and gang rape ordeal by four men, by viewing her experience as a learning curve, which opened her eyes to reality. During the interview session, she highlighted that she no longer took life for granted.

It changed me. I was naïve, not thinking that such a thing exists or it can ever happen to me. The rape taught me to be careful all the time, and that the world is not safe.

Nachos' perceptions of her sexual abuse could explain the reason she mentioned that she was eager to talk about her experiences in public, so as to enlighten other people about the existence of abuse. She mentioned that she wished to talk about her experiences on a television show, as well as having a book written about her experiences. Perceiving the experience of sexual abuse as a learning experience could be associated with the support that Nacho received from her mother and teachers at her school, including her former primary school. Support mitigated feelings of self-blame and guilt because a person comes to realize that she is not held responsible for what happened. In that way, feelings of acceptance are facilitated.

Talking about the sexual abuse also signifies that a person has acknowledged what has happened and s/he is ready to move on. Patricia and Violin coped by talking to someone about their sexual abuse whenever they experienced flashbacks. People who were there to listen included peers, professionals, and parents. The effectiveness of such a strategy was clear when Patricia asserted that *"I just talk to my friends about it and I will forget for a while"*. On the same note, Violin indicated that *"I talk about my problems and when I do so, it makes me stronger and I want to go on with life again"*. Interestingly, Moira (16), who had been sexually abused by her biological father for three years from the age of 7 years, and later at 12 by a foster parent for a year, alluded to talking indirectly about her experiences.

I would tell someone that this friend of mine is going through this and that, what can I do to help her? But actually I was referring to myself. Then they would give me an advice. This method helped me bear the pain of the abuse.

Talking about the abuse is possible and could be effective when the listener is non-judgmental and s/he is capable of comforting the person who has experience of sexual abuse. As demonstrated in the previous section (distorted beliefs about the experience of sexual abuse), therapy played a major role in alleviating their feelings of anger and in helping the victims come to terms with their experience of sexual abuse. Such a situation could boost confidence to talk openly about their experiences of abuse.

On the other hand, three participants reported that they had adopted an optimistic attitude when they felt hopeless to stop the abuse and/or when the memories of their abuse were triggered. They hung on to the hope that their situation was temporary and that they would survive. Such an attitude was reported by Galata, Hippy and Shawa. Galata was unable to stop the sexual abuse because her father was hitting her and threatening to kill her mother if she attempted to disclose the abuse. Teachers did not believe her story but rather they protected her father who was their colleague. Her mother did not get to know about her abuse because she was not living with Galata and her abusive father. She was on her own. Galata mentioned that she was suicidal; however optimism had helped her to dismiss the thought of committing suicide. She declared that:

I told myself to be strong and that one day I will come out of it and I will open my heart and talk what is really going on with me. About the killing stuff [suicide], I just thought to myself that it is not a good idea. It won't solve my problem and where would my soul go? Well my body will go under the ground. Where will my soul go to because it will not rest?

Similarly, when Hippy's aunt and uncle ill-treated, insulted and threw her out of their house, she did not give up school. She mentioned that, as she was thrown out, the thought of becoming a prostitute came to her mind, but she dismissed it as she thought the practice would confirm her relatives' perceptions about her. She adopted the belief that things would change when she said:

Every time when things were tough, I used to say one day it will happen to me and I will be a better someone.

For example, when the social worker in Shawa's village did nothing about her disclosure and failed to honour the appointments she had made. Shawa demonstrated optimism when she persisted in finding protection rather than feeling discouraged. She sought help from a local clinic:

This year, I have decided that my whole life has been messed up. I do not want to see my social worker again because every time when I make appointments she says come on Monday or on Tuesday or Wednesday, and I would not find her. I promised myself that I will not give up on it. I am not going to give up on finding help for myself, but I am gonna leave this social worker and find someone else.

It is apparent that optimism was common among participants who lacked support and had received negative reactions when seeking help for their situation. In such circumstances, participants did not allow themselves to be discouraged.

5. Discussion

This study revealed strategies which fall into three categories, namely: (a) detachment from abuse, (b) distorted beliefs about the abuse/abuser, and (c) acknowledgement of the occurrence of abuse. Differences were noted in terms of strategies used when support was available and when there was no support. Detachment, the strategy that temporarily distances a person from the abuse, was often practiced by participants who had no form of support. These included participants who were abused by their parents and/or when their disclosure of sexual abuse was not believed or taken seriously by a trusted non-abusive parent/adult. This provides evidence for Kelly's (1988) assertion that forgetting is a consequence of a lack of understanding and social support. The suggestion is that they had no safe and comfortable platform to vent their frustrations, probably because of fear of family disruptions or defiling the family name. The fact that incestuous families tend to restrict the children's social interaction with non-family members (Finkelhor, 1979) could also be the reason some participants resorted to silence when there was no one to listen to their disclosure. Hence, they resorted to risky behaviours such as running away, drug use, self-injury and unhealthy eating habits.

Detachment from abuse and distorted beliefs are temporary strategies to suppress the emotional pain. Kelly (1988) warned that when someone tried to forget, he or she would repeatedly be reminded about their abuse through dreams and flashbacks. Physical pain

inflicted on themselves in the form of self-injury and unhealthy eating habits signified participants' difficulty in coping with their memories and experiences of sexual abuse and are created by such an experience. Resorting to self-destructive behaviour helped them gain some relief from unbearable emotions related to the experience or memories of sexual abuse. For some victims it may be a way of attacking a despised object, namely their body, which they feel is defiled and no longer their own, whilst other victims are punishing themselves for their perceived guilt (Doyle, 1995).

