Understanding the Impact of Child Sexual Abuse on Women's Sexual Lives: A Discourse Analysis
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Birchmore K,* Moulding N,* Zufferey C.*

a Safe Relationships and Communities Research Group, UniSA: Justice & Society, University of South Australia, Adelaide, South Australia

Abstract

This paper reports on a post-structural feminist study that examined how discourses about child sexual abuse frame understandings of the impact of abuse on women’s sexual lives. The study considered the overarching question ‘What discourses associated with the impact of child sexual abuse on women’s sexual lives are reproduced, resisted or invisible in the narratives of women who have been abused and the professionals who work with them?’ Discourse generates the experiences that are possible, including what people think and do and their material circumstances. The research method involved three related studies that included a survey and interviews with Professionals who work with women who have experienced child sexual abuse, and interviews with women who have histories of child sexual abuse. Thematic and Foucauldian discursive analysis identified powerful, gendered, heteronormative discourses about female sexuality, child sexual abuse and its impact on women’s sexual lives. This report will briefly overview previous research in the area, the theoretical approach and research methods employed in the study and outline the three overarching thematic representations in the accounts of the women and the professionals.

Keywords

sexual lives, sexual abuse, trauma, heteronormative discourses, sexuality

*Corresponding author: nicole.moulding@unisa.edu.au
1. Introduction

1.1. Child sexual abuse and women’s sexual lives: A brief review of the literature

The prevalence rate of child sexual abuse in Australia, as in other countries, varies because it is determined by the way sexual abuse is defined and measured (1-3). For example, narrow definitions require sexual penetration which result in lower prevalence rates whereas broader definitions include non-penetrative acts of abuse. Other factors influencing definitions include restrictions on the age of victims and perpetrators (4). Nonetheless, it is generally accepted that one in three women and one in seven men in Australia have experienced child sexual abuse (5). Female children are at higher risk of child sexual abuse (6) and for both girls and boys the perpetrator is overwhelmingly male (7). This underscores the gendered nature of child sexual abuse.

The body of research focussing on the general effects of child sexual abuse for women is vast and draws on diverse paradigms. Moreover, there is not a definitive benchmark for psychological symptoms specifically linked to child sexual abuse (8-10). Generally, conventional research examining the effects of child sexual abuse is premised on examining the detrimental outcomes. For example, many researchers have reported that women with histories of child sexual abuse experience a range of negative consequences spanning psychological, physiological, behavioural and social domains (6, 7, 11-13). Many of these studies are retrospective (14), with a focus on determining the objective psychopathology caused by child sexual abuse.

Intriguingly, previous studies have paid less attention to women’s perspectives on their sexual lives, which is noteworthy given the known effects of child sexual abuse across women’s lives, including its sexual impact. It is critical to understand the socially constructed nature of women’s experiences, including the common premise that child sexual abuse is inevitably traumatic and damaging (15, 16), and outside of ‘normal’ experience, because these constructions have potentially powerful implications for individuals. Along these lines, feminist research has sought to challenge pathologising and individualising constructions of child sexual abuse and brought to the fore alternative understandings about women who have histories of child sexual abuse and the impact on their sexual lives (14, 17-19). This study was primarily concerned with the social dimensions of sexual relationships and as such considered the broader socio-cultural aspects of gender and heterosexuality, their historical dimensions and how these influence contemporary understandings.

2. Method

This research was framed by a post-structural feminist perspective (20-22). Post-structural feminism provides a theoretical basis for undertaking research that takes account of the historical, social and cultural context, aimed at challenging taken-for-granted ideas about gender relations (20). This is because post-structural feminism privileges the challenging and resisting of oppressive knowledge rather than the development of ‘truth’ positions (20). This enabled attention to the role of language and dominant discourses in constructing understandings of child sexual abuse and heterosexual relationships. A post-structural feminist perspective also enabled attention to both the oppressive aspects of discourses of child sexual abuse and their impact on women’s sexual lives, and the scope for resistance and agency on the part of women. As alluded to earlier, understandings of childhood sexual abuse are contested, with many different definitions in the literature (4, 23).

While positivist, quantitative research requires participants to fit within pre-set definitions of child sexual abuse, in the study reported on here, research participants self-identified as to whether they considered a past experience to have been sexually abusive. This fitted with a feminist epistemological approach that centres women’s voices and subjective experience (22). The research was comprised of three related studies, with studies one and two focussed on professionals and the third focused on women.
Study 1 was a survey with helping professionals who work with women with backgrounds of sexual abuse. Thirty professionals took part, all were female, and most were from South Australia (n=17), New South Wales (n=6), Victoria (n=4), Queensland (n=2) and the Northern Territory (n=1). The survey sought the participants’ perceptions on the effects of child sexual abuse, with specific consideration of the impact on sexual intimacy. The participants were from organisations that included government (n=14) and non-government (n=11) entities, with most indicating counselling as the major focus of their work (n=28). The most common professional background was social work (n=14). Surveys are an appropriate tool for self-reported knowledge, attitudes and beliefs and were useful to attend to professionals’ meanings (24).

Study 2 involved semi-structured interviews with helping professionals (n=12) who self-selected to participate. All were female. The semi-structured interviews ‘overlayed’ the survey rather than sitting in isolation from it, and the data sets produced related results that were considered together in the analysis.

Study 3 involved semi-structured interviews with women (n=28) who self-reported a history of child sexual abuse. Interviews provide accounts and insights into broad social and cultural contexts and can convey reflections on broader social values (25). Feminist researchers have successfully drawn on this form of data collection (26), which has been useful in understanding the gendered social aspects of past events such as childhood sexual abuse (27).

We analysed the survey data (Study 1) from professionals through thematic analysis (28), while the richer, more detailed interview data from the professionals and women (Study 2 and Study 3) were analysed through Foucauldian discourse analysis (29). Willig (29) suggests that Foucauldian discourse analysis seeks to examine how discursively constructed contexts influence subjective possibilities with a particular focus on the role of power in the construction of subjectivity, and the limitations and possibilities available. The analysis identified the diverse discourses used to construct the impact of child sexual abuse on women's
sexual lives, including the mobilisation of heteronormative discourses, femininity discourses and victim-blaming discourses and their implications for women’s subjectivities. The three related studies enabled the exploration of the connections, contradictions and differences between women’s and professional perspectives.

The analysis also explored the categorising of sexual pathology and behaviour that can create ‘normal’ and ‘abnormal’ binaries and how this lens of abnormal pathology has been applied to women’s sexual lives. Dominant discourses tended to present androcentric sex, that is, heterosexual sex focused around men’s needs and desires, as normative. However, it is important to understand the contested nature of heterosexual relationships because this generates opportunities to critique oppressive heterosexual ideas, including the idea that experiences of child sexual abuse are pervasively and inevitably damaging to women’s sexual lives. A feminist theorising that views heterosexuality as contested makes space and hope for women to practice their sexual lives in ways that are pleasing to the individual woman (30).

This report will briefly highlight the three overarching themes identified through the analysis of data in both the professionals’ and women’s constructions of ‘Being Abnormal’, ‘Compulsory Sex’ and ‘Resistance and Agency’. Next, we briefly summarise the findings from the analytic process and their implications.

