Living With Paradoxes: Victims of Sexual Violence in Germany and the Conduct of Everyday Life

By
Karolin Eva Kappler

To apply for the title of Doctor of Sociology

Ph.D. supervisors:
Dr. Carol Hagemann-White
Professor of General Pedagogy and Gender, University of Osnabrück
Dr. Ignasi Pons i Antón
Professor of Sociology, University of Barcelona

Doctoral Program in Sociology, Biennium 2004-2006
European PhD Program in Socio-Economic and Statistical Studies

Department of Sociology and Organizational Analysis
Faculty of Economics and Business

June 2009
Acknowledgments

First of all, I would like to thank my two advisors, Dr. Carol Hagemann-White and Dr. Ignasi Pons i Antón. Without whose help and support, this thesis would not have been written.

I would also like to thank the Department of Sociology and Organizational Analysis of the University of Barcelona and the member Universities of the SESS doctoral program, especially the BGSS at the Humboldt University to Berlin and the La Sapienza in Rome for their support;

my Ph.D.-fellows at the University of Barcelona, the SESS doctoral program and especially the members of the doctoral colloquium at the University of Osnabrück, as well as the organizers and participants of the network of young researchers working on the topic of violence, of the Interdisziplinäre Zentrum für Frauen- und Geschlechterforschung at the University of Bielefeld for the emotional and academic support they provided me;

my students in qualitative research techniques of the University of Barcelona for their questions and interest;

the Agència de Gestió d’Ajuts Universitaris i de Recerca for their financial support;

Lesley King and Miriam Adelman for their help in editing;

my friends and family for their support in every moment.

But most of all, I would like to extend my warmest gratitude to medico mondiale e.V. who provided me with initial insights into the phenomenon, the staff of the hospital where I carried out the first interviews and other support organizations, that facilitated contacts for the interviews, and of course to all my informants, who so generously gave of their time.
## Index

1. Introduction 9

2. Theoretical Framework: Sexual violence in the frame of everyday life 17  
   2.1. Sexual violence in the universe of violence 17  
      2.1.1. Principal distinctions: aggressiveness, aggression, violence and trauma 17  
      2.1.2. Different types of gendered violence 23  
      2.1.3. An intimate relationship: sexuality and power 27  
      2.1.4. Sexual violence – conceptual definitions 29  
      2.1.5. Multiple forms of sexual violence 39  
   2.2. Everyday life as a theoretical approach toward a microsociological understanding of sexual violence 41  
      2.2.1. Introduction to everyday life 41  
      2.2.2. A systemic approach to everyday life: the Conduct of Everyday Life 46

3. Overview of current state of research: sexual violence and society 51  
   3.1. Sexual violence in numbers: prevalence data and comparison 51  
      3.1.1. On quantifying violence 51  
      3.1.2. National prevalence data and their limitations 53  
   3.2. Sexual violence and its individual and social dimensions 59  
      3.2.1. The historic evolution of sexual violence 59  
      3.2.2. Causal models on sexual violence 71  
      3.2.3. Individual and social consequences on sexual violence 78  
   3.3. Some victimological words on sexual violence 83  
      3.3.1. The victim – aggressor relation 84  
      3.3.2. Some victim classifications 86  
   3.4. Research question and objectives 93

4. Methodological approach 97  
   4.1. Methodological design 98  
      4.1.1. The methodological frame: Grounded Theory 98  
      4.1.2. The in-depth interview 100  
      4.1.3. The questionnaire-guidelines 103
### 4.2. Methodological implementation

- **4.2.1. Field access and sampling**
- **4.2.2. The grounded analysis**
- **4.2.3. Excursus on subjectivity or the relationship between research question, interviewees, data and researcher**

### 5. Looking at how victims conduct everyday life

#### 5.1. Narrative moments

- **5.1.1. The narrative absence of everyday life**
- **5.1.2. The narrative absence of normality**

#### 5.2. Some case reconstructions

- **5.2.1. "Until December I still had a work; then nearly everything was OK."**
- **5.2.2. "I have worked as much as I could. I have simply (-) like BEAMING oneself away."**
- **5.2.3. "I think right now our everyday life is quite carefree."**
- **5.2.4. “Because if you, in the end, have had no freedom for 48 years, except for 5 or 6 years in-between."**
- **5.2.5 “It was lucky, with all that I went through, that I was in Germany.“**

#### 5.3. Specific patterns of the interviewees’ Conduct of Everyday Life

- **5.3.1. Hyperactivity: between running away and binding constraints**
- **5.3.2. Retreat: between avoidance of the world and creation of an ideal one**
- **5.3.3. Time-out: between overwhelming memories and therapeutic confrontation**
- **5.3.4. Revelation: between visibility and exclusion**
- **5.3.5. Commitment: between integration and denunciation**

### 6. Specific moments of the interviewees’ Conduct of Everyday Life

#### 6.1. Scenarios from the victims’ everyday lives

- **6.1.1. Work life: from pleasant to constraining forms of normalcy**
- **6.1.2. Family: origin, continuity and disruption**
- **6.1.3. Body: between silence and screaming**
6.2. The semantics of the victims’ everyday lives
   6.2.1. The meaning of knowledge about sexual violence
   6.2.2. The absent presence of sexual violence in everyday life

7. Conclusion

8. Bibliography

9. Glossary

10. Annexes
   10.1. Social policy regarding sexual violence and victims in Germany
   10.1.1. Introduction to social policy in Germany
   10.1.2. Policies on violence against women
   10.1.3. Independent victim support organizations
   10.2. Interview-guideline
   10.3. Adverts
   10.3.1. Advert published in newspaper
   10.3.2. Notice posted on campuses and in help lines
   10.4. Rules of transcription
   10.5. List of citations (in German)
   10.6. List of figures
   10.7. Abbreviations
1. Introduction

„A trauma is such an extreme experience, so separated from the everyday that the instruments of the everyday are never able to reach it completely. [...] The traumatic experience can no longer be removed from the person's biography, but depends enormously on which position it takes within it. It is possible that future life may be determined by it, one can be destroyed, or one can live with it, for better or for worse, in a different way than before, although damaged, not broken, defeated, ruined.” (Jan Philipp Reemtsma cited by Folkers 2003, 23)

This statement made by a kidnapping survivor sums up the central contention of the present study: A violent assault or crime is experienced as completely singular, lies outside the everyday and cannot be coped with by means of the available tools of daily life. Yet, after having survived the extremeness of a violent attack, everyday life goes on, albeit continuously filtered through the prism of the latter experience. Hence, violence generates a paradox between the immanent singularity of the violent event and the contextual plurality of everyday life. This ambiguity between the unusual and the common, the outstanding and the routine and the subject and the social will guide the present study, providing a particular focus, looking closely at the subjective experience of violent assault and its integration into survivors’ everyday lives, within the context of a mutual relationship between humans and society. Thus, I follow the research perspective provided by a subject-orientated sociology, which as Bolte

---

1 My translation. Original version: „Ein Trauma ist eine so extreme Erfahrung, so sehr vom Alltäglichen getrennt, dass die Instrumente des Alltäglichen es nie ganz erreichen können. [...] Das traumatische Erlebnis lässt sich aus der Biographie nicht mehr entfernen, aber ungeheuer viel hängt davon ab, welchen Platz es in ihr einnimmt. Es kann das künftige Leben von ihm determiniert werden, man an ihm zugrunde gehen, oder man kann mit ihm leben, schlecht und recht, anders als zuvor, beschädigt zwar, aber nicht kaputt, vernichtet, zerstört.” (Jan Philipp Reemtsma cited by Folkers 2003, 23)

Jan Philipp Reemtsma, patron, multimillionaire and scientist, was kidnapped in March 1996 and was held 33 days in captivity until his ransom was successfully delivered. He publicly discussed his experiences in the media and published the book *Im Keller* (1997).

2 In the present study, I will use two terms -survivor and victim- in order to refer to people who have experienced violent assault. Regarding connotation of both terms, as well as their general use and intrinsic meanings, please compare p. 37.
argues is sociological research focusing on “the mutual relationship between humans and society”³ (Bolte 1983, 15).

The first idea for the study was developed through the framework provided by practical training in Kosovo⁴ and inspired by several art performances in Germany, as well as my experiences observing and living in the Kosovarian post-war society, talking and working with women survivors of sexual violence and working in interdisciplinary projects. In the beginning, I was simply fascinated and sometimes overwhelmed by the difference I sensed, but was not able to articulate as clearly as Kai T. Erikson:

“I felt for a moment as though I were in the company of people so wounded in spirit that they almost constituted a different culture, as though the language we shared in common was simply not sufficient to overcome the enormous gap in experience that separated us.” (Erikson 1976, 11)⁵

In numerous studies, Erikson has analyzed the chronic conditions which precede, accompany and follow a traumatic event and their effects on individual reactions, social networks and society. Although, in the previous citation, he refers to survivors of a natural disaster, his description also fits my experience with female survivors of sexual violence. In this sense, the general purpose of the present research is to carry out a description of this “different culture” which results in an “enormous gap in experience”.

It is called trauma, “separated from the everyday”, “wounded in spirit” or “gap in experience”. Thus, it refers to a destructive attack on the self, affecting the subject’s body, spirit and identity, isolating and encapsulating the damaged self in relation to its social surrounding. In the two aforementioned examples, these attacks are both of a violent nature, the


⁴ The practical training (of 4 months) was part of my academic formation at the Institut d’Études Politiques de Paris, in which I focused on humanitarian and development aid. Thanks to Medica Mondiale, I was able to take part in this practical training “in the field”, getting a first hand perspective on its support work for traumatized girls and women in war and crisis zones, by offering medical, psychological, social and legal help. Medica Mondiale was founded in 1993 and currently supports projects in more than 9 countries (Bosnia-Herzegovina, Albania, Kosovo, Afghanistan, Congo, Liberia, Rwanda, Uganda and Israel). In 2008, its founder, Dr. Monika Hauser, has received the Right Livelihood Award, also called the Alternative Nobel Prize. For more information see: http://www.medicamondiale.org/

⁵ In this sentence, Kai T. Erikson encapsulates his first impressions and first contact with the survivors of a terrible natural catastrophe, the Buffalo Creek flood. This natural disaster took place in 1972, when a mining company dam broke and 500 Million liters of water and debris poured down Buffalo Creek, a narrow valley in West Virginia, USA, leaving a completely destroyed valley and community in its wake.
first one, a criminal and violent kidnapping, and the second, a natural disaster or natural violence. Hence, the binomies of unique/common, personal/public emerge regardless of the origin of the violence.

Normally, culture creates common bonds between members of a society through which they come to see certain aspects of society in similar ways. People’s living together depends primarily on the fact that they have a certain amount of cultural knowledge in common (Newman 2004, 115). Thus, the gap that I have mentioned above seems to be generated by a lack of shared knowledge. Since I had first sensed this difference working with victims of sexual violence during my practical training in Kosovo, I decided to choose them as my object of research. I began by reading and studying literature on the topic which came mainly from clinical disciplines such as medicine, psychology and psychiatry. Only in very few texts did I find hints of the possible social consequences and impacts of sexual violence, but apart from these scant allusions I was unable to find anything referring to the social and sociological scope of sexual violence.\(^6\) As a result of this lack of sociological literature on the phenomenon, the bibliography I worked with has an interdisciplinary character; it was necessary to draw from disciplines other than sociology in order to be able to reopen current research and relink my results to it.\(^7\) In 2004, when I began to think about and attempt to define my Ph.D.-project, the first results of several representative national surveys on violence against women of different European countries were published. Thus, I found myself, on the one hand, with available psychological and psychiatric micro-data and specific analysis regarding victimological and criminological aspects and, on the other hand, with socio-demographic macro-data. But my question referring to the impact of sexual violence in the social sphere remained unanswered. Consequently, I decided to focus my investigation on the space left between, outlined and shaped by these two blocks of knowledge and to carry out research on a micro-sociological level. That is how and

---

\(^6\) This phenomenon has been amply discussed in medical literature, thus deserving a sociological response. Hence, the missing of knowledge in this field is felt as a large gap in the chain of knowledge construction (Bierhoff and Wagner 1998, 108 and van der Kolk et al. 2000, 47-69).

\(^7\) In the present study, I will use sociological terms and concepts as well as psychological ones, which partly reflects the existing literature in the field and the state of research today. Most of the psychological and clinical terms used are explained and defined in the glossary.
why I decided to study the everyday lives of women who have suffered sexual violence.

Regarding the approach and design of the present dissertation and as there was and still is very little known about the vacuum in that I have pointed out, the present study concentrates on victims’ subjective perceptions. My primary interest is not what «really» happens in their everyday lives and their often so-called objective realities, but their own perceptions of their lifeworlds. According to the constructivist premises of the approach which is the basis of the qualitative and Grounded Theory-based methods adopted in the present Ph.D.-thesis, reality is always interpreted and constructed by individuals. Hence, the present study incorporates the perspective of a subject-orientated sociology which analyzes social structures and elements focusing on the following issues:

1- how such structures and elements influence human thought and actions;
2- how people shaped by specific socio-historical conditions act according to this structural frame and therefore participate in its consolidation or change;
3- how the observed structures develop and have developed out of human interest, thinking and behavior. (Bolte 1983, 15-16)

Therefore, subject-orientated sociology attempts to study the interdependency of actions and structures, relating people and society. It poses the fundamental question of how people are able to define the scope of their action, act autonomously, arrange and defend themselves, within precise constraints. This research perspective has been used primarily to study the work life of different social groups and modern society’s influence on work life. The present study builds on the openness of the concept and applies it to the research field of survivors of violent or traumatic experiences. Therefore, the more precise research question emerges as: How are survivors actively capable of adjusting their behavior to all the different and partly contradicting requirements in the different spheres of life? And more colloquially: How do they cope with and manage their lives? Their arrangements are not -sociologically speaking- socially given and passively assumed, but are actively constructed by people, although often
not done so consciously. Nevertheless, they are only partially shaped by the people themselves. Although actors are closely linked to them, they are only partly able to influence their logic, thus facilitating decision-making and evaluations for both individuals and society, mediating their conflicting relationships.

As sexual assault suffered by an individual does not occur in a social void, there is a growing amount of current research which deals with the so-called “ripple effects of sexual violence” (Morrison et al. 2007). Situated within this research area, this Ph.D.-project emphasizes one of them which has not yet been studied: victims’ everyday lives. Consequently, the exceptional lies in the apparently banal. On the one hand, everyday lives represent the individual and social scene where the sexual assault has taken or takes place. On the other hand, consequences are manifested in victims’ everyday lives and the victims cope with them on an everyday basis. But contrary to the psychological and medical literature which focuses on pregnancy, gynaecological complications, sexually transmitted diseases, mental health and behavioural problems like depression, post-traumatic stress disorder and suicidal behaviour among many (Krug et al. 2002, 162-164), I study how survivors come to terms with the different trials, tribulations and circumstances of their everyday lives, which they encounter as persons of a specific sex and age, as working persons, as members of families, people belonging to private circles of relationships, as members of associations or as citizens, but also with their own interests and possibilities. In this sense, I analyze the “individual arrangement of the social arrangements of a person”8 (Voß 1991b, 69). They form the action systems of practical coping with subsistence on a daily basis, following the theoretical approach of the Conduct of Everyday Life9 developed by a research group with the same name.

Over the last decades, sexual violence has undoubtedly been a highly discussed and often polarized and polemically treated phenomenon. But actions and situations do not become social problems and phenomena by themselves. They are socially constructed. Therefore, the term sexual violence should not be understood as a simple label, rather it reflects the social circumstances and conditions surrounding its occurrence and where the idea is conceptualized. In this regard, (sexual) violence comes to be a form of abjection, which is pronounced when society or parts of society condemn the related act (Menzel and Peters 2003, 8). In modern western societies, there is probably a general agreement that sexual contacts should be carried out consensually. Usually, actions which deviate from this standard are seen as sexual violence (Menzel and Peters 2003, 11). Yet it still represents an amply debated and often polemic issue, especially when conditions, attitudes and behavior are subject to varying interpretations. On the one hand, sexual violence generates social indignation to the point that in certain feminist discourses, rape becomes the central metaphor of culture: the rape of women, the rape of minorities, the rape of mother earth (Trömel-Plötz 1991). On the other hand, sexual violence and rape are the result of longstanding cultural discourses; they are most frequently assigned a negative valence and a variety of social institutions try to avoid acknowledging their presence. Yet, paradoxically, sexual violence and rape suscitate fascination, linked to their two main components: sex and violence. Nonetheless, rape has universally been considered a heinous crime, albeit tolerated as part of the spoils of war (Katz and Mazur 1979, XI). Generally speaking, it might be said that no rape-free societies exist today.

On a scientific level and according to Hagemann-White (2001), there are very few studies on rape and sexual violence in Europe, when compared to other types of violence, such as domestic violence. This means that sexual violence is the least understood and researched form of violence against women. The lack of evidence available seems to hamper the development of good quality, evidenced-based policies, services and programs for women and girl survivors of sexual violence. Furthermore, it has not only been neglected in science but also as a public health problem.
and a violation of multiple human rights. In this sense, sexual violence can be understood as a threat to global security and constitutes a crime against humanity. Consequently, the present research is meant to fill part of the existing void, while reflecting as well on the ambivalence between social fascination with sexual violence and its neglected and repulsive dimensions, promoting awareness of the limitations and contradictions of any research done in the field.10

Therefore, in the second chapter, I go on to define the central terms of the present study, such as aggression, sexuality, gender and power, outlining the theoretical framework of violence in general, sexual violence specifically and the Concept of Everyday Life. In the third chapter, I review the current state of the research, through a look at quantitative studies on sexual and domestic violence, and I outline the social and historical dimensions of sexual violence, emphasizing its constructed character. Further, I discuss victimology and the results it has on victims. At the end of the chapter and based on the previous concepts, I develop the hypothesis and objectives of the present study. In the fourth chapter, I describe the methodological design, including the methods used for data collection and data analysis, followed by a short subchapter on subjective matters concerning the researcher, the interviewees and the data. After referring to the methodological and analytical impact on narrative moments of the interviews, in the beginning of the fifth chapter, I present some selected cases in order to provide initial insight into the data and the phenomenon studied. In the third part, I present five different patterns that emerge in the way victims conduct everyday life -hyperactivity, retreat, time-out, disclosure and commitment. The sixth chapter begins with the analysis of the three main scenarios where everyday life takes place - work life, the family and the body -before taking up the central categories of the study: knowledge and the ambiguity of the absent presence of sexual violence.