Keeping busy and running away are strategies used to flee from realities of constant memories or persistent abuse. A child who has exhausted all sources of help believes that the only solution is to run away from home (Sgroi, 1982). Mrazek and Mrazek (1987) warned that although dissociation temporarily allows a child to function, if it persists it may have negative consequences for the development of future relationships. Remembering, acknowledging and working through experiences of sexual abuse are crucial processes if victims are to be able to deal positively with their past (Kelly, 1988: p.193). Indeed, participants in Hemelein and McElrath's (1996) study found that women who had adjusted well had talked about their sexual abuse to their friends or family members.

The perception of sexual abuse as a learning experience, talking about it, and expressing optimism reflect participants' acknowledgement of the sexual abuse. Participants who construe sexual abuse as a learning experience can review their own behaviour at the time of crisis and focus on more adaptive responses (Mrazek & Mrazek, 1987). However, they warned that if the strategy of treating the abuse as a learned experience is not checked, it could lead to a serious loss of reality. In the same vein, if talking about abuse is met with negativity, the survivor can further be damaged psychologically.

It was interesting to note racial differences in terms of the types of strategies adopted by participants. Black students avoided pain-inflicting tendencies, such as self-injury, drug use and starving. Instead, they justified the occurrence of the abuse, acknowledged its occurrence, and remained optimistic about the future. This could be rooted in African beliefs about misfortunes, tragedies and unpleasant events. Mbiti (1969:201) noted that in an African worldview, nothing harmful happens by chance; unpleasant events are caused by someone (a witch) and/or mystical power of religious nature. He further clarified that 'a divine authority' is perceived as the only solution to such misfortunes. Such beliefs could exert a greater impact in alleviating feelings of self-blame and guilt, in the sense that the responsibility for the occurrence of the abuse does not lie with the survivor. For that reason a person becomes motivated to fight the evil using religious-related strategies.

On the contrary, White and Coloured students reported self-injury and using drugs, talking about the abuse and distorted "positive" ideas about the abusers. These strategies could be linked to an individualistic worldview, commonly embraced by most White people, including Coloured people whom, Hickson and Kriegler (1999) indicated as having a culture more similar to Afrikaans speaking group than Africans or Indians in South Africa. In an individualistic worldview, self-reliance is greatly espoused. It centralizes the personal namely, personal goals, personal uniqueness, and personal control while peripheralizing the social (Williams, 2003: p.370). A human being is treated as capable of existing and flourishing on his/her own (Letseka, 2000). Evidently, an individualistic lifestyle could minimize the person's chances of benefiting from social support by people other than close relatives. For that matter, abused persons may struggle on their own to rescue themselves

from the abusive situation. For young children with no resources or capability to deal with the situation it becomes easier for them to resort to “quick fix” strategies, especially if attempts to stop the abuse are frustrated.

6. Conclusion

Although based on the views of only a relatively small number of participants, this study provides clarity with regard to the ways survivors of child sexual abuse cope with their experiences and associated emotions, especially when support was and/or was not available. The study further revealed influence that could be exerted by idiosyncratic factors, such as one’s racial/cultural background, in deciding on the type of strategies to adopt in dealing with a difficult situation. Cultural factors in particular, influence individuals’ worldviews, and shape the way they see the world and their place in it. Most importantly, it shapes the way meanings are given to experiences and are passed between individuals, groups and generations (Eckersley, 2007). The implication for counselling is that one solution may not necessarily be suitable for all cases. Interventions should consider the client’s culture, and if not, they may not succeed or could lead to interventions that may cause damage to the clients (Cross-Tower, 2005). A suggestion to counselors, professionals and paraprofessionals is to obtain a broad knowledge of the beliefs and cultures of their clients before offering intervention services.

Several limitations to this study are evident. The sample size was too small to permit generalizations to a wider group of sexually abused survivors. Additionally, the views of male survivors were not captured, nor the views participants of all population groups in South Africa. Biases in the recruitment strategy are possible, as participants were only those who were based at the social welfare units. Survivors referred to such agencies are likely to have experienced serious forms of abuse and are receiving emotional support from the counseling services at the institutions where they are based. It would be interesting to capture views of survivors who have not yet received any form of emotional support.

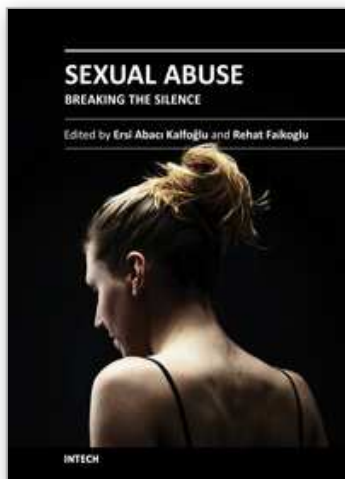
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Sexual assault can be considered as expression of aggression through sex. This, in turn, can have serious negative effects on a survivor's social and occupational functioning. This book has been organized towards that specific approach, by compiling the scientific work of very well-known scientists from all over the world. The psychological victimization of sexual assault, the physiological aspect of sexual abuse and the different attitudes in coping with sexual assault based on different cultural backgrounds are analyzed. Having in mind that one solution may not necessarily be suitable for all cases, we hope that this book will open a debate on sexual assault for future practice and policy and that it will be a step forward to 'break the silence'.

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University Campus STeP Ri
Slavka Krautzeka 83/A
51000 Rijeka, Croatia
Phone: +385 (51) 770 447
Fax: +385 (51) 686 166
www.intechopen.com

InTech China

Unit 405, Office Block, Hotel Equatorial Shanghai
No.65, Yan An Road (West), Shanghai, 200040, China
中国上海市延安西路65号上海国际贵都大饭店办公楼405单元
Phone: +86-21-62489820
Fax: +86-21-62489821

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