## 3. Findings

### 3.1. Being Abnormal

The theme of ‘Being Abnormal’ showed that the women and professionals reproduced discourses which suggested that childhood experiences of sexual abuse invariably have far-reaching and damaging implications that are evident in adult life. The professionals reproduced ‘damage talk’, which drew on discourses about child sexual abuse as damaging women’s development, impacting on their behaviour and

The professionals used ‘damage talk’ discourses, informed by the idea that child sexual abuse is inevitably damaging, and results in women having problems with ‘fear, trust, dissociation, distorted boundaries [and] difficulties with meaning making’.
psychological wellbeing. The women also drew on discourses about themselves as damaged, both sexually and psychologically, with sexual abuse sometimes seen as having made them into different people from who they otherwise might have been. In line with Reavey’s (31) arguments, we suggest that this is an example of how the focus on the behaviour of women with a history of child sexual abuse in research and practice has resulted in insufficient recognition of how women’s experiences take place within a context of unequal gendered power relations and related gender discourses that construct them in disadvantageous ways.

As part of this ‘damage talk’, we show that the professionals, informed by the idea that child sexual abuse is inevitably damaging, reproduced the more specific idea that women are also sexually impaired. The professional participants identified women as having difficulties with trust as not only an effect of child sexual abuse, but also as the reason for their difficulties with sex. For example, comments from the survey respondents included the idea that, because of the child sexual abuse, women experience a ‘lack of trust’, or have ‘no trust’ and that their ‘boundaries’ have been ‘violated by child sexual abuse’. Another example of the use of discourses about damage drawn on by a professional suggested that child sexual abuse results in women having problems with ‘fear, trust, dissociation, distorted boundaries [and] difficulties with meaning making’.

3.2. Compulsory Sex

The professionals and women also attached considerable importance to being in a committed sexual relationship, and to the compulsory performance of sex on the part of women as key to this. An example is shown in the following quote from the semi-structured interviews with the professionals:

> It is my understanding that because they see sex as the same act [as the sexual abuse in childhood], it stops them from doing acts, consenting acts, with their partner.

In their legitimised positions of authority, the professionals
therefore drew on normative discourses about the performance of heterosexual sex. The women in the study similarly reproduced these heteronormative discourses about sex, constructing themselves as psychologically and sexually ‘different’ to other women because of the sexual abuse.

### 3.3. Agency and Resistance

The final theme was ‘Agency and Resistance’, which offered a challenge to the exclusive focus on abused women as damaged. A small number of professionals resisted categorising women as damaged. For example, some challenged and resisted the construction of abnormality through drawing on alternative discourses about women’s experiences of sex. These alternative discourses included emphasising external factors that impinge on women’s sexual experiences, including the use of feminist discourses to acknowledge the constraining impact of unequal gender power relations on women and their sexual lives.

This perspective is demonstrated in a number of different survey responses from professionals through acknowledging ‘power imbalances in sexual relationships’, women’s sexual partners as ‘unsafe/coercive/physically abusive/emotionally abusive’. During an interview, one professional also posited that women’s attitudes towards sex with their partners could be influenced by gendered experiences other than the child sexual abuse history, such as feeling tired or being busy, as well as ‘...huge expectations on women, the amount of housework and child raising....’

The women’s narratives included alternative discourses about agency and resistance through descriptions of the pursuit of sex ‘on their own terms’. For the women in the study, re-claiming their bodies and asserting ownership of their bodies was not an end-point nor did it involve complete freedom from the effects of abuse.

However, the pursuit of sex on their own terms is understood as the pursuit of preferences in the present moment, and thus points to the potential for more satisfying sexual practices for women.
4. Conclusion

The accounts from the professionals and women show there are fissures in the representation of child sexual abuse as inevitably leading to problematic sex lives for women. The women in this study demonstrated sexual agency and resistance to dominant psycho-medical discourses that abnormalised them and their sexual lives, demonstrating instead that they can and do experience satisfying lives. These findings have implications for helping professionals working with women who have histories of child sexual abuse, drawing attention to the need for practice approaches that are gender-aware and that take a critical perspective on pathologising discourses which construct women as inevitably sexually and psychologically damaged (for other examples of pathologising constructions of women see 32, 33). There is an important role for helping professionals in supporting women in ways that increase agency, including sexual agency, as a key aspect of health and well-being.

5. References

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