



**South Essex
Rape & Incest
Crisis Centre**

**Information Pack
For Women and
Girls who have
experienced
Sexual Abuse**

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Introduction

South Essex Rape and Incest Crisis Centre (SERICC) opened in 1984 to provide counselling, advocacy and support to women and girls who have experienced sexual violence.

Please read this pack at your own pace. You may be experiencing a range of feelings – from outrage to despondency, from anger to the deepest of relief. At the end of the pack there are additional resources and contact numbers, as well as numbers of websites throughout the pack. (if you are reading this online many of the websites will be correct and active at the time of writing).

The vast majority of sexual violence is committed by men known to the women and girls they abuse. SERICC acknowledges that boys are abused and that some abusers are women. It is also important to acknowledge that some women and girls experience sexual abuse by more than one person, sometimes groups of men and women.

This pack is for women and girls who have experienced any sexual violence either by someone they know or a stranger, recently or in the past. It includes general information, facts of sexual violence and a brief overview of counselling. It does not need to be read all at once. Some parts of the pack may bring up thoughts and feelings, so take your time. If you feel overwhelmed, then reach out and get wider support.

Sexual abuse of children in the family continues to be the most hidden and least publicised form of child abuse. Sexual abuse of children by a trusted adult, not necessarily a member of the family, is also rarely spoken about.

The Facts¹

It's much more common than people think

- 21% of girls and 11% of boys experience childhood sexual abuse.
- 23% of women and 3% of men experience sexual assault as an adult. 5% of women and 0.4% of men experience rape.
- 40% of adults who are raped tell no one about it. 31% of children who are sexually abused reach adulthood without having disclosed their childhood sexual abuse.
- Only 15% of adult serious sexual offences are reported to the police and of the rape offences that are reported, fewer than 6%¹ result in an offender being convicted of this offence.
- Childhood sexual abuse can *also* be experienced by any child including children with a disability, missing or looked after children and children from families experiencing domestic violence.

It represents a form of gender inequality...

- The majority of perpetrators are male and most victims are female. It is both a cause and consequence of gender inequality

¹ Statistics from Home Office Sexual Violence Action Plan 2007

What is sexual abuse?

It is not uncommon for sexual abuse to begin with kissing and genital touching and eventually progress to oral sex and full intercourse. However, sometimes a child's first experience of sexual abuse is full intercourse and this can happen with a child as young as two or three years old, or younger.

Watching and looking

The abuser may make a child look at pornographic materials like books and DVD's or internet sites or make the child watch him masturbate, or engage in other sexual activities. Sometimes the child is made to do things to themselves or with other adults or children, so that the abuser can watch them.

Does pornography lead to sexual abuse?

Studies show that of the 200 million people online at any time between 25 to 30% are using pornography sites. The only words entered in search engines more often than 'sex' are 'the' and 'and'. At the time of writing there were more than 400,000 websites worldwide that offer child pornography, which is illegal in every country in the world but despite this there was a 345% increase in child porn websites in a 5 month recorded period in 2003²

There are differing opinions and views on the issues of pornography within society. However, in the majority of pornography, women and children are depicted as passive and submissive and the men are depicted as being in control. This form of inequality may lead to some men wanting to replicate that power relationship within their relationships with women and children.

Except for the minority of people who think that you should show be able to access and buy any form of pornography - including child pornography – most people support some form of censorship. Therefore, it is not a question of being for or against censorship; it's about where you draw the line and why. Why consider censorship? Research has clearly shown that attitudes in society are influenced and shaped by the ideas and images that we are constantly exposed to. Take advertising as an example. If advertising didn't work, multi-national companies would not spend literally millions of pounds on advertising their wares. It is therefore safe to assume that if advertising can have such a huge influence on the choices and decisions we make and how we live our lives; exposure to pornography will also help to influence and dictate societal attitudes.

² Cornwall Rape and Sexual Abuse Centre

Kissing

The abuser kisses the child in a sexual way. Open mouthed or 'French' kissing are the most common, or the abuser may kiss other parts of the child's body in a sexual way. Kissing is not really the right word for what abusers do, as kissing should be a shared, consensual action – what the abuser does is put their mouth or their tongue onto or into the child's body without the child's consent.

Genital Touching

A child may be made to touch or rub the abuser's genital area or to masturbate the abuser. It is also common for the abuser to touch the genital area, rubbing the child's vagina or inserting fingers in the child's vagina or rectum.

Oral Sex

Oral rape is very common in sexual abuse. The child is either made to perform oral sex on the abuser or the abuser performs oral sex on the child. This can be the most terrifying abuse for a child because it can bring with it fears of choking to death when a penis is pushed back into the throat, or if the abuser ejaculates.

Intercourse

It is important to remember that when an adult has sex with a child it is rape; because the child has not and cannot give their consent for it to take place.

'Dry intercourse' is when the abuser rubs his penis against the child's genital area, inner thighs or bottom. This can gradually progress to full vaginal and anal rape. The latter case occurs when the penis is inserted into the anus or rectum.

Organised Abuse and Ritual Abuse

Organised abuse is when there are a number of abusers who regularly commit sexual violence against children and young people, and sometimes against adults too. When these organised groups add 'religious' elements, such as ceremonial garments, rituals, chanting, and so on, to the abuse, this is known as ritual abuse. It is also sometimes called satanic abuse because of the way ideas about the devil and the supernatural are used to scare and threaten children and adults.

