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Abstract

This study aimed to explore the experiences of parents of rape survivors. A grounded theory approach was used and in this approach, we co-constructed the data, so our perspectives were included within the process substantive theory was developed utilizing Charmaz' constructivist approach. Semi-structured interviews were done to 10 informants. Three categories were identified namely, (1) "Moving Abruptly", (2) "Moving Through", and (3) "Moving On". A core category "Protecting the Child" was formed. Findings revealed that parents of rape survivors undergo changes and patterns of behavior which are centered on the protection of the child. Amplification of relationships and becoming better results from this experience.

Keywords: sexual assault, secondary victims, grounded theory, parents of rape victims, Charmaz, constructivist, parent-child relationship, Southeast Asia, rape survivors

Introduction

Rape is a serious and devastating problem in our society today, which has caused negative effects in the community. The Philippine Information Agency had reported that Central Visayas ranked number one among the regions with the highest number of reported violations of Anti-Violence Against Women and their Children Act of 2004 from January to September 2013 where Region VII was reported to have one of the highest number of rape cases with 370 cases landing on the 7th place among the 16 regions (Braga, 2014).

Many people speculate on how rape can affect a person's life including the person's family and friends, and people may disregard the fact that these traumatic events does not only injure the survivor but also affects the survivors' family, especially the parents. (Calhoun, Cann, Tedeschi, & McMillan, 2000; Koss and Hoffman, 2000).

Numerous studies have quantitatively examined the impact of rape on the physical, emotional and psychological levels of the survivor. (Basile, Chen, Black, & Saltzman, 2007, (Dube et al., 2005).) However, few studies were done with

respect to the impact and profound effects of rape in parents of rape survivors. Hence, we aimed to generate a substantive theory that explains the process experienced by parents of rape survivors. The parent-child relationship consists of a combination of behaviors, feelings, and expectations that are unique to a particular parent and a particular child. Of the many different relationships people form over the course of their life span, the relationship between a parent and a child is among the most important (Simon & Schuster, 2005). The experience of sexual assault have seen to alter the parent-child relationship since it can increase vulnerability to a range of mental health conditions (Banyard, Williams, & Siegel, 2001). Following the rape of a loved one, family and friends often experience considerable emotional distress, physical and psychological symptoms that can disrupt their lifestyles and family structures (Cwik, 1996). Children who have experienced sexual assault need to feel safe and loved. When parents do not have an understanding of the effects of rape, they may misinterpret their child's behavior and end up feeling frustrated or resentful. Their attempts to

address troubling behavior may be ineffective or, in some cases, even harmful (Schooler, Smalley, & Callahan, 2010). On the other hand, when a parent does recognize the needs of their child, during the crisis they may impart positive emotional effects on their children, helping them make healthier choices (Byrant-Davis, Chung, & Tillman, 2009).

We aimed to generate a substantive theory that explains the process experienced by parents of rape survivors and to gain a better understanding of the effects of rape to their roles as parents.

Methods

Design: We utilized a grounded theory specifically Charmaz' constructivist approach. In this approach, we co-constructed the data, so our perspectives were included within the process (Calman, n.d.). This also looks into the participants' thoughts, feelings, values, viewpoints, assertions, etc., rather than facts (Charmaz, 1995).

Settings and Informants: We interviewed selected parents of rape survivors who are situated in the vicinity of the province of Cebu. A total of 10 informants were gathered with the use of snowball and theoretical sampling. The informants met the inclusion criteria: (a) child must be a 19-year-old and below rape survivor, and (b) parents must be the primary caregiver of the child. Exclusion criteria are as follows: (a) children who were victims of rape but died in the traumatic event, and (b) the sex-offender is one of the parents. In this study, the sample size was reasonably sufficient since data saturation was achieved after interviewing the 8th informant, wherein no new information was obtained and redundancy was observed. Two other informants were interviewed which served as a validation for data saturation.

Data Collection: Once approval was sought, we underwent a self-awareness activity with a registered guidance counselor and conducted a mock interview. We then scheduled interviews with eligible informants. A depression screening test with the informants was performed using the Patient Health Questionnaire 9 (PHQ-9). The internal reliability of the PHQ-9 is excellent, with a Cronbach's alpha of 0.89 in the PHQ primary care study. We utilized a semi-structured interview guide with a grand tour question "Tell us about your experiences in parenting your child who is a survivor of rape." An audio recorder was used to document the verbatim responses of the informants. The data collected was transcribed and analyzed. A token of appreciation was offered to the informants after each interview.

Ethical Consideration: An ethics review committee approved the research prior to data gathering. We distributed consent forms to the identified informants, explaining to them thoroughly the purpose, risks, benefits, guidelines and their different rights as an informant. Also, to protect the data of the informants, all data gathered and encoded were stored in a computer that is password protected.

Data Analysis: The Charmaz constructivist approach was utilized. In a grounded theory, the data collection and data analysis were done simultaneously. First, initial coding was done. In initial coding, we studied pieces of data such as words, lines, segments, and incidents to learn what the informants view as problematic. Followed by focused coding. In focused coding, we selected useful initial codes and analyzed them against extensive data. Related codes are then grouped to form sub-categories (Charmaz, 2006). Axial coding was done thereafter. In axial coding, we searched for relationships between sub-categories to categories. In selective coding, we integrated and refined categories so that categories are related to the core category, ultimately becoming the basis for the grounded theory (Babchuk, 1996). Theoretical integration was done throughout the process, which begins with focused coding and precedes throughout the entire subsequent analytic step. Theoretical integration specifies the relationships between the categories developed in focused coding (Charmaz, 2006). In each process, data, method and investigator triangulations were done in order to validate data through multiple perspectives. Memo writing was also done, this helped us in making comparisons between data and data, data and codes, codes of data and other codes, codes and category and category and concept for articulating conjectures about these comparisons (Charmaz, 2006).

Results

The data gathered from (10) informants yielded (3) categories and a core category that emerged in the coding process of this research.

As shown in Figure 1, each category represents the different phases that the parents undergo, namely "Moving Abruptly", which includes experiencing adverse emotional and behavioral response. "Moving Through" which includes adapting, seeking retribution, changing parenting approach and letting go and letting God. Lastly, "Moving On" which includes amplifying relationships and becoming better. Each phase will be thoroughly explained in the following sections.

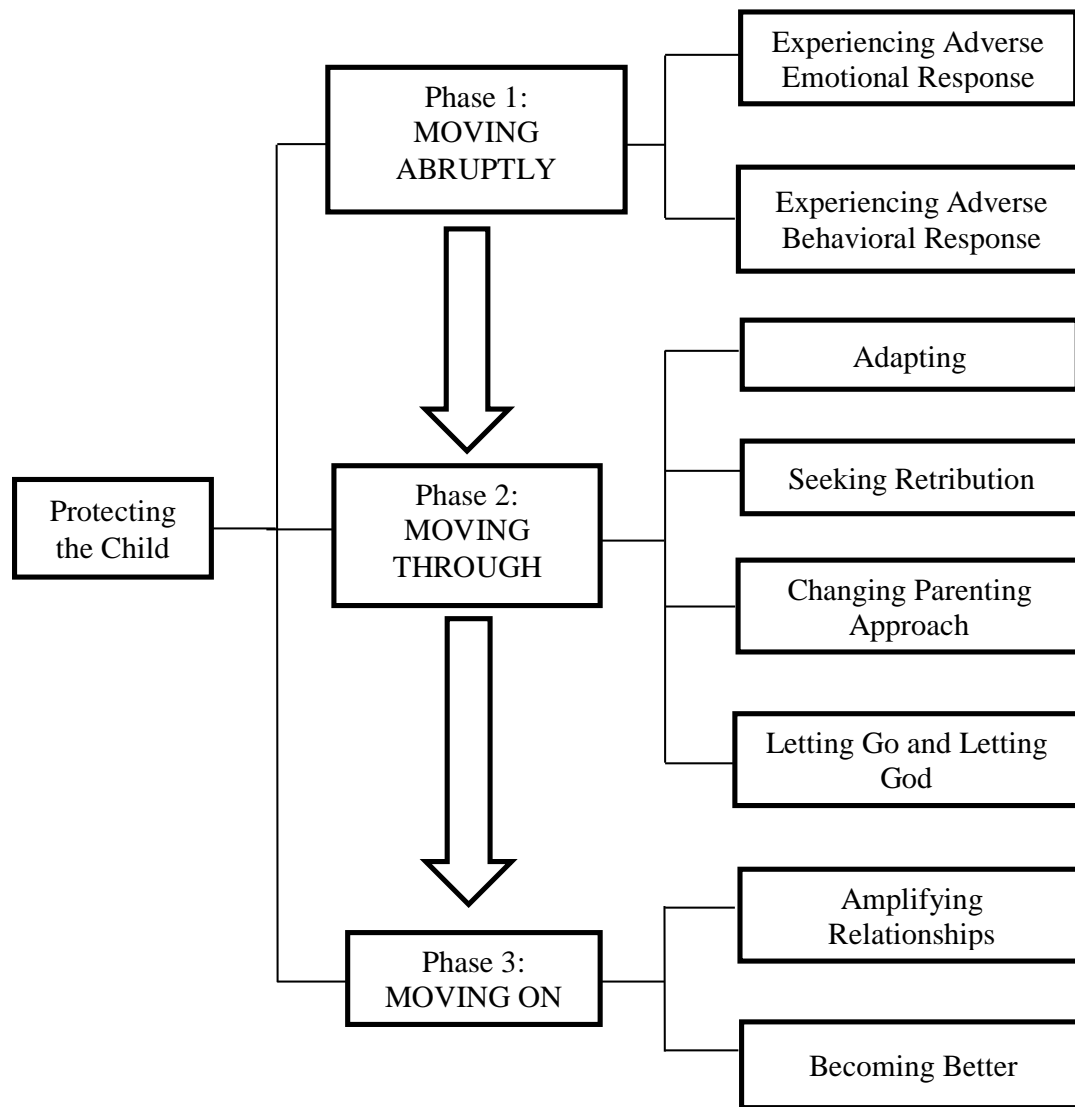


Figure 1. Theoretical Framework of a Movement Theory

Category 1: Moving Abruptly

This explores the different sudden and unexpected effects experienced by the parents when a sudden traumatic incident happened to their child who they loved and cared for since the day they were born, and how the traumatic event such as rape have affected them emotionally, psychologically, and behaviorally.

Sub Category 1: “Experiencing adverse emotional response”

This depicts the various adverse emotional responses the parents experienced after knowing that their child was raped.

Pain depicts the unquantifiable and unpleasant emotional response that they felt caused by the devastating incident experienced by their child. According to Nila, “Being a mother of rape survivor is very painful to think about, you think about what happened to your child every time, it almost makes you commit suicide, the embarrassment and the effect of the incident, where her future is destroyed.”

Anger and hostile thoughts is another part of this sub-category. This feeling of resentment that were felt by the parents influenced them to have hostile thoughts towards the perpetrator. According to Selena, “I was angry, I was very angry. If only I could kill the perpetrator, I would kill him.”

Questioning. The gravity of the situation makes it hard for these parents to understand and comprehend the reality that this happened to their child. They tend to ask, “Why did this happen, I have a good kid.”

Self-blame. In here parents tend to feel responsible for what happened to their child, since it is their responsibility to protect and keep them safe. According to Pinky, “Yes, I regretted it, because I allowed my children to go home at any time.”

Shame is another reaction by the parents upon knowing the incident, wherein they tend to compare their experience to such standards made by the society. Parents tend to feel embarrassed to share their experience, since people often have the tendency to blame them for what had happened. According to Pinky, “I was embarrassed and silent. If people ask me about the incident, I deny it, I will

say I don't know, I was not there. I will not entertain the conversation because it is a bad experience."

Sub Category 2: "Experiencing adverse behavioral response"

This depicts the inappropriate behaviors experienced by the parents, which has affected them physically and psychologically.

Neglecting self-care is a current state wherein the parents are too preoccupied about the situation that they start to forget about themselves. According to, "I was getting insane, I went to Church not wearing any undergarment."

Loss of appetite is an effect of the incident in which parents lose their desire to take in food which resulted in physical changes, such as weight loss. According to Nila, "I didn't have the appetite to eat during that time. Who would want to eat seeing their child always crying? I lost weight and I was pale."

Loss of interest in sex is one unique maladaptive symptom that has emerged in the study; this correlates to the intimacy between the husband and wife. In this case, most of the mothers have lost their drive to perform sexual acts. According to Trixie, "I and my husband had not engaged in sex for a long time. There was a time, I don't like doing it because I am a girl, but eventually it became okay, sometimes I cannot open up to my husband about it."

Category 2: Moving Through

This category shows the parents actions towards the incident. This explores the effects, actions and interventions done by the parents after what happened to their child.

Sub category 1: "Adapting"

These are behaviors experienced by the parents to effectively cope with the situation.

Seeking for support is when the parents seek ways to reach out to their friends, family and different organizations about the incident. According to Nila, "I went to ask for help so that I can solve our problem, if Mrs. Chiong didn't help, we were hopeless."

Sub Category 2: "Seeking retribution."

Seeking retribution is defined as an act wherein the parent of the survivor finds ways for someone to pay for the consequences that her child has experienced, such as wanting to kill the perpetrator. According to Trixie, "I urged in seeking justice, so that I can put the perpetrator in jail." According to Pepe, "It would be have been better to kill him immediately."

Sub Category 3: "Changing parenting approach."

This explain how parents adjust their ways of parenting to compensate to the current situation.

Being stricter is a response wherein the parent demands more rules for the child to follow in order for them to protect their child. According to Linda, "I always look for my daughters."

Giving more care is another response wherein the parents become more hands-on towards their child. According to Selena, "I did everything so that she would eat, I took good care of her."

Encouraging is an act wherein the parents of the survivor shows support and positivity. This is where the parents provide the child with comfort and let them understand the situation that they are already in. According to Rin, "I talked to my child about the incident. We can't escape the reality, I told her this will just pass. You are hurt now, but at least we are at peace because the perpetrator is caught and in jail."

Providing diversional activities is an act performed by the parent to direct the child's mind to another situation. According to Linda, "I give her the things she wants, so that she'll enjoy." According to Pinky, "Yes, I took her to places, to stroll around."

Sub Category 4: "Letting go and letting God"

This reflects the time the parents turn into God for help, guidance and strength, for them to get over the incident. Parents improve their relationship with God and continually ask God for enlightenment. According to Rose, "Focus on the altar, I just pray, pray and pray. Lord helped me through prayer. He will not give you a heavy problem if you cannot handle it."

Category 3: Moving On

This category depicts the positive outcomes after they have accepted reality that their child was raped, and how the incident paved way to establish a closer and meaningful relationship with God and their child. It also explains how the incident made them become stronger and better individuals.

Sub Category 1: "Amplifying relationships"

This shows the bond of the parent, child and other family members becoming stronger through spending more time in caring for the child and doing diversional activities together. The parent's relationship with God has also improved in this phase. According to Lyn, "I am closer to my daughter. Before, we are not that close because we were far from each other. Now, she is closer to me because I am always taking care or her, and keeping an eye on her." According to Lyn, "I got closer to God and on those times, it was God who I leaned on."

Sub Category 2: "Becoming a better person"

The attitude of these parents have also changed by becoming aware of their negative traits and changing them into positive ones because of the new learning that made them understand their child and other people more. According to Rose, "If I

am reprimanded, I just cry. I don't talk back. But before, I am not like that. I don't let my guard down. I am not the kind of person who allow someone to surpass me. I am mean. So far, from the things that I've been through, God has given me trials. Now I am patient, I became more humble."