---

10 The present study, for example, focuses on sexual violence against women and mentions sexual violence against men only scantily in the theoretical part (Compare p. 58). The reason for this gendered focus is the following: aspects of sexual violence suffered by men would require a totally different approach, including a different gender perspective and a different research setting. Hence, it is not possible to assimilate the differences within one single thesis nor to mix opposed concepts that would simply create more confusing results.
Summing up the incoherencies and paradoxes linked to the topic of sexual violence at the individual and social levels, a list put together by the London Rape Crisis Centre combined, through a gender perspective, ambiguous warnings in a practical guide for women. The result is an apposite collection of contradictions, which reflect the ambiguity and paradoxes of the phenomenon and the trammels of the research field:

“Don’t go out without clothes – that encourages some men.
Don’t go out with clothes – any clothes encourage some men.
Don’t go out alone at night – that encourages men.
Don’t go out alone at any time – any situation encourages some men.
Don’t go out with a female friend – some men are encouraged by numbers.
Don’t go out with a male friend – some male friends are capable of rape.
Don’t stay at home – intruders and relatives can both rape.
Avoid childhood – some rapists are “turned on” by little girls.
Avoid old age – some rapists “prefer” aged women.
Don’t have a father, grandfather, uncle or brother – these are the relatives who most often rape you women.
Don’t have neighbours – these often rape women.
Don’t marry – rape is legal within marriage.
To be quite sure – don’t exist.” (London Rape Crisis Center 1984, 2-3)

But despite these overwhelming paradoxes, the present dissertation is here to attempt to shed some light on these ambiguities.
2. Theoretical Framework: Sexual violence in the frame of everyday life

In the first part of this chapter, a comparison between different concepts of violence and terms closely linked to it will help to contextualize and identify sexual violence. In the second part, I will present the general sociological framework in which the central phenomenon sexual violence will be studied. For this purpose, I will first define the general context of everyday life and then go on to elucidate the theoretical framework used in the present work: the Conduct of Everyday Life.

What is violence? And what is sexual violence? There is relatively little consensus on the matter, very often some laws contradict others and not all studies on the topic are consistent. The lack of a common definition is not the only cause for these divergences. Very often, there are highly personal or political reasons for conceiving an event as rape or sexual violence. The great majority of people condemn rape and sexual violence. Nonetheless, behavior that seems sexually violent to one person might represent normality for another. The seriousness of an event may be evaluated differently, according to the social, cultural or economic context of the people involved, giving it a specific coherency within different frames of understanding. In view of this specific angle and in order to be able to define and develop the theoretical premises of this study, a brief review of the existing definitions is necessary. Consequently, I will present a short summary of basic concepts linked to sexual violence, such as the terms violence, aggression or trauma, in order to contextualize the phenomenon, both at the conceptual level and its manifestations.

2.1. Sexual violence in the universe of violence

2.1.1. Principal distinctions: aggressiveness, aggression, violence and trauma

There are seemingly endless definitions of and on violence, differing in terms of the authors' intentions, the cultures of the respective societies and objectives pursued. Generally speaking, they can be situated in a field
of forces consisting of four poles, and from which a certain framework for the notions developed in this chapter emerges:

Figure 1:

<table>
<thead>
<tr>
<th>biologism</th>
<th>← violence →</th>
<th>systemic perspectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>↑</td>
<td></td>
<td>↓</td>
</tr>
<tr>
<td>moral perspectives</td>
<td></td>
<td>constructivism</td>
</tr>
</tbody>
</table>

Four Poles

Violence, its definitions and its alleged causes are situated, on the one hand, on a spectrum between a biological focus, which attributes violence to natural and innate drives, and a constructivist perspective, which considers violence a social construction. On the other hand, violence tends to be viewed through a moralistic prism that condemns or permits certain types of violent behavior, which are in turn classified as good or evil. This is opposed to a systemic perspective which treats violence as a system which functions according to its own laws. More and more studies -for example those based on ecological models\(^{11}\)- tend toward this later perspective, which considers violence to be a complex social phenomenon, albeit one which possesses a logic of its own.

In order to provide a first initial definition, I will cite the World Health Organization (WHO) and its first *World Report on Violence and Health* (Krug et al. 2002). The report considers public health sector ignorance on violence as a consequence of the lack of a clear definition and understanding of the problem, as well as the lack of a precise concept for its classification, recognition and prevention. In its 49\(^{\text{th}}\) assembly in 1996, the WHO declared violence a major and growing public health problem worldwide (resolution WHA49.25). Furthermore, and due to its extremely

\(^{11}\) See pp. 75-76.
diffuse and complex character, the definition of (sexual) violence cannot be
derived through an exact science, but constitutes “a matter of judgment”
(Krug et al. 2002, 4):

“Nothings of what is acceptable and unacceptable in terms of behaviour and
what constitutes harm, are culturally influenced and constantly under review
as values and social norms evolve. (…) There are many possible ways to
define violence, depending on who is defining it and for what purpose.”

The WHO defines violence in the following manner (Krug et al. 2002, 5):

“The intentional use of physical force or power, threatened or actual, against
oneself, another person, or against a group or community, that either results
in or has a high likelihood of resulting in injury, death, psychological harm,
maldevelopment or deprivation.”

This definition, emanating from the public health sector, takes a
constructivist view of violence. Furthermore, the type and the nature of
violence are determined by the aggressor’s intention, the means used to
put it into practice or to manifest an intention as well as the consequences
for the victim, group or society. The WHO-definition is both oriented
towards the aggressor, responsible for the action, and towards the victim,
who suffers the consequences. Hence, it implements neither a moral nor a
systemic approach.

The systemic concept of violence is situated at a more abstract level,
focusing solely on the actions and not on its actors. From this perspective,
violece can be defined as follows: all thoughts or acts which -beyond a
spontaneous action- constitute an endeavor against any vital structure for
purposes of destruction. Such phenomena may be reflexive or exteriorized,
endogenous or exogenous. This definition avoids moral aspects, such as
elements of blame, concentrating both on the interactive responsibilities
and the consequences produced by the action (Kneer and Nassehi 2000,
38).13

In general, it is assumed that violence has probably always been part
of human experience. Therefore, it is commonly acknowledged as
inescapable and continuous. Its impact can -in different forms- be observed

12 See chapter 3.2.1. on the historic dimension of sexual violence, pp. 59-71.
13 In his theory on social systems, Luhmann does not describe violence as a social and autopoietic
system which produces communication in a closed process. Nevertheless, his systemic concept can
be -at least partly- applied to the social phenomenon of violence.
in all parts of the world. Nevertheless, it should not be and must not be accepted as unavoidable (Krug et al. 2002, 3). From a constructivist, systemic and interactive point of view, there are new alternatives and solutions for violent conflict resolution, perhaps conducive to certain optimism regarding an improvement of the situation (for example Galtung 2008). Relating to origins of violence, there are several theories which will be briefly summarized in the chapter 3.2.2. on the causal models for sexual violence. But before further clarification of the concept of sexual violence and its historic and social dimension, it will be necessary to discuss some terms that are related and often confused with violence.

Aggressiveness and violence: In order to distinguish between aggressiveness and violence, Sanmartín (2004, 13) entitles one of the chapters of his book *Keys to understand violence* as followed: “The aggressive is born. The violent is made.” With this evocative declaration, he portrays aggressiveness as a drive which consequently represents a feature selected by nature, enhancing the biological efficiency of its carrier; at the same time, there are also features that work to inhibit aggressiveness, such as facial expression of fear, which limit and regulate its scope. In other words, human beings have aggressive potential by nature, but they become peaceful or violent according to their individual life history and to the culture they belong to (Corsi 2003, 20).

Therefore, and according to Sanmartín and Corsi, violence represents a cultural product molded by conduct, aimed at obtaining control

---

14 See pp. 71-78
15 As there is no valid definition across disciplines and cultures for these terms, the following distinctions have to be understood as short general introductions. Generally speaking, it can be said that in psychology the term aggression is preferred and in sociology the term violence.
16 My translation. Original in Spanish: “La violencia y sus claves”.
18 There are two opposing explanations of aggressiveness and violence: biologism and environmentalism. The theories of the first type consider aggressiveness and violence to be inherent human characteristics. They include theories which highlight instinct as its motivational base, with Darwin, Freud or Lorenz as examples. According to this point of view, in almost all animals, including humans, conduct is endogenously determined and instinctive. Nevertheless, they also recognize non-instinctive features, based on results of research on heredity, sex differences, hormonal action, effects of alcohol and cerebral conditions. Another aspect of this perspective is the premise of greater predisposition for aggressive conduct, based on the assumption that men are inherently more aggressive than women.

From the environmentalist point of view, the following theories are summarized: theories of associative learning are predicated on the alignment of connections between stimuli and responses, such as unpleasant conditions which generate intensive negative effects, the observation of objects and/or circumstances with negative meanings and frustration. (Sanmartín 2004, chapters 1 and 2).
and domination over other people. Nonetheless, from a systemic point of view, violence is not based or oriented toward people, but simply toward itself. This means that, first, the only reason for violence is violence and that, second, the only consequence of violence is violence. This sentence might seem tautological, because it says that a violent culture produces violent actions in order to foster and reproduce a violent culture. In fact, what it emphasizes is that violence is a purely social and cultural process, in contrast to aggressiveness which represents a necessary and useful human impulse linked to self-defense and survival.

Aggression and violence: In specialized literature, in legal texts as well as in the everyday use of words, no clear and singular distinction between both concepts is made. Aggression is ostensibly employed in a psychological sense and is linked both to the theory of innate instincts and to theories of learning. In general, both terms are considered social constructions which depend on the perception and interpretation of the actors involved and the social environment. Thus, they are generally linked to the ethic and moral sense of an individual, a group or a society, which considers certain behavior as socially unacceptable and condemnable. Their use can vary according to context - legal, quotidian, popular, psychological or sociological- and to the origin, culture and socialization of the people involved. In the German context, the term «aggression» seems to be of lesser intensity and impact than the word «violence», which automatically refers to concepts such as domination and power. 19 Therefore, it is possible to distinguish between the two in terms of their degree of severity - at least in a German context. According to Bierhoff and Wagner (1998, 48-49), aggression results in banal damages. The latter should be avoided, insofar as they infringe upon forms of conventional behavior. Aggression is hostile in character and the consequence of emotional excitation, whereas violence results in severe damages with considerable consequences. It infringes upon legally fixed norms and is

---

19 In German, there is no linguistic distinction between the terms «power» and «violence», as there is in English. In German, the word «Gewalt» is used both for «power» and «violence». Therefore, the German term «Gewalt» automatically induces the use of a certain physical and/or psychological force, in the first case, and the (mis)use of power in the second case.
Another concept related to violence is trauma. Despite its medical and psychological origin\(^1\), it has been slowly integrated into sociological literature. According to Kai T. Erikson (1995, 228-229), the classical medical use of the term trauma does not refer to the lesion caused, but to the blow which caused the injury; it does not refer to the mental situation which arises, but to the event which provoked the disorder. The term «posttraumatic stress disorder» (PTSD)\(^2\) is a concession to this medical convention. In this sense, it is possible to distinguish between «trauma», which refers to the cause and means that there is a violent event which harms and provokes acute trouble, and «stress», which refers to effects and signifies a series of events or even a chronic condition which gradually erodes the mind.\(^3\)

In this context, Erikson distinguishes between individual and collective trauma. According to him, individual trauma represents a blow to one’s body tissues and mental structures resulting in lesions or other dysfunctions. Something alien breaks down physical and mental defenses in order to invade, possess and become a dominant element in the interior landscape. Collective trauma develops slowly in a society, without having the immediate quality, normally associated with trauma. Nonetheless, it represents a shock, recognition of the fact that the community has disappeared as positive support and that an important part of oneself no longer exists. The degree of severity of this effect varies according to the scale and level of social individualization (Erikson 1976, 153-154).

Until the present, trauma models have tended to measure the effects of traumatic events on the individual, classifying symptoms and indicating

---

\(^{1}\) Therefore, and as sexually intrusive and offensive acts are often not legally condemned, the term sexual aggression is often used in specialized literature instead of the term sexual violence.

\(^{2}\) Nonetheless, the consideration of the psychological trauma will be indispensable in the analysis, since a great majority of studies on victims have been done in the psychological and medical field and, to date, the consequences of a violent experience are largely subsumed under this concept.

\(^{3}\) Besides this definition, it is necessary to keep in mind that the term trauma is of common use in everyday speech and language, in which it describes a chronic situation and the long term consequences.
the helpfulness of certain treatments.\textsuperscript{24} This is crucial, but it has an individualizing effect: focus of the effects of sexual violence remain at the level of the single person -the victim- and rape is not seen as a social problem with sociological dimensions (Morrison 2007, 4). Nonetheless, the concept of trauma may provide a way of measuring and illustrating how the wounds caused by sexual assault are not limited to the primary victim, but pervasive throughout society (Morrison 2007, 3).\textsuperscript{25}

In order to summarize the previous paragraphs, it is possible to say that whereas aggression and violence refer to socially and legally constructed concepts, which depend both on the normative frame and on the morals of a society, the term trauma is related to the short and long term consequences, focusing particularly on the negative effects for the victims' well-being\textsuperscript{26}. Since these concepts are frequently employed in different disciplines of social sciences, both gaps and overlapping emerge, requiring re-linking through interdisciplinary and transdisciplinary approaches (Galtung 2008, 28-37).

\textbf{2.1.2. Different types of gendered violence}

Apart from the difficulties of defining violence, its conceptual diffuseness often generates more confusion than clarity. Nevertheless, the phenomenon of violence has received a lot of public attention over the last decades. In this general process of increased awareness regarding violence, previously tolerated types of violence have been criminalized by including new behavioral patterns in the definition of violence freeing them from related taboos (Lamnek and Boăță 2003, 13-14). This evolution has been accompanied by the links drawn between the categories «violence» and «gender», primarily associating masculinity with the aggressive role and femaleness with victimhood.\textsuperscript{27}

\textsuperscript{24} Compare pp. 78-83 on the individual consequences of sexual violence.
\textsuperscript{25} At the same time, the word «trauma» can be applied to nearly everyone at some point in life. Hence, it represents the individual and social fear of harm and loss of control.
\textsuperscript{26} In the chapter on the historic dimension of sexual violence, I will discuss the role of medicine and psychology and their power in defining the phenomenon. I will also refer to the evolution of the psychopathologies and their social linkage. See pp. 66-67.
\textsuperscript{27} Compare pp. 90-93.
Social violence, domestic violence, violence between partners, terror at home, gender violence, violence against women, male violence, sexual violence, physical violence and emotional violence are only some types, concepts and terms used in the context of «gendered» violence. This long typology of different types of violence has been constructed over the last decades, mainly thanks to the feminist movement and under the slogan of gender and inequality. According to the United Nations, violence against women means:

“any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life”. (UN 1995, Declaration of Beijing).

Hence and according to the habitual discourse, violence against women is seen as a manifestation of structural features of patriarchy and the historically unequal relations of power between men and women, which have led to the domination of women by men, discrimination against women and the raising of obstacles that block their full development. In this context, sexual violence may be considered as one of the most gender-specific of all crimes (Temkin 1987).

Violence against women follows cultural guidelines, such as traditional practices. One of them is male identity, which integrates aggression as one of its central characteristics -in many cultures positively estimated-, acquired through social learning and heredity. At the same time, violence often represents a condition needed to comply with male identity and to perform social control. In this regard, it is nourished by historic and cultural roots, such as the process of naturalization of so-called male violence, legitimating the use of the latter in interpersonal and inter-

---

28 This reflection is limited to the different types of violence which are most similar and closest to sexual violence, in order to clarify their differences and avoid confusions between them. I do not aim to present an exhaustive list, because there are many more types of violence, both at the individual and social levels.

29 Definition of patriarchy: Castells defines patriarchy as following: “a basic structure of all contemporary societies. It is characterized by the authority of men over women and their children, imposed by institutions. In order to exert this authority, patriarchy must dominate the entirety of social organization, from production and consumption to politics, law and culture. Interpersonal relations are also marked by domination and violence which are generated in the culture and institutions of patriarchy” (Castells 1998, 159. My translation).

30 Nonetheless, we should not fail to remember that men can also suffer sexual violence. Please see p. 58.
gendered conflict resolution.\footnote{It is necessary to remind that male violence is not limited to inter-gendered conflicts and hierarchy, but also includes intra-gender violence, between men.} Hence, the construction of male identity in patriarchal cultures, based on gendered power-relations, follows the traditional and hegemonic model of masculinity.

Therefore, violence against women, male violence or gender violence are related to and can be explained by (the maintenance of) gender inequality, men’s anger over losing their power and forms of self-esteem based on their male identity (Alberdi and Matas 2002, 22-36). From this perspective, both domestic violence and partner violence further refer to the distinction between the public and private sphere, focusing on the private and intimate space in which violence (mostly) happens.\footnote{See the paragraphs on legal changes regarding rape in marriage (figure nº 7 on p. 69).} All these types of violence are based on the idea that violence has no purpose of its own, but that it is an instrument of domination and social control which derives from the inequality of power between men and women. Furthermore, violence is assumed to have an instrumental character, structural and institutional as well as ideological and omnipresent (Alberdi and Matas 2002, 26-31).