A common element with both organised and ritual abuse is that children will often be made to hurt other children, which makes it even harder for them to disclose what is happening to them. Even when victims of ritual abuse do tell of their experiences they are often disbelieved. It can be very difficult for them to find a genuinely safe place to get help.

Responsibility

The abuser is always responsible for sexual abuse no matter what the child does or does not do.

Susan

Susan is the youngest of three daughters in a family of five. The family is a happy one and they are well known where they live. All of the family would describe themselves as a 'close family'. However, there is a secret. When Susan was approximately three years of age, she remembers her father beginning to touch her in a 'funny' way. He would cuddle her, but it made her feel a bit weird. He always told her how much he loved her and that she was his special girl.

Gradually, as the months went by Susan's father started touching her genitals and making her touch his penis; he would often give her sweets or money as bribes. This became part of Susan's everyday life. She did not tell anyone because daddy started asking her to do some very strange things, things like putting his penis in her mouth; she thought that was awful. When however, she refused to do what her daddy wanted he would get really cross and say he would tell her mum that she had been dirty and bad for years. No one would believe what she said, everybody would hate her. So Susan did what she was told.

From seven to fifteen, Susan's father made her do worse and worse things. He had sexual intercourse with her. She grew to hate her father but she felt so disgusting she never plucked up the courage to tell anyone. When she was fifteen Susan got her periods and her father said 'from now on it had to stop because she might get pregnant'. Susan did her best to forget it had ever happened. After leaving school at sixteen she started working in a local shop, despite her school teachers encouraging her to stay on in further education.

Her father continued to be strict about her going out with friends. Susan's mother said it was because she was the baby of the family. Susan's best friend encouraged her to go out and have fun, but whenever she did go out her father told her that she was dirty and that everyone would be

able to see that. No matter how much Susan washed herself she felt dirty. She washed and she cleaned herself over, and over again. She used bleach on herself to make sure she was really clean.

One evening, she was asked to work overtime. Her supervisor talked about a television programme she had watched recently about a girl who had been sexually abused by her father. Susan listened. It was the first time she had ever heard anyone talking about what had happened to her. The supervisor said that the girl in the programme never told anyone until she had her first baby. She was so scared that the father would harm her child that she told the whole family. Susan listened. "Thank goodness there are people out there to talk to about this kind of thing. Imagine how awful it must be". "Imagine" said Susan.

Later that evening Susan went to her friend's house. She went on the computer and looked at the programme her supervisor had been discussing. Susan had never realised that what happened to her was described as sexual abuse. She wrote down one of the helpline numbers and decided that one day she would contact them. She was scared but wanted to find out if other girls felt this dirty. For the first time Susan thought that it was her father that was dirty and not her. She rang the helpline two months later and spoke to a woman who described her feelings to what happened as normal. Susan was relieved that finally she could speak to someone and continued to ring the helpline until she got the courage to go into the rape crisis centre and meet a counsellor face to face.

Susan no longer scrubs herself clean with bleach. She feels that she has a future and does not need the permission of her father to go out and meet her friends. She is saving so that she can share a flat with her best friend in the future.

Sexual abuse is always an abuse of power. The power may be used in an obvious (bullying or threats) way or hidden (bribing) way. Children are never in a position to give their informed consent because they do not have a mature understanding of sexuality. Many children are taught not talk to strangers especially in schools where there is an emphasis on 'stranger danger'. Research and statistics show that in less than 8% of reported sexual violence is the perpetrator a 'stranger'.

As more adult women began to talk about sexual abuse, it became evident that most victims are abused by people known to them - relatives, neighbours, babysitters, and friends etc. Abuse within the family is all too common.

The media and many people in general society would like to think that sexual abuse only happens in certain 'problem' families. This is certainly not the case. Abuse happens in all kinds of families regardless of wealth, status, race, faith or culture.

Often, in the beginning, many children believe that what is happening to them is happening to everyone; that it is 'normal', although they know that it feels wrong and no one talks about it. As they get older, and realise that not every child experiences what they do, their sense of isolation and shame can be incredibly difficult to bear. Sometimes the abuse can be cruel and violent, but it can also be accompanied by parental love and affection that make it even harder for a child to make sense of what is taking place.

"I love daddy, but I do not like the awful things he does to me". Children who are sexually abused within their family often feel that the sexual abuse is part of parental love. Often they are made to feel very 'special' by the abuser, given extra attention, gifts, and time. The feelings of shame and secrecy are made worse by the fact that children's bodies sometimes respond to the abuse.

This physical response does not mean the child enjoyed the abuse, and does not detract from the violation of their body. It is important to remember that you were betrayed, not by your body, but by the adult(s) who abused you.

Short Term Responses

Short term responses are those which are evident at the time of abuse or in the days, weeks or months following it. As short term responses can be identified around the time of abuse, awareness of them can be very helpful.

Short term emotional and behavioural responses to abuse include many signs of distress that parents and carers often note in their children for a variety of reasons.

