

CHAPTER 4

RESULTS AND DISCUSSIONS

1. INTRODUCTION

This chapter presents the findings of the present study. The results are discussed in accordance with the themes that were identified around the issues discussed in the literature review, which were guided by the research questions. Quotes from the interview transcripts are used to substantiate these themes, and the emerging themes are compared with the findings of previous studies. The themes that were identified in this study will be discussed around the following main issues: disclosure, family relationships, childhood experiences, employment profile, living arrangements, substance abuse, individual characteristics, and support system.

2. DISCLOSURE

Disclosure happens when the child either decides to tell somebody about the abuse or when somebody discovers the abuse and the child confirms it. It involves the process of disclosure itself, that is, how did the abuse come to the open, the disclosure of the whole abuse experience including the extent and the details of the abuse, and the identity of the perpetrator/s. The process of disclosure is very crucial as it may determine how the mother responds, and also, the level of maternal distress. It also says a lot about the relationship that the mother has with her daughter, and how could that be affected by this process.

2.1. Disclosure Process

The disclosure process was voluntary in most cases and it was mostly made to the mother, although there are cases of non-disclosure and disclosure to other family members. The following statements provide examples of different processes of disclosure:

“...she came and told me.... So, I'm glad that she told me...”

“...because she didn't even talk about the abuse, I discovered it myself”

“She told my mother. She goes to my mother like every second weekend, ...my mother came and told me”

Some children would only complain of pains in their private parts and the sexual abuse would be confirmed through medical examination.

“...she said to me, ‘mama, it is sore here’ (pointing private parts), then I took her to the clinic where they checked her and said ‘Yo! such a big hole....., then they told me that somebody has been busy with this child.”

The child that did not disclose her sexual abuse had been previously abused by her father. She disclosed the first incidence to her mother and the mother broke up with her partner but she went back to him after 4 years and the abuse continued again. According to the mother's account, the second abuse was revealed in her dream and then she went to the 'sangoma' who revealed it in a 'traditional mirror'. The daughter, when she was confronted, and the social workers where the child was taken to for investigations and treatment, later substantiated this. The non-disclosure of the second abuse may be related to the lack of support that the child experienced after the first incidence when the mother decided to go back to her partner.

The other child, from those who disclosed voluntarily, had been previously abused by her father, and when her mother accidentally caught them watching a pornographic movie, she went and disclosed at the school the following day. As the father was still receiving counselling from social services, he did it again and this time the daughter voluntarily disclosed to her mother. The other disclosures were to the grandmother and the elder sister who also turned out to have been abused by her father for years but never disclosed, but she then disclosed both abuses to the mother.

The time frame between the onset of the abuse and the disclosure by the child varied from a day to years. In families where more than one child was abused, the elder child only disclosed her abuse when the younger sibling was also being abused.

“So, T said, ‘I’ve got to tell you that I’ve just found out now that daddy has been sexually molesting M, and he has been doing it to me also now for years’.”

It can be hypothesized that when the elder daughter discovers that her younger sibling is also being sexually abused, she might feel jealous when she realizes that she is not special anyway, as a result she would disclose both her abuse and that of her younger sister, and in some cases her abuse would have stopped when the father goes for the younger child. Although there are children who disclosed within 3 days of the sexual abuse, the findings indicate that most children experience difficulty disclosing their abuse by their fathers, as a result they may take time to disclose which could range from few months to years.

The mothers reported that when the disclosure happened, they realized that the warning signs were there for a long time, but they never associated them with sexual abuse. The mother whose child’s sexual abuse was confirmed by medical examination but did not disclose the perpetrator for 4 years; in that 4 years she reported that she had noticed signs that implicated her husband as the perpetrator but she had no proof as the child did not want to talk.

“If I think of it now and I look back a year ago, I think in my own way I had a feeling that something was going on, but I just couldn’t put my finger on what was going on.”

This mother reported that every time she phoned her daughter to check if she was back from school, her husband who was supposed to be at work would answer the house phone and she would ask herself what is he doing in the house. Other mothers reported things like the child not wanting to be left alone with her father, the child’s behavior towards the father, especially when watching TV and issues around sexual abuse are discussed and also the unusual closeness that they had noticed between the father and the daughter, but none of them linked these to the abuse at that time. This supports the hypothesis that when the disclosure happens, mothers usually think back and identify some warning

signs that they never associated with the abuse before disclosure, or even if they did suspect the abuse, they never associated it with their partners because of their trust in them.

The mothers whose children did not disclose voluntarily, and those who took a long time before they disclosed were more angry with their children for keeping the abuse a secret and also had more trust issues with them. They felt that their children might have enjoyed the sexual experience with their fathers, as a result the level of support was even less and the negative feelings towards their children were more intense. They felt that their relationship with their children was non-existent. This supports the hypothesis that if the disclosure was voluntary and it was made sooner, the mothers may find it easy to believe and support the child (Everson et al., 1989; Lyons & Kouloumpos-Lenares, 1987, cited in Corcoran, 1998). The study failed to support the notion that the mother is more likely to believe and provide full support if the disclosure is made directly to her, because all the mothers, including those whose disclosure was from a third source, eventually believed, but they were not fully supportive. This could be attributed to the fact that even those children who disclosed directly to the mother, had taken time to do so.

2.2. Background of the Sexual Abuse Experience

According to the mothers' accounts, the sexual abuse mostly involved full penile-genital intercourse, followed by attempted intercourse and touching the perpetrator's penis; fondling of genitals and breasts, which all happened in very few cases. In most cases, the full intercourse was combined with other types like fondling. Few mothers seemed unsure or perhaps denied the extent of the abuse of their children. Although some were unsure about the number of incidents, the majority reported multiple incidents that had been confirmed, with a few that had been happening for a long time before the disclosure, as far as 8 years ago.

The stories reported included those of a father leaving the mother in bed at night and going to where the child was sleeping and abusing her; mother at work, gone out for shopping or visiting friends and the father left with the child in the house. One father was

working night shift whilst the mother was working day shift, and the other father's work was nearer the house, so he would go home anytime during the day whilst the mother was still at work and abuse his step-daughter. In those incidents that only involved fondling, some mothers reported that it happened anytime, even when the mother was in the house doing house chores like cooking, and the child and her father watching TV in the lounge. There were two incidents where the mothers were admitted to the hospital because of their own health problems and that of the other children, and a particular one where the father went to the shop with her step-daughter and abused her behind the shop. But generally, it is evident that the sexual abuse of children happens in the homes both with the mother present or away.

"...may be weekends while I'm busy with other things, may be I'm in and out, may be I went shopping..."

There are a substantial number of children who were sexually abused by other men in addition to their fathers. These included strangers, neighbours and other family members. It is clear from the findings that other people would take advantage of the fact that the child had been sexually abused by her father, and also abuse her. There was a case that was reported by one mother where the neighbour abused the child, and when he was taken to court, he denied it, saying that all he knows is that the child was sexually abused by her father.

Most mothers reported some kind of pressure from the father to the child to ensure compliance and secrecy from the mother. These involved verbal threats of killing the child, emotional blackmail about family dissolution and loss of financial support, and special favours like spoiling the child and getting closer to her than to other children. The following statements illustrates an example of the coercive behaviors employed by the fathers:

"My daughter told me, 'he said I should not tell you because if I do he is going to shoot us all with a gun, and we will go hungry because you are going to leave him; so, I did not want you to fight because I love you both'."

“But then sometimes, I suppose that’s when it started, then he became a little bit too close to her..., and I was thinking, I do not like this, it is too much...., you could just feel it is too much.”

It is evident from these findings that a substantial number of abuse allegations involved severe forms like penetration, multiple perpetrators and different kinds of verbal threats from the father to the child which could explain the high level of the child and mother’s distress, and difficulty with post disclosure adjustment for both. These findings are consistent with those of (Flynn, 1994; Friedrich & Reams, 1987; Russell, 1986; Spacarelli, 1994). However, they do not support the findings of previous studies that reported the relationship between the severity of abuse and the level of maternal support as all mothers were partially supportive (Heriot, 1996; Russell, 1986; Sirles & Franke, 1989; Feiring et al., 1998, cited in Elliot & Carnes, 2001).

Mannarino and Cohen (1986, cited in Keen and Keen, 1995) and Sirles and Franke (1989) assert that when the mother learns that the sexual abuse happened in her presence, she finds it difficult to believe it, and when she does believe it, she would be more angry at herself, and experience feelings of uselessness and inadequacy as a mother, and feel embarrassed about how other people would see her. This study affirmed this notion.

2.3. Maternal Response to Disclosure

The mothers in the study reported different ways in which they responded to the disclosure. They all reported different reactions and feelings associated with shock. Some reported that they did not believe their daughters in the beginning but they only believed when the abuse was confirmed by the medical examination. One of them reported that she even beat her child for lying. Others stated that although they believed their daughters right away, they found it hard to accept that such a thing has happened. Only one mother reported to have believed her two daughters right away and accepted that it happened. One mother stated that she thought she was dreaming when her mother told her about her daughter’s disclosure.

The following reactions were noted from the mothers' interviews; crying uncontrollably, shouting and swearing at the child, the father and everybody around, feeling confused and not knowing what to do next. One mother described herself as having 'lost it'. They described these reactions as an expression of their anger. They also described feeling hurt and sad after the disclosure. Some physiological responses ranging from stomach-ache to feeling dizzy and fainting, having palpitations and heart-racing, were reported. One mother also reported that she thought she was dying and nearly fell from the chair she was sitting on at that time. The other one reported that she even clapped her husband on the face. It is evident from the above findings that this is a devastating experience for the mothers and their initial response is a result of shock, which could be related to the identity of the perpetrator.

“You can't deny it but obviously, you do try to reject it for a while, you know. You can't accept everything, you try to figure out from the child, like interrogate her and try to find out, and it is very difficult to accept all of it.”

This supports the research that reported that maternal response could be inconsistent as it can move along the continuum of belief and disbelief (Humphreys, 1992) and also the findings of several studies reviewed by Elliot and Carnes (2001) that the mother's initial reaction might not be her final reaction as it may be related to shock.

2.3.1. Maternal Support vs Maternal Collusion

Maternal support was measured by three concepts namely: belief, protective action and emotional support. Belief referred to the mother's belief of the child's account that she has been sexually abused and the identity of the perpetrator. This does not include the initial disbelief that mothers may experience as a sign of shock. Protective actions refer to the actions taken by the mother to maximize the safety of the child so as to protect her from further victimization, and also to make sure that the perpetrator suffers the consequences of his deeds. This includes separating the child from the perpetrator, opening a case against him for justice to be done, and complying with the investigation process. Emotional support refers to the actions taken by the mother that demonstrate her concern for her child, understanding what she is going through, not placing any blame on her, making sure that she gets some form of counselling to work through her emotions,

taking actions in favour of the child rather than the partner, and also seeking counselling for herself to deal with her own emotions so as to better assist her child through the recovery process.

2.3.1.1. Mothers Believing Their Children's Allegations

All the mothers eventually believed their daughters although most of them needed some evidence. One mother whose child was not penetrated only believed after 2 months when her husband confessed at the Teddy Bear Clinic. All the women stated that once they believed the child's allegations, they also believed that the perpetrator was the one identified by the child. This is consistent with Elliot and Carnes's (2001) review of studies that revealed that mothers do believe their children's allegations of sexual abuse by their spouses. The study also found support for Humphreys' (1992) report that some mothers would want some evidence before they believe the abuse allegations and this may be attributed to shock as a result of the identity of the perpetrator.

The findings of this study were also consistent with the suggestion of Sirles and Franke (1989), that mothers who are victims of physical abuse or domestic violence are more likely to believe their children, but less likely to be fully supportive because of their powerless positions. Mothers in the present study were victims of domestic violence and although they believed their children, they did not provide full protective actions towards their daughters as they either maintained the relationship or took time to leave the partner. Another possible explanation for this could be the conflict of loyalties between the child and the partner, not knowing whom to prioritize over the other.

2.3.1.2. Protective Actions and Emotional Support

Most mothers reported to have taken actions immediately or the following day, depending on what day of the week the disclosure took place. They took their daughters to either the clinic or reported to the Child Protection Unit, but they were eventually referred to the Doctor for medical examination and the social services for counselling. The following statements are examples of the mothers who took immediate actions:

“I called the police there and then, they came and they took L to the doctor who filled some forms saying that the child has been raped. He was then arrested”

“Yes, my mother told me on a Sunday, I took a day’s leave on a Monday and myself and my husband went to Teddy Bear Clinic and told them what happened, what she had said.”

The mother whose daughter only disclosed the perpetrator after 4 years also called the police right away. Some perpetrators were arrested and others were not arrested even if the cases had been opened. The mother whose child’s abuse was initially revealed in a dream and later confirmed by the child and the clinic stated that when she reported the case to the police they did not take her seriously when she explained how she discovered, so no case was held against her partner. At the time of the interview there was one case which was still in court, the other one was withdrawn by the mother after her daughter had demanded her father back and threatened not to talk in court, but when this man came out he abused the younger daughter who was also taken to the Teddy Bear Clinic and never talked there, as a result the case was nullified even though the medical examination had confirmed the abuse. One mother reported that her husband came out on bail after he had been in custody for 3 months and she called his family to intervene, but while they were still waiting for the day of the family meeting, he raped the same child again and he was re-arrested. After two court dates the mother was told that the case had been finalized but she never got an explanation as to how and why, but her partner was released.

It was evident from this study that some mothers would try to resolve this either on their own or involve the extended family. One of the mothers initially confronted her husband; then she told his mother but she never reported him to the police nor took the child to the clinic until after 2 years of continuous abuse when the school threatened to take actions against her. She then took her child to the social workers but no charge was laid. This mother stated that she had showed her husband the social workers’ papers and the abuse stopped.

This study revealed that some mothers would not want their husbands to go to prison, as a result, they deny some aspects of the abuse, and make them enroll on the offenders' treatment programme.

“I was trying to confront her as well, not to cover up for him but I did not want him to go to prison. I did deny some of it....you do not want them to tear you apart now.”

This mother describes how she denied some aspects of the abuse and she had him enrolled at the CATTS' offenders' treatment programme. In addition to that, some mothers, although they want to protect their daughters, they experience difficulty taking a decision to leave, as a result they also encourage their man to get treatment. This was evident in the following mothers' account, whose husband was also attending the offenders' treatment programme at CATTS:

“I try to make a decision everyday, I still wonder why I'm still married to him; I wonder why I'm still living in the same house as him, you know.”

There are a significant number of mothers whose actions were mostly aimed at preserving the relationship with her spouse. One mother asked the school psychologist to rather take the child away to the school hostels and let her visit them during school holidays than to involve the police. At the time of interviews, the mothers who were married were still staying with their husbands, except for one who had divorced him and she had him kicked out of the house by the court's family advocates. The mothers who were not married to their partners had either gone back to their parent's home, or found alternative accommodation for themselves and their children.