The previously mentioned concepts appear in a great majority of studies on sexual violence and constitute its main theoretical context. This thesis, however, is situated in a broader theoretical frame which follows along the previously expounded lines, but which is integrated in a more general and interactive framework. Following the anthropologist Riane Eisler, determining features do not depend on whether a culture is Western or Eastern, industrial or pre-industrial, secular or religious. Her approach focuses on the degree to which a culture is primarily orientated towards one of the two basic alternatives regarding its social and sexual organization: either the Dominator or the Partnership model (Eisler 1995, 20). According to Eisler’s concepts, the first one is based on a hierarchy constructed on fear and power, in which the social relations are principally characterized by domination and submission. The most prominent example seems to be patriarchal society, as previously mentioned. The second concept is founded on relations based on solidarity. It might be necessary to mention
that this does not mean that everything is peace, love and cooperation, but that violence, pain and fear may also exist in this type of social organization. It simply describes a vision of how a Partnership Society should be. Nevertheless, chronic violence, pain and fear do not form part of its basic social and institutional structure (Eisler 1995, 4-7). The two models can be summed up in the following way:

Figure 2:

<table>
<thead>
<tr>
<th>Component</th>
<th>Dominator Model</th>
<th>Partnership Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gender relations</td>
<td>The male -both on a personal level and regarding associated values- is ranked over the female.</td>
<td>Women and men have the same value on a social level, and some values associated with femaleness which may even enjoy priority.</td>
</tr>
<tr>
<td>2. Social structure</td>
<td>Social structure is predominantly hierarchical and authoritarian.</td>
<td>Social structure is more egalitarian; differences are not automatically associated with a higher or lower status.</td>
</tr>
<tr>
<td>3. Sexuality</td>
<td>Coercion is the main element determining selection of a mate. Its principal functions are male procreation and male sexual release.</td>
<td>Mutual respect and freedom of choice for both genders are the basic features. Its principal function is the construction of bonding between women and men by means of mutual pleasure and reproduction.</td>
</tr>
<tr>
<td>4. Power and love</td>
<td>The greatest power consists in dominating and destroying.</td>
<td>The greatest power consists in living, nourishing and illuminating life.</td>
</tr>
<tr>
<td>5. Violence</td>
<td>A high degree of social violence and abuse is institutionalized, including physical and psychical violence against women and children in the domestic space, rape, war, etc.</td>
<td>Violence and abuse do not form part of the structural elements of the social system. Therefore, the children’s socialization includes the non-violent resolution of conflicts.</td>
</tr>
</tbody>
</table>

Dominator vs. Partnership Model (Eisler 1995, 403-405)

Thus, the theoretical frame of the present Ph.D.-study is based on this model for degrees of domination characterizing the social relations in a
given society. This seems to be appropriate, because the term domination refers to interaction between people, whereas the term inequality concentrates on social structure. In this sense, the phenomenon studied in the present research is situated within the social context of the Dominator model and is -partly- based on and has its origin in such forms of organization. At the same time, the social interactions studied here are developed within the same social frame and are highly influenced by its principles.

2.1.3. An intimate relationship: sexuality and power

After having defined violence but before defining sexual violence I will provide a short outline of basic concepts on sexuality, in order to understand the limited sexual scope of sexual violence. From a constructivist point of view, sexuality flows from words, images, rituals, fantasies and bodies (Weeks 1993, 6), thereby being “a subjective, intimate and emotional experience, which is hardly classifiable” 33 (Guasch 2000, 14). As previously seen in the case of violence, it also defies facile attempts at definition or binary oppositions, but rather incorporates a series of antagonisms, such as common vs. exceptional or private and intimate vs. public. Furthermore, as it is generally understood, sexuality is often directly linked to social constructions and institutions such as love or marriage. Without going too deeply into the complex context of sexuality, love and marriage, we should at least mention that excepting current Western society, there is usually considerable difference between love within and outside of marriage, as expressed in the following quote from a lost religious treatise on marriage: “There is nothing more foul than loving one’s wife like one’s mistress”34 (Saint Jerome 1893, 49 cited in Ariès 1982, 142). Only since the 18th century and only in the West have both types of love been fused and a new model of marriage created, according to which both spouses are erotically and amorously bound to one another. This

33 My translation. Original in Spanish: “(La sexualidad es) una experiencia subjetiva, íntima y emocional, difícilmente clasificable. Pero nuestra sociedad pretende etiquetarla como si fuera un producto de supermercado” (Guasch 2000, 14).

represents the entrance of the previously extra-matrimonial eroticism into marriage. This (modern) spread of ideals of romantic love was one of the factors which disentangled “the marital bond from wider kinship ties and give it an especial significance” (Giddens 1992, 26). But romantic love was characterized by an imbalance in gender terms and therefore distorted in terms of power. Thus, female dreams of romantic love have very often led to domestic oppression and subjection (Giddens 1992, 62).

Furthermore, sexuality is also often misinterpreted as an alleged human right to sexual satisfaction (not to be conflated with the right of sexual freedom), because it is commonly considered to be a human existential necessity or drive, comparable with eating, drinking or sleeping. Yet, according to the theory of desire, sexuality is an appetite and not a necessity. The main difference is that a necessity requires a foreign object for its satisfaction, whereas desire can not be satisfied, because desire is its own object. The myth of Oedipus illustrates this human dilemma of the impossibility of satisfying one’s desires (Turner 1996, 44). The sexual nature of sexual violence has often been related to both concepts: necessity and desire. Since they induce the impossibility of limiting the (mainly male) sexual drive or satisfying sexual desire, sexual violence has often been considered an inevitable problem, one that women simply have to live with.

Yet beyond considering sexuality a necessity or desire, society must reproduce its members in order to survive. Therefore, it has established preventive forms of control over its members. Examples of these controls are, for example, the prohibition of prostitution, homosexuality, abortion, representing acts which defy the logic of reproduction. Furthermore, condemned sexual acts have often been declared and defined as violent, in order to enforce their abolition and condemnation. This represents a regulation of sexuality, but not its reduction or extinction (Turner 1996, 84). This means that the sexual elements of reproduction are only biological in very few aspects, but “… to use the modern jargon, sexuality is inscribed on persons not by the inner discourse of their physiology, but by the exterior

---

35 Please compare the chapter on the historical evolution of the concept of sexual violence and its use as an instrument in condemning specific sexual and socially unaccepted acts. See p. 66.
discourse of sexual ideology” (Turner 1996, 232-233). Hence, reproductive relations in a society never exist without regulation. According to Foucault, modern institutions compel their members to pay the price—in this case increasing repression—for the benefits they offer. According to Galtung (2008, 15), they apply negative feedback in the form of negative sanctions. Thus, civilization means discipline, and discipline in turn implies control over inner drives, control that to be effective has to be internal. But, furthermore, and according to Giddens, sexuality should not be understood only as a drive which social forces have to contain. Rather, it is “an especially dense transfer point for relations of power”. In this sense, sexuality can be used as key point of social control by means of the energy, infused with power, which it generates (Giddens 1992, 18-19).

Some constructivist authors—such as Guasch or Tiefer—argue that “sexuality is not natural”, in order to give salience to its wide normative system which regulates when, how, with whom and by which means reproduction takes place (or not) (Guasch 2000, 24). In its further deconstructivist development, Judith Butler’s work stands out, arguing that sex represents not only a norm but forms part of regulatory practices which produce the bodies they govern. Thus, its regulatory power constitutes a productive power which produces, marks off, circulates and differentiates the bodies it governs (Turner 1996, 28). In this regard, sexuality seems to represent a particularly convenient instrument for the transmission of power relations and which can be (mis)used for violent purposes.

Therefore, in order to conclude this brief excursus on sexuality, it is necessary to underline the importance of power, power relations, control and regulations, not only in relation to sexuality but also to the construction of concepts and everyday language on sexuality and violence. Sexuality thus emerges as a facile instrument of violence, particularly within the context of a society following Eisler’s Dominator model.

2.1.4. Sexual violence – conceptual definitions

In this regard, I choose sexual violence as the central phenomenon of the present Ph.D.-study, due to its specific social and historic range. Its individual and social consequences determine sexual violence as violence
which has been perpetuated over centuries and is omnipresent at the social level. A more phenomenological approach to sexual violence -proposed by Sharon M. Wasco, an American psychologist (Wasco 2003)- suggests that sexual violence might have started long before and might project beyond the actual act of abuse, extending as far as social and cultural structures, permeating and influencing social cohesion. Hence, sexual violence may be considered a socially omnipresent phenomenon both in its spatial and temporal dimensions. Nevertheless, the great challenge seems to be to make visible a phenomenon that is so deeply rooted in social life that, in spite of its omnipresence, it has been rendered invisible, as shown by Wolfthal (1999).\textsuperscript{36}

In order to situate sexual violence within the more general context of violence, I make use of the quantitative studies carried out in many European countries, which classify violence primarily according to its nature. Therefore, I use the WHO’s typology of violence, which includes three types of violence -self-directed, interpersonal and collective- and four different manifestations of violence -physical, sexual, psychological and deprivation or neglect.

Figure 3:

\begin{figure}
\centering
\includegraphics[width=\textwidth]{typology_of_violence}
\caption{A Typology of Violence (Krug et al. 2002, 7)}
\end{figure}

\textsuperscript{36} Regarding the social incorporation of sexual violence, please compare chapter 3.2.1., especially Wolfthal’s (1999) study on \textit{Images of Rape}, p. 61.
This simplified and schematic classification attempts to combine different conceptual definitions (see vertical lines in figure 3) with the definition of acts (see horizontal lines in figure 3), yet it does not include cultural concepts such as symbolical or structural violence. Nonetheless, it allows a first and general look of the phenomenon by means of a bird’s eye view. As specified in the previous scheme, sexual violence can occur as interpersonal violence in families or in other relationships against children, partners or the elderly or in the community between acquaintances or strangers. On a collective level, it can be of social, political or economic nature. According to the WHO, it represents the only face of violence which can not be self-directed, such as suicidal behavior or self-abuse. But this affirmation seems to be questionable, because it is possible to think of sexually self-directed behavior of a violent character, such as injuring one’s genitals. This same WHO-report emphasizes the fact that sexual violence is influenced by morals, cultural values, social norms, human rights, gender, legal initiatives and crime. Furthermore, it evolves over time. Hence, definitions of sexual violence are constantly evolving, whereas all definitions are marked by cultural, socio-political and geographical inflections and the corresponding effort to incorporate innovation to social and legal frames. In order to capture this entire spectrum, I will introduce different conceptual definitions of sexual violence according to their orientation, intention or field of application. 37

1. Definitions oriented towards the aggressor: The WHO-report tries to establish connections between different communities and offers the following definition:

“…any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.” (Krug et al. 2002, 149)

Furthermore, the WHO emphasizes that coercion can comprehend a vast range of different levels of force and power, including physical force,

37 These different conceptual definitions can be divided between individual definitions linked to attribution theory and institutional and community definitions (Brookover Bourque 1989).
psychological intimidation, extortion or other threats, such as threats of physical injury, the victim’s expulsion or social exclusion. It may also occur when the person assaulted is not in conditions to give her or his consent, for example, because she or he is drunk, under the effects of drugs or simply sleeping. Consequently, the WHO asserts that sexual violence is used as a tool to punish and subjugate individuals for perceived transgressions of social or moral codes, noting that its “underlying purpose is frequently the expression of power and dominance over the person assaulted” (Krug et al. 2002, 149).

This WHO-definition is similar to the legal definition which tries to objectify the phenomenon and focuses on the aggressor and the incident. It considers, on the one hand, the nature of the act committed and, on the other hand, the aggressor’s intention, as fundamental elements in order to determine the type and degree of violence. Furthermore, it reflects social perspectives on what is socially considered condemnable or acceptable. 38 Hence, the legal definition evolves and is permanently adapted according to the changes in morals and values, including sometimes the (alleged) cause -for example, gender or inequality between women and men- in its definition. 39

2. Definitions oriented towards the victim: From a subjective point of view, a definition is supposed to be oriented towards victims. In this sense, it assumes that sexual violence is a merely subjective and personal experience which is transformed into reality by the victims and based on their appreciation of the experience in their own psychic system; hence, it can only exist as an experience and as a memory, as image translated into sign. 40 According to Bal, rape can neither be visualized nor verified,

38 Apart from this dichotomious choice, it has to be acknowledged that a lot of actions lay between the socially condemnable and the acceptable, representing a kind of grey zone of permissive consensus, due for example to lack of evidence. But as these actions are not condemned, they are automatically socially accepted, undermining social norms.
39 Furthermore, these changes also depend on available economic resources, their abundance or scarcity. For example, the public health system evolved from a institution focused on emergencies to an -also- proactive and prevention-oriented institution. On the contrary, violence also seems to require economic resources for its development and existence, as Napoleoni (2004) showed for the case of terrorism. Compare footnote nº 73, p. 52.
40 Regarding the labeling of sexual assault, Kahn et al. (2003) have found both quantitative and qualitative differences between acknowledged and unacknowledged victims (victims who acknowledge that they have suffered a sexual assault and victims who do not acknowledge their experiences as a sexual assault, although it should be labeled as one).
because the experience is both, physically and psychologically, internal. Consequently, rape seems to happen inside. “In this sense, rape is by definition imagined; it can exist only as experience and as memory, as image translated into signs, even adequately “objectifeable”. (Bal 1990, 142)  

At the same time, Mieke Bal calls rape “an obscuring term” and its definition differs in relation to time and space (according to Wolfthal 1999, 2). Furthermore, the word «rape» is often used as a metaphor for a narrative event, “in which each participant, as well as the narrator, may well interpret the incident differently” (Bal 1994, 37-8). Hence, the different definitions and especially the contrasting points of view seem to indicate that there has never been social agreement on how to define sexual violence. The sexually violent act may at times be seen and classified -both by society and the assailant- as an abduction, seduction or acceptable behavior, whereas the victim perceives the act as a violation, biased by variables such as class, gender and ethnic differences (Wolfthal 1999, 3). 

This allegedly subjective and victim-oriented definition has rarely been adopted, partly due to a generalized societal mistrust of the victims that is linked to their social exclusion. It might sometimes even seem as if society were -in a paradoxical way- more afraid of the victims and thus tempted to defend itself more from them than from the aggressors. 

In this context, the victimological concept, according to Enrique Echeburúa (2007), presents two elements which are needed in order to be able to talk of victims and victimization. The objective element requires an experienced and lived traumatic incident. The subjective element refers to the victims’ suffering. Both elements together demonstrate the overwhelmed victims’ inability to integrate the incident into their lives, producing severe emotional trouble. Through these two conditions, the victimological definition attempts to incorporate both the (sometimes

---

41 This does not mean that the incidents were less real for the victims. What it means is that violence and especially sexual violence depends mainly on personal, situational and interactive characteristics.

42 Yamawaki (Yamawaki 2007) has shown that “external observers make different assumptions about a rape incident based on their GRT (gender-role traditionality), BS (benevolent sexism), and HS (hostile sexism) levels in different victim-perpetrator relationships” (Yamawaki 2007, 406).

43 See chapter 3.2.1. on the historic dimension of sexual violence, pp. 59-71.
dubious\textsuperscript{44}) objectivity to the incident and the subjectivity of the victims’ perception. In the psychological field, this definition is applicable, since tools of psychological analysis are available which can be used to demonstrate the victims’ troubles and suffering, for example, through standardized questionnaires which collect and qualify symptoms. On a sociological level, however, these techniques have not yet been developed.

3. Sociological definitions: A more interactive notion defines sexual violence as any form of violence which uses sex as an instrument to harm another person (Alberdi and Matas 2002, 68-69). It concentrates on the instruments used, on the (alleged) causes, on the effects for the victims, on the socially-closest environment and on society in general. Furthermore, this definition is often situated in the gender violence context\textsuperscript{45}. It is primarily associated with male sexual violence, based on the characteristics of patriarchy (or a Dominator society) that seeks female subjection through control over the body. According to this feminist point of view, “it does not represent the aggressive expression of sexuality but the sexual expression of male aggression”\textsuperscript{46} (Alberdi and Matas 2002, 68). Sexual violence is mainly performed against women’s psyche through their bodies. Thus, it represents at the same time physical aggression and psychological affront, both of which constitute a blow to women’s sexual identity and freedom. In this sense, sexual violence includes all forms of aggression which involve use of women’s bodies against their will. Traditionally, such acts were understood as offences against one’s honor and it is only recently that they have come to be considered offences against female (sexual) freedom. In addition, Shukla (1994) and Brownmiller (1992) interpret sexual violence as a specific feature of the male «modus operandi» and a performance of power over women which has a political meaning for the respective society. Hence, violence apparently represents the expression of individual and collective access to absolute power, both in the West and the East. Generally, this performance is socially acknowledged and almost

\textsuperscript{44} In case of rape or sexual abuse, the situations are often unclear, for example, due to the lack of evidence or to contradictory testimonies.

\textsuperscript{45} Compare pp. 68-71.

\textsuperscript{46} My translation. Original in Spanish: “No se trata de la expresión agresiva de la sexualidad, sino de la expresión sexual de la agresión masculina” (Alberdi and Matas 2002, 68).
exclusively practiced upon women, who are socially constructed and defined as sexual objects.\textsuperscript{47}

This sociologically feminist definition of sexual violence has been applied in a wide range of studies on violence and sexual violence. Consequently, I will adopt this definition as the basis of the present study. However, rather than understand this definition simply in terms of inequality between women and men, I will relate it to Eisler’s Dominator model, as explained above\textsuperscript{48}. This then situates sexual violence in a wider context which includes both structural, hierarchical and authoritarian elements and interactive concepts like bondage, coercion, domination and destruction. Furthermore, theoretical alternatives to the Dominator model have already offered a different vision of the phenomenon studied here, because they show other possible options to violence.