These include:

- Being afraid of the dark or needing the light on;
- Having trouble sleeping;
- Not wanting to go to places which they used to be happy to visit;
- Not wanting to be left with or visit people they used to be comfortable with;
- Suddenly going very quiet when they have previously been outgoing;
- Being loud and getting into trouble when they were previously well behaved;
- Not wanting to be left alone, becoming very clingy;
- Wetting or soiling themselves, when they had previously been dry and clean;
- Becoming very secretive;
- Scratching, cutting or burning themselves;
- Getting into fights;
- Having difficulty eating and drinking;
- Becoming very jumpy and nervous.

These changes in behaviour or character do not necessarily mean that a child is being sexually abused; but it is important to bear this possibility in mind when considering other causes or issues.

There are also often medical symptoms of abuse, which may include:

- Venereal infection;
- Mouth infections or soreness;
- Bruising around the mouth, buttocks or thighs;
- Pregnancy;
- Vaginal or rectal bleeding;
- Vaginal or rectal itching and soreness;
- Recurrent urinary tract problems.

These are very clear signs of distress which, in a child or teenager should never be left unexplained. When these kinds of symptoms are present, sexual abuse must be seriously considered even if a child is not disclosing abuse.

Betty

Betty is forty eight years of age, happily married with three children, twin boys of nineteen and a girl of sixteen. She and her husband get on well. They have no financial worries and they live in a lovely house. Betty works for a charity and is now raising money for cancer research. She is also involved with several local community groups.

On the outside everything looks fine. The only indication that anything might be wrong is Betty's weight problem. Over the years she has battled to keep her weight under control, going on numerous diets; but after each diet the weight piles on again because of Betty's binges. She now weighs fifteen stone and has more or less given up.

Betty and her husband do not have sex anymore. She cannot bear him to see her naked much less touch her. Sometimes she wishes he would have an affair then she would not feel so guilty. While they do not fight and appear to get on well, there is a depressing routine about their life together and the spark and hope of the early years have gone.

Betty never voices any of this. In fact, she voices very little. She cannot bear emotion of any kind; she hates to see people cry and would never cry herself. She does not feel especially close to her children, in fact she does not feel especially close to anyone. Sometimes Betty wonders if it should be otherwise but does not allow herself to think about this for long.

Eight years ago Betty attempted suicide. Her husband came home one night to find her unconscious and her wrists bleeding badly. She was hospitalised for six weeks. During that time the psychiatrist tried to get her to talk, but she would not say why she did it. She said that she did not know and she and her husband never talked about it.

Betty is locked in a lonely prison of silence. However, she can manage her life provided that there is no major challenge. She does not really know herself, but she no longer wants to. She tried to look once at what might be beneath her feelings, but what happened as a result scared her too much. Betty was abused by her brother from the age of seven to eleven. He raped her repeatedly in her own bed late at night while her parents slept.

Two weeks ago Betty decided to go for sexual abuse counselling as she was having repeated nightmares. She finally told her doctor what had happened to her as a child. The doctor contacted the rape crisis centre while Betty was sitting there, to make the appointment. This was the first time she had ever told someone about what had happened to her.

Betty wants to understand why she is having these thoughts and nightmares. She hopes that by talking to someone, who will not judge or blame her for what happened, she will then have the space and time to make sense of how she is feeling.

Long Term Responses

Long term responses are those behaviours and coping mechanisms which you may have found helpful at the time of the abuse or you may turn to in the months and years following the abuse. Long term responses usually occur as a result of an abused person not being able to speak about their experiences or not having been believed or helped if they did disclose. You may have carried on with your life keeping this secret, containing your feelings, and trying to contain the significant effects they may have on your life and personality. The ways that you have used to cope are survival mechanisms, and have helped keep you going. Problems arise when the survival mechanisms begin to hinder your ability to live the life that you want to live.

At certain stages in your life, particularly in times of stress and major change, feelings may be accompanied by other symptoms such as panic attacks, nightmares, flashbacks and intrusive memories. Sometimes it takes a crisis or a series of crises for someone to piece together their experience of abuse. TV, radio programmes, newspaper articles etc. are constant reminders of the fact that sexual abuse is not a myth and that it does not have to be a secret anymore. You have the right to tell and the right to seek help.

There are many ways of coping and surviving sexual abuse. The following are an outline of some of them. It is not an exhaustive list, as each individual will have different responses to their own experiences.

Addictions

These can become a way to escape, to find relief, to protect you, to gain control and to feel 'better'. You may use alcohol, drugs, or food in an attempt to temporarily escape or numb the negative feelings you have about yourself and your life. You may be addicted to crisis, chaos, dangerous situations, sex, work, groups, people, gambling; all of which can lower your self-esteem and interfere with relationships and can be life threatening.

Even if you are not addicted you may still be using prescribed drugs such as tranquillisers or painkillers, illegal drugs and/or alcohol to try and blot out the physical and emotional pain you are experiencing. Whilst they can be helpful temporarily, their prolonged use has both physical and mental consequences which will not help you deal with your experiences in the long run.

Once you feel that you have been heard and are getting the support that you need, you may find it becomes easier to handle your life without the use of drugs or alcohol. Alternatively, you may find that cutting down or cutting out drugs or alcohol helps you get into the right frame of mind for seeking help for yourself.

Eating Difficulties

What we are referring to here concerns problems with eating, or disordered thoughts about eating, how we eat and do not eat, and what that means to you. *We are not talking about body size.* Eating disorders thrive in a media and celebrity led culture. Sexual abuse intensifies the problem.

Women will sometimes develop Anorexia (strictly controlling what you do or do not take into your body, starving yourself of food or eating too little to be healthy), or *Bulimia* (a pattern of eating and throwing up, or bingeing and throwing up). As a child having body parts or objects forced into your mouth or your body you may have choked, gagged or vomited.

Throwing up may have become a way of saying no. Your body may be remembering the abuse and responding as it did, or as it wanted to do, in the past. Some adult survivors of sexual abuse find that they literally cannot swallow food or drink sometimes. However, this is a separate issue from the conscious decisions taken by an anorexic.

For girls who have been forced or pressured into sex they did not want, growing into a woman's body can be terrifying. Anorexia and Bulimia can be a way to attempt to assert control over their changing body.

Compulsive eating may be another way of coping. If you are hurting, eating may be the only way you know how to comfort yourself or get relief from your pain.

Eating difficulties can become potentially life threatening patterns, as food is vital to life. It may be helpful to look at why you eat the way you do. It is important not to condemn yourself for trying to get your needs met through food. Many women are not used to responding to their body's needs, and abuse often makes it more difficult for people to learn to listen to their body; so that even basic needs such as hunger and thirst are difficult to recognise.

Once you are safe and you can start to take control of your memories and experiences, you may find it easier to identify your body's needs and respond to them with nourishment and gentleness.

Panic

This is what you feel when you get scared or overwhelmed by your emotions. Although these feelings can happen anywhere and at anytime there is usually a reason, a thought or a 'trigger'. However, in a panic attack you are not always aware of what that reason is. Panic attacks can make you feel as if you are going to faint or cannot breathe.

Your heart beats fast, your eyesight may be affected, you may break into a cold sweat, have shaking legs and arms and you may feel like you are going to die from a heart attack or go mad. It is very difficult to think clearly when you are having an attack.

The most important thing is being able to calm down, breathe slowly and deeply and make sure you are safe. An effective way to deal with the panic or anxiety is to catch it early. Try to reassure yourself that it will pass. It may be helpful to find something solid to lean against, such as a wall or railing, or to sit down.

Try and ground yourself by gripping something tightly or pressing your feet hard into the ground – this can help remind your body that you are in the "here and now". When the feelings of the panic attack pass try to relax and rest a bit. Panic attacks can be exhausting. When you feel rested try to determine what helped you when it started.

Each time you have an attack you will learn more about what you need to help you get through it. If you have supportive people around you, you might consider sharing your ideas with them so that they can try and help in ways that feel comfortable to you.

The more support you have during attacks (and in your life generally), and the more you learn about how you can get through the panic attacks, the more control you will begin to experience. Taking control of symptoms like panic attacks can help you feel stronger about taking control in other areas of your life too.

Dissociation/Spacing Out/Splitting

One of the common ways of dealing with the experience of sexual abuse is to 'escape' from your body or mind. Often as children it was not possible to run away so this is another way of leaving the situation. To dissociate (take yourself mentally away from your own body) is an incredibly clever survival response to trauma, and helps people cope with otherwise unbearable situations.

Unfortunately, as time goes on, dissociation may well become a problem as it can start to happen even when no new trauma is occurring. It can cause difficulties in everyday life.

For example; a child may get into trouble with a teacher for "daydreaming" and respond aggressively because they are not sure where they are or who the teacher is; or an adult may attract unwanted attention by "zoning out", losing focus and balance in a public place, and then being confused and jumpy when people try to help.

Dissociation can show itself in many ways, for example; walking into walls or doors; feeling like you are spacing out and not being present; finding an object and staring at it; feeling like you are just a pair of eyes. Leaving your body may involve feeling like you are floating while others go somewhere they cannot identify. 'Splitting' from the body can often happen when you are not aware that it is happening, and this is why it can take a while to realise where you are and who is with you afterwards.

Some women split themselves, other people, events and abusers into either all good or all bad. For example, a child may separate the father whom she depends on for love and protection from the father who abuses her; this allows her to preserve an image of a 'good' father. However this can leave the child identifying herself as 'bad' in order to make sense of the abuse.

This can continue into adult life where on the outside you may present an image, lifestyle or personality that is very different to the feelings that are going on inside the "real you". In extreme situations, dissociation occurs so frequently that multiple personalities can develop; each able to carry part of the trauma they have experienced, as carrying it all at once would just be too overwhelming.

These ways of being numb to physical sensation were an effective way of dealing with pain in the past. However, in adult life these experiences can be lonely and isolating as you cut yourself off not only from the pain but from the abundance of life and good feelings. It helps to listen to your fears, your needs, and your body.

Pay attention to the times when it happens and develop ways of returning and tell a friend what is going on.

If you have found good ways of grounding yourself during panic attacks then you may find some of them helpful following dissociation. Again, the key thing is to find a way to reassure your body and your mind that you are in the “here and now”.

As you build your support network and begin to make sense of your experiences, memories and feelings, you may find that dissociative reactions are not happening so often to you; and those that do occur feel more under your control.

Phobias

Phobias mean being terrified of something, sometimes for no apparent reason, but usually with an understandable cause. For example, being afraid of leaving the house or being in confined spaces may seem inexplicable but make sense in the context of someone’s personal experiences. Some women switch from one phobia to another. One month being afraid of spiders, the following month of men with glasses, then dirt or cleanliness.

