Common Behavior and Coping Mechanisms of Childhood Sexual Assault Survivors

• Eating disturbances-The issue is control over physical self and can be used as a coping mechanism to reestablish control over one’s body.

• Sleep disturbances-These are any changes in sleeping patterns (i.e. sleeping with the lights on, with animals or stuffed animals, sleeping with clothes on or the radio on). One may experience nightmares related or unrelated to the sexual assault.

• Role Reversal-(trained to “take care of others needs”) A sexual assault survivor may develop a sense that their needs are unimportant and that taking care of others needs is more important. Conditional relating might also be present because they have learned that they have to give something to be love or accepted (“nothing is free”)

• Extremely Low Self-Esteem-Survivors may have doubts about worth or ability and may feel like they are “damaged goods”, or that they must have caused the abuse.

• Isolation and Lack of Relating Skills-Isolation is used as a way of coping rather than having to deal with the stress of relating to others.

• Inappropriate/Inappropriate Use of Power and Control-The dynamic of sexual assault is that one person abuses their power over another individual. The sexual assault survivor has learned that relationships are not equal; therefore, it can be difficult for a survivor to relate to others in a way that demonstrates mutuality.

• Limited Problem-Solving Skills- Due to the dynamics involved in sexual assault, a survivor may have limited abilities in developing new ways of getting their needs met. A survivor may rely on others to solve problems for them, or may appear to want others to “rescue” them rather than work through situations on their own.

• Lack of Safety Mechanisms-Less ability to recognize when a situation is risky or could be potentially harmful.

• Blurring of Boundaries-Survivors may not have developed a sense of what is mine/yours. During an assault boundaries are violated and wishes are disregarded. Therefore, there can be some loss of ability to know when personal space is being invaded.

• Blanking Out/Invisibility-Survivors may not feel that they have personal power in their life and may believe that if they go unnoticed they will not have to deal with the situations. As a result survivors may not speak up, get involved, or do anything to “make waves”.

• Self-Destructive Behavior-These are behaviors that are potentially harmful. Suicide attempts, cutting, burning, and alcohol/drug abuse are a few examples of risk taking behaviors.
• Sexual Acting Out/Sexuality Concerns—Sexual assault survivors may have been taught that sex is “all they are good for.” As a result, survivors may engage in promiscuity, fear or aversion to sexual contact. Sexuality concerns may also occur if the assault was committed by a person of the same gender.

• Psychosomatic Complaints—these are physical symptoms that may occur as a result of emotional distress. For example; headaches, stomach aches, pain in the area of the body where the assault occurred, abdominal pain, and lower backaches.

• Avoidance as a Main Coping Skill—May avoid uncomfortable situations. Similar emotional, cognitive, behavioral, social and physical effects exist for children raised in violent households. The impact of childhood trauma may affect a student’s ability to succeed academically or socially.

Child Sexual Abuse: How you might be feeling:

Guilt:
- Because you didn’t tell, because you didn’t tell earlier, because you didn’t tell all of it.
- For telling someone else and not your parents
- For experiencing pleasure during the abuse
- For feeling like abusing younger children or abusing your children
- For being attractive, for causing it because you were pretty
- For breaking up your family.

Sadness:
- For losing that “special” relationship
- For losing the innocence of childhood.
- Seeing your parents’ sadness and grief
- Feeling you’re not the same anymore

Confusion:
- About what’s going to happen
- About sex and affection
- About how you’re supposed to feel about the offender

Fear:
- About what’s happened to your body
- Of having to testify in court
- Of trusting others, especially nice people
- Of being abused again
- Of having talked about it, of people finding out.
- That nobody will believe you, that people will blame you
- Of expressing anger, or hurting somebody
Shame:
- That it happened to you
- That you have sexual feelings

Rage:
- To your mother or non-offending parent for not believing you.
- For not protecting you

Anger:
- Sometimes at the offender but mostly at yourself
- Similar emotional, cognitive, behavioral, social, and physical effects exist for children raised in violent households.
- The impact of childhood trauma may affect a student’s ability to succeed academically or socially.