We should also add that some approaches -linked to some psychoanalytic tendencies-, which interpret and declare sexual violence as the aggressor’s and victim’s satisfaction of sexual and masochistic desires, can be revealing, showing that sexual violence does not mean sexual contact in its narrow sense. Rather, it represents the frustrated necessity to show dominance, in which case the aggressors do not merely seek sexual satisfaction but the victims’ total submission, humiliation and degradation. Only if these aims are achieved may the aggressors experience a euphoric moment. Thus, it represents a sexualization of the social level of aggression (Redondo 2002, 92), close to the general function of sexuality in the Dominator model, whereas in the Partnership model, mutual respect and freedom of choice are supposed to foster mutual bonding between the genders by means of sexuality. Consequently - and in summary - sexual violence uses sexuality as a tool to subjugate and humiliate other persons and to destroy their identity and personality.\textsuperscript{49} It is a violence directed against victims’ bodies and intimacy, linked to concepts such as morality

\textsuperscript{47} On sexual violence against men, please see p. 58.
\textsuperscript{48} See pp. 25-27.
\textsuperscript{49} Further, I will assume that a sexual assault has two components: first, the use of power and violence; second, their expression through the act of sexual intercourse. In this context, one of the primary goals in this study is to recapture the muted or silenced voices of the rape victims, to understand the violation from their point of view (Wolfthai 1999, 3).
and religion, and sense of shame; it suppresses, humiliates and degrades its victims (Herman 1992, 119).

Moreover, it is possible to observe an enormous complexity of sexual violence which frequently goes unnoticed and neglected: girls and boys suffer sexual violence perpetrated by men and women; women suffer sexual violence perpetrated by men and women; and men suffer sexual violence by men and women. As I will show in the chapter on the social dimensions of sexual violence, there are considerable differences between these types of violence, although in other aspects they may be quite similar and comparable. Therefore, the complex character of sexual violence should be acknowledged and it should not be reduced to specific or singular characteristics. Nevertheless, it is sufficiently specific to be considered a unique, but complex, type of violence. Given the aforementioned features, its direct connection to trauma can be easily explained: sexual violence represents aggression directed directly against the victims' bodies and intimacy; furthermore, it is linked to shame, moral and religious disgrace regarding one's sex, sexuality and the value each person attributes to his or her sexuality. Its aim is to subjugate, humiliate and degrade. Consequently, it is a type of violence which produces a high probability of major incidence of post-traumatic effects (Herman 1992, 119)50.

Consequently, I base the present research on a relatively broad notion of sexual violence, defined as any form of violence that utilizes sex in order to harm another person and which occurs against the will and without the consent of the persons involved in any moment of the action.51 However, many of these acts may not be acknowledged as (sexual) violence, at least on a colloquial and social level. Although such action may be carried out without the explicit use of violence but by means of authority or (alleged) love, it nonetheless represents violent assault (Kavemann 1992, 16).52 Furthermore, the people involved must be in conditions to be

---

50 See chapter 3.2.3. on the consequences of sexual violence, pp. 78-81.
51 Therefore, sexual violence does not include -at least according to the conceptual definition used by the present study- masochist rituals or rape-fantasies, to the extent that the latter are consensual and they do not cause lasting damages for anybody.
52 The term sexual assault or sexual violence covers many kinds of illegal (and sometimes even legal) sexual behavior, such as incest, sodomy, carnal knowledge, molestation, fondling and
able to express their free consent and will, which -for example- excludes mentally handicapped people, people under the effects of drugs or minors. In contrast to legal definitions which consider the aggressors' intentions as the fundamental element in order to determine the type and degree of violence, this more sociological definition concentrates on instruments used in order to perpetuate violence, effects on the victim and the victims, their social environment and society. Therefore, sexual violence is defined by means of a perspective centered on the victims and on individual, interactive and social consequences.

Regarding the use of terms in this study, I employ the term «sexual violence»\(^{53}\), in order to emphasize the violent and sexual nature of its acts.\(^{54}\) In the specialized literature, both terms -sexual aggression and sexual violence- can be found and some authors even use both terms interchangeably. In Anglo-Saxon and German-speaking countries, the term «sexualized violence» is frequently used in order to channel attention more toward the instrumentalization of sexuality. Nonetheless, I will use the more conventional term of sexual violence. In relation to the people who have experienced or suffered a sexual assault, two terms are generally used: either «survivor», which refers to the future and recovery, thus having a positive connotation that partially denies the related powerlessness that tends to follow a violent assault; or «victim», which has largely negative connotations linked to social stigmatization and hopelessness\(^{55}\). The term victim is generally used in legal, as well as in criminological and victimological contexts. For those who have been subjected to sexual assault, the first term is usually preferred. Yet, from an analytical point of view and in relation to the individual and social phenomenon of violence, the term «victim» seems to be more adequate. Therefore, and in the

---

\(^{53}\) In order to describe sexual violence, there are many different terms which sometimes refer to the same type of assault: sexual violence, sexualized violence, sexual exploitation, incest, sexual (child) maltreatment, pedophilia, sexual abuse, rape, etc. I generally use the term sexual violence, when I refer to no specific type of sexual violence but to the generic term. I use the specific types, if I want to specify on them. See the glossary for the specific definitions.

\(^{54}\) See the paragraph on aggression and violence, pp. 21-22.

\(^{55}\) Compare pp. 90-93.
present study, the latter is generally used, thereby following a more sociological and victimological tradition, while in specific contexts, the first one might also be employed, conducive of a more subjective and psychological perspective.56

To conclude, the term sexual violence does not represent a simple label, but is constructed socially and includes the social circumstances and conditions surrounding its occurrence. In modern Western societies, there is probably some general agreement that sexual contact should be carried out in mutual consent. Generally, actions that deviate from this norm are called sexual violence (Menzel and Peters 2003, 11). Nonetheless, it still represents a highly-debated and often polemic issue, especially when conditions, attitudes and behavior are interpreted differently, as Girard (1972, 176-177) explains referring to the genesis of myths and rituals employing coercive or violent practices, such as incest and parricide. The need to define violence, both from an objective and subjective point of view, should not be considered a conceptual weakness, but rather the possibility of introducing dialectical and sometimes contradictory elements and questions into the research. In this sense, in accordance with Fischer and Riedesser (1998) and their manual on psycho-traumatology, the present approach might be called ecological-dialectic. It aims to understand violence in relation to its context and between people and their context, considering the tension between the subjective and suffering victim’s inner-perspective and the observer’s outside-perspective. Hence, a violent or traumatic situation has to be understood in its complexity regarding its:

- interaction between insider- and outsider-perspectives
- contextual conditions
- subjective attribution of meaning
- experience
- behavior

In this context, the complexity and paradoxes linked to the individual and social phenomenon of sexual violence have to be acknowledged. Together

56 Apart from the generally used terms, there might be also other possibilities to refer to victims or survivors.
with specific biases, they give rise to difficulties in finding a common conceptual definition.

### 2.1.5. Multiple forms of sexual violence

After the presentation of different conceptual definitions and in order to conclude this first part of the theoretical framework, I will now look at sexual violence and the acts it includes. In the German legal context\(^{57}\), two main blocks of acts can be distinguished: First, «rape» or «sexual coercion» refers to assaults against the sexual self-determination of another person, through violence or intimidation. In this context, intrusion into the victim’s body (rape) and crime with several perpetrators are considered aggravating factors.\(^{58}\) Second, «sexual abuse» refers to assaults carried out without physical violence or intimidation and without consent, which affront the sexual self-determination and integrity of another person. Sexual abuse refers to any sexual acts committed against minors under age 14, against people with mental disabilities, people who suffer any kind of mental disorder or who are in a subordinate position in institutions such as prisons or other relationships of dependency, as they are considered to be unable to give consent. Therefore, sexual violence ranges from any type of non-desired sexual contact to the attempt of rape and rape itself. Criminal character appears wherever there is a lack of consent from one of the implied parties. A problem regarding analysis of this kind of crime concerns how consent can be assessed, since it is regarded as a primarily intimate and private act.\(^{59}\)

But even at a legal level, legislation varies widely from one country to another. For example, in Latvia, an act becomes a crime only if the coercion includes vaginal penetration, and, in Turkey and Romania, rape is defined as forced sexual intercourse on a person of female gender. In

\(^{57}\) The paragraphs 174 to 184 of the Strafgesetzbuch (StGB - German Penal Code) refer to different types of sexual violence: abuse of minors, rape, forced prostitution, etc.

\(^{58}\) Since 1998 (6th law regarding the reform of penal law), the §177 StGB (German Penal Code) only recognizes a single corpus delicti regarding crimes of violation, including sexual coercion (Absatz 1) and rape or specially severe cases of sexual coercion (Paragraph 2). By substituting the terms man and woman by aggressor and victim, both can be of both genders, introducing gender neutrality. By eliminating the term «extramarital», sexual coercion and rape by a husband or wife are included. Previously coded instruments of coercion (use of violence, present threat to life or physical condition are completed by a new instrument: taking advantage of a situation in which the victim is at the aggressor’s mercy without further protection (Folker 2003, 16-18).

\(^{59}\) Compare pp. 64-65.
addition, wider definitions include: non-specification of the gender of rapist or victim (as in Poland) “anyone who forces ... another person”; penalization of any form of bodily penetration; aggravating factors such as when the rape is “committed jointly by several persons” (Germany); or different forms of forcing. Under the British Sexual Offences Act (2003), it is still the case that the prosecution must prove the absence of consent (Hagemann-White 2006, 20).

The WHO-report on violence and public health presents a wide range of acts which might occur in different circumstances and ambiits and can be defined as sexual violence:

- Rape within marriage or dating relationships;
- Rape by strangers;
- Systematic rape during armed conflict;
- Unwanted sexual advances or sexual harassment, including demanding sex in return for favors;
- Sexual abuse of mentally or physically disabled people;
- Sexual abuse of children;
- Forced marriage or cohabitation, including the marriage of children;
- Denial of the right to use contraception or to adopt other measures to protect against sexually transmitted diseases;
- Forced abortion;
- Violent acts against the sexual integrity of women, including female genital mutilation and obligatory inspections for virginity;
- Forced prostitution and trafficking of people for the purpose of sexual exploitation.” (Krug et al. 2002, 149)

Although some of the acts included in the previous list are less disseminated in Germany and Europe and more in other cultural milieus, we should include them here in order to show the entirety and variety of acts constituting sexual violence. Furthermore, some of the latter items, such as forced abortion, are related to very broad notion of sexuality which includes any acts linked to a person’s reproductive and sexual identity.

More specifically, a representative study on violence against women in Germany includes the following as “undesired sexual acts”:

- forced sexual intercourse and undesired penetration of body with penis or other objects;
- attempted penetration against one’s will with penis or other object;
- forced intimate touching, petting or similar acts;
The list of sexual abuses for children under age 16 includes the following:

- being sexually touched or being touched on intimate parts;
- forced to touch another person's intimate parts;
- forced to touch one's own intimate parts;
- attempted or forced sexual intercourse;
- other forced sexual acts. (Müller et al. 2004, question 72)\textsuperscript{61}

After this detailed definition of violence, sexuality and sexual violence, I will now refer to the context in which my research has been carried out—the everyday life of victims of sexual violence.

2.2. Everyday life as a theoretical approach toward a microsociological understanding of sexual violence

2.2.1. Introduction to everyday life

There is a longstanding sociological tradition of research on everyday life and lifestyle issues. It will not be possible to recapitulate the whole range of this research tradition due to its extent, which would take us far beyond the scope of the present research. After briefly referring to the principal everyday life approaches, I will define its central terms, situate the present dissertation and outline its theoretical framework.

Everyday life as a topic for social thought was brought into the spheres of politics, science, art and social theory in the 20\textsuperscript{th} century, but it is still largely absent from dominant discourse. It seems that there has been

\textsuperscript{60} My translation. Original in German: "]_Jemand hat mich zum Geschlechtsverkehr gezwungen oder ist gegen meinen Willen mit dem Penis oder etwas anderem in meinen Körper eingedrungen; _Jemand hat gegen meinen Willen versucht, mit dem Penis oder etwas anderem in mich einzudringen, es kam aber nicht dazu; _Jemand hat mich zu intimen Körperberührungen, Streicheln, Petting oder ähnlichem gezwungen; _Ich wurde zu anderen sexuellen Handlungen oder Praktiken gezwungen, die ich nicht wollte; _Jemand hat mich gezwungen, pornographische Bilder oder Filme anzusehen und sie nachzuspielen, obwohl er/sie wusste, dass ich das nicht wollte" (Müller et al. 2004, question 803).

\textsuperscript{61} My translation. Original in German: "]_sexuell berührt oder an intimen Körperstellen angefasst; _gedrängt oder gezwungen, die Person an intimen Körperstellen zu berühren; _gedrängt oder gezwungen, sich selbst an intimen Körperstellen zu berühren; _zum Geschlechtsverkehr gedrängt oder gezwungen; _zu anderen sexuellen Handlungen gedrängt oder gezwungen." (Müller et al. 2004, question 72).
some bias based on the idea that the routine, banal and taken-for-grantedness of everyday life make it unworthy of theoretical engagement (Featherstone 1995, 55). It has, however, emerged as a concern within the philosophical tradition of phenomenology, as well as within historical materialism, linked to the idea of everyday life as critical knowledge (Vaiou and Lykogianni 2006, 733). Following the phenomenological project, a fundamental contribution was made by Berger’s and Luckmann’s *Social Construction of Reality* (1967). Time-geography has been offered as a method for studying everyday life (Hägerstrand 1985) that provides a different perspective on time in relation to spatial context, looking at positions, movements and activities of individuals in time and space (Vaiou and Lykogianni 2006, 734). De Certeau’s work has also been important, given its concern for how everyday practices are performed, that is, how people negotiate meanings and develop strategies and tactics in an everyday context.62

Since these approaches tend to neglect aspects such as the influence of historical change or the significance of institutionalized practices and discourses, the everyday appears to be a contradiction-free and given parameter of existence. Therefore, it might be necessary to use a more dynamic approach that seeks to incorporate not only the unchanging background and the routine of the everyday, but also the terms of its transgression. “Momentary and fragmented as this transgression may be, it contains in it the seeds of a non-alienated life.” (Vaiou and Lykogianni 2006, 734). In this respect, Lefebvre’s recurrent “approximations” (Lefebvre 1991) of the everyday focus not only on its continuous adaptations, but also on the collisions with various structures of time and space. “People’s

---

62 Until today, everyday life has been studied primarily through the following approaches:
- Social-objectivistc approaches: considering everyday life as a social sphere with an objectively given and explicit social logic. This perspective refers primarily to Marxist approaches, while structural functionalism generally neglected everyday life (Parsons and Merton);
- Time and space approaches: including concepts of time budget and time-geography;
- Historical approaches: biographic research;
- Subjective-interpretative approaches: including philosophical (Husserl and Heidegger) and sociological (Schütz, etc.) notions, ranging from phenomenological positions to lifeworld-approaches (Schütz, Berger and Luckmann, Soeffner), Weberian influenced tradition, the American pragmatism Chicago school and symbolic interactionism (Mead, Blumer and Goffmann). Another line is ethnomethodology (Garfinkel), based on practical practices.
- Culturally theoretical-oriented approaches: including lifestyle-research linked to models of de Certeau and cultural studies. (Voß 1991, 13).
Everyday lives are characterized not only by continuous adaptations, but also by collisions with various structures of time and space. In this sense, Lefebvre marks out the political dimension and the revolutionary meaning of the concept of the everyday, which is also developed by Heller as she reconstructs the meaning and transgression of alienation. According to Maffesoli, the everyday is “polydimensional: fluid, ambivalent and labile.” (Gardiner 2000, 6).

To sum up, everyday life is mainly characterized by repetitiveness. In this sense, repetitions make everyday life and thinking pragmatic, because routines relieve the individual from permanent uncertainty and doubt. Therefore, routines help to create stability in social groups and institutions63 (Lüdtke 1989, 11). Furthermore, everyday life actions are not fortuitous or coincidental and without structure, but they follow principles of order, rules, proceedings of meaning, plans and purposes (Schütz 1971/1972, 119). Everyday life is also the only sub-universe which is directly relevant to every person, which every person can influence directly and can be influenced by. It represents the individual space of interaction, adaptation, action, planning and experience, and the individual milieu of every person. In addition, everybody has manifest and latent knowledge of the explicit and implicit rules, structures and potentials for action of his or her own everyday life and lifeworld (Soeffner 1989, 12). One of the most important characteristics of everyday life is confidence, which through palpable acts is being permanently tested regarding awareness of rules of action.

Everyday life actions and communication work thanks to that which is taken for granted, which does not need to be articulated and often cannot or should not be. Partners in interaction assume common knowledge of an assumed common reality which is maintained by actions. This confidence in a common world of latent congruencies provides the rapidity and certainty of actions and reactions required in everyday life. But for rapidity and certainty to work, sequences of interactions, free of malfunctions, are

---

63 Normality has to be distinguished from routine, everyday life, habitus or institutionalization. Normality is mainly a result of normalization which represents a historically specific type of routine-following. According to Luhmann, homogenized fields allow the continuous alignment of social representations inside social sub-systems. Normalized fields effectively satisfy this homogeneity (Link 1997, 313).
required. This space of interaction of the taken-for-grantedness of everyday life represents the world, in which you know exactly what to expect and in which you are competent. It produces the capacity of the everyday life actor (Soeffner 1989, 14). According to Soeffner (1989, 15-16),

“[…everyday life is not a historically given specific reality, nor a world of everyday objects and performances. The generative structure of what is called everyday life is based on a specific type of experience, action and knowledge.”

The aim of everyday life is to construct normality and to minimize the abnormal, in other words, doubt. Therefore, on a micro-sociological level, it facilitates interactions by making them foreseeable and by generating interactive security. Furthermore, everyday life is connected to places where women and men live, work, consume, relate to others, forge identities, cope with or challenge routine, habit and established codes of conduct. The everyday means permanent adaptations, recurrent small decisions, particular practices and general priorities (Vaiou and Lykogianni 2006, 731).

“Everyday life involves the whole of people’s lives and the totality of their activities, practices and strategies, as these develop within the specific relations into which they have been involved during their life-course and the social conditions prevalent in their generation and locality”. (Simonsen and Vaiou 1996; according to Vaiou and Lykogianni, 735)

Another important category of everyday life is “boundary work” (Nippert-Eng 1996, 7), which, according to Nippert-Eng, “consists of the strategies, principles, and practices we use to create, maintain, and modify cultural categories” (Nippert-Eng 1996, 7). Boundary work represents the process of arranging and organizing realm-specific matters, such as people or objects into, for example, home and work related items, spaces, instruments and actions. These conceptualizations can be maintained or changed as needed or desired. In this sense, boundary work is mainly a mental activity, but enacted and enhanced through a largely visible collection of essential, practical activities, representing the physical side of

boundary work. Furthermore, it includes two dimensions: the placement and transcendence of boundaries (Nippert-Eng 1996, 7-8).

Since lifestyle is another commonly used term in research on everyday life, I will briefly define it, before introducing the concept of the Conduct of Everyday Life. There are many different definitions of lifestyle. The lowest common denominator for our definition considers lifestyle as a distinctive, hence recognizable, mode of living (Sobel 1981, 28). But there are multiple definitions of lifestyle emphasizing different nuances such as the inclusion of biography, opportunities, orientations, definitions of borders, social membership, coherence, distance, and distinction (Wahl 2003, 32-34), often focused on the sphere of consumption (Giddens 1995, 106). According to Soeffner, lifestyle includes two main dimensions: presentation and observation. In this sense, lifestyle always includes an aesthetic element (Soeffner 1992, 78 to 80).

Müller describes lifestyle as “a structural pattern of space and time” (Müller 1992, 376). He theorizes four dimensions of lifestyles based on material and cultural moments (Müller 1992, 377):
- expressive actions (leisure activities, consumption)
- interactive actions (forms of sociability, marital conduct)
- evalutive actions (value orientation, attitudes)
- cognitive actions (self-identification, structures of perception)

Lüdtke introduces a similar definition and distinction but summarizes Müller’s expressive and interactive actions with one category, called performance or patterns of performance (Lüdtke 1989, 42-44). In addition, these patterns of performance do not only satisfy the utilitarian needs of a person, but they represent the material shape of a person’s identity (Giddens 1995, 106). In this sense, Müller’s definition is very close to the Conduct of Everyday Life, the concept which I use as a theoretical frame for the present dissertation and which I will go on to present in the following

65 These repetitive daily actions also have an impact on and transform their physical environment, which consequently reveal the traces of the routines and rules of actions. On, vice versa, they condition the everyday life of society’s members. This physical dimension would be interesting to analyse, but cannot be sufficiently studied in the present dissertation, due to the research method chosen and lack of corresponding data. Furthermore, it would require a different (inter)disciplinary approach, including reflections on design, architecture or urban planning, thus going beyond the scope of the present research.
chapter. But as lifestyle -especially in its Anglo-Saxon tradition- is often and closely associated with modern forms of status grouping, the social organization of consumption and a re-evaluation of material culture (Chaney 1996, 14 and 43; de Certeau 1988; Lefebvre 1999), I will use the concept of the Conduct of Everyday Life in the present thesis in order to avoid confusion and misunderstanding, while at the same time remaining aware of the ways in which these concepts overlap. Furthermore, many everyday life theorists exclude work life from everyday life routines, which - at least for the present study- would mean to neglect one of the main analytical categories.

2.2.2. A systemic approach to everyday life: the Conduct of Everyday Life

The concept of the Conduct of Everyday Life is defined as the connection of all activities and actions which a person carries out on a more or less daily basis in his or her different life spheres. The object of Conduct of Everyday Life research is the supposedly grey arena of everyday life, shaped by a variety of routines as well as consistently arising problems. Although taken for granted by most people, it does not just «naturally unfold». Following the perspective of a subject-orientated sociology, we consider that it is not an easy task to construct, stabilize, maintain and -if necessary- change one’s everyday life. From a sociological perspective, an integrated system of rules is established for everyday actions which help to structure necessary activities (Voß and Weihrich 2001, 9), through positive and negative feedback and positive and negative sanctions (Galtung 2008, 15).

Hence, the Conduct of Everyday Life is defined as “how a person comes to terms with the different intrusions and circumstances of his or her everyday life, which he or she encounters as a person of a specific sex and age, as a working person, as a member of a family, belonging to a private circle of contacts, as a member of associations, as a citizen, ... but also with

---

66 The Conduct of Everyday Life was developed by the Münchner Projektgruppe „Allgemeine Lebensführung“ in the frame of the Münchner SFB 333 „Entwicklungsperspektiven von Arbeit“, mainly in the period from 1987 to 1996.
his or her own interests and possibilities, and how he or she conciliates these parts” (Kudera and Voß 2000, 7). Therefore, and according to Voß (Voß 1991b), the Conduct of Everyday Life is an arrangement of arrangements and an action system of practical coping with life on a daily basis. In contrast to biographical research, which studies the shape of human life in its full length, the Conduct of Everyday Life analyzes human life in its breadth and scope (Kudera and Voß 2000, 7).

In this sense, the Conduct of Everyday Life represents a timetable and a road-map -both in time and space- of a person’s behavior. This mapping shows how a person distributes and organizes activities which seem to be necessary in order to meet both external obligations and personal interests (Kudera and Voß 2000, 8). In the context of the action system of the Conduct of Everyday Life, a specific integration of a singular person and social institutions takes place. It controls and manages the person’s participation in society, on the one hand; on the other, it controls the way the person is shaped by widespread social attitudes. It does not represent the simple accumulation of trespasses and incursions made into different social spheres, but the forms of coping people develop in conducting their everyday lives. Hence, the concept represents the linkage or coupling of persons and society and their dynamic interweaving (Kudera and Voß 2000, 8).

The Conduct of Everyday Life is based on and influenced by the following theories:
1. A dynamic and constructivist System Theory. People are considered constructors of their lives and life conditions and this is described on a System Theory-level (Voß 1991a, 208).
2. This vision is partly influenced by an early and philosophical Marx still heavily influenced by Hegel (Voß 1991a, 208).
3. Another basis is Husserl’s thinking on performing and intentional subjectivity in everyday existence (Voß 1991a, 208-209).

---

The concept of the Conduct of Everyday Life was initially developed for purposes such as the study of changes in the proportion of work and leisure, the tendency toward individualization and pluralization of life and the growing importance of productive activities outside the work places. Its aim of broaching the issue of life on a global and broad level makes this concept particularly interesting for the present study (Voß 1991b, 6). Specifically in a gender -specific field, the concept has been proven to be of great value for detecting current but invisible patterns of time and space management (Jurczyk 1991).

The Conduct of Everyday Life attempts to overcome the separation and fragmentation of everyday life into different sociologies in order to reveal complex interaction. It considers everyday life as a “factum sui generis” (Voß 1991b, 6) and does not reduce life either to an objectivist constellation of social conditions and their consequences nor to a voluntaristic expression of personal decisions. It proposes a synchronic view of life (and not a diachronic view as in biographic studies). Its main objective is to understand the everyday cohesion and connectivity of all actions of life (Voß 1991b, 6). Principles of this approach are:

1. Holism: considering the breadth of all life activities both holistically and in an integrative way.
2. Practical actions: conceptualizing the inter-relation of the practical actions on a daily basis.
3. Innate logic: understanding the innate logic of everyday life.

The term Conduct of Everyday Life is composed of the following words:
- Conduct: refers to the constructivist, innately logical generation of subjects;

---

68 “Conduct of life”. My translation.
- Everyday: orientates the approach towards a day-to-day basis (and not towards the course of life);
- Life: refers to its holistic approach. (Voß 1991, 11)

Hence, the Conduct of Everyday Life is not interested in the whole range of activities, but on the systemic character of everyday experience. The basic structure of the system is the distribution of activities assuring a person’s different social fields of reference. In this context, the person is considered their bearer. This system is highly influenced by its social conditions, but it is basically a result of a person’s active efforts to construct. Its function is the practical coordination of everyday activities. Thus, the Conduct of Everyday Life represents the way a person actively arranges his or her life within social spheres and how a person coordinates and links all of this to a working whole. It refers to “the individual arrangement of social arrangements of a person”69 (Kudera and Voß 2000, 69). But despite the fact that it is a personal product and after being initially arranged, the Conduct of Everyday Life acquires autonomy with regard to the person and follows a functional and structural self-logic. Thus, it is not synonymous with the person nor does it represent a social system: it is a medium mediating between person and society (Kudera and Voß 2000, 69).

Consequently, the Conduct of Everyday Life is the action system of a single person (Alltägliche Lebensführung 1995, 32). The linkages of every single action represent, on the level of different individual fields of action and life, sub-systems. By this means, for example, it becomes problematic if a single sub-system (for example, work) permanently absorbs the Conduct of Everyday Life, reducing flexibility and autonomy (Voß 1991, 58-59). In contrast to biographical research which studies the shape of human life in its extension, the Conduct of Everyday Life focuses on human life in its full breadth of current reality (Kudera and Voß 2000, 7). Therefore, actions are theoretically and analytically structured into six dimensions (Voß 1991a, 213):

- what is done thematically and which logic it follows (thematic dimension → includes a broad or narrow spectrum of activities);

---

- when, how long and through which temporal logic is the activity executed (temporal dimension → integration of different time horizons and styles or dominance of one single time regime);
- where, under which spatial conditions, the action is executed (dimension of space → broad and wide or narrow space);
- with whom, with which expectations, with which kind of social style an action is being carried out (social dimension → number and character of social circles);
- which cognitive and material tools are used and how they are used (medial dimension → wide or narrow range of technical and cognitive tools);
- which rational meaning is being attributed to the actions (rational dimension → simple or complex attribution of meaning);

Therefore, the main questions of the present dissertation are: How are these dimensions of the Conduct of Everyday Life articulated in the specific case of the everyday lives of victims of sexual violence? Are their life conduct more static, flexible or dynamic? (Voß 1991a, 309) In this regard, the dimensions seem to be helpful and applicable in order to detect the specific daily structures of everyday life, since they guide and limit analysis at the same time. Hence, they represent a kind of guideline in the vast field of everyday life research. Furthermore, since the Conduct of Everyday Life approach mainly focuses on personal arrangements, it emphasizes the active part of the individuals without neglecting conditioning by social influences –thereby following the research perspective of the present study, subject-orientated sociology.
3. Overview of current state of research: sexual violence and society

In this short review of the current state of research, I will refer first to quantitative research done in the field in order to show the known statistical impact of the phenomenon. Second, I will discuss individual and social dimensions of sexual violence through mention of historical evolution, causal models and consequences. Third, I will outline some victimological thought on sexual violence insofar as it refers to criminological and victimological aspects of victimhood. Based on the theoretical framework, outlined in the previous chapter, and the overview of the current research status, I will develop the central hypothesis and objectives of the present dissertation.

3.1. Sexual violence in numbers: prevalence data and comparison

3.1.1. On quantifying violence

In order to give salience to sexual violence—or more generally speaking, violence against women—70 as a major social problem, at least three different principles have been used:

1. From a legal perspective, violence against women is presented as a violation of human rights 71 and is stressed as a public problem for individuals, societies and states. The problems which arise from this approach are the following: it makes a moral appeal, maintaining a dichotomy between victims and aggressors, following the established traditions and rituals (Girard 1972).

2. From a public health perspective, violence against women is considered in terms of its impact on victims’ individual health and the collective health of a society. In this context, its lack of visibility at the social level has been detected. Nonetheless, this approach construes violence against women

---

70 Most of the quantitative and nation-wide studies do not only focus on sexual violence, but on gender violence, domestic violence or violence against women. Nonetheless, most of them include a specific chapter or part referring to sexual violence. Therefore, when I refer to general study, I will use the term of violence against women.

71 Compare, for example, EU-funded projects like CAHRV (Co-ordination Action on Human Rights Violations; http://www.cahrv.uni-osnabrueck.de/).
exclusively as a public health problem, thereby neglecting its impact on other social spheres.\textsuperscript{72}

3. From an economic perspective, the individual and social costs of violence against women have been calculated, with the aim of sensitizing social institutions to the fact that violence is simply too expensive. At the same time, this approach has the disadvantage of not allowing any understanding of the structures of violence and its multiple connections to other social ambits.\textsuperscript{73}

For each of these approaches, the quantification of sexual violence has been indispensable.\textsuperscript{74}

Figure 4:

![The Magnitude of the Problem of Sexual Violence](Krug et al. 2002, 150)

Nevertheless, and according to the WHO, the real magnitude of sexual violence remains unknown. This is largely the result of an allegedly high undetected number of unreported cases. Since the number of unreported cases is supposed to be the highest of all those that concern the police and justice system, official police reports and crime surveys seem to be of little

\textsuperscript{72} See, for example, the first “World report on violence and health” published by the WHO.

\textsuperscript{73} Compare, for example, the chapter on “The cost of violence” in the Council of Europe’s report Combating violence against women. Stocktaking study on the measures and actions taken in the Council of Europe member States (Hagemann-White 2006, 8-12). Regarding other types of violence, such as terrorism, its specific connection and interaction with and impact on economy has been studied (Napoleoni 2004). For sexual violence, comparable research has not taken place.

\textsuperscript{74} Prevalence data reflect the number of people affected in a determined population and incidence data refer to the number of violent incidents that occur per year and thus call for agency responses.
use in estimating the scope of the phenomenon. Thus, sexual violence is presented, by the WHO (Krug et al. 2002, 162-163), as a floating iceberg, of which only the upper peak is visible for official statistics. A slightly larger part seems to have been detected by the so-called prevalence studies. Nonetheless, the main part of the iceberg remains invisible. In this general context and since the 90s, at least 16 large-scale studies at the national level have been carried out, measuring the extent of violence against women in the Council of Europe member states (Hagemann-White 2006, 7). As I have previously pointed out, this was convergent with the desire to make sexual violence more visible as a social problem.

3.1.2. National prevalence data and their limitations

As already mentioned, police, prosecutors and judges primarily employ traditional definitions of «what counts as rape» and conservative notions of both «real victims» and «real rapes», in which the victims’ behavior continues to be a central part of the assessment of whether a crime of rape has been committed. This is reflected in apparently underreported crime statistics and important differences in conviction rates and attrition data throughout Europe.

- In Europe, prosecution rates vary markedly from over 50% to 10%.
- European countries with adversarial legal systems report the highest rates of attrition, though Sweden is also in the group with fewer than 10% conviction rates.

75 According to the report State of European research on the prevalence of interpersonal violence and its impact on health and human rights published by the European research network CAHRV (Martínez 2006), there are representative national prevalence studies in the following European countries: Belgium, Denmark, Estonia, Finland, France, Germany, Ireland, Lithuania, Holland, Norway, Portugal, Spain, Sweden, Switzerland and United Kingdom (England, Wales and Scotland). Data has also been collected and published on a national level in Bosnia and Herzegovina, Croatia, Czech Republic, Iceland, Slovakia and Turkey.

76 “The UK study (Kelly et al. 2005) showed the significant role played by the police in “no criming” cases (25% of reported cases) providing evidence that police perceptions of the “rape” remain crucial. The vast majority of cases did not proceed beyond the investigative stage, and the conviction rate for all reported cases was 8%. 9% of reported cases were designated false, with a high proportion of these involving 16-25-year-olds. […] that many police think that “women lie about rape. Evidential issues accounted for over a third of rape cases lost at the investigation stage. In a substantial number of cases in this category the decision not to proceed was linked to victim credibility […] In the UK study, only 14% of cases reached the trial stage, […] Rates of acquittal were twice as high in cases involving adults as those involving under-16s.” (Humphreys and Carter 2006, 19-20).

77 Although evident, it remains necessary to mention that crime reports only reflect those acts of sexual violence which represent a crime according to the penal code in force.
German-speaking countries have conviction rates of between 20-25%, compared with the United Kingdom or Sweden with below 10%.

There is no country with an increase in convictions that exceeds increase in reporting. (Regan and Kelly 2003, 11)

In this sense, England, Wales, Finland, Ireland, Scotland and Sweden share a pattern of increasing attrition for rape, with increased reporting and declining conviction rates over decades. But not all countries have increased their reporting rates. Nonetheless, a shift in report data between 2001 and 2003 suggests that a trend toward higher reporting is now occurring in nearly all European countries (Humphreys and Carter 2006, 19).

As it is generally accepted that all forms of violence against women - including sexual violence- are under-reported in official crime statistics, a more accurate picture seems to be possible only through well-designed quantitative research and properly assessed prevalence data. The following table shows a short overview on some European countries and their prevalence data on sexual violence against women:

**Figure 5:**

<table>
<thead>
<tr>
<th>Country</th>
<th>Prevalence of rape / sexual aggression</th>
<th>Sample and Method</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>England and Wales, 2000</td>
<td>4.95% of all women, at least once after age 16.</td>
<td>6,944 women (British Crime Survey); face-to-face interview; national level.</td>
<td>Myhill and Allen 2002</td>
</tr>
<tr>
<td>France, 2003</td>
<td>11% experiences at least one sexual aggression in her life (including childhood).</td>
<td>6,970 women (between ages 20 and 59); interviewed by telephone; national level.</td>
<td>Jaspard et al. 2003</td>
</tr>
<tr>
<td>Germany, 1999</td>
<td>8.2% &quot;forced sex&quot;, 13.8% &quot;forced sex or on drugs&quot;, 25% reported of sexual experiences which would constitute a crime.</td>
<td>Sample of 304 young women; regional level.</td>
<td>Krahe et al. 1999</td>
</tr>
<tr>
<td>Germany, 2004</td>
<td>13% experience sexual violence (legal definition) after age 16; 58% different forms of sexual harassment.</td>
<td>10,264 women between 16 and 85; face-to-face-interview and written questionnaire; national level.</td>
<td>Müller et al. 2004</td>
</tr>
</tbody>
</table>
### Overview on European Prevalence Data (Own elaboration)

As shown by the previous table, quantitative studies on sexual violence are not consistent. This is partly due to the use of different sample sizes (especially regarding age), methods (regarding the size of the sample and especially the way of collecting data), and definitions of sexual violence (ranging from a broad definition of sexual violence to its narrow and legal definition) (Hagemann-White 2001). What is most surprising are the significative differences between the results, for example between the 4.5% of Spain and the 34% of Sweden, which seem to result from the type of definition used, the type of screening used, the way questions on sexual violence are positioned in the questionnaire and how they are formulated. Another factor is apparently the social and cultural context of the people interviewed, and cultural, social and individual attitudes regarding moral, intimacy, shame, stigma and sexuality, to mention just a few. Furthermore, the interviewees’ sensitization and interpretation of the experienced incidents plays another important role.

---

<table>
<thead>
<tr>
<th>Country</th>
<th>Prevalence of rape / sexual aggression</th>
<th>Sample and Method</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Italy, 2006</td>
<td>23.7% sexual violence after age 16 in lifetime; 4.8% rape or attempted rape after age 16 in lifetime.</td>
<td>25,000 women between 16 and 70; telephone interview; national level.</td>
<td>Sabbadini and Muratore 2006</td>
</tr>
<tr>
<td>Spain, 2000</td>
<td>4.5% (Question: Does he insist on having sexual relations although he knows that you do not want to?).</td>
<td>20,552 women from age 18; questionnaire through telephone interview; national level.</td>
<td>Instituto de la Mujer 2000</td>
</tr>
<tr>
<td>Sweden 2002</td>
<td>34% sexual violence from age 15 on (no specific data on rape).</td>
<td>6,926 women; questionnaire by mail; national level.</td>
<td>Lundren et al. 2002</td>
</tr>
</tbody>
</table>

---

Questions on sexual violence should not be too vague and should describe in a differentiated way what has happened. Separate and detailed questions might allow the researchers to provide data concerning narrower and broader definitions of sexual violence. Questions should be related both to intimate persons and partners and to strangers, in order to avoid the under-reporting of sexual violence by partners. But at the same time, questions should not be too detailed and intrusive and should be sensitive enough to avoid re-traumatization in the interview.
The overview report *State of European research on the prevalence of interpersonal violence and its impact on health and human rights* (Martínez and Schröttle 2006) shows that the results of the European studies on violence against women are not comparable\(^79\), mainly because of their distinct methodologies. Furthermore, the report laments the lack of studies on violence against men, elderly people, disabled people, migrants and other marginalized groups. Since European countries widely differ in their social composition, this impedes both inter-country data comparison and differentiation of population groups within countries. Paradoxically, the most vulnerable population groups have been mainly excluded from the studies, because they are not easy to reach in general population samples. Another critical point is that most current studies are neither repeated regularly nor designed with a longitudinal approach, which impedes the monitoring of development of violence over time (European Commission 2008, 33-35).\(^80\) Summing up, it is possible to say that the lifelong prevalence of sexual violence in Europe varies between one in ten and one in four women.\(^81\)

Furthermore, the *Comparative reanalysis of prevalence of violence against women and health* (Schröttle et al. 2006) has shown important overlaps between different forms of violence. Referring only to the German case\(^82\), 76% of women (who currently have a partner) have had no experience of any form of violence (psychological, physical nor sexual) from their partner. 24% have experienced at least one of these forms. Of the 13% who have experienced physical violence by their current partner, 5% have suffered the latter in combination with sexual violence, and 7% together with sexual and psychological violence, (whereas 65% of the women reported only physical violence and 35% in combination with psychological). In the case of experiences of psychological violence or

---

\(^{79}\) In order to test the possibilities of systematic data comparison, CAHRV conducted a post-hoc-data analysis on the basis of five data sets from violence-against-women prevalence studies (France, Germany, Finland, Lithuania and Sweden).

\(^{80}\) Nonetheless, some European countries plan to repeat the quantitative assessment of violence against women, with studies scheduled for 2010 to 2012.

\(^{81}\) Apart from its quantitative dimension, it also varies qualitatively in degree and intensity of appreciation from non-traumatizing to permanently affected.

\(^{82}\) For the German prevalence study, calculations are possible for violence by current partners and based on women who have a partner currently (age: 20-59). For more cases (France and Sweden) please see Schröttle et al. 2006, appendix.
physical threat (total of 15%), 5% reported also sexual violence and 4% sexual and psychological violence. Only 1% has experienced sexual violence (11% of them without any other form of violence; 68% together with physical and 75% in combination with psychological violence; 55% together with both physical and psychological violence). The following chart illustrates these numbers and the overlapping of the different forms of violence.83

Figure 6:

Overlapping of Different Forms of Violence (Schröttle et al. 2006, 68)

Regarding sexual abuse, prevalence numbers are even less reliable than data for sexual violence (experienced from age 16 upwards) due to victims’ possible problems in remembering the incidents. Furthermore, with

83 The percentages relate to all victims of any form of violence (=100%).
“"The most commonly experienced form of violence by partners is psychological violence without any other form of violence (42.2% of victims), followed by women who have experienced physical violence without any other form of violence (35.9%). Another broad group of victims has experienced psychological and physical violence without sexual violence (17.1%). Women who have reported sexual violence by their partners are rather rare (4% of victims), but this may also relate to openness of reporting and difficulties to report on sexual violence by current partners. Sexual violence by partners is regularly combined with other forms of violence." (Schröttle et al. 2006, 68)
Unfortunately, the calculation is restricted to women victimized by current partners and based on women who have a partner currently (age: 20-59). A calculation for all victims and types of violence is not possible.
regard to the German prevalence study, data on sexual abuse was included in the questionnaire on context of partner violence, in order to study possible correlations between these two types of violence. In total, nearly 9.9% of all respondents experienced sexual abuse.\(^{84}\) Nearly all studies refer to sexual violence perpetrated against women.\(^{85}\) There are fewer studies, and these are mainly studies with small samples, treating sexual violence against men. One of the first national studies on violence carried out against men in Germany reveals that between one and two out of ten boys suffer sexual abuse, of which about one third is attributed to female aggressors (Forschungsverbund Gewalt gegen Männer 2004, 83-98).

In this sense, it is possible to state that sexual violence against men is almost ignored. Most of the time, only sexual abuse of boys is mentioned and admitted, whereas rape or sexual harassment of male adults is, for the most part, not considered (Gahleiter and Lenz 2007, 21). The old myth that a woman can not be raped against her will seems to still be valid for men. Generally, it is believed that men can only be raped by other men and, it was only a few years ago, that rape of men was finally incorporated into a great part of Western legislations.\(^{86}\) In this sense, sexual violence against men is worsened by the fact that it humiliates them and undermines their sense of male identity, whereas, in the case of female victims, it reinforces female identity (Forschungsverbund Gewalt gegen Männer 2004, 209).

In a cross-national test, Yodanis (Yodanis 2004) has shown that in “countries where the status of women is low, prevalence of sexual violence against women tends to be higher” (Yodanis 2004, 655) and vice-versa. Consequently, feminist theory and its assumption which links the degree of inequality between men and women with men’s violence against women is empirically proven. “It is through fear that men are able to control women’s behavior, keep women out or confine their participation, and thereby maintain control of social institutions” (Yodanis 2004, 657). In this sense,

\(^{84}\) Own calculation based on Müller et al. 2004, Tabellenanhang (appendix of tables) page 31, table 20 C Sexueller Missbrauch (sexual abuse).

\(^{85}\) The relationships between aggressors and victims of sexual violence are another social aspect. To mention only one approach, Myhill and Allan arrived at the following result: 45% of the assaults happen between current partners, 11% between ex-partners, 10% between intimates, 11% during rendezvous, 16% between family members and 8% between strangers (Myhill and Allan 2002, 3).

\(^{86}\) Compare the scheme of legal changes between 1980 and 2006, p. 69.
Eisler’s hypothesis of and distinction between a Dominator- and Partnership-society-model seems to be upheld by the quantitative data.

3.2. Sexual violence and its individual and social dimensions

3.2.1. The historic evolution of sexual violence

As shown by Muelenhard and Kimes (1999), definitions -and especially the definition of violence and sexual violence- “reflect the interests of people with power” (Muelenhard and Kimes 1999, 234). Although “evidence suggests that women have been abused by men throughout history” (Muelenhard and Kimes 1999, 235), this violence has often been socially accepted and legally permitted, that is, insofar as it corresponds with and reflects the existing social order. The essential issue, which demonstrates the direct coupling of sexual violence and the social order, could and can still be summed up in the following question: Who is allowed to rape whom? (Dolbhofer 1994, 18).

Consequently, the social construction of sexual violence has its roots in and depicts the dominant structures and authority of a society, which nowadays, and in a Western context, is generally called patriarchy. There is a strict correspondence between the perceived seriousness of the violation and the importance which is given to the agents’ social role. By this means, social distance modulates the scale of seriousness of the crimes, not through intrinsic ferocity of the act, but the social condition of the men and women implicated (Vigarello 1998, 30-32). Furthermore, such perceptions have been influenced by religion, law, medicine, psychiatry and psychology. In this regard, Emilia Galotti’s phrase «Violence is not violence» - pronounced in Doris Lessing’s novel with the same name- summarizes the influence of the cultural representations of violence, its social construction and its normative character (according to Künzel 2003b, 15). The reasons

87 This question represents a paradox, because when somebody is allowed to rape somebody else (thanks to its legal and social acceptance), it is impossible to talk of a «rape». Therefore, it is impossible to be «allowed to rape somebody». Either the act is socially condemned and hence called «rape» or it is socially accepted and consequentially not classified as «rape». Nevertheless, the question «Who is allowed to rape whom?» does precisely show the constructivist character of the definition and its impact on an individual and social level.
why different types of sexual behavior have been considered antisocial or violent depend on the aforementioned phenomenon: their impact on the alteration of the social order, the damage or lesion they produce on others and their seriousness regarding the violation of rules, among other aspects. Therefore, they provoke a series of effects on the social order mediated by the individual and not desired by the dominant order (Redondo 2002, 20). In this sense, the act of rape is converted into a reality, thanks to a second social act -the act of its social and cultural acknowledgement linked to its condemnation (Künzel 2003b, 11).

Specifically, the history of sexual violence is -in a complex way- interwoven with the vision and conceptualization of the body and morals. It is closely linked to strategies of non-observance, avoiding and forgetting, which lead to the negation of the violent character of the aggression and the questioning of victims’ possible consent and contribution and analysis of their decisions, their will and their autonomy (Künzel 2003b, 10). Furthermore, the evolution of the social perception and the concept of sexual violence is parallel to and linked to the changes in the social systems oppressing women (Vigarello 1998, 8-10). Given its constructed character, sexual violence -in the sense of the previously presented definition- has enjoyed social acceptance through intellectual, aesthetic and ideological legitimation since Ancient times.

For the Ancient World, the current definition of sexual violence as forced sexual intercourse would not make any sense and in fact did not exist. What today would be called rape was named differently: to disgrace / defile; robbery; to rob; to corrupt, to tarnish; to scorn; carnal knowledge, stain, vice (Dolbhofer 1994, 5-6). It represented largely a legitimated action. At that time, its social dimensions included two conditions: first, sexual intercourse was considered violence if it threatened women and the corresponding marriage system within their society by challenging the legitimacy of offspring; second, it was also considered rape if it questioned and injured the hierarchical principles of social order that were intrinsic to ancient states88 (Dolbhofer 1994, 46). At that time, a woman’s consent or

---

88 For example, to have forced sexual intercourse with one’s own slave was not considered rape, since it reflected and corresponded to the social position and order of the master-slave-relationship.
refusal was not taken into account and did not have any importance. Thus, we can say that since Ancient Times, the social construction of sexual violence has its roots in and illustrates the dominant structures and authority of a society. As early as the Codex Hammurabi, rape of virgin and married women was evaluated differently (Oppenheimer 2006, 29).

This social construction is incorporated into a whole range of cultural and social discourses which generate hierarchies, ignorance and the development of myths which are sometimes linked and sometimes detached from the progress or regress in law. According to Wolfthal's study (1999) in Art History, medieval and early modern rape images reveal different social and cultural discourses, ranging from classic ""heroic" rape imagery" (Wolfthal 1999, 7) to images depicting rape as a violent, sexual crime which deeply hurts the victim. At the same time, artistic and cultural representations of rape also reveal different -and most of the time- false interpretations also affecting today's discourse on rape: that women's clothing, attitude and behavior causes rape, that it is saintly to choose death or rape, that women say no but mean yes, that the fundamental problem is not men's behavior, but women's false accusations of rape. Since these current misconceptions of Western culture about sexual violence have roots in a distant past, it is quite difficult to eradicate them (Wolfthal 1999, 198). Another important insight provided by Wolfthal's study is related to the fact that most of the images and cultural scripts analyzed in her book had been previously neglected or misinterpreted both by lay people and scholars (Wolfthal 1999, 197). Therefore sexual violence has often remained insufficiently acknowledged, although it has been perceived and described throughout the centuries.

Yet forced sexual intercourse with another master's slave was considered as theft, since it represented assault on another man's property (Dolbhofer 1994, 18).

Another example is the following: in most war treaties up to the 17th century, "it was perfectly permissible for soldiers to violate enemy women." The rape of prostitutes was also often legitimized, "since prostitutes were by definition common women, sexually available to all men" (Wolfthal 1999, 2). But medieval and early modern societies were not monolithic in their definition of rape and some legal texts of the past would coincide with a more modern definition of sexual violence, considering lack of mutual consent. For example, the 13th century treatise by Philippe de Beaumanoir defines the crime «femme efforcier» as "when one has carnal knowledge of a woman against the will of that woman". And Matthew Hale's 17th century law code views rape as "the carnal knowledge of any woman […] against her will" (Wolfthal 1999, 2-3).

The sagas of the gods and heroes are only one example -such as the rape of Europa by Zeus in the Greek saga- to the recreation and enactment of explicit and metaphoric symbols in literature, art and cinema (Redondo 2002, 99)
Religion—and in the cultural context of this research, the Catholic and Protestant churches in particular—has played a crucial role, both culturally and socially, in constructing women’s position in society through the representation of Eve and Mary as dichotomous female prototypes. Thus, pleasure and sacrifice or pain, as well as sexuality and sin, were erected as oppositional pairs, constituting a sort of vicious circle for female identity (Girard 1972, 40; Eisler 1988, 30 and 130). In this context, law plays the role of an arbitrator between the social construction of sexual violence and the social system. Among other things, it influences language and the process of its evolution and decides on the terms used regarding the acts of sexual violence. On a linguistic level, it is necessary to mention that in the German legal context the word for rape («Vergewaltigung» in German) historically follows the term «Notzucht»—a term composed of two parts: the first one refers to coercion and the second, to theft. Therefore, a consumed act of sexual violence was—until recently—considered theft of a woman, referring to the rape of the Sabine women (Künzel 2003b, 9).

Consequently, the legal classification of the crimes of sexual violence in the German Penal Code becomes more understandable, since the concept developed:
1) From a crime of robbery or rape of women («Frauenraub»)—representing a crime against the father or husband, but not against the woman—;
2) Through «Notzucht»—referring to coercion and robbery—;
3) Towards crimes against morality («gegen die Sittlichkeit» in German);
4) And an infraction against the social and familiar order and an infraction of (female) honor, similar to defamation (Künzel 2003b, 11).

91 The term «Notzucht» should not be taken at face value, because the first part of the term «Not» does not refer to need or neediness and the second part «Zucht» not to castigate or chasten. In an old understanding of the words, «Not-» stands for coercion («Nötigung») and «–zucht» for the aspect of a forced displacement (to subduct «Wegnehmen / -nunft») or to pull away («Wegziehen / -zûht» or «–zucht») (according to Künzel 2003b, 9).

92 Therefore, rape has also always represented a strategy during war-time in order to humiliate and destroy not only the raped women but all their society (see Oppenheimer 2006 and the social commitment of Medica Mondiale (http://www.medicamondiale.org/) whose founder, Dr. Monika Hauser, received the Right Livelihood Award, also called the Alternative Noble Prize in 2008.

93 Allusion to the interdependence of female honor and sexual violence persists from Germanic tribal rights and throughout the whole Middle Ages (Künzel 2003b, 21).
5) Currently, it is still not considered a classic violent crime, but a crime against one’s sexual freedom («Sexualfreiheitsdelikt» in German) (Shwa 2005, 23 and 61).

The period which has been most studied in literature and which will be treated in more detail in this chapter stretches from the 18th to the 21st century, since it provides better legal and cultural documentation. In an early phase (18th century), there is a relative tolerance of violence, with few reports and denunciations and insistent allusions to the appropriation and property of the victim linked to the universe of honor (Künzel 2003b, 46). In this sense, Norbert Elias’s hypothesis is fundamental, because it shows how ““norms of aggressiveness” vary over time, how they become “refined”, “cultivated” and “polished and limited by an infinity of rules and prohibitions which convert into self-control”94 (according to Vigarello 1998, 21). Since crimes against property are considered a more serious attack on social order and stability -and therefore a greater social problem-, sexual violence represents a less destructive act for the existing order (Vigarello 1998, 41).

Furthermore, the morals in force at the time also weaken and deflect perception of the atrocities of sexual violence. First, sexual violence is closely linked to «fornication» and «sin», referring to moral transgression against good customs, and it is not considered a heinous crime. Thus, the term carnal knowledge is often used in this context. Secondly, it is the victims who lose their honor and suffer exclusion from society. They are physically marked, stigmatized and depreciated. The damage is worsened, because virginity marks the boundary between women of honor -who can be raped- and women without honor -who according to law can not be raped95 (Vigarello 1998, 50-52). Therefore, rape of a married woman -her husband’s alleged property- is considered a more serious crime. Personal damage to the victim is not contemplated and, furthermore, the harm that has been done is understood as abduction and is conceived in relation to the woman’s “owner”.96

94 Translation of the author. Original version in Spanish: “[…]“normas de la agresividad” varían con el tiempo, cómo se “refinan”, se “civilizan”, “pulidas” y limitadas por una infinidad de reglas y de prohibiciones que se acaban transformando en autocontrol” (according to Vigarello 1998, 21).
95 Such as, for example, prostitutes.
96 “Thus, the tendency to misattribute violence against women to strangers in a dangerous outside world glosses over the ways violence against women is part of the social structures of
In this sense, the history of sexual violence is interlaced with the history of representations of femaleness. It is a form of negating women their condition as a subject with rights. This is linked to the (alleged and mythic) certitude of consent, based on the presumption that a single man’s rape of a doughty woman was impossible for mere physical principals; female vigor was considered sufficient for her own defense (Künzel 2003b, 63-85). Both literature and art have treated this interface of representations of femaleness and violence in diverse ways.97 Heinrich von Kleist’s *Marquise of O.* is only one example, in which pain and pleasure, respectively violence and sexuality are connected. Yet, the violent character of many representations (both in literature and art) were largely mistaken to be erotic acts, erotic happenings or moments of emerging Eros. Furthermore, violent moments were often hidden, either by creating a void or by obscuring and displacing the item (such as reference to sleep and fainting rather than rape) (Künzel 2003a, 17-30).98

Sexual violence is also primarily posed as moral crime, a blasphemous gesture in which the violent act is diminished and is replaced by the tag of «depravation or sin». The victims’ image, the suspicion of women, the tendency to involve the violated being in depravation, as well as difficulties in analyzing the intimate acts, inner resistance, their negation and the perception of the body among those who have been violated, all transform rape into a seriously condemned crime in legal texts yet one that is a very infrequently persecuted in court. Consequently, court cases are

---

97 Sielke (2002), for example, has studied variables like race and class and their influence in the construction of sexual violence and the image of victims in American literature and American rape narratives.

98 “A visual poetics would claim that representing rape as self-murder displaces rape, with the suicide becoming its metaphor. [...] To say one thing and to mean another is to do a third. To produce a gap between language and thought, the real subject disappearing within the cracks of the conflict. Replacing the experience, the metaphor removes the rape itself. [...] [R]ape cannot be visualized. It cannot be visualized not only because “decent” culture would not tolerate such representations of the “act” but because rape makes the victim invisible. It does that literally first – the perpetrator “covers” her – and then figuratively – the rape destroys her self-image, her subjectivity, which is temporarily narcotized, definitively changed and often destroyed. Finally, rape cannot be visualized because experience is, physically as well as psychologically, inner. Rape takes place inside. In this sense, rape is by definition imagined; it can only exist as experience and as memory, as *image* translated into signs, never adequately “objectiveable”.” (Bal 1990, 142).
few and far-between, generally limited to sexual violence against children\(^{99}\). Thus, justice is converted into a double-edged sword for the victims. (Vigarello 1998, 94; Künzel 2003a, 89-99) It operates as an institution conserving common rules and habits which consistently and regularly turn sexual violence into a part of the everyday life of all members of society.

Nonetheless little by little, sensitivity regarding sexual violence has been raised. Towards the end of the 18\(^{th}\) century, understanding of the danger of precise threats against people becomes priority and less importance is given to the sacrilege of sin and misconduct. This development is accompanied by a new perspective on violent crimes, representing a decisive step towards the theoretical and systemic perception of the phenomenon: moral seriousness is separated from the social seriousness of the acts; moral weakness is separated from assault against people. In this context, violence against minors emerges, directly linked children's -considered morally impeccable and angelic- fragility\(^{100}\) (Vigarello 1998, 98-128).

Furthermore, victims slowly become subjects: the harm that has been done is more and more concentrated on their own private being and not longer on their wardens; rape tends to be seen more in terms of physical injury and less as undue appropriation (Vigarello 1998, 136); laws hierarchically organize different levels of seriousness and place the victims into a more independent position regarding their wardens and more independent in relation to moral failure. Nonetheless, rape -as well as sexuality- continues to produce a fusion of elements such as obscenity, moral and body. Open sexual assault is slowly differentiated from simple private vice, which establishes the boundary between rape and lascivious behavior. Another change at the end of the 18\(^{th}\) century is the rise of public

\(^{99}\) Till this day, the majority of those elements continue to be valid and play a key role in legal procedures. There is a general social and cultural problem regarding female credibility. On the one hand, this is a consequence of women’s legal position in society. Since, over the course of centuries, women have not been considered legal subjects but merely its objects. On the other hand, there is a social and artistic imaginary which poses on the alleged female inclination towards lie and falseness. Therefore, femaleness is inseparably linked to falsehood and trickery. This affects women’s position as witnesses, particularly important in proceedings for sexual violence, given to its private and intimate character. In general, there are only two witnesses available -the alleged aggressor and the alleged victim. Consequently, physical proofs are often asked for. The imaginary, as well as its use and its application, can still be observed in legal practice (Künzel 2003a, 205-256).

\(^{100}\) See the paragraph on the social construction of the victims' image, pp. 90-93.
opinion in cases of sexual violence and the medical rhetoric which drives to confirm female submission to men at a scientific level (Vigarello 1998, 159-160).

The second period is principally characterized by the influence of medicine and psychiatry and their vision of the aggressor and the victim. On the one hand, new terms are used in order to hierarchically organize violence, such assaults against chastity or sodomist violence. In this way, laws created crimes which did not exist before, and assigned and declared acts as sexual violence which previously had been unacknowledged or even ignored. This of course is further testimony to the fact that violence is closely linked to the social order and priorities which set the limits of transgression (Vigarello 1998, 179). On the other hand, new distinctions of sexual violence are introduced, such as a new qualification linked to an alienated act: incontrollable coercion which involuntarily invades the subject and which is closely linked to obsession. In this way, acts of sexual violence become a medical phenomenon and problem (Künzel 2003b, 63-88; Vigarello 1998, 191-193). Furthermore, the relation between violence and lack of consent is imperceptibly questioned in the second half of the 19th century (Vigarello 1998, 208), insofar as threat and terror are attributed to the aggressor and weakness and unconsciousness to the victim.

At the end of the 19th century, the aggressor is placed at the center of interest and the study of his alleged profile is supposed to lead to an explication of the crime. At the same time, sexual abuse of children is separated from other acts of sexual violence. The term pedophilia is utilized increasingly (Vigarello 1998, 261). The notion of personal damage is slowly transformed into one of traumatic incidents containing psychological elements which start appearing, for the first time, at the beginning of the 20th century (Vigarello 1998, 309). Within this new medical-psychological context, sexual violence and its consequences are seen to bring particular cycles of memory with them which include episodes of amnesia or forgetting (Herman 1992, 7-26).

An important period was the time marked by the invention of hysteria during the 19th century. At that time, the majority of physicians thought that the source of this «female illness» was located in the uterus, until Janet and
Freud detected that the somatic symptoms of hysteria were based in disguised representations of memory in which occulted traumatic events of childhood were hidden. Thus, they became the first in the medical field to observe and report on the effects of sexual assault on women. In 1893, Freud began to formulate his seduction theory, based on 13 adult female patients who reported childhood sexual seduction by an adult, usually the father. By 1896, he categorically stated that childhood sexual seduction before puberty was the cause of hysteria. However, a year later he retracted, concluding that the reports of his patients were not actual events but fantasies. Hence, it seems that Freud’s own findings aroused considerable confusion and anxiety in him: if his hypothesis linking experiences of sexual violence with hysteria was true, and taking into account the huge amount of women seemingly affected by hysteria, there must be excessive sexual violence even in the highest classes of his own Paris and Vienna milieu (Herman 1992, 7-26; Wasco 2003, 311). This truth seemed to be too tremendous and overwhelming and such huge social scope that not even Freud was able to acknowledge it. Therefore, it remained all but forgotten until the First World War and the War in Vietnam. At these moments in history, similar symptoms were detected in the veterans who had served on the battlefields. For the first time, symptoms of traumatic disorder were described. Yet it was not until the 1970s and the advent of the feminist movement that posttraumatic stress was recognized as a disorder, one also -or even- common and extensive among women in civil life (Herman 1992, 28).

This evolution can be summarized as follows: in earlier times, the victim could have been condemned as a witch. In Freudian times, she would have been considered to be a classical hysteric. Today, she gets diagnosed as having «multiple personal disorder». This illustrative summary reflects the substitution and the development of moral institutions, which define and condemn social transgression in order to protect the social order. Consequently and little by little, the church and morality have been replaced by medicine, psychiatry, psychology and science.\footnote{Naturalization was another process, which was fostered by the medical and psychological sciences. It was and still is often used in order to explain violence against women by means of the}
The third period starts with the feminist movement and its struggle for women’s control over their own bodies -including the right to abortion-, insisting on women’s freedom to live safely in any place and at any time (Oliver and Valls 2004, 89). Consequently, a new awareness has been generated regarding everyday security and the impact of trauma. Violence is reinterpreted and defined, also implying other changes in the imaginary and in social behavior, such as in relations between men and women and ways of understanding history and oneself (Vigarello 1998, 317). In order to achieve these changes, one strategy consisted of the mobilization of public interest around sexual violence cases, meant to produce changes in social imagery and behavior. In emblematic processes such as the one that took place in Aix-en-Provence (France 1978\textsuperscript{102}), a social debate began on the public and political range of sexual violence (Vigarello 1992, 324; Brownmiller 1992, 307), through such means as accusing police and the justice department of trivializing sexual crimes and of frustrating victims’ attempts to press charges (Badinter 2004, 24-25). Consequently, sexual violence became a public and political problem and left the intimate and private space.\textsuperscript{103} At the same time, the awareness of trauma and its consequences profoundly change ways of looking at and treating victims, their behavior and the acts, at both individual and social levels. Damage stops being seen as moral and starts to be seen as physically verifiable in relation to the victims’ health. In this sense, harm produced by the aggressor can be assessed in a more objective as well as sensitive way.

\footnote{natural and fundamental differences between women and men and specific and natural male features (Alberdi and Matas 2002, 60).}

\footnote{Two young Belgian tourists, who were returning from Spain to Brussels, decide to camp on the beach of Morigou, close to Marseille, on August 20\textsuperscript{th}, 1974. They are approached by a “local pig” (In the original: “un macarra local”), just as they were setting up their tent and they ask him to go. The situation repeats itself the following day and they give the same negative reaction. The man decides to “take revenge” and returns during the night and after having convinced two of his friends to come with him. The assaulters try to enter the tent, situated in a solitary place only a few meters from the sea shore; the two girls resist until a certain point where one of them hit the skull of the most audacious with the tent-hook hammer. The sight of blood unleashes horror: the girls suffer atrocities and rapes lasting 4 hours. The same night, they report the incidents to the closest police station in the town. This was one of the first trials in which the victims asked for the support of moral authorities, because they wanted to go further than the assault itself and initiate social debate (Vigarello 1998, 322-323).}

\footnote{By this means, sexual violence is generally situated between two extremes: on the one hand, public scandal regarding few cases of social impact, as the Belgian case Dutroux of 1997, which shocked vast parts of Europe, or the American Catholic church’s scandal; and, on the other hand, an invisibility of the majority of cases.}
These tendencies and evolution simultaneously foster further legal developments. In the German context, not one single change in the Penal Code was made between the two World Wars, in 1945 the Penal Code of 1852 was reestablished and maintained until its reform in 1974 (Künzel 2003b, 44).

Figure 7:

<table>
<thead>
<tr>
<th>Country</th>
<th>Year(s)</th>
<th>Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>England and Wales</td>
<td>1991</td>
<td>- includes rape of a male victim</td>
</tr>
<tr>
<td></td>
<td>1993</td>
<td>- boys under 14 can be charged</td>
</tr>
<tr>
<td></td>
<td>1993/7</td>
<td>- includes rape in marriage</td>
</tr>
<tr>
<td></td>
<td>1999</td>
<td>- end to cross examination by the accused</td>
</tr>
<tr>
<td></td>
<td>2003</td>
<td>- legal project to revise the whole legislation regarding sexual violence</td>
</tr>
<tr>
<td>Finland</td>
<td>1998</td>
<td>- gender neutral</td>
</tr>
<tr>
<td></td>
<td>1999</td>
<td>- lower requirement of force and threats</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- not a moral crime</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- three degrees of sexual aggression</td>
</tr>
<tr>
<td>France</td>
<td>2006</td>
<td>- includes rape in marriage</td>
</tr>
<tr>
<td>Germany</td>
<td>1997</td>
<td>- includes rape in marriage</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- gender neutral</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- more general definition to include the exploitation of vulnerability and dependency</td>
</tr>
<tr>
<td>Italy</td>
<td>1989</td>
<td>- women’s groups can be parties to the case</td>
</tr>
<tr>
<td></td>
<td>1996</td>
<td>- crime against person</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- defined as “sexual violence”</td>
</tr>
<tr>
<td>Spain</td>
<td>1989</td>
<td>- introduces concept of “offences against sexual freedom”</td>
</tr>
<tr>
<td></td>
<td>1995</td>
<td>- includes rape in marriage</td>
</tr>
<tr>
<td></td>
<td>1999</td>
<td>- widened definition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- increase in sentencing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- widened definition</td>
</tr>
</tbody>
</table>


In order to conclude this overview of historic evolution, I reproduce here the following table describing changes in some European legislations between 1980 and 2006 in order to specify and widen the definition of acts of sexual
violence. On an international level, in 1993 the UNO recognizes women’s rights as human rights and declares that violence against women represents a violation of human rights. With the stimulus of the UNO-conference in Beijing in 1995, the phenomenon of gender violence becomes internationally established as a social problem.\textsuperscript{104}

After a number of steps, such as recognizing violence against women, showing its frequency, linking it to the patriarchal system, improving analysis by distinguishing the roles of the different authors and underlining violence in a domestic and family context, current feminist theory seems to be divided into three principal currents: one which analyzes what does and does not work regarding the reduction of violence; another studies the political and legal system and the last works on the meaning of violence against women as a violation of human rights (Walby 2000).

Another wider and more visionary proposal comes from Hagemann-White (1999), who puts forth a proposal to eliminate violence against women from a feminist and peace-constructing perspective. In her perspective, it is necessary to eliminate the polarization between men and women beyond the traditional gender-division and foster better community cooperation through a new kind of contract between the genders. Thus, it becomes necessary to develop new paths for resolving conflicts in order to remodel them constructively. According to Hagemann-White, feminist integrity can not be “preserved” (Hagemann-White 1999, 10) and the feminist movement should abandon the idea of purity, which is principally a patriarchal concept, and should start to collaborate with other social movements. Hence, the feminist movement should evolve toward constituting itself as a more dialogic movement. This proposition fits -at least partly- Eisler’s concept of a Partnership-guided society\textsuperscript{105}, which is based on relations of mutual trust, focused on pleasure.

In order to summarize this brief historical review on sexual violence and in order to take issue with Susan Brownmiller’s famous statement

\textsuperscript{104} It is necessary to remember that the Declaration of Human Rights dates from the year 1789. For further information on social policy regarding sexual violence and victims in Germany, please compare annex 10.1. on pp. 323-328.

\textsuperscript{105} See pp. 25-27.
(1992), until recently not all women were rapeable and furthermore, not all people were rapeable within their cultural and legal contexts (Brownmiller 1992, 259; Künzel 2003b, 54). Another continuity is the alleged invisibility of sexual violence - both a problem for the justice and public health system, but also for social institutions and attitudes - , but which represents a constructed invisibility sustained by a lack of will and insistency. Even in science and philosophy, sexual violence represents an often ignored and misinterpreted issue. In spite of the importance of Michel Foucault’s writing on the relationship between sex and power, his ideas about rape are flawed, insofar as he sees no difference between physical assault and rape (Wolfthal 1999, 3-4). But this inability to see sexual violence from the victim’s point of view is not unique to Foucault. It simply represents a paradox, which seems to be associated with sexual violence: producing fascination and stigmatization at the same time, as well as simultaneous presence and absence.

3.2.2. Causal models on sexual violence

Attempting to explain the origins of violence and more specifically of sexual violence is a complex endeavor, given the multiple shapes it takes on and the different contexts in which it occurs, as well from its moral and subjective connotations. Hence, its different definitions are already often linked to and based on specific causal explanations, following specific lines of thought, ideologies or convictions. They vary from biologically influenced ideas, considering rape a natural adaptation or a by-product of evolution.

106 Today, sexual violence is generally explained as a result of power-relation between the sexes. Sexual abuse of boys is often considered, but a more detailed study often fails due to a lack of data. The question - which is nearly never asked - is the following: Where does this lack of material and knowledge come from? Factors which have been listed in the detailed study of a case of sexual abuse of male minors - are (Kerchner according to Künzel 2003b, 137-164): the historic construction of sexual crimes which turns the focus away from minor abuse; alleged experts engage in disagreements which then take precedence over issues and cases; issues of lesser significance are introduced in distract attention; public polemic and the abundance of witnesses and documents may sometimes disguise content and topic rather than providing insights (Künzel 2003b, 155).