Core Category: Protecting the Child

This study defines "Protecting the Child" as interventions and measures in response to the rape incident affecting the child. Protecting can encompass how the parents nurture the child and seek justice after the incident. The parents nurture or care for their child in ways that would promote a better and healthier development. Along the way, parents can experience various changes which can include but are not limited to physical and emotional changes. Parents are willing to sacrifice their lives, jobs, time and efforts in order to look after and protect their child. They provide needs that focus on the best interest of their child. When parents protect their child, they give them supervision and support aside from providing sufficient care for their child. When a child gets hurt or is threatened, the response of parents would be reflecting, planning, and implementing ways to protect their child. This core category has formed from the three categories: Moving Abruptly, Moving Through and Moving On. The parents of rape survivors experience this process with a common goal leading to the protection of the child.

Discussion

Moving Abruptly. Trauma and trauma symptoms affect not only the individual, but also people who have significant relationships with the traumatized individual, such as parents (Nelson, 1998). For parents, they are found to be "secondary victims" of the incident. The "secondary traumatic stress theory" describes the emotional effects on family members giving support to a victimized member of the family (Ting et al., 2004). In this study, it was evident that the parents of rape survivors had experienced various adverse emotional response such as shame, pain, etc. as they realized that their child was raped. Sexual assault has an impact on family members, including parents. Following the sexual assault of a loved one, family and friends often experience considerable emotional distress and physical and psychological symptoms that can disrupt their lifestyles and family structures (Cwik, 1996). Shneidman's Psychache Theory states that psychache (unbearable guilt, despair, hopelessness, shame, pain, and depression) is the key cause of suicide, and accounts for the effect of all other psychological factors. Psychache directly leads to suicide once the psychological pain surpasses an individual's threshold of tolerance, to the point where death is seen as the only means of escape (Flamenbaum, 2009).

Emotions affect behavior because actions allow feelings to be expressed. In this study, it shows that the different emotions felt by the parents have contributed them to manifest behavioral effects such as losing the interest in sexual activity and appetite. Most people do express their feelings by engaging in certain behaviors (Sanders, n.d.). Men's sex drives are stronger than women's. Women place more value on emotional connection as a spark of sexual desire. Women also appear to be heavily influenced by social and cultural factors. Sexual desire in women is extremely sensitive to environment and context (Sine, n.d.). Thus, explains why female partners in this study are more prone to lose the interest in engaging in sexual activity than their male partners.

Moving Through. Social support is exceptionally important for maintaining good physical and mental health. Overall, it appears that positive social support of high quality can enhance resilience to stress, help protect against developing trauma-related psychopathology, decrease the functional consequences of trauma-induced disorders, such as post-traumatic stress disorder (Ozbay et al., 2007).

Parents of victims often tend to feel that someone must pay for what has happened to their child or it is "the urge to fight back" (Linden et al., 2004). The motivation is revenge, not because humans are fundamentally evil, but because vengeance is a part of the innate survival mechanism of a complex social species. The secondary victim can feel good about gaining a sense of power and control by planning vengeance and may experience pleasure at imagining the suffering of the target and pride at being at one side of some spiritual primal justice (Horowitz, 2007).

When a parent has a child who has experienced this type of trauma, parents may then start to think about, "what went wrong?" or "what did I miss?" In a way parents may then try to improve by means of changing their usual ways of parenting, thinking that this time it may be more focused towards caring for their child, in this manner a parent may become more "authoritative." Authoritative parenting is a type of parenting wherein the parent has a high level of parental involvement and a strong discipline towards their child. More so, authoritative parents become more supportive and more demanding towards their child (Morin, 2018).

Much has been claimed about Filipinos being resilient, able to bounce back rapidly after personal and collective trauma. There are elements in Filipino culture that offer an advantage in terms of coping mechanisms. Religion is one, offering some kind of explanation for a disaster, for example, that God is testing your faith. These rationalizations do allow people to cope (Tan, 2013).

Moving On. A study conducted by Gray (2010) shows that people believe in God more strongly after being exposed to unexplained suffering. Traumas can lead to a deepening of faith when people realize the limits of personal control and ask for spiritual guidance. A study on people exposed to traumatic events have found that social support and positive relationships with others is a way that could lead into psychological recovery. Difficult experience can deepen the bonds of family and friends. It also gives an opportunity to see how other people care (Greenberg, 2013). Survivors who experience post-traumatic growth seem to have a better ability to re-frame their lives after extreme trauma (Everett, 2016). In this case, the gravity of the incident made the parents become stronger and better individuals. “A Movement Theory” states that parents of rape survivors undergo a process of change centered on the protection of the child. This process initially moves from the emotional and behavioral responses of the parents to the actions and interventions they did in response to the incident, and ending at the positive outcomes that stemmed from the experience.

Our recommendations from this study would include: the parents of rape survivors to seek for psychological support, the community to respect the privacy of the parents and support them in attaining justice, the nurses and healthcare providers to be more compassionate and understanding to these parents and to serve as advocates, the government to have programs and services not only providing mental health support to these parents but also financial aid, and the future researchers to interview more male informants, perform dyads, and search for parents who have a male child that was raped, this would contribute to the knowledge and understanding of the process and provide more comparisons.

References

- Banyard VL. (2001). The long-term mental health consequences of child sexual abuse: An exploratory study of the impact of multiple traumas in a sample of women. Retrieved from <https://www.ncbi.nlm.nih.gov>
- Bentivegna K, Durante A, Livingston N, Hunter AA. (2019). Child Sexual Abuse identified in Emergency Departments Using ICD-9-CM, 2011 to 2014. *J Emerg Med.* 22. pii: S0736-4679(19)30228-8.
- Braga. (2014). Region 7 has highest number of rape cases : the freeman. Retrieved from <https://www.philstar.com>
- Bryant-Davis, T. (2011). Surviving the storm: The role of social support and religious coping in sexual assault recovery of African American women. Retrieved from <https://www.ncbi.nlm.nih.gov>
- Bouchard EM, Tourigny M, Joly J, Hébert M, Cyr M. (2008). Psychological and health sequelae of childhood sexual, physical and psychological abuse. *Rev Epidemiol Sante Publique.* 56(5):333-44.
- Dillard R, Beaujolais B. (2019). Trauma and Adolescents Who Engage in Sexually Abusive Behavior: A Review of the Literature. *J Child Sex Abus* 12:1-20.
- Draucker CB, Martsolf DS, Roller C, Knapik G, Ross R, Stidham AW. (2011). Healing from childhood sexual abuse: a theoretical model. *J Child Sex Abus.* 20(4):435-66
- Everett. (2016). Becoming stronger after trauma. Retrieved from <https://www.rewireme.com>
- Flamenbaum. (2009). Testing Schneidman’s theory of suicide: Psychache as a prospective predictor of suicidality and comparison with hopelessness. Retrieved from <https://www.colleaguescanada.gc.ca>
- Gray. (2010). Blaming God for our pain: Human suffering and the divine mind. Retrieved from <http://www.mpmlab.org>
- McTavish JR, Sverdlichenko I, MacMillan HL, Wekerle C. (2019). Child sexual abuse, disclosure and PTSD: A systematic and critical review. *Child Abuse Negl.* 15;92:196-208
- Morin. (2018). 4 types of parenting styles and their effects on kids. Retrieved from <https://www.verywellfamily.com>
- Sanders. (n.d.). How do our emotions affect our acts? Retrieved from <https://classroom.synonym.com>
- Sine. (n.d.). Sex drive: how do men and women compare? Retrieved from <https://www.webmd.com>
- Tan. (2013). Post-post-trauma. Retrieved from <https://opinion.inquirer.net>
- Ting, L. (2005). The secondary traumatic stress scale. Retrieved from <https://www.researchgate.net>