

Working with recent rape survivors

Information sheet 5007

Specific issues and counselling processes

Each individual victim of sexual assault has their own personal and private experience. The way they respond to the assault is determined by a multitude of factors. These include, the victim's age, relationship status, cultural background, personal history, physical ability, access to support systems, level of self-esteem and the unique combination of strengths, weaknesses and skills that help them survive the situation which all combine to produce unique experiencing. However, just as there are common patterns of sexual assault, there are common responses to sexual assault. These responses will be experienced by most victim/survivors at some point in time. This has led some workers in the field to label these responses as Rape Trauma Syndrome - a typology of emotional impacts which roughly parallels Post Traumatic Stress Disorder. Briefly, these include:

Powerlessness and loss of control

"I feel so helpless. Will I ever be in control again?"

Because all forms of sexual violation involve a wresting of power from the victim, the counsellor's primary role must be to facilitate the empowerment of the victim. By explaining procedures and options, by respecting and advocating for their choices, the counsellor can assist the survivor to regain a sense of control in the ongoing process of their life.

Emotional numbness

"I feel so numb. Why am I so calm? Why can't I cry?"

After an assault has occurred, many victims experience periods of emotional numbness which is a shock response. This response is often misinterpreted by those around them. For example, it may be taken as an indication that they are in control of the situation, are calm and relatively unharmed, or even that they are fabricating their experience of the assault. However, emotional numbness is not an uncommon reaction to severe trauma. It should be interpreted as a victim's 'front line' defence against the overwhelming reality that they have been sexually assaulted.

Denial

"Was it really sexual assault? I'm okay. I'll be alright."

Following the initial shock of the assault, or even months later, a victim may deny to others or to themselves that they have been assaulted. They try to suppress the memory of what has happened in an attempt to regain the previous stability of their lives. Denial also plays a part in the ranking of types of sexual assault. For instance, some victims may feel that if the offender did not penetrate them they were not sexually assaulted, or alternatively, if the offender did not ejaculate then it was not as bad etc. It must be remembered that sexual assault exists on a continuum and that all forms of sexual harassment and violation are experienced as threatening and can have devastating consequences for the victim.

Disturbed sleep

Survivors of sexual assault often experience sleepless nights and/or nightmares. The nightmare may involve reliving the assault/s which indicates that they have unresolved issues pertaining to the assault. It is the counsellor's role to support the victim in the process of sifting through these issues. It is also important to affirm that as the healing process continues, the nightmares or sleepless nights will become less frequent.

Flashbacks

Memories of the assault often return without warning. Sometimes these flashbacks will be so vivid that the victim feels as if they have re-lived the experience of assault. As a counsellor you need to reassure the survivor that flashbacks are not the result of irreversible psychological damage or an indicator of insanity. They represent a trauma response which, like nightmares, will decrease as issues are resolved and the healing process progresses.

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Guilt/self blame

"I feel as if I did something to make this happen. If only I hadn't..."

Victims of sexual assault may feel that they could have avoided it by acting differently. These sort of reactions are often strongly linked to the myths about sexual assault that prevail in the community which frequently blame the victim rather than the offender. The behaviour and reactions of friends, family, police, lawyers and social workers may reinforce the victims' own feeling that s/he 'asked for it'. The victim may also feel guilty that they have brought shame on their family and themselves by talking about it or reporting it to the police.

Similarly, if they believe they could have resisted more forcefully they may also feel at fault. This is particularly true for adult survivors of childhood sexual abuse who tend to see themselves as they are now, as adults, rather than as they were at the time of the abuse.

As counsellors, our role is to provide information that demonstrates that men, women and children have been sexually assaulted under many circumstances. The offender is always at fault, never the victim. Nothing a victim does is 'asking for it'. Equally, the victim's strategies for surviving the assault are issues for affirmation, not condemnation. Under all circumstances the worker must reinforce that the victim is not to blame and that it is the offender who must take full responsibility for the crime they have committed.

Embarrassment/shame

"I feel so dirty, like there is something wrong with me now. Can you tell that I've been raped? What will people think?"

Many people who have been sexually assaulted feel intensely ashamed and embarrassed. They often feel dirty and in some way 'marked for life'. This reaction may prevent victims from speaking out about the assault. Cultural background factors can intensify such feelings. Underpinning these reactions is the internalisation of the myths pertaining to sexual assault. Encouraging the victim's to work through these assumptions will ensure appropriate relocation of responsibility for the assault with the offender.

Loss of confidence

"I feel I can't do anything any more....even the simplest things."

The experience of assault exposes the victim to the stark reality that they cannot always protect themselves no matter how hard they try. The assault is not only an invasion of the victim's physical self but also the intellectual, social and emotional self. The experience of assault brings vulnerability issues to the fore which can devastate self confidence and destroy assumptions about the world and your place within it. To facilitate the survival process workers must concentrate on building and affirming a newly defined sense of confidence.

Mood changes

"I feel like I'm going crazy!"

After the assault, the victims' emotions may swing from intense emotional pain to complete numbness. They may feel depressed, restless or deflated, confused or stridently angry. Feeling at the whim of emotions over which they have no control may make them believe they are psychologically unstable or crazy. As workers we can support survivors by predicting the possibility of intense mood changes and validating their responses while placing them within a framework of 'normal' and understandable responses to trauma. The victim should also be reassured that as they continue to work through the issues arising from the assault these reactions will subside.

Low self-esteem

"I'm disgusted by myself, by the memories. I'm just worthless."

Given that sexual assault disempowers, humiliates and degrades victims, it is not surprising that victims often experience low self esteem. It is essential that, as workers, we focus attention on the positive aspects of the victim's character, strategies to cope, and personal achievements as a means of enhancing and making more accurate the victim's sense of self. Again, the exploration of the reality of what happened may assist the victim to reframe their own part in it and to release themselves from self-blame and other entrenched

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responses which may contribute to a sense of low self-esteem.

Depression

"How am I going to go on? I feel so tired and hopeless."

Many victims of sexual violation suffer periods of depression. It may take the form of inertia, fear, anxiety or self hatred, numbness, loss of appetite, disturbed sleep or include other physical indications of stress. Often associated with depression is a sense of meaninglessness. After being assaulted many of a victim's previous assumptions about themselves, their rights and expectations lose their meaning leaving them feeling totally undermined. The supportive worker should endeavour to uncover the themes beneath the depression, including intense personal grief and repressed anger at the injustice of the assault. The externalisation or release of grief and the appropriate re-focusing of anger will empower the victim/survivor.

Fear

"I'm constantly jumpy. A sudden noise, an angry voice, moving bushes and I am afraid."

During an assault many victims fear for their lives. Often this fear is a direct result of the offender's threats. After the assault, a victim may be fearful of the dark, being alone or going out by themselves. They may experience fear generated by the possibility of pregnancy or STD's or live in fear of running onto the offender again or facing them in court. All of these fears are very real concerns and the worker should try to ensure that the material conditions of the victim's life are such that he or she is literally and symbolically as secure as possible. In all instances the worker should regard the victim's fears as legitimate and support them to develop strategies which will contribute to a gradual rebuilding of their confidence in day to day living.

Anxiety

"I feel so tense. I'm a nervous wreck."

Survivors of sexual assault often experience severe anxiety which may manifest in physical symptoms such as difficulties in breathing, muscle tension, nausea, stomach cramps or headaches.

These symptoms can be eased as they gradually deal with the issues underlying the stress, and employ relevant stress management strategies.

Hostility

Many victims of sexual assault experience feelings of hostility towards the gender of their offenders. For example, women who have been sexually assaulted may experience feelings of hostility towards, and a fear of, men. These feelings may be directed against a specific person, such as the offender, or generalised to other men. Feelings of hostility may also include a friend or relative whom the victim feels should have protected them or given them more support. Many workers attempt to discourage and eliminate these feelings presuming them to be destructive. However, it must be recognised that given their experiences, the victim's reactions are quite justified and often these feelings of hostility represent the beginning of a natural, positive emotion rather than a negative one. It indicates that the victim is beginning to view the world and themselves in a different way, consequently placing less trust in what could be abusive relationships. It also indicates that the victim is not placing the entire blame for the assault on themselves but is recognising that the offender was responsible. It is most important to work towards the moment when the survivor is able to see the role played by society in creating both the offender and the conditions for these sort of offences to occur.

The task is to identify positive avenues for the translation of hostility into energy for sustained personal and social change.

Anger

"I want to kill him; I hate him, everything, everyone."

Anger is a difficult emotion for most people. Culturally, we are discouraged from expressing anger and it is most frequently displaced rather than directed at the appropriate target. The victim's anger towards their offender is more than justified. They may also be angry at the response they receive from others to whom they disclose. As a counsellor, you need to be aware that you too could be a target of this anger and you must assist the victim to identify avenues for positive

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expression of anger by helping them learn techniques for safe expression, and confidence in the legitimacy of anger which arises out of the experience of the assault.

Sexual Confidence

"I just can't bear to be touched"

The experience of sexual assault has a direct impact on a victims' sexual confidence and interest. They have experienced sexual expression linked to aggression, hostility, derision, arrogance, force, domination, insensitivity and coldness. Often it is difficult to free one's mind of these associations and feel comfortable enough to re-establish or begin a sexual relationship. It is important that the victims' partner understand that they will need allow the victim to be in control of any sexual activity and therefore, the one to initiate it. It is essential to long-term recovery that the victim is not pressured into sexual intimacy.

Alienation/isolation

Feelings of differentness, alienation, isolation and despair are often experienced by sexual assault survivors if they are unable to share their experiences with others. Societal norms prevent many victims from speaking out about their experience of sexual assault and many victims, women in particular, have few avenues for personal communication. This is particularly the case for victims assaulted by their partners or acquaintances. Likewise, victims from Non English Speaking backgrounds may be denied access to mainstream support systems. Victims with a disability may also be unable to voice their experience to others due to the nature of their disability.