Phobias can affect many aspects of your life, and those which require constant cleaning of home and/or body can be particularly intrusive. Phobias are very distressing and many women experience them, but it is also important to recognise them as ways of coping. It can be helpful to look at the thoughts that go with the phobia rather than trying to explain ‘it’ logically.

As you work through your experiences in a safe way, you may find that you can make more sense of what feels so terrifying; and exploring the things which help you address your fears may also enable you to take back more control over your life.

You and Your Body

For many women having a body has become more 'trouble' than it is worth; and some women may therefore chose to ignore it. This not only shows itself through how we eat, sleep, exercise, ignoring body needs – like not going to toilet for long periods of time, staying cold instead of putting on more clothes, or not recognising when your body is sick or ill.

Bodies can be a source of wisdom and information not only for maintaining physical health but for being in touch with feelings and needs. Our body is our essential connection to life.

Physical Illness and Pain

Some women have been abused in ways that have left them with physical illnesses – their bodies remember what they have endured. For others, the ways of coping has led to illness.

Girls and women sometimes suffer one illness after another; for example - unexplained aches, pains, headaches, rashes, stomach pains, asthma, pelvic disorders and problems with sexual organs, sexually transmitted infections such as genital warts, Chlamydia, HIV and many other illnesses that can result from early trauma and stress.

Sometimes an area of your body that was traumatised or injured will develop problems later. You may also experience more subtle problems such as chronic tiredness or low resistance to colds and flu because your immune system isn't functioning well. Whilst not all illnesses are caused by emotional problems or sexual abuse it is important to acknowledge that emotional and post-trauma states often have physical symptoms. Knowing about this emotional aspect to illness and pain can be useful as it gives you the opportunity to work on both an emotional and physical level.

Being aware of these connections as you build up your support and move on from your experiences can help you to notice when particular parts of your body need attention and make it easier for you to nurture those parts that need it most. Paying attention to your physical wellbeing helps improve your emotional well being, and vice versa.

Sexual and relationship issues

Some women who have been abused have problems with sex and intimacy. Others may have positive sexual experiences for a time and only much later experience problems or difficulties. A common experience is flashbacks during sex and the re-experiencing of sensations or feelings. Specific sexual practises e.g. oral sex or being touched in a certain place or way, can evoke memories or feelings of the sexual abuse.

These feelings can be frightening and distressing. Young women will often disclose their experiences of childhood sexual abuse when they first receive sex education or when they begin to develop sexually. They realise that sexual abuse is not normal and should not have happened.

Many women who have suffered sexual abuse find it difficult to trust other people, both in general and intimate relationships. Feelings about sex may be very confused or sometimes extreme. Some women may hate sex and get no enjoyment from it, often going to great lengths to avoid it. Other women become very sexually active. Some women may even feel that it is expected of them to offer sex all the time and they often believe that they have no right to say no.

Some women are afraid of sex. As an abused child your sexual feelings may well have been linked with fear. It could be that you cannot become aroused without fear or you might be terrified of the painful feelings that come up whenever you have sex. Women who were abused by someone they loved and trusted can link sex, love, trust and betrayal so that they are unable to maintain adult sexual relationships.

Some women need control over the sexual experience in every detail, for example keeping the lights on or off, sleeping and having sex in different places. When you start to allow yourself to recognise and fulfil your needs without criticising yourself, to understand your boundaries, to accept yourself and go at your own pace it will enable you to feel more secure. It may take a long time or it may not. It can change with each relationship.

These fears and experiences are a natural result of being abused and common to many women. Some women who have been sexually abused will experience some difficulties with their sexual identity. Sexuality is not only

about sex, it is also about exploring who you are without the fear of expressing it.

Guilt and Self-Esteem

Women may feel very guilty about the sexual abuse they have suffered. They become convinced that it must be their fault or that something about them must have caused it to happen, blaming themselves for not stopping the abuse, for not telling somebody, for 'letting it happen' to them. Often the abuser will encourage and manipulate guilt by telling the child that she is to blame, that she made him do these things.

Women may experience low self-esteem as a constant feeling of worthlessness. Also they may feel guilty, bad, dirty, unliked, unloved and unlovable, or their feelings may change from day to day. Feelings of self hate, shame, powerlessness may come out of the blue.

Many women describe feeling as if other people know that they have been abused just by looking at them. Sometimes a woman cannot understand her own feelings. She might have a sense of happiness being just around the corner, yet always out of reach. At first changing these feelings may not be easy. However, with practice like learning any new skill, the process of releasing and acknowledging feelings will be the foundation of learning to like yourself and your sense of self will grow and develop.

Depression

This word can be used to describe the impact of many different experiences and generally develops through a combination of the effects we have already described above. It can be so severe that it causes women to feel like life is not worth living. For other women depression is a word that covers all feelings and emotions. It may feel too overwhelming and all consuming like being swallowed into a big hole.

Each time you feel bad try to isolate the thought or situation that has set that feeling off. This is not always easy at first, but it gets less difficult with practise. By paying attention to your feelings and discovering the roots of your negative thoughts it can help dramatically change the way you feel about yourself.

Suicidal thoughts and feelings

Women who are very depressed may attempt suicide or have suicidal thoughts. It may be a way of telling yourself that killing yourself will provide a way out of the prison of depression 'without' having to confront all of the pain. It may be a form of revenge or a way of believing that it will make everyone else happy (because they will be better off without you) or that it is the only way of putting everything 'right'. These feelings and thoughts are real at the time and it is important not to deny them. It is hard to imagine that you could ever feel any other way, but you will and you can. Learn to reach out and get support.

Self-Harm

This is a broad term which covers the spectrum of behaviours including self injury such as cutting, burning, and eating disorders. Self harm can be a way of recreating the abusive situation producing a similar result. It can also be a way of expressing anger or a way to have feelings or not to have feelings. It can be a type of punishment and an attempt at control; and self harm can also provide an intense feeling of release and relief as it is another way of coping.

Whatever the purpose, self harm can create feelings of shame and guilt, so it is important to talk about it, because like sexual abuse it can become worse with silence.

Anger

Anger is a feeling common with sexual abuse. Anger is often felt towards the abuser, but can also be experienced towards other people. Parents, particularly mothers, are a target for a great deal of anger; anger resulting from the fact that they did not see or recognise what was going on and prevent the abuse from happening. Sometimes women feel angry at what has been taken from them, innocence, childhood, happiness etc. Other women feel afraid of losing control (although this rarely happens when anger is expressed in a safe and constructive way).

Anger can be a powerful and liberating force. Repressing your anger however, can be more damaging. As you become more familiar with experiencing and expressing your anger it can become a part of everyday life. When it is not so pent up it stops being a dangerous monster and takes its place as one of many feelings.

Action – using anger as a motivating force is also a crucial part of your wellbeing. If you are able to listen to what your anger is telling you, then it can become a valuable resource for moving you towards positive change. Focusing your anger precisely (or putting the anger where it belongs) onto the abuser and away from yourself then clears the way for self acceptance, self-nurturing, positive action in the world and regaining a sense of control and power in your life.

Ann

Ann was an only child, five years of age, and was loved and cared for by her parents. They went out once a week and their next door neighbour's son, Robert, used to baby-sit. He was seventeen.

Ann was fond of Robert. He would play with her and read her stories. One night, as he was reading her a story and tucking her into bed, he put his hand under her night-dress and started gently rubbing her legs, bottom and genitals. This happened several times and then one evening he asked if he could look between her legs. He then started to kiss Ann's genitals and lick them. Ann thought it was a dirty thing to do and she did not like it.

Robert never hurt her physically but she wished he would stop. He told her it was their little secret and that her mummy would not like to know about it, it would be better not to tell. Then one day Robert tried to put his fingers into Ann's vagina. She screamed and cried and cried. Robert comforted her and promised never to touch her again.

Robert didn't babysit after that night so the abuse stopped. Sometimes Ann wished she could have told her mum what was happening, but she was afraid in case her mum told her she was a dirty, bad girl.

Her mum found a new babysitter, Jane. Ann was very quiet and shy when Jane first started coming round to look after her. She cried when her mum went out until she came home. Her mum

described her as too sensitive and shy. It was a 'phase' she said. The phase lasted until she was in her twenties. Ann met her boyfriend at a club. Many boyfriends were met at clubs. She used alcohol to feel less inhibited. When Ann had a drink she was afraid of no one, but she couldn't talk about her feelings and was becoming more and more dependent on alcohol to feel ok.

One morning, Ann had a huge row with her mum. Her mum had said that she couldn't keep coming home drunk and that something bad would happen to her coming home late, drinking and meeting strange men. Ann shouted at her mum saying 'strange men out there! You let Robert come into the house every week so that you could go and out enjoy yourself. How can you say that? Bad things happened right here in my home.'

Ann's mum was shocked into silence. She could not believe what she was hearing. Ann felt a deep sadness. She never wanted her mum to know what had happened to her as a child.

Together, they told her dad. He was angry and confused at first, but they all talked openly, for the first time in years. Ann said she needed help with her dependency on alcohol. Ann felt that nothing could change in her life until she stopped drinking. With support from her family she contacted a local community group who supported her with the alcohol dependency.

Ann was given information about her local rape crisis centre so that she could talk to a counsellor about her sexual abuse as a child and the impact it had on her adult life.

Positive Feelings

For many women positive feelings can be frightening. Even the idea that you might at some time feel 'good' can be threatening. Unexpected good feelings may be difficult to cope with and the idea of contentment and happiness may be so unfamiliar you do not know how to relax and enjoy it.

In childhood feelings such as happiness might often have indicated disaster. For example, you could have been playing happily with friends and your Uncle called you in and assaulted you, or you were sleeping peacefully when your father abused you, or you pretended to be happy when you were suffering inside.

Being liked, loved and appreciated can feel very threatening to a lot of women who have been sexually abused. Appreciation can bring feelings of shame. The contrast between someone's high opinion of you and your own self-hatred can be painful. And feeling positive about yourself – feeling worthy, deserving and proud – may all seem totally out of reach. Although you have experienced a lot of pain in your life, learning to tolerate feeling 'good' is possible. Take all opportunities that come your way. Take the risk of admitting that you feel good – first for a moment then for longer.

Why seek support?

Many women, who have been sexually abused, want to forget all about it. They want to put it in the past and get on with their lives. Like all painful experiences women want to move away from the hurt and sadness and live a 'normal' life again. One of the most common ways for a woman to cope with abuse is to minimise what happened, telling herself, "well it only happened a few times". 'Forgetting' is a common way of coping with an extremely painful experience.