Most mothers had at some stage taken their daughters for counselling, and from those who were not receiving any at the time of the interviews, some raised their concerns about that and felt that their children needed some professional support. Some mothers had also received their own counselling of which some of them were still under treatment. Others also felt that they needed counselling but no one had offered them anything. These findings demonstrate the mothers' need to assist their children to better cope with the abuse by ensuring that they get some counselling, by getting some help for

themselves to better understand their children's trauma, to help them through the recovery process, and also to deal with their own emotions.

In this study, the level of maternal support varied in the actions taken by the mothers. Although all the mothers took different protective action, not all of them were indeed protective. They could not provide full support to their children. Their responses and actions demonstrate partial support and ambivalence. These findings diverged from the view that the number of fully supportive mothers is higher than that of partially supportive mothers and those who display ambivalent responses (De Jong, 1988, cited in Elliot & Carnes, 2001; Everson et al., 1989; Heriot, 1996; Pellegrin & Wagner, 1990). However, consistent with the review of studies by Elliot and Carnes (2001), this study did not support the notion of maternal collusion, as, although the majority of mothers reported the presence of warning signs long before the disclosure, there was no evidence linking those to sexual abuse.

There are several possible explanations for the mothers' ambivalence in their response. These include their financial circumstances and their emotional make-up, the level of their psychological distress following disclosure, potential consequences of the break-up and poor or lack of social support. These factors were suggested by previous researchers as having some influence on the mother's response to disclosure (Carter, 1993; Deblinger et al., 1993; Flynn, 1994; Leifer et al., 1993; Lipton, 1997; Paredes et al., 2001). This also supports the views of Elbow and Mayfield (1991); Mashego (2000) and Strand (2000) that the mothers' role should be understood in relation to their different circumstances which may hinder their capacity to protect and be fully supportive.

2.3.2. Psychological Effects of Disclosure on the Mother

The mothers reported feeling useless, inadequate and feeling like failures and stupid. All these feelings were related to themselves as persons, mothers and women. Others reported that they felt "*bombed*", "*as if their world had fallen apart*".

Some experienced it as a punishment for either taking back their partners after they had previously broken off, or for staying in an abusive relationship.

“I felt that this is God’s way of punishing me because I kept on taking this crazy person back in my life”

They experienced some forms of losses ranging between significant relationships like the spouse, family support, friends and child, loss of a home, loss of financial security, loss of trust in the child, the partner and other people and loss of control over the child. This illustrated in the following statements:

“I am failing to control her.”

“It didn’t matter that I had three beautiful kids because I messed up their lives, that’s how I felt.”

Other mothers reported that they had to get alternative accommodation and they had nobody to support them financially as they were unemployed.

All the mothers described some feelings of intense fear and feelings of helplessness. The fears reported were those of being alone; fear of family dissolution; fear of losing everything including the spouse, children, home, house and family, and financial support and the fear of breaking down. At some stage each of them experienced feelings of helplessness, not knowing what to do or having no strength or courage to do anything.

Other symptoms reported were persistent recollection of the whole disclosure process where this would come to their minds time and again, which was too traumatic for them, and avoidance of any stimuli related to the trauma, like avoiding thinking about their feelings and detaching themselves from other people to avoid any questions. Also, symptoms of increased arousal were reported by most of the women in the study which included difficulty falling asleep as a result having to take tablets for that, and anxiety features like palpitations, choking, fainting, tightness of the chest, dizziness and breaking things in the house, panic attack symptoms. These symptoms interfered with some mothers’ social functioning. One mother reported to have had these panic attacks on the highway to work or at the office until she stopped working, and the other one could not even leave the house to go to work, hence she stayed at home for the whole month. Some

mothers reported physical symptoms like severe headaches, fatigue, having developed growths on the neck, and stomach problems. One mother who is suffering from epilepsy reported that her condition has worsened since she discovered the sexual abuse of her child. The other mother had just been diagnosed with hypertension and had also developed bloodshot eyes. There was one mother who reported to have developed cysts all over her face that required removal by surgery, and she was also diagnosed with gastric ulcers and hiatus hernia for which she was awaiting surgery.

Mothers also reported irritability and anger outbursts, and these were characterized by loss of temper, episodes of screaming, shouting and swearing, and just “*going mad*”. Other feelings reported were emotional difficulties like sadness, depression characterized by poor self care, loss of interest in life and in previously pleasurable activities like cooking for the family, lack of energy, and crying the whole time. Three mothers verbalized a wish to die but none of them was actively suicidal at the time of the interview. The following illustrations provide examples of some depressive symptoms experienced by some mothers:

“I didn’t care about anything, like when I go to work I didn’t brush my hair, I didn’t wear make-up, I didn’t care what I looked like...”

“Sometimes I feel like I would be better off dead”

These findings demonstrate that mothers are negatively affected by the disclosure of the sexual abuse of their daughters by their spouses. They experience it as traumatic, both as primary victims and as secondary victims, meaning that their experiences are those of being personally attacked, and also feeling their daughters’ pain. Carter (1990) asserts that the child’s sexual abuse experience can leave the mother severely traumatized. Previous studies by Corcoran (1998); Green et al. (1995) and Timmons-Mitchell et al. (1997), revealed the presence of PTSD symptoms in mothers of sexually-abused children. The findings of this study supported the previous findings as all mothers presented with symptom features of post-traumatic stress (PTS), even if they did not meet the full DSM diagnostic criteria. This may explain their inability to be fully supportive to their children as indicated in the findings of Deblinger et al. (1993); Lipton (1997); Newberger et al.

(1993), and Paredes et al. (2001) which revealed the relationship between maternal trauma symptomatology post-disclosure and the level of support she can provide the child with.

All the mothers indicated in their interviews that they experienced anger towards both the child and the spouse. They were angry with their daughters for the abuse itself as they felt that they were either responsible for the onset, or might have enjoyed it, and for not disclosing timeously, for refusing to talk in court, and also for their behaviour after the abuse. They also verbalized their anger towards the helping professionals as they either felt blamed or let down by them by not providing a proper service for them, and also the legal system for dragging the court case, for failure to provide proper closure to the cases and for poor response of these institutions to these types of cases.

Mothers also reported anger that was directed to themselves. This was related to self-blame for not protecting the child enough, for not being accessible to the child for her to disclose earlier, for missing or ignoring the warning signs, and also for staying with abusive partners which put the child at risk. One mother reported that she was even angrier with herself after the husband had confessed 2 months later as she had earlier believed him and thought the child was lying. The anger experienced by these mothers went hand-in-hand with guilt feelings. Most mothers questioned their own judgment abilities and their decision-making abilities. They felt that they chose wrong partners, that they could not see how much their children needed them, and that they kept on going back to their abusive partners. They also blame themselves for taking their daughters along when they went to stay with their new partners. Two mothers even felt that they should not have even got involved with any men in the first place, as step-fathers cannot be trusted with step-daughters.

A substantial number of mothers felt betrayed by the person they most trusted, loved and respected.

“I had a husband who loved me and that I loved very much, but somehow he had gone. This is the man I respected more than anything in the world, had gone and touched my daughter who was innocent...”

“He was the man I had on a pedestal and he has fallen off, and I don’t know how to put him back after that.”

Some mothers stated that they were left with the unanswered questions directed to the partner, the child and the self but they felt that nobody would be able to give them answers to these questions.

“... I said, when you were so unhappy, why didn’t you go and have an affair; I said, why pick on a child, why not just go and pick up a woman or somebody, have an affair.... I couldn’t understand and I, still today I do not understand why.”

“ All the time and nobody seem to be able to answer it.”

Other issues that faced mothers in the study were issues of trust. They could not trust their children as they had kept such a secret, their spouses for the abuse itself and the safety of the younger children who had not yet been abused, in the self as a capable mother and also in the world in general including other people and the systems operating in the country. Added to this, mothers were often blamed by some family members, friends and neighbours for not taking appropriate actions immediately, or for even lying about the abuse. One mother had to produce the doctor’s papers to community members as proof that her daughter had been sexually abused because they did not believe her because of her husband’s credentials in that community.

“I don’t know if I will ever look him in the face and trust him again because I can’t, I can’t trust him. ...I wonder, is he going to do it to my other daughter when she gets out of nappies....”

“I’m telling you it’s useless, honestly; a useless legal system or whatever it is that we have.”

“I don’t trust her anymore, no, I don’t, because she has secrets. She kept a secret that she was not supposed to keep from me as a parent.”

The mothers also felt torn apart between the child and the partner over who to choose and who to support, and also the family members who want them to leave their partners when they do not want to. Some mothers also experienced ambivalent feelings towards their partners, wanting to punish them for what they did, but not wanting to leave them. Some had to take a decision to leave under difficult circumstances because of their economic situations.

This study supports the view of several studies reviewed by Elliot and Carnes (2001) that mothers experience significant levels of emotional and psychological distress as a result of learning about sexual abuse of their children. These may be related to the perceived consequences of disclosure, the dilemmas they are faced with because of the identity of the perpetrator, and their economic situations.

3. FAMILY RELATIONSHIPS

3.1. Family Structure

It was indicated in the mothers' interviews that most of these incestuous families were reconstituted families where either of the partners have been married before, or have had previous relationships and had children out of wedlock; as a result they had come to the current relationship with children. One mother reported to be staying with her step-children whilst in another instance the step-children only visited the couple. Some of these mothers have had at least one child with the current partner whether that child was alive or not, and there was one instance where the couple did not have their own children.

The study could not confirm the findings that step-fathers are more likely to abuse their step-daughters as compared to the biological father as indicated in the literature (Dodds, 1999; Finkelhor, 1994, cited in Dodds, 1999; Russell, 1986). This could be related to the size of the sample. However, it was noted that most mothers whose daughters were abused by step-fathers were never married to their children's biological fathers, which is one of the factors exposing children to having step-fathers. This supports the researchers

hypothesis that the number of children born out of wedlock increases the chances of them having step-fathers as a result of mothers dating and eventually marrying the step-father.

3.2. Parental Relationships

The findings of this study indicate that there were poor couple relationships in these families. These were characterized by domestic violence, which varied in severity. One mother reported being physically abused by her partner to such an extent that he even tried to kill her by strangling her. This mother described her beatings to have been so severe that property would be destroyed, like windows, furniture, and so on. Some mothers described their relationships as chaotic in a way that there was a lot of shouting and swearing among the couple. The two women below describe their relationships with their spouses:

“He just beat and tried to stab me with a knife. That was the first time in 1997 and since then it never stopped”

“It’s very tense, we argue non-stop about everything, about kids, about money, about kids’ manners, about my work; we argue constantly. ...get into an argument, ja, then he would end up beating me.”

They also experienced some form of emotional abuse by their partners, which involved infidelity, verbal threats of physical harm either of the mother or of the child, verbal abuse, and lack of financial support.

“The thing is that he had an affair with another lady.... He said, ‘ok, you going to be the security there, I am going to see girls outside’...”

“...while we were married I thought of those things when we were not arguing about another woman. That is why he had so many women, because of his great charm.”

The data also revealed that there is lack of love and warmth in the couples and they also revealed that there was marital dissatisfaction although they had stayed in those abusive relationships. Two mothers had previously moved out on several occasions but kept on going back with the hope that things have changed but they never did.

“My husband didn’t spend much time in the house.”

Most mothers reported some sexual problems in their relationships. They either did not want to participate in sexual activity because of the problems in their relationships; so, they either refused to have sex with their partners or were passive during the process. Some mothers reported that their spouses never touched them for a long time, and the other one reported that her husband was highly sexual and she felt that she could not cope with his pace, as he sometimes demands it when she does not feel like it.

“To be honest, I didn’t want him to touch me. Well, I would just do it because I was under his roof.”

“... may be I do not give my husband what he needs. I think he has a problem dealing with sex. ...he is too demanding and my body needs a rest, you know. I do not feel that urgent need like when you are young...”

Most mothers in this study were dependent on their spouses for financial support. Even though some of them did not get it, some of their basic needs were catered for, like accommodation. Although most of them never had the emotional support that they needed from their partners, they seem to be emotionally tied to them as a result they could not leave them even though they were financially viable.

“I just stayed because I had nowhere to go as I’ve told you that life at home is not right, especially if you are not working, who’s going to support you. He would say that I’m making his daughter suffer because I’m not working and he’s working; I must come back so that he can maintain us.”

“I think my main fear is being on my own. I love him very much.... Financially I can look after myself.... I don’t think I have the courage and strength I need to actually get up and go. I would rather try this out and see where it gets us at the end of the day,...”

As indicated earlier on, this relationship is also affected by sexual abuse of the child by her father. There is lot of anger, feeling of betrayal and loss of trust directed to the partner, but because of the love and trust that they once felt for each other, mothers end up experiencing ambivalent feelings of love and hate towards their spouses.

“I must admit he’s really trying to make amends for what he’s done; and I will be fine with that, and then I would think wow! such a wonderful person, he’s not that bad; and then another thought would come in my head and I would still think, Oh, then I have a mental picture of him touching my daughter, and that just puts him back 3 steps with me.”

It is clear from the findings that although all the mothers experienced negative feelings towards their partners, those who decided to stay in the relationship were the most ambivalent. They mostly reported that the relationship with their spouse has changed for the better. This is evident from the following illustration:

“Yah, I think we talk more, not a hell of a lot more, but, like the other night I needed to talk and he did sit down and talked to me. I think he’s got more respect for me, like basically helping, you know. It feels good as well. So we feel that, I feel that I can communicate with him a little bit better. It has even brought us closer, and we can sit together...”

On the other hand, the ones who decided to leave were clear about their negative feelings towards their partners as indicated in the following examples:

“I see him untrustworthy, I see him as a snake. I don’t have many words to describe him, he is just a snake”.

“No. Since that Saturday, absolutely nothing (referring to communication with him). The only communication was when we went to..., the only time I was so close like this with him, was in July when we were in the maintenance Court, tomorrow as well, I’ll be there. I don’t talk to him at all, we sit next to each other where I don’t even look at him.”

It is clear from the findings of this study that in conjunction with the child’s sexual abuse, there were other problems in the couple’s relationship, which might have contributed to the development of an incestuous relationship between the father and the daughter. This supports the systemic view that incest occurs in families with multiple problems (Katz, 1979; Trepper & Barrett, 1986; Russell, 1984). The researcher posits that these problems define the relationships amongst the family members, especially the parental relationship.

Consistent with the findings of Bandi (2003), Carter (1993), Johnson (1992), and Steinmetz (1996), the mothers in this study experienced a range of negative feelings directed to the husband as a result of learning about their children's victimization.

