Responses to Sexual Abuse

Sexual abuse victims experience a range of reactions. Reactions may vary due to the age of the victim, and gender of the victim. Sexual abuse has also been shown to produce immediate and long-term reactions.

There are common responses to sexual abuse. Outlined below is a brief description of these common responses.

Flashbacks:
Flashbacks are sensory memories of the sexual abuse. They can affect one or more of our five senses. Most often flashbacks are triggered by the child coming into contact with abuse-related stimuli or an event that may represent the abuse in some way. Flashbacks are sudden and intrusive and can occur at any time.

Flashbacks can include visual images of the person who hurt your child, or image of the sexual abuse taking place. Sometimes a flashback can be hearing the voice of the perpetrator saying something to the child, or physical sensations related to the types of acts committed against the child. Smells, tastes, touches can also activate a sensory memory if the child connects these things with the abuse. For example, if a child was being sexually abused while chicken noodle soup was cooking on the stove, any time the child smells chicken noodle soup this could trigger a flashback.

Repetitive and Intrusive Thoughts and/or Memories:
Sexual abuse victims also experience intrusive thoughts and memories. These thoughts and memories are usually unexpected and unwanted. They can be about what specifically happened while being abused, or can also focus on other issues such as fear, danger, sex, guilt, and helplessness.

Nightmares:
Nightmares are similar to flashbacks and intrusive thoughts in that they too are unexpected and unwanted. Victims typically experience two types of nightmares. The first type presents as a graphic and realistic rendition of the sexual abuse. The other presents in a symbolic way, exposing themes of intrusion, vulnerability, violence and danger.

The first type seem to occur soon after the abuse, whereas the second type can occur right after the abuse, but more commonly are a longer term symptom.

Self Injury:
Self-injury is any sort of self-harm which involves inflicting injuries or pain on one's own body. It can take many forms. The most common form of self-injury is cutting, usually superficially, but sometimes deeply. Some people may burn themselves, punch themselves or hit their bodies against something.

Self-Injury is a Coping Mechanism. Most people who self-injure are unable to handle the intense feelings, they can feel numb or disconnected. Often they are unable to express their emotions verbally. They may have a dislike for themselves or their bodies.

Those who self-injure identified in several studies what self-injury does for them.

This is what they said:
- Helps to escape from emptiness, depression and feelings of unreality.
To ease tension
Relief: when intense feelings build, self-injurers are overwhelmed and unable to cope. By causing pain they reduce the level of emotional and physiological arousal to a bearable one.
Expression of emotional pain.
Escaping numbness: many of those who self-injure say they do it in order to feel ‘something’, to know that they’re still alive.
Obtaining a feeling of euphoria
Continuing abusive patterns: self-injurers tend to have been abused as children. Sometimes it is a way of punishing oneself for being ‘bad’.
Exerting a sense of control over one’s body.
Grounding in reality, as a way of dealing with feelings of depersonalization and dissociation.

Sources: