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The sexual assault victim: What every nurse practitioner should know

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Structure of the Presentation

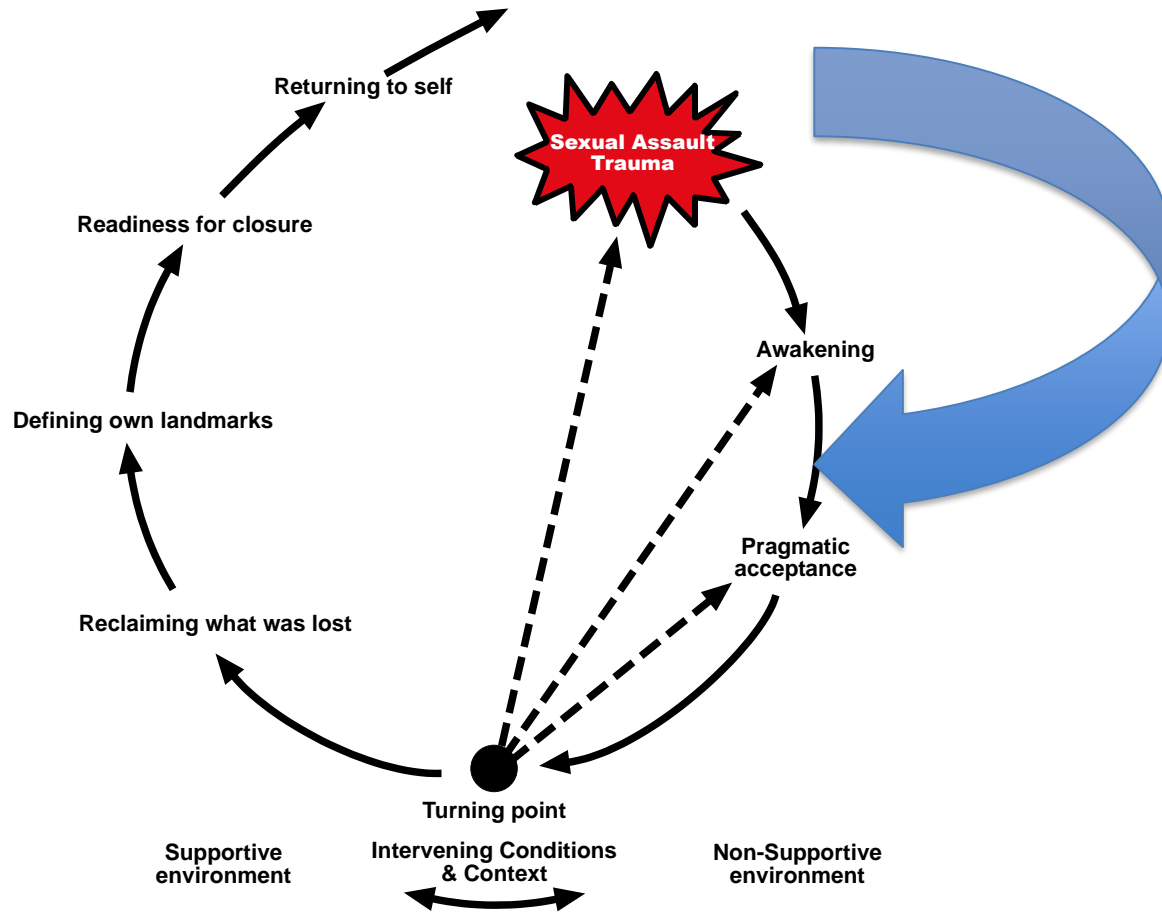
- ❑ The theory of recovery from sexual assault trauma
- ❑ My AHA moment - Discovery of neurologic explanation
- ❑ Implications for practice

Theory of Recovery from sexual assault trauma

- ❑ A longitudinal study for 6 months, then end of first year
- ❑ Ten women
- ❑ To discover the process (journey) of recovery from sexual assault trauma as experienced and described by victims
- ❑ To develop a theory to guide nursing practice in South Africa

Findings

Women's Journey of Recovery from Sexual Assault Trauma



Sexual Assault Victim Week 1

Stage	Behaviours
Sexual assault trauma	Inability to move, lying motionless, inappropriate thinking, not knowing what to do, loss of control “Mental Paralysis”
Awakening	Realising what has happened, self blame, guilt, fear of not being believed, seeking help, selective disclosure , conflicting views, complying or not complying with management

Mental Paralysis

He got up, cleaned himself with my husband's socks and left us lying there. My husband was still lying with his hands and feet tied. I did not even think of untying him, I just lay there. I could not move, or think. My body was just heavy. I don't know how long I lied there motionless!

Mental Paralysis

I just lay there. He came back and said: "Good, you are still here." He continued from where he left, Sine. I am sure he thought I really wanted it. He did his thing until he was satisfied. He left me and disappeared. I laid there naked for a long time before I even remembered my daughter.

Mental Paralysis

He grabbed my bag and searched and threw it back to me. Well I thought he will let me go. He then said – “Ride on the bicycle” This did not make sense, but I got on the bicycle. He then cycled with me as if I was a parcel that he was carrying. I could feel tears coming down my face, but I could not think straight. I could not scream or anything.

Mental Paralysis

At 12 weeks

I think I have forgiven myself. There were times when I used to think, I could have tried to fall off the bicycle or scream and attract the attention of people we passed on the way, but I did not. I could not. I was numb all over. I had no power in me to do anything. I was just paralysed mentally.

Selective Disclosure

I have not told my dad because he does not care any way. If my granny was here, I would have told her. She is in Eastern Cape My mom,..... I can't tell. She will be angry with me and ask many questions.

Selective Disclosure

I asked my partner not to tell his family. I don't know, I just feel like that this is a private matter.

Selective disclosure

*Promise me you won't tell the nurses
and the detective, but some of the
things I told you, I did not tell them. I
don't know, but some I only remember
now. Some I just did not think of telling
them, please, please.*

My Aha Moment – Discovery of Neurologic explanations

- ❑ IAFN 2013 – Prof R Campbell
- ❑ What is “mental paralysis”?
- ❑ What causes it?
- ❑ Why does it happen to some but not all?
- ❑ What causes “selective disclosure”
- ❑ Can rape victims be trusted when they chose what to say and to whom?

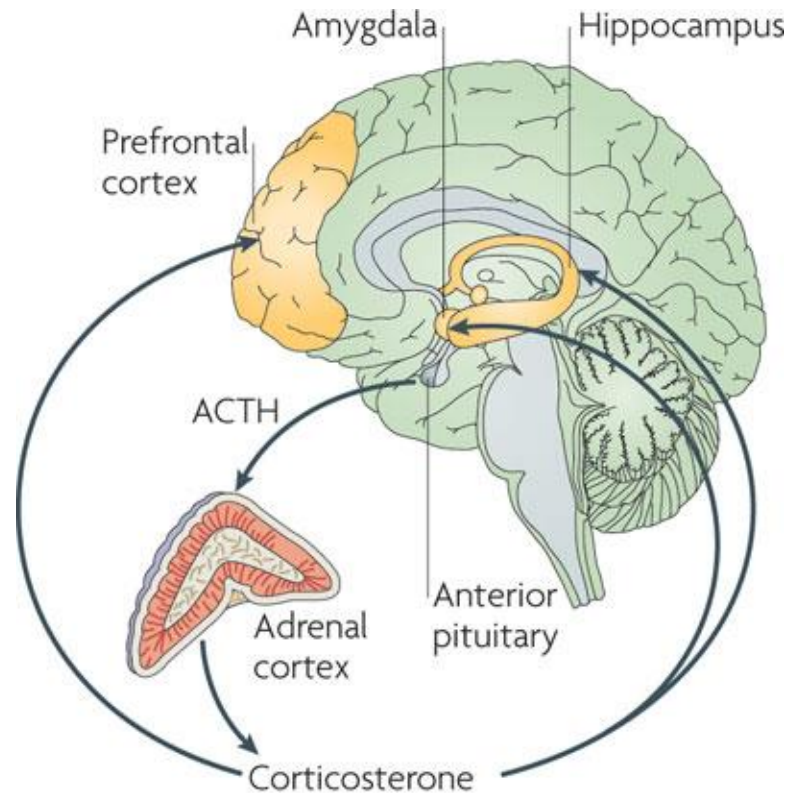
Tonic Immobility/ Thenatosis

- Mammalian response in extreme fearful situations
- Automatic response to rape (and other forms of trauma)
- 10-50% of victims of rape
- Fight, flight or freeze when a cocktail of hormones are released to protect and sustain one

Tonic Immobility/ Thenatosis

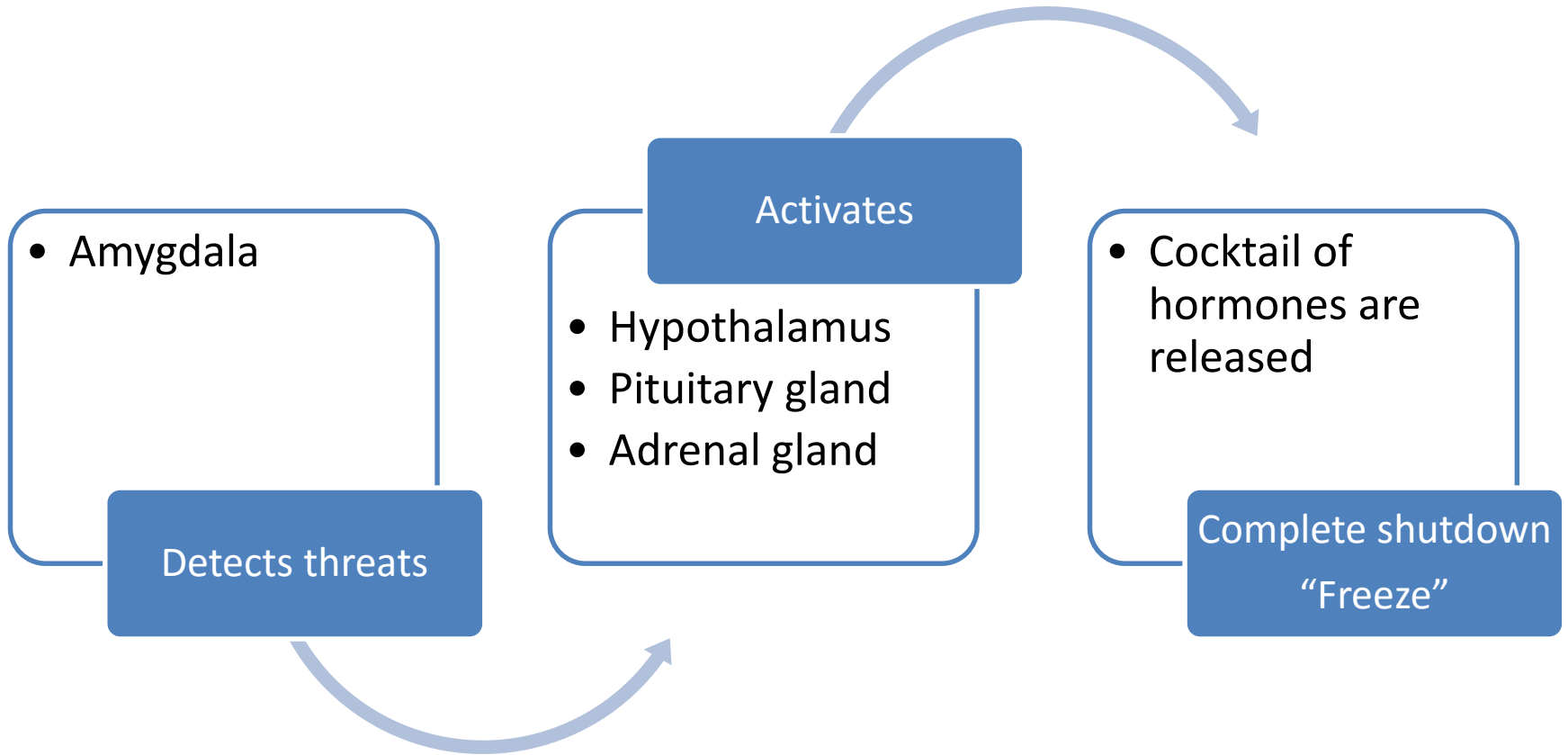
Hormone	Activity
Adrenalin	Arouses you to your circumstances “I am being attacked”
Cortisol	Provides you with uncommon energy (To fight/ flee)
Opioids	Act like morphine – to temporarily numb your pain
Oxytocin (Bliss hormone)	Attempts to stabilise your emotions, romantic attachment

Brain Regions Impacted by Trauma

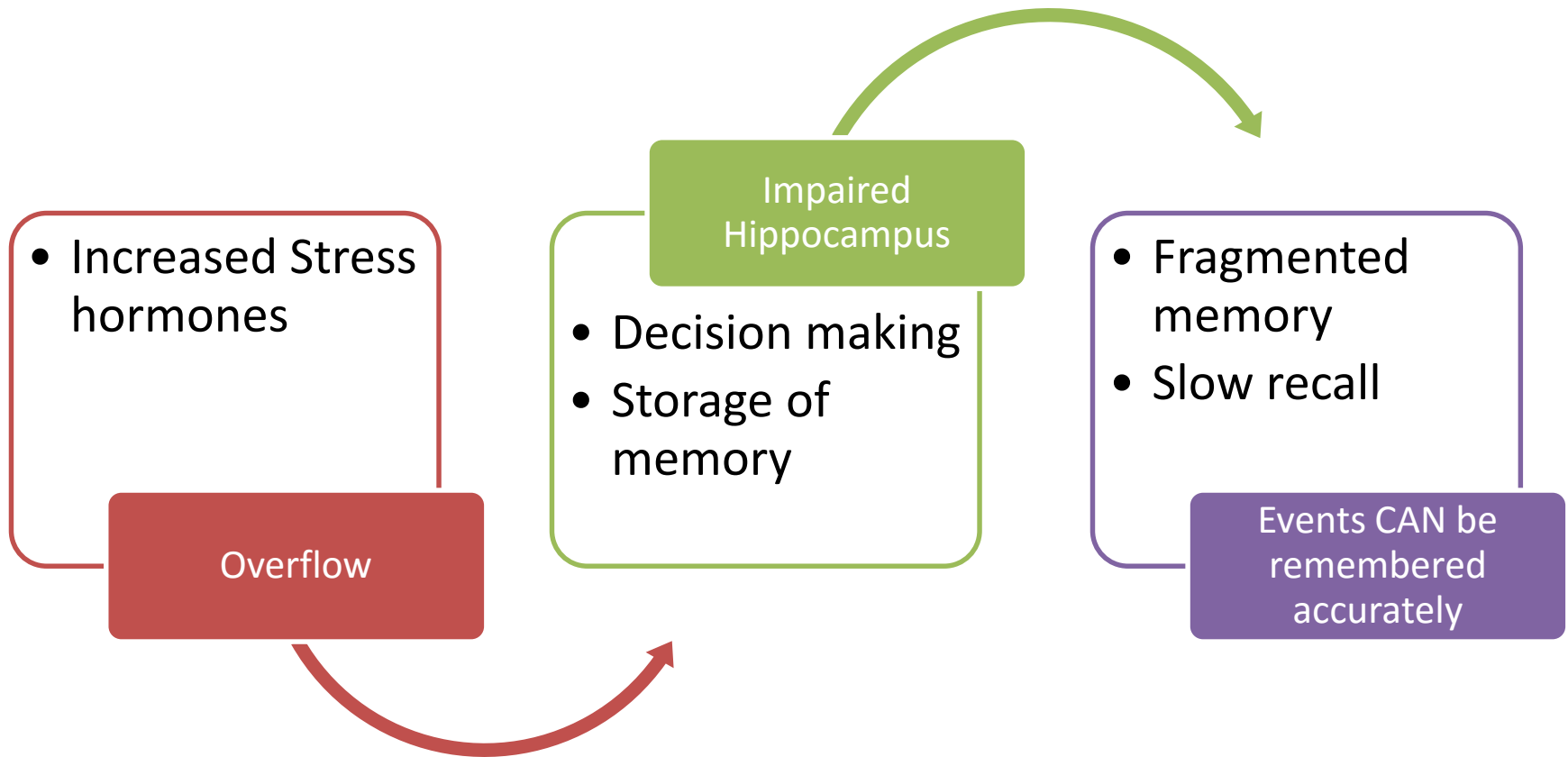


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Brain regions impacted by trauma



Brain regions impacted by trauma



Effects of the cocktail of hormones

- ❑ Block the Hippocampus to organise and store thoughts
- ❑ Disjointed thoughts – makes it difficult to recover encoded information
- ❑ Trouble recalling the attack in a chronological order
- ❑ But smell, sounds of voice etc. remains intact
- ❑ Alcohol use prior to rape may also affect recall

Victim behaviours

- ☐ Trouble recalling the attack chronologically
- ☐ Affect – no emotion or smile/ laugh inappropriately while telling about the ordeal
- ☐ Slow in answering, anger busts
- ☐ Long silence before answering
- ☐ “Shroud of doubt”
- ☐ Guilt for failing to protect self
- ☐ Statement incoherent

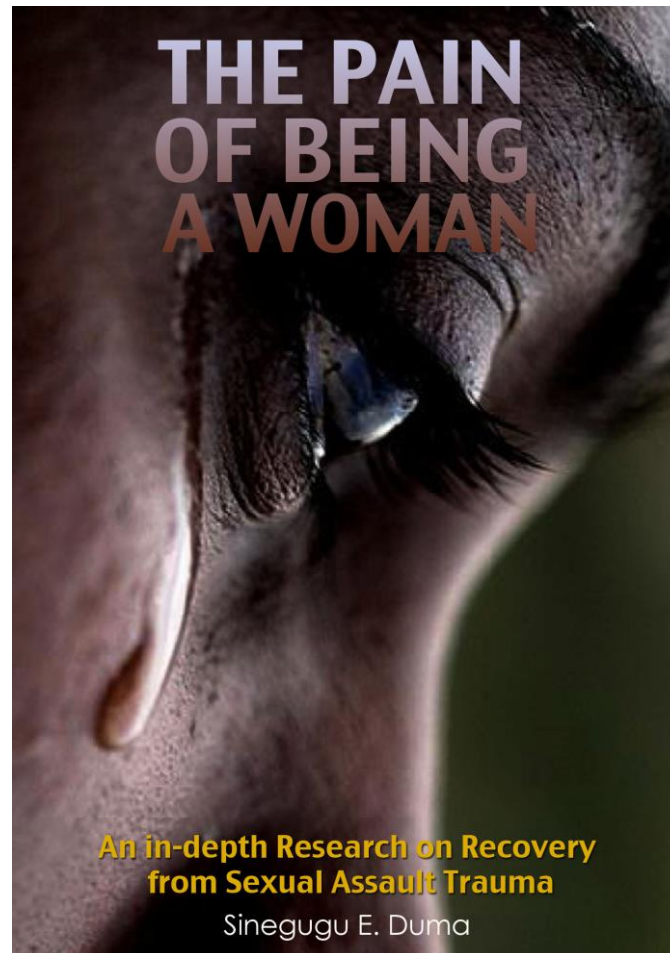
Implications for Nursing Practice

- ☐ Allow time to recollect thoughts/ consolidate thoughts
- ☐ Ask what she remembers e.g. smell or anything she heard/ felt in order to corroborate evidence
- ☐ Allow her to find the missing pieces of the puzzle on her own
- ☐ Assure her that she can tell things as she remembers them
- ☐ This is no time for “interrogations”
- ☐ **Assure her that Tonic Immobility is normal/ Give it a name**

Implications for Nursing Practice

- ❑ Tonic Immobility & forgetfulness are frightening to the victim
- ❑ Self blame – for not being able to save/protect self
- ❑ Assure her that she did the best she could under the circumstances
- ❑ Help her understand that there is nothing to be ashamed of
- ❑ Written information and follow-up care

More information



References

- The neurobiology of sexual assault. Dr Rebecca Campbell, Professor of Psychology , Michigan State University