Unlike many other experiences it does not get easier with time, it does not fade or disappear. Buried with the abuse are all the feelings that surround it – sadness, fear, anger, guilt and pain. It continues to affect you and how you live your life. Many women achieve much in their lives by doing well at work, raising a family, and enjoying all the things everyone enjoys, but there is often a feeling of unease, a persistent sense that something is not quite right or an underlying anxiety.

Some women try to put the abuse behind them eventually arriving at a point in their lives when they know that they just cannot go on trying to pretend 'everything is alright'. This can happen a few months after the abuse has stopped, or years afterwards, as many as ten, twenty or even thirty years later.

There are many different events that can bring on a crisis where you can finally say 'Yes, I was sexually abused and I need to do something about how I am feeling now'. Relationships, pregnancy, abortion, the birth of a child, or your child becoming the same age as when the abuse happened to you, or death of the abuser can act as triggers.

Geraldine

Geraldine is thirty two years of age. She works as a nurse in a local hospital. She has been married for four years and has no children. She and her husband get on very well. They did not have sex before they got married because Geraldine did not want to. Their honeymoon was a big strain as she hated the idea of being seen naked and of having intercourse. She thought sex would get easier as time went on but it didn't. Geraldine never enjoys sex and only does it to please her husband.

About ten months ago her father died, he was sixty three. Geraldine has never been especially close to him, but after he died she found that she could not get over her grief.

She became more and more depressed, cried a lot, lost interest in her job and everything at home. Everyone she talked to said that it would take time and that it was normal to feel this way, but Geraldine knew that it was not normal. She had also begun to feel afraid and panicky.

One day at work she felt dizzy and thought that there was no breath coming into her body; her heart was thumping and she thought 'I am having a heart attack'. These panic attacks continued and in the end her doctor prescribed her tranquillisers. She could not get her father out of her mind and she kept seeing his face and feeling afraid.

There was something familiar about the fear, but she did not understand it. One night she had a terrible nightmare and woke up trembling and terrified. She dreamt that she was a little girl in her bed at home. There was a man leaning over, telling her to stay quiet and be a good little girl. The man, her father, had his penis out and was holding it against her face.

She did not tell anyone about the dream. Three weeks later when she and her husband were having intercourse, she had a flashback. Geraldine remembered being small and a heavy weight on top of her and a burning sensation between her legs. She screamed at her husband and sat up shaking and frightened. Finally she managed to tell him what was wrong. She broke down and cried and said 'I think my father abused me'.

Geraldine was terrified by what she had just said. The next morning she felt in shock. She didn't know what she should do next but she couldn't clear her head or think straight. She phoned her friend and cried and cried.

Her friend told her about a poster at work that she had seen. She gave Geraldine the phone number and went with her on her first appointment to see a sexual violence counsellor.

Reaching out

You can ring SERICC if something is happening in your life now, or if you are having difficulties about something that has happened in the past. You can also phone if you are worried about your child, someone else in your family, or someone you know.

If you ring us we can offer telephone counselling and 'one to one' counselling, emotional support and practical information. We will not tell you what to do or judge your actions.

What is counselling?

Counselling provides a space to help you gain a clearer understanding of yourself and your situation. SERICC's counsellors will never force you to talk about anything you are not ready to discuss.

At any of your appointments your counsellor will answer any questions you have about counselling or other support needs. You and your counsellor will review whether you feel the counselling is meeting what you need on a regular basis.

Deciding to have counselling and making the commitment to yourself is a very powerful and life affirming choice. In the counselling you will be looking at yourself, your relationships and your life in general. Counselling is not always easy or comfortable and perhaps the hardest part to come to terms with is the fact that you yourself have to do the work.

Your counsellor can support you and explain what is happening, but she cannot do the work for you. You will have to do the remembering, feel all of the emotions and make the changes. There are no easy answers and although you may get angry with your counsellor, you must keep reminding yourself that she can support you through it.

Feelings can be confusing for some women who are going to counselling and they often say, 'I felt bad before I started this, but I feel ten times worse now'. At times you may feel like running away and forgetting all about it, this is normal.

One of the first things to be learnt in counselling is that it is healthy to have feelings. Some women are afraid of 'cracking up' or going mad when this starts to happen. When you work with a counsellor who is right for you, you should feel understood and supported.

Women are encouraged to express their feelings in safe and appropriate ways. This may well mean going through long bouts of sadness and depression with many painful tears.

What does counselling involve?

Counselling does not bring with it the promise of total happiness - there will always be issues and situations in your life that can cause pain. Nor does it offer the possibility of being able to forget about the abuse. What it offers is the ability to accept the abuse and live with it as part of your life. You will never forget the abuse but you will remember it with less acute pain.

As time goes on you will be able to recognise your own patterns and to feel and be able to interpret your own emotions. You may have to face things that you do not want to face. You may make changes that are very hard to make and see things in a different way.

A lost childhood can never be regained. This is one of the saddest realities that many women have to face. You will probably feel differently about yourself, your relationships, the way you are living and the lifestyle that you lead.

You have to be prepared to take these things in your stride and believe that at the end of it, you will know where everything fits and belongs. The aim of counselling is to enable each person to achieve that for herself.

This means that you will have to work between sessions. It is not enough to come and see your counsellor every week, fortnight or month and forget all about it in between times.

What you need most, and you have survived sexual abuse so you will have plenty of it, is **courage**...

It takes courage from the moment you begin to think 'maybe I need to work this out', right through to the very end. It takes courage to believe that you can work it out and that you have the right to do so. It takes great courage to face ourselves as we really are.

If you think you have got to this point or you are thinking of going for help and support, then there is a part of you ready to confront it. It is the part of you that has never given up, that has always believed and hoped that things should and could be better.

Trust this deep and very strong part of yourself and go forward. Your courage and determination will lead you to where you want to go.

There will be good and bad days during this process. Sometimes you may feel very low. This may disrupt your daily routine, your attention and concentration. You may think that you are 'falling apart' and you will feel fragile for a time, this is part of the counselling process and is normal.

It is really important that you give yourself permission to take the time to look after yourself, develop a support network, create a safe place in your home, or a friend that you can trust and talk openly with when you need to talk, or to get as much support as you can. Telling someone outside of the counselling is essential as it can help to make it more real for you.

They may not always know what to say or how to be, but they can listen. It may be someone close to you, or someone you feel will understand. Other people may have to be 'on hold' for a while and you may have to decide to drop what is not essential, or release the pressures in any way that you can.

Some things are more difficult like holding down a job, or looking after children, but being honest with yourself and looking for solutions e.g. extra childcare, quitting activities that you do not enjoy, dropping unsupportive people, or lightening your work load – will all help.

When you are immersed in working through the trauma of sexual abuse it is easy to feel that all you are is a 'person who has been sexually abused'. It is likely there will be periods in your counselling where you may need to be focused and involved – this is often inevitable and vital; however, it will help if you can take breaks and appreciate how far you have come.

Acknowledging the other parts of your life affirms that you are and are allowed to be a complex, multifaceted person.


Resources and Additional Information Booklist

There are many good books available, we would suggest that you have a look at the DABS web based book service which offers free postage Directory and Book Services (DABS) <http://www.dabsbooks.co.uk> There is a wide selection on Amazon.co.uk and your local bookshops or library.

Title	Author	International book standard number
Breaking Free: Help for Survivors of Child Sexual Abuse	Carolyn Ainscough & Kay Toon	0859698041
The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse	Ellen Bass & Laura Davis	0060964375
I Never Told Anyone: Writings by Women Survivors of Child Sexual Abuse	Ellen Bass & Louise Thornton	0060965738
Outgrowing the Pain	Gil	0440500060
Cry Hard and Swim: The Story of an Incest Survivor	Jacqueline Spring	0860688135
Allies in Healing: When the Person You Love Was Sexually Abused as a Child	Laura Davies	0060968834
Ghosts in the Bedroom: Guide for Partners of Incest Survivors	Ken Graber	155874116X
The Body Remembers: The Psychophysiology of Trauma and Trauma Treatment	Babette Rothschild	0393703274
Trauma and the Body: A Sensorimotor Approach to Psychotherapy	P Ogden	0393704572
Father-daughter Incest	JL Herman	0674002709
Out in the Open: Guide for Young People Who Have Been Sexually Abused	Quaine Bain & Maureen Sanders	85381184X
Black Girls Speak Out	Khadj Rouf	0907324606
Mothers Surviving Child Sexual Abuse	Carol-Ann Hooper	0415071887
In their Own Words: A Sexual Abuse Workbook for Teenage girls.	Karen Riskin & Lulie Munson	0878685960
My Father's House: Memoir of Incest and Healing	Sylvia Fraser	0860681815

Useful telephone numbers and web sites

South Essex Rape and Incest Crisis Centre	☎ 01375 380609
Rape Crisis England & Wales www.rapecrisis.org.uk	
Eating disorders National Helpline http://www.b-eat.co.uk/Home	☎ 0845 634 1414
Alcoholics Anonymous National helpline http://www.alcoholics-anonymous.org.uk/	☎ 0845 769 7555
Narcotics Anonymous National helpline http://www.ukna.org/info/contacts.htm	☎ 020 7730 0009
Rights of Women (free legal advice by women for women)	☎ 020 7251 6575
Women's Aid (national domestic violence helpline)	☎ 0845 702 3468
Samaritans	☎ 0345 90 90 90
Threshold InfoLine (mental health information run by women for women)	☎ 0845 3000 911
British Association of Counsellors	☎ 08704 435252
I in 4 (for male and female survivors of sexual abuse, run by survivors)	☎ 020 8697 2112
MIND (mental health helpline)	☎ 08457 660163
www.izzyspromise.org.uk (for survivors of organised abuse, and their families/partners)	☎ 01382 206222



Do you need to talk to someone about
**rape or sexual
abuse?**

It could have happened a long time ago or more recently.

If you are worried, need support or information, you can call our helpline:

**SOUTH ESSEX RAPE
& INCEST CRISIS CENTRE**

01375 380609

www.sericc.org.uk



**South Essex
Rape & Incest
Crisis Centre**

Our 24 hour answerphone will tell you our helpline times, or leave a message and we will call you back as soon as possible.

We offer a confidential helpline, 'one-to-one' counselling and support for women and girls who have suffered or are suffering sexual violence.