3.3. Father-Daughter Relationship

The findings of this study revealed that the relationship between fathers and daughters was mostly poor and mainly characterized by lack of respect, love, affection and closeness. For those that were reported to be close, the mothers felt that it was rather too much for their liking and this may be associated with either the grooming process or a special attention to ensure secrecy. There were some relationships that were reported to have been initially distant but became close at one stage, which the mothers suspect was when the abuse started.

“So, ja, you always find he always bossed her around. ...he used to make her feel like she wasn't part of the family, because she wasn't, he's not her father. That's how I observed.”

“At first he was very rejecting, it was really bad when she was very small. He just couldn't accept her.... But then sometimes, I suppose that's when it started, then he became a little bit too close to her; and I was thinking, I do not like it because it is too much; I do not like this step-father and girl thing.”

Although in most cases it is unclear whether the poor relationship preceded the abuse, the findings indicate that the disclosure of sexual abuse had an effect on this relationship, others for better and others for worse. One particular mother reported that her child and her husband have become close and more open to each other since the disclosure of the abuse. This is the mother who stated that her husband was very rejecting towards her daughter. Otherwise, most of these relationships are characterized by anger and hatred, mistrust, feelings of betrayal and confrontations. The following mothers' statements demonstrate these negative effects:

“One day she told her father as he was beating me up, she said, 'you know what, I will hate you till you die...’”

“She would tell her father, ‘Dad, I can kill you; why did you rape me?’ Ja, you are making me your wife, you sleep with me”

The mother in the second statement reported that her two daughters would come to the kitchen as she dishes up and dictate to her as to how much meat she must put in their father’s plate and which piece, and they would go to an extent of changing the pieces themselves to make sure he does not get the best meat.

It was also noted that there are some children who experience ambivalent feelings towards their fathers. They experience feelings of love and hatred, warmth and anger; as a result they tend to be forgiving towards them. This was evident in the following responses:

“She was very confused, I sat with her a few times. She is very, very confused; sometimes she wants him, other times she wants to come and hug him, and sometimes she feels sorry for him.”

“The time he was in prison, my daughter started saying, ‘I want my father back; I never said you must have him arrested, I love my father, and I am not going to Court.’ The next thing she refused to go to school, saying that she misses her father.” (The mother to this child had to drop the case but at a later stage the child wanted her father arrested again)

The children who were reported to have had relationships with their parents that lacked love and affection were the ones that were mostly ambivalent and did not want their fathers to either leave or to be punished for the abuse, even if they did experience other feelings like anger and hatred. This could be explained by Finkelhor’s (1979) suggestion that children who experience lack of affection and nurturing from their parents may experience sexual contact as the only form of attention that they get and they might not want to lose it. This study also supported the view that some fathers would engage in the grooming process before the abuse in an attempt to gain the child’s trust.

3.4. Mother-Daughter Relationship

According to the mothers' accounts and also from the researcher's analysis, these relationships ranged from being distant and rejecting, with poor or lack of communication, to being dependent on the daughter for support, in a case where the mother was sickly. The following statements illustrate these relationship problems:

"She was very shy, very conserved. She never spoke to me about anything. I would get home from work.....she would come in about her homework and instinctively I would turn around and shout and say 'I don't have the time now, just go away, let me just finish'; by the time she comes back or I go to her she'll say 'ok mom. I've sorted it all, its fine now,...she'll go to bed and then I'll go to bed and I'll realize that but I haven't spoken to her, I haven't asked her about her day, nothing."

"Even S cried very loud and told them, 'my mother is sick, she cannot walk a long distance, she gets tired.' S knows my health more than other people. Sometimes when we go, maybe to Swaziland...she is the one who would tell these speeding taxi drivers that 'my mother is sick, she has got epilepsy'."

Some mothers reported that they had previously had close and loving relationships with their daughters, which later changed for no apparent reason. These mothers stated that these relationships changed to rejecting relationships where they developed unexplained hatred towards their daughters even before the abuse allegations.

"What I know is that at some stage I just hated my daughter and I didn't know why. When I looked at her I would just feel that hatred."

"It was so funny that I started at some stage feeling rejecting feelings towards her".

The mothers who described their relationship with their daughters as close with open communication verbalized that they were surprised when their daughters did not disclose the sexual abuse immediately or did not disclose at all.

“... didn’t I ask enough questions, what is it about me that my kids can’t talk to me because we talk about everything... I ask myself, they could tell me that but why couldn’t they tell me this?”

Furthermore, it is evident from the mothers’ accounts that this relationship undergoes some changes as a result of the disclosure of sexual abuse by the mother’s partner. They all reported some changes in their relationship with their daughters. They all acknowledged that this relationship was characterized by anger and hostility that they felt towards each other, mistrust and jealousy to name a few. As much as they sometimes blame their daughters for the abuse, they also feel blamed by their daughters for not being protective enough and for not stopping the abuse as they feel that the mothers are aware.

“It’s been badly affected (talking about their relationship); she doesn’t trust me and I don’t trust her anymore because she kept this thing a secret. ... what makes me even more angry is that when I saw it in the ‘mirror’ there is nowhere where he put his hand on her mouth as she said.” (this particular mother at times feels that her daughter was enjoying it, hence she didn’t scream).

Even the mothers who felt that they had grown closer to their daughters, and that communication was more open and honest since the disclosure of the abuse, they still experienced those negative feelings towards each other and most of them felt that they did not get the same response from their daughters. They all reported some difficulties in dealing with their daughters’ behavioural problems like acting out behaviours and truancy, and they were still experiencing anger towards their daughters which was exacerbated by their stubbornness.

“She steals. She takes money in the house. When S discovers that there is money in the house, she does not hesitate to take even R200 and use it in one day, and you would not know what she did with it. When you ask her she would say, “mama, there is the change, the rest of the money is not here”. Also, she does not listen, she is stubborn. When you tell her to clean the house she would say, “no, mama I am tired”. I remember asking her to scrub the floor and she said I am spoiled, you see those things. Sometimes I would even cry and tell her that she is the one who knows my

health status. Yesterday I even said to her, "I am going to disappear and you would not know where I went to"; she apologized saying, "I am very sorry to treat you so bad being my parent" and I said, "what are you apologizing for, don't you know that other children are treating their parents nicely outside". She does not respect me anymore, she is naughty, she does not listen anymore".

The mothers in this study seemed confused as to how to handle their daughters. They did not want to hurt them; as a result they could not discipline them. They felt the need to protect their daughters even more and they got overprotective in the process and got involved with them even more, and some mothers were watching their daughters like a hawk

"sometimes when she makes me angry I want to beat her, but at the same time I don't want her to cry because if she cries I don't feel alright"

A number of mothers reported that they do not allow their children to visit friends anymore and they do not want them out of their sight anymore. One of the mother stated that she was keeping track of her two daughters with a phone where they have to phone her all the time to say where they are and what they are doing until she comes back from work.

Some relationships between mothers and their daughters were more conflictual with negative interactions like arguing.

"She has this anger. She just shouts, even if you talk to her nicely she would just shout"

"Hey, my child would talk and shout, and sometimes I would jump wanting to hit her and my elder daughter would ask me to leave her"

Because of the pain that some mothers felt for their daughters, and also the guilt feelings, self-blame and feelings of inadequacy that they experienced, most of them tried and compensated for those feelings. Most mothers in the study wanted their children to get everything that they wanted, to such an extent that one mother felt that she could even

make a loan just for her two abused daughters to get whatever they want. Another mother who is unemployed stated that once she gets a job she would make sure that her child gets everything that she wants.

The findings of this study indicate that there are usually relationship problems in the mother-child unit even before the disclosure of child sexual abuse. In most cases, it is unclear though if these problems preceded the abuse itself or if they resulted from the abuse even if the mother was not aware at that time. Previous studies have revealed that the poor relationship between the mother and her daughter could increase the child's vulnerability to sexual abuse by her father as well as to non-disclosure of the existing abuse by the daughter (Clunie, 1993; Finkelhor, 1986). Even though the present study could not confirm the relationship between a poor mother-daughter relationship and the onset of sexual abuse of the child by her father, this seemed to be a trend in the families of the mothers in this study.

Consistent with literature, the relationship between the mothers and their daughters underwent some changes after the disclosure, which were accompanied by the negative feelings they felt towards themselves and towards one another (Hooper, 1992; Mashego, 2000; Mthembu, 2000; Sheinberg & Fraenkel, 1999). From the above findings, it is clear that the mother-daughter relationship is mostly characterized by ambivalence as demonstrated by the mothers' reports of both positive and negative feelings towards their daughters post-disclosure. This could explain the ambivalence in maternal responses and their inability to provide full support to their children, and the children's psychological and emotional difficulties.

4. CHILDHOOD EXPERIENCES

This study indicates that mothers of sexually-abused children usually have experienced a difficult childhood. Childhood problems reported ranged from (a) physically absent or distant/rejecting mothers, fathers or both, (b) physical abuse by the family member who was playing the parental role at the time when their mothers were not there, (c) history of sexual experience by a family friend or an extended family member, and (d) exposure to

parental violence where the parents experienced marital difficulties which in one case resulted in divorce when the participant mother was in her early teens.

“I was abused (sexually) as a child. I was about my daughter’s age (8 years) and it was a friend of the family, and he abused me”.

“We were brought up by my grandmother. When my father died she took us as my mother had to go and work. Then my mother got married to another man. Things were not ok there because when we visit my mother she would tell us to go because my step-father was angry. Truly speaking, we never got love because even my grandmother was staying with my step-grandfather who used to beat us”.

It can be speculated that these mothers have unmet childhood emotional needs which is indicated by their history.

It is also indicated by the mothers’ accounts that the father-perpetrators also have histories of difficult or deprived childhoods, either physically, or emotionally or both. Some fathers were reported to have had some traumatic experiences in their lives like being in the army, sexually abused by a stranger or by an extended family member. One mother stated that her partner was exposed to domestic violence in his family, as his father was a man of violence. The other one was reported to have lost his father when he was less than 10 days old and his mother raised him as a single parent. Other reports involved a father who was never home because of his pastoral duties, and even when he was home he never had time for his children, instead he would punish them for any offenses that his mother would report to him as committed in his absence. One mother stated that her husband had a good relationship with his parents, but thinks that he was a spoilt brat who could never be wrong in their eyes. The same husband was reported to be from a family background where other people are undermined and looked down on.

Also, lack of maternal love and nurturance was evident, and this was related to mother’s absence due to death, maternal substance abuse or staying away from home because of work commitments. One perpetrator, whose mother had died, was raised by his father only who reportedly emotionally abused him. The father, whose mother was working and

staying at her workplace, was raised by his siblings who were both physically and emotionally abusive towards him. There was also one father whose parents were substance abusers and he was brought up in that environment.

These findings support the previous work which indicated that parental childhood experiences may contribute to the development of incest between the father and her daughter because of the emotional needs that were never met by the parents' families of origin and unresolved childhood conflicts (Faller, 1988; Marais, 1990; Reis & Heppner, 1993). Due to the relationships that the mothers in this study described with their own mothers, they may have lacked role models where they could learn parenting skills. As a result, this could explain their own difficulty in their relationships with their children. These findings are consistent with those of Bandi (2003), Clunie (1993), and Tamraz (1996). In addition to that, fathers' childhood histories might have left them with feelings of inadequacy and powerlessness, anger towards their own mothers which in turn, they generalized to all females, or they may have learnt violence from their own fathers, which supports the views of (Faller, 1988; Mzarek & Kempe, 1981). Also, they might be sexualizing their affection for their daughters, as well as their own emotional needs, as they never learnt appropriate ways of expressing these needs because of their relationship with their own parents, which is congruent to the suggestions of Driver and Droisen (1989).

5. EMPLOYMENT PROFILE

Some mothers were unemployed and they did not have alternative financial support. These mothers had previously worked and the reasons for the current unemployment ranged from health problems, quitting the job after 6 months due to non-payment by the employer and retrenchment. These jobs involved being a petrol attendant, a factory worker and a domestic worker. One mother had lost her job after the abuse allegations, which was less than a year ago, whilst some mothers had been unemployed for sometime. The mothers who were working were in the corporate world.

According to the mothers' accounts, most fathers were employed and their jobs were also in the corporate world where they held high positions. The unemployed fathers had been retrenched from their jobs and these jobs involved farm work, being the messenger in the company, and a painter in a factory. One retrenchment was around the same time as the sexual abuse disclosure, just before the arrest, although these did not seem to be related. The second one was 2 years prior to the sexual abuse incident. One mother was not sure when her partner was retrenched but it seemed like a few years earlier.

The feminist view relates incest with power issues and they posit that men would do anything in their power to endure dominance and to announce their power (Bell, 1993; Tamraz, 1996; Vogelman, 1990). Findings of the present study revealed that some fathers were unemployed as a result of retrenchment, which might have been an injury to their manhood, as a result they might have felt powerless, hence they used incest to compensate for those feelings. Also, a number of working fathers were in the corporate world and holding almost same positions as their wives at their workplaces, which could pose a threat to their power and dominance at home, as a result, incest could have been their way of exercising control and reclaiming their power from their families. This is consistent with the findings of Russell (1997) who suggests that men with powerful wives tend to exercise their control through violence to their wives and children.

6. LIVING ARRANGEMENTS

Some families stayed in houses whilst some others were staying in shacks or one- roomed houses with just a partition to separate the kitchen and the sleeping room. The mothers in the latter group described lack of privacy and poor sleeping arrangements whereby the child either slept on the sofa or floor whilst the parents slept in beds. This situation was noted in the families where both parents were unemployed. This supports the suggestion that economic conditions contribute to lack of privacy and poor sleeping environment, which puts the child more at risk for sexual abuse. Also, the stress and frustration that goes with that could render the father powerless, as a result, he may re-claim his power

by victimizing the vulnerable child (Johnson, 1992; Marais, 1990; Prusent, 1992). This might be the case with the fathers from these families.

The families that stayed in houses were those in which both parents were employed and holding almost same positions in their jobs, and incest could have resulted from power issues as discussed above.

7. SUBSTANCE ABUSE

The findings of this study indicated that in some families both parents had abused some form of substance in their lives although some mothers claimed to have stopped or to be social drinkers. Substances reported were mostly alcohol, dagga and drugs. In most cases, fathers were abusers and they were reported to be still using those. This is consistent with previous studies, which revealed a high rate of substance abuse in incestuous families (Kaufman, Peck & Tagiuri, 1954, cited in Schetky & Green, 1988).

8. INDIVIDUAL CHARACTERISTICS

A number of descriptions were given by the mothers as their personality profiles even before they were aware of their children's sexual abuse. These included being unhappy, insecure, and socially isolated with no friends outside their families.

“...before the abuse I was not really a happy person, I was looking for happiness.... I've got friends that I work with but I do not see them after work, I haven't got, I never built friendships in South Africa, I've had occasional friends. I've never built friendships in South Africa which includes after work...”

One mother stated that her husband did not have friends as well and they do not socialize with anyone outside the family. They neither attend the church nor any social events in their community. Another mother reported that although she never socialized outside her family, her husband had many friends and he spent most of his time with them outside the family.

Some mothers had been physically absent from home either due to work commitments or health problems of their own and of their other children. Emotional absence was also noted which was mostly related to the problems in the relationship, alcoholism and the psychological make-up of the mother and the dependency features.

There were some signs of sexual aversion that mothers reported. This involved lack of interest in sex, which resulted in refusal to participate or mother being passive during the process, but these were attributed to problems in the relationship. On the other side, most mothers reported some form of sexual deviations in their partners like hyper-sexuality, as this mother felt that her husband was too demanding sexually; sexual interest in young children and promiscuity. One mother stated that her husband was attracted to a young girl from the neighbourhood and he would engage in inappropriate play with her until she stopped him, as she could see that it was going too far. Another father had been previously arrested for two rape charges, one for a young girl of 17 years and the other one for his wife at the time when they had divorced, although they later got back together. The same woman described her husband as a charmer and a manipulator who always has a reason for everything he does. All fathers were reported to be instigators of domestic violence in the family due to their violent nature. One mother stated that her partner has episodes of talking to himself at times, and also saying things that he later denies, and telling her not to take him seriously because he is a liar.

From the mothers' accounts, two children were the only children in the households even if they were not the biological daughters to the perpetrator. The other five were the eldest daughters either in the household or from the couple and there were other children in the house. In two families, mothers reported that the fathers also abused their second daughters at a later stage.

Mothers gave the following descriptions of daughters. They were described as physically attractive and older looking for their ages, passive and withdrawn, not interacting with anybody in the family or outside the family. Other children were having speech problems, learning difficulties and one was mentally challenged with Downs' Syndrome.

Consistent with the views of Burgess (1985), Mzarek and Kempe (1981), O'Connor (1991) and Schetky and Green (1988), the findings of this study support the view that there are some characteristics of each family member that could increase the child's vulnerability to sexual abuse. The mothers whose partners were known to have some form of sexual deviation did not have a problem believing their children right away although it was difficult for them to accept. This finding supports Sirles and Franke (1989), when they hypothesize that mothers whose partners are known sexual deviants believe their children with ease. It did not support their view that mothers whose partners abuse substances experience difficulty deciding who to believe. Also, it did not support the findings of SAPS (2001, cited in Dawes, 2002) and Trepper and Barrett (1986), that substance abuse had an inhibiting effect on the father's impulse control, because, even though most fathers were substance abusers, none of them was reported to have been under the influence when the abuse happened. Paredes et al. (2001) cited several studies indicating that children of substance abusing mothers are high risks for maltreatment including sexual abuse. Holden (1997, cited in Bandi, 2003) attributes this to the mother's emotional distance and lack of parental guidance for the child resulting from substance abuse.

8.1. Impact on the Mother

Because of the trauma that the mothers experience, in addition to negative feelings that they experience towards their daughters and partners, they also experience negative feelings towards themselves. These include self-blame for not being protective enough to their daughters or for not being accessible for the child to disclose, for missing the warning signs, for staying with the abusive partner which put the child at risk, and for initially believing their husbands. Almost all the mothers in the study reported this. One mother even verbalized that she has messed her daughters' lives for taking her husband back again and again and for not pressing charges against him when he raped her some time ago.

Most mothers questioned their own judgment abilities and their decision-making abilities. They felt that they chose wrong partners; they could not see how much their children

needed them, they kept on going back to their partners or even for taking their daughters along when they went to stay with their new partners. Two mothers even felt that they should not have even got involved with any men in the first place, as step-fathers cannot be trusted with step-daughters. These mothers saw themselves as failures, and inadequate. Some even stated that they had to take anti-depressants for some time.

“Am I a bad mother, am I selfish. I felt that I’m useless; why did I take him back; why didn’t the children tell me; they didn’t tell me because I am a bad person, I’m useless, I must be this horrible parent. I felt like a fucked up person...”

The present study supports the view that mothers of sexually-abused children undermine their motherhood and experience the abuse as an attack to their persons; hence they experience negative feelings towards themselves (Bell, 2003; Hill, 2001; Massat & Lundy, 1998). Grosz et al. (2000); Jacobs (1990) and Mashego (2000) revealed that these feelings are exacerbated by the long duration of the abuse with the child, not telling earlier, and also feelings of being blamed by the daughter. This study also supports these findings.

8.2. Impact on the Child

The sexually abused children also experienced negative feelings towards the self, the mother and the father because of the traumatic effects of the abuse. Based on the mothers’ accounts, children experienced intense fear and a sense of helplessness over the situation. They all either experienced fear of the perpetrator, fear to be alone as they felt unsafe, fear of strangers and even acquaintances. One mother reported that her daughter was also scared of men in general and another mother reported that her two sexually abused daughters displayed regressive clinging behavior.

The symptoms reported were persistent re-experiencing of trauma through bad dreams about their fathers wanting to rape them again or wanting to kill them, nightmares related to the abuse, and some form of avoidance of the stimuli associated with sexual abuse trauma. These avoidance symptoms ranged from avoiding the activities or the situations that could bring back the recollection of the trauma, like running away when she sees the

father, or verbalizing that she does not want to see him, not wanting to take off clothes when sleeping, and in cases where the perpetrator stays in the family, choosing to move to alternative accommodation to avoid staying with him or in the home environment where the abuse took place. Another form of avoidance reported was the inability to express or experience any feelings, whether negative or positive, and a tendency to isolate oneself from others and withdraw. Also, symptoms of increased arousal were reported. These involved fainting episodes; irritability and angry outbursts towards their mothers and other people in the family, peers and teachers; sleeping disturbances including difficulty falling asleep, sleep-walking and sleep-talking, and one mother added that her daughter required medication for her to sleep. Other symptoms reported were (a) bedwetting, (b) anxiety reactions related to exposure to anything that symbolizes any aspect of the traumatic event like the sight of the car similar to their father's, (c) the repetitive play of the trauma displayed on dolls and other children, and (d) also doing the things that her father would do after the sexual act like pouring water in the basin and washing her private parts. All the child victims, according to the mothers' reports, experienced concentration problems either at home, school or in both settings. One mother reported that her daughter was so anxious that she pulled out all her eyelashes.

Some mothers felt that factors such as having to tell the same story over and over again exacerbated the traumatic effects, and also the medical examination. One mother indicated that her daughter experiences more bad dreams closer to court dates.

Most of the women further stated that they had noticed these problems even before they discovered the sexual abuse, but they did not know at that time that those were the possible reactions to such.

Most mothers described their daughters as having been withdrawn and socially isolated from friends. One mother even described her daughter as depressed and having low self-esteem. Another mother also described her two sexually abused daughters' social withdrawal as having felt like there was death in the house. These mothers also reported that their daughters were either emotionally restricted, labile or overly sensitive. Some of

these behaviours had improved at the time of the interview and one mother reported that her daughter had moved from being withdrawn with restricted emotions to being very labile and too sensitive. She related these to hormonal changes of pre-adolescence but her daughter was only 8 years at the time of the interview.

The mothers indicated in the interviews that their daughters experienced a range of behavioural problems which included stubbornness, fighting with the mother, other siblings, peers, teachers or opposite sex; having lost respect for authority, aggression and being cheeky and shouting at others and hitting younger siblings. Most mothers described their daughters as rude and naughty. Two mothers stated that their children bunked school. One of them would play sick for her not to go to school. Another one would leave for school in the morning, only to find that she never went to school, instead she went somewhere with friends that the mother referred to as 'bad company'. Other school problems that were reported by the mothers were loss of interest in schoolwork, and attention and concentration difficulties. All children who had these school-related problems showed a significant drop in their school performance. Only one mother reported that although her daughter was severely affected by the abuse, she paid all her attention to her schoolwork and even got A+ grades.

The mothers also reported behavioural problems like sexual acting out; conduct problems like stealing and lying. Another child was reported by her mother to have been caught trying to cut her wrists with a razor in the bathroom.

According to the mothers' accounts, children experienced a lot of anger directed to the mother, the father or both parents, and also the legal system. One child was reported that she felt that counselling was a waste of time for her because all she wanted was to see justice being done. Another child was reported verbalising her need for revenge against her father. Some children even confronted their fathers about the abuse, wanting the answers and verbalising their hatred towards them. Some were reported to be confused about their feelings towards the perpetrators. There was one child who never wanted her

step-father to be arrested from the onset. The hatred that some children felt towards their fathers was in other cases extended to other males in the family and/or in general.

Some children experienced guilt and self-blame for the abuse and the consequences thereof; they saw themselves as having caused trouble in the family. Other issues according to the mothers were confusion about their identity, that is whether to behave like a child or an adult; loss of trust in the mother; loss of interest in the previous pleasure, feeling ashamed and embarrassed to play with other children in the family because of the stigma, suicidal ideation and eating problems like refusal to eat or fluctuation in eating patterns.

Consistent with the views of Finkelhor (1986), Lewis (1997), and McKendrick and Hoffman (1990), PTSD symptoms including anxiety features like sleep disturbances, flashbacks and exaggerated fears and phobias; and also depressive symptoms such as social withdrawal and poor self-esteem were indicative of the traumatic impact of sexual abuse on the child. This is also congruent with studies conducted by Kiser et al. (1991), McLeer et al. (1988), Rosin (1994), and Wolfe et al. (1989), which reported the symptoms characteristic of PTSD on the sexually-abused children.

De Jong (1988, cited in Elliot & Carnes, 2001) and Elwell and Ephross (1987) assert that child victims often face secondary trauma as a result of humiliating physical examination by the doctor, having to tell the story again and again because of the number of people that get involved with the case such as the legal team and other professionals, as well as their attitude and response. This present study found support of this assertion.

The most common problems reported were behavioural problems. This could explain the severity of maternal distress and lack of full maternal support; which negatively affected the mother-daughter relationship, as it was documented that mothers may be faced with difficulties in dealing with their children's behavioural problems. As a result, they may respond in less supportive manner due to the anger they feel towards their children. This finding supports Elliot and Carnes's (2001) hypothesis that children who are aggressive

and acting out are less likely to get adequate support from their mothers. Furthermore, Crawford (1999) and Mzarek and Kempe (1981) attributed the breakdown of the relationship between the mother and the child to the mother's inability to cope with her child's behavioural problems, as well as the anger and hatred that the mother feels towards her daughter as a result of such behaviour.

The findings of the present study also support the works of Forward and Bucks (1978), Hansen (1993), Sheinberg and Fraenkel (1999), and Swanson and Biaggio (1985) indicating that children experience anger towards their mothers, blaming them for different reasons related to the abuse. It also supports the suggestion of Hooper (1992) and Mashego (2000) that children's anger is more directed to the mother as compared to the father. The possible explanation for that in the current study could be that children felt unprotected by the mothers, as the vast majority of mothers either continued to stay with their partners or had left in some instances but later came back and the child was re-victimized, or only took a decision to leave after subsequent abuse incidents.

9. SUPPORT SYSTEM

Most mothers felt that their own families were not fully supportive towards them. Even those who reported to be supported by their families, they felt blamed by other members of their families for staying in the abusive relationships in the first place. Other mothers had to hide some aspects of the abuse from their parents so as to minimize the extent. There were few mothers who stated that although their parents were supportive, they were not happy with them staying in those relationships after the abuse disclosure. For mothers whose relationships with family members was poor even before, further damage was often incurred as some had to go back home to be a financial burden.

It was also clear that the in-laws are usually not supportive to the mother. They either do not believe her or blame her for having their son arrested. The in-law relationships, reported by mothers, ranged from pretending as if nothing happened by not talking about

it, threatening the mother with violence or cutting any form of communication with the mother and her child.

“They are strange people. They know everything but they pretend like they don’t know. You know, they would rather just put blinkers on and pretend as if none of this has happened. They don’t discuss it, they don’t, they just think if they keep quiet it will all go away. So, there are no big talks about anything till now”.

“And you know what breaks my heart is, me and his sister were so close, we were very good friends. Not a phone call to hear how was I, not a visit, nothing. Not a week would go by that his sister and I don’t see each other. Never heard from them again. Then when he was supposed to appear, they were all there with him, and they didn’t even greet any of my family as well”.

Also, there seems to be lack of full support from friends and neighbours in most cases as indicated by blaming the mother for staying in the abusive relationship and also for not leaving him even after the abuse allegations.

“Oh! they (friends) think I’m mad for staying with him. But there’s, obviously they are my friends, they support my decision”.

This study also revealed that mothers feel unsupported by the institutions that deal with their cases. These involved helping professionals and legal system. Some feel blamed in the process whilst others feel let down by the police who fail to respond and act accordingly, and also the delay in the court proceedings and finalization of some cases.

“When I came there I had a fight with the social worker., she had a bad attitude. Instead of talking to me nicely she said, ‘if you do not have time for this child we will take her to the welfare.... They were definitely blaming me for not standing up and doing something to stop this.”

“I must tell you these court people are useless...’ no ending to it.”

Some mothers also feel that counselling services is more interested in the victim and the perpetrator and they are left to deal with the situation on their own.

“He goes for his counselling, all the same, to me it means nothing because I still sit at home, looking at him, looking at my daughter and thinking why did you do that, why didn’t you leave her innocence alone...; I haven’t even scratched the surface of how I feel”

The findings of this study indicate that most significant relationships were damaged by the sexual abuse of the child by her father. The relationships that were previously perceived by the mother as supportive were negatively affected, especially those of both families including extended families, as a result most of them were left to deal with this trauma alone. Several researchers have reported a correlation between lack of social support and severity of maternal distress, which later affects the level of maternal support; as a result, exacerbate the child’s distress (Hiebert-Murphy, 1998; Lipton, 1997; Timmons-Mitchell et al., 1997).

Although the shift from a collusive mother to the powerless mother who is incapable of protecting her child has been indicated; a number of authors pointed out that mother-blaming by both the public and the professionals is still prevalent in this country (Carter, 1990; Corcoran, 1998; Faller, 1988; Herman & Hirschman, 1977, cited in Meiselman, 1990, Russell, 1986). Consistent with that, a substantial number of mothers in this study felt blamed by family members, friends, neighbours and helping professionals.

10. CONCLUSION

This chapter has presented results of this study in accordance with the themes that were identified. Quotes from the interview transcripts were used to illustrate these themes and these were discussed with reference to the literature and the findings of previous studies.