107 Foucault states that sexual crimes, per se, should not be punished “under any circumstances”. He argues that he sees no difference between assault and rape, insisting that “whether one punches his fist into someone’s face, or his penis in the sexual organ makes no difference” (according to Plaza 1981).

108 Since there are few causal models which focus only on sexual violence, the present chapter refers to both gender and sexual violence.

109 Thornhill and Palmer ask the following question: Is human rape an adaptation or a by-product? From their perspective, an adaptation would mean that rape was favored by selection, because it increased male reproductive success through increasing number of mates. A by-product would mean
(Thornhill and Palmer 2000) to some radical feminist notions which consider any sexual intercourse between men and women as an expression of the power and dominance of men over women (Dworkin 1987). According to Corsi and Peyrú (2003), theoretical models can be classified into three general groups: psychological, social and multi-causal models, although there are other authors who differentiate between five models.  

In the first place, the psychological, psychopathological or individual models seek the cause of (gender) violence in individual factors, either as regards the aggressor or victim. According to this model, the cause of violence is situated in the particular features of the people involved and can be eradicated at their will. Causal explanations are consumption of alcohol and drugs, individual psychopathologies, frustration, provocation by the victim, incompatibility of characters or behaviors learned in childhood (Sanmartín et al. 2004, 37-42). Within this type of argument, violence is attributed to personal behavior, represented, for example, in popular explanations, connecting violence to the discharge of intolerable emotions known as catharsis, in which a release of pent-up emotion induces emotional cleansing (Corsi and Peyrú 2003, 34-38).

These explanations are often translated into some of the myths surrounding sexual violence. For example, consumption of alcohol or drugs is frequently used in order to minimize or even free aggressors from blame. Another perspective used to justify the aggressor’s behavior and blame the victim involves linking habits and behaviors learned in childhood to the

---

110 Although most of the following models were elaborated for understanding domestic or interpersonal violence, they also refer to sexual violence, considering that it represents one specific type of domestic or interpersonal violence. Therefore, they can and have to be considered, when talking about sexual violence. Furthermore, and linked to the fact that sexual violence is less studied than violence against women in general, there are offered few causal models that refer only to sexual violence, beyond the myths mentioned in the previous chapter.
causes of violence. This argument is often used in relation to aggressors who suffered maltreatment and abuse in their childhood. They can thus be transformed into the victims of their childhoods and lives and released from blame and guilt. They are thereby seen as driven by their past, instincts and emotions, and their autonomy and freedom regarding their scope of action is denied. Even though the co-presence of sexual violence and the above mentioned variables has been proven, cause and effect correlations are still not entirely demonstrated and they too are often used in order to blame or exonerate behaviors. Consequently, the complexity of sexual violence is often simplified in these psychological models and the causes are sought only in individual characteristics, thus denying the social perspective (Bosch and Ferrer 2002, 81).

As Sanmartín notes, the interactive perspective which states that biology is the origin of aggression may be situated between psychological and sociological models. Under the influence of specific cultural factors, aggression may degenerate into violence (Sanmartín 2000, 100). Given its interdisciplinary approach, this approach is located in a sort of «no-man’s land» and receives criticism from both sides. Furthermore, it must still develop more precision in its arguments.

In second place, sociological models seek the causes of violence in social context. From their perspective, structural violence forms the basis from which multiple types of interpersonal violence arise, permeating daily life (Corsi and Peyrú 2003, 33). This group includes -among others- the following models: One approach explains violence as a last resort, which males may employ as a last resort to maintain control when all else has failed, in order to maintain their male power and identity. Other models are based on the theories of social learning, family systems, resources, interchange and stress (according to Bosch and Ferrer 2002, 176; Sanmartín et al. 2004, 85).

Another sociological model is presented by feminist theory, one of the dominant -if not the most dominant\(^\text{111}\)- ideological perspectives in the field of sexual violence. This theory employs gendered lenses -

\(^{111}\) In his review of sociological perspectives on violence, Richard Gelles (1993) writes that feminist theory is “becoming the dominant model for explaining violence toward women” (Gelles 1993, 41).
reconstructed after centuries of ignoring the gendered dimensions of social phenomena— which contemplate women as objects of control and domination by a social system characterized by patriarchy and oppression. It takes a social constructivist stance toward violence as socially constructed rather than determined by other factors. Generally speaking, feminist models consider rape to be the result of long and deep-rooted social traditions in which males have dominated nearly all important political and economic activities, reflected for example in prostitution and particularly in pornography. In this sense, they focus on the male domination of sociopolitical and economic affairs as the ultimate determinant of a societal risk of rape (Ellis 1989, 10).

As seen in the chapter on the historical evolution of the concept of sexual violence, the sociological approach represents an important change in the analytical perspective of the causes and consequences of violence. Nonetheless, concentrating on the male condition, these models channel attention towards questions of female domination and power and the struggle which accompanies them. In this manner, feminist models introduce a new and seemingly crucial variable, yet their often activist approach maintains and locks the phenomenon into a dichotomous style of argument which does not stimulate new approaches to communication and dialogue. Regarding sociological models, there are several frequent flaws: some of them neglect various individual aspects, and/or they assume conclusions, causalities and connections without adequate proof.

Therefore, and in the third place, multi-causal or ecological models articulate various explanations in a more general and comprehensive scheme (Bosch and Ferrer 2002, 184). To provide a brief overview, ecological models include different levels or sub-systems, which impact on and influence sexual violence. Hence, they represent the most complex and

---

112 Although—according to this causal model— a lot of everyday behaviors, rituals and attitudes reflect the "male domination", as Bourdieu’s concept of “symbolic violence” reveals (Bourdieu 1998, see pp. 90-93), women—over time and unconsciously— have assumed and learned their role and their function in a patriarchal society. In this sense, they often foster and defend patriarchy. Therefore, emancipation represents a process of reflection on the existing and on supposedly normality, through which one may remove oneself from inherited patterns of thinking and acting.

113 For further details and variations of different feminist approaches and concepts regarding sexual violence, please compare p. 70.

114 Compare p. 70.
complete causal models. Krahé and Scheinberger-Olwig (2002, 35) summarize them in the following adapted scheme:

Figure 8:

<table>
<thead>
<tr>
<th>Level of analysis</th>
<th>Focus of explanation</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social system</td>
<td>Macro-social</td>
<td>Socio-cultural focus</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Socio-biological focus</td>
</tr>
<tr>
<td>Interaction</td>
<td>Micro-social / interpersonal</td>
<td>In-communication of sexual intentions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Situational opportunism</td>
</tr>
<tr>
<td>Individual system</td>
<td>Intra-personal</td>
<td>Theories of socialization</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Social processing of information</td>
</tr>
</tbody>
</table>

Classification of Causes (Krahé and Scheinberger-Olwig 2002, 35)

In this manner, ecological models combine psychological, individual, interactive, social and sociological focuses, attempting to achieve a more complex and multi-perspective vision of the phenomenon. But apart from their interdisciplinary approach, they show and connect the causes in simple centrifugal circles, partly neglecting the connections and relations or the different levels of interaction and communication between the different systemic levels.

Bronfenbrenner’s ecological model, one of the most prominent, starts from a constructivist orientation and considers the person as an active being. In this context, the milieus and contexts which affect people are analyzed with regard to their systemic range and impact and treated as linear variables which may have an independent influence on the development of the phenomenon. Systems -modifiable and expansive- are considered to be dynamic. Hence, individuals and their surroundings influence each other through mutual adaptation. Reciprocity plays a central role, since it represents the factor which produces the dynamism of systems which characterizes the ecology of human development. It is

---

115 Authors of multi-causal models are (according to a list presented by Bosch and Ferrer 2002, 184-192): a model proposed by Sandra Stith and Karen Rosen 1992; a predictive model (Idem. 1993); the ecological model of Jorge Corsi 1995; Berkowitz 1996 revised Corsi’s model; James O’Neil and Michele Harway’s model of 1997; Enrique Echeburúa and Javier Fernández-Montalvo’s model of 1998; Lori Heise’s model of 1998; and Bronfenbrenner’s ecological model.
present both in the relations between people and between systems. Consequently, it means that a change in any part of the ecological system may affect the rest and generate new changes, which in turn influence the whole. Furthermore, time and life-cycle perspectives are included as central variables in the model.

Generally speaking, the ecological model includes the following sub-systems: the micro-system, which encompasses different intimate and close contexts in which a person is shaped; and the meso-systemic level, where interrelations between two or more contexts take place. The person participates actively in them and they directly influence his/her development, characterized by the person’s direct participation, participation of people with whom he/she has closer relationships, communication between and knowledge about different contexts. The eco-system includes the formal and informal structures of a society and influences people in a direct way, including communication of the existence of supportive links and knowledge. Finally, the macro-system represents the ideology and the organization of the common social institutions of a specific culture or sub-culture.

In order to summarize and contextualize the present study, I follow the idea of the multi-causal and ecological models. In this context and as outlined in the introduction, the present dissertation focuses on the meso-systemic and partly eco-systemic level, while it refers to the micro-system through clinical and psychological literature already existing in the field, and to the eco-systemic and macro-systemic level using existing causal sociological models mentioned above.

In addition to strict causal models, we must also mention the psychosocial processes which facilitate violence by dissimulating, naturalizing and hiding violent acts and their consequences or by negating one’s own vulnerability, by exaggerating and idealizing or by minimizing or ignoring its importance (Corsi and Peyrú 2003, 47-63). Since terms such as causes, risk factors and vulnerability appear in nearly all studies that have been done on sexual violence, it thus becomes necessary to enunciate them and discuss their content. Nevertheless, these concepts have (only) been empirically detected and in some cases there is no deep and
theoretical knowledge available on them and on their mutual overlapping and interaction. Thus, it may be difficult to determine if they constitute causes, risk factors or consequences of sexual violence. Consequently, they should be treated with caution.

In addition to causes, risk factors are commonly referred to. In contrast to causes, they focus on causal relations from the individual perspective of a person and his/her risk or probability of suffering sexual violence, as a result of belonging to a specific group of people\(^\text{116}\). They are linked to the following elements: First, factors of primary causal efficiency - basically composed of cultural and educational aspects, which are supposed to generate violence as a naturalized form of interpersonal power relations\(^\text{117}\) - ; second, associated factors which do not act as causal elements of violence but whose presence increases the probability of its occurrence and/or the seriousness of its manifestations\(^\text{118}\); third, factors which contribute to the perpetuation of the problem: these factors, deriving from the malfunctioning of institutions, impede the early identification of the problem. They represent a key-element in the causal chain, following their ecological meaning\(^\text{119}\) (Corsi 2003, 32).

Vulnerability is another term which is linked to the causes of violence and risk factors and refers to those elements which increase people’s probability of suffering sexual violence. The WHO (Krug et al. 2002, 157) mentions the following as elements that raise one’s vulnerability:
- being married or living with a partner
- being young
- consuming alcohol or drugs
- having already being raped or abused sexually
- having many different sexual partners

\(^{116}\) As being young, female, old, handicapped or black among many others.

\(^{117}\) Cultural guidelines and norms which maintain gender inequality, gender socialization according to stereotypes, vertical and autocratic family organizations, female socialization of defenselessness, male socialization as regards the use of force and power in order to resolve conflicts, exposure to domestic violence between one’s parents during childhood and adolescence, etc.

\(^{118}\) Stress factors can be: economic, social and concerning work life; consumption of alcohol and/or drugs; etc.

\(^{119}\) Absence of an adequate legislation or difficulties in the application of the existing one, lack of police and judicial agents’ ability to attend to cases in an adequate manner, lack of public health agents’ capacity to identify cases, psycho-pathologization of the problem by different supportive services, absence of common and social networks of support, etc.
- being involved in sex work
- poverty.

This WHO-list of factors might seem surprising and even paradoxical, because they reflect the different manifestations of sexual violence -from rape by a husband or partner to exploitation and rape of sex workers-, while also mixing different variables and levels -such as age, risky conduct or socio-economic variables. Furthermore, some elements are missing, such as family background. In this sense, the list suffers from insufficient reflection on the factors it includes and misses an analytical framing.\textsuperscript{120} In the paragraphs that follow, I will now move on from causal models to a discussion of individual and social consequences in the following paragraphs.

### 3.2.3. Individual and social consequences on sexual violence

As a result of the predominance of clinical literature, most studies concentrate on psychological consequences for victims and related to mental health issues, referring little to social consequences. Therefore, I will engage in further discussion of their findings in this chapter, particularly because, in accordance with a broader ecological approach, individual and psychological aspects and reactions must -at least- be acknowledged. Thus, I will provide here a brief overview of the medical and clinical literature in this field, presented according to immediate, short, middle and long-term consequences.

Regarding reactions during sexual assault, Feldmann (1992) provides the following list: blocked capacity of perception, sensation of alienation, disconnection from reality, sensations of unreality and mental vacuum, nausea, vomiting, loss of consciousness and sensations of panic, such as feeling paralyzed, defenseless and ceding (Feldmann 1992, 31). Consequently as I have already argued, it is possible to say that traumatic events overwhelm the common individual system of protection and care which normally offer a sensation of control, connection and meaning.

Traumatic reactions happen when an active response in the face of a threat

\textsuperscript{120} Compare the enumeration of the London Rape Crisis Center, p. 16, and its paradoxes.
or a violent act—whether resistance or flight—is not possible (Herman 1992, 33-34).

Consequently, in the short term, sexual violence may generate serious distortions of psychic balance such as fears, anxieties, self-doubts and feelings of guilt. In the long term, these feelings may develop into mistrust, fear of leaving one’s home, sexual problems, fears concerning society, depression, exhaustion, anxiety in the street, reduced social activity, disturbances of sleep, poor perception of one’s health and health problems, somatizations, negative sensations regarding men and masculinity, nightmares, self-harming and suicide attempts (van der Kolk et al. 1996, 171). 121 Specific to sexual victimization is the violation of the intimate self, of trust, of identity and of duty. Its social dynamics can be summarized as following: loss of one’s safety net, repression, isolation and blame, and changes in relationships (Quina and Carlson 1989, 26-31). To recapitulate, medical and psychological literature distinguishes between an acute period of disorganization and a long period of reorganization in the case of a single and particular victimization. In the case of prolonged victimization, the first period mostly becomes chronic and its symptoms may develop in a more severe and intense way (Feldmann 1992, 33). 122

Apart from the type of sexual violence and its seriousness and intensity, the victims’ recuperation and reintegration also depend on the time which elapses between the first assault and the therapeutic intervention. According to Feldmann, if a therapy is started during the first three months after sexual assault, between 20 and 25% of the victims can continue living without symptoms. Without an immediate and adequate intervention, the symptoms and habits become more and more chronic (Feldmann 1992, 37), and therefore also more and more difficult to treat. These clinical consequences, which might follow a sexual assault (or any

---

121 Research has been done concerning the psychological and emotional effects on the primary victim individual as well as the physical consequences, such as chronic diseases, headaches, eating disorders, gynecological symptoms, irritable bowel syndrome, damage to the urethra, vagina or anus (Morrison 2007, 2).

122 “In a clinical setting, a woman’s reaction to sexual violence is treated as an individual, medicalized problem that must be “fixed”. The problem is that in the context of trauma there exists an individualizing tendency of many branches of therapeutic sciences such as psychiatry and psychology, combined with a historical tradition of perceiving the words of women (particularly about violence) as untrue, irrational and hysterical […]” (Morrison 2007, 25).
kind of trauma), are subsumed in the term posttraumatic stress or posttraumatic stress disorder (PTSD)\textsuperscript{123}. This disorder includes the following characteristics (Krahé and Scheinberger-Olwig 2002, 64-65):

- An event which threatens or attacks a person’s physical integrity and which entails intensive sensations of fear and defenselessness, as well as shock.
- Flashbacks, which mean the victim involuntarily and mentally re-experiences the episodes of sexual violence and traumatization.
- Avoidance and insensitivity.
- Accelerated excitation – alterations of sleep, problems of concentration.
- Persistence of the symptoms for more than a month.

In addition, Fischer and Riedesser (1998, 59-61) focus on the paradoxes of traumatic situations: first, traumatic situations are characterized by the impossibility of an adequate reaction. This paradox may continue throughout a victim’s whole life, over which the victim continuously struggles to integrate the psychologically and physically overwhelming experience into his/her life in a permanent interplay between avoiding or controlling one’s memory and accepting it, in order to prevent further panic and stimulus satiation. From the outside, this inner struggle and destruction of one’s self-conception and world-conception mostly remains unseen and unsuspected. Therefore, the main assumptions of their specific ecological-dialectic trauma-model are the following (Fischer and Riedesser 1998, 61):

- Traumatic experiences have to be considered in their dynamic process and evolution.
- The key moment of the traumatic process is the paradox between existentially threatening situations and lack of adequate reactions.
- The traumatic experience occurs within the psycho-ecological context of the social network.\textsuperscript{124}

\textsuperscript{123} Like all psychopathologies, the concept of posttraumatic stress is an historic construction influenced by practices, technologies and discourses, which become visible in the diagnosis, study and treatment of the so-called mental illness. Posttraumatic stress was first developed as a diagnosis for the survivors of the two world wars and the holocaust. Later, the concept also started being used for victims of sexual violence. Nevertheless and even today, the victims’ reactions might still be misunderstood and be interpreted as exaggerated and hysterical behavior (Künzel 2003a, 239-240).
In addition to the violation of autonomy and physical integrity, another key element—at both individual and social levels—is the feeling of guilt which sexual violence often generates in the victim. Another consequence is the attempt that many victims make to control their sentimental relationships and to maintain an intimate and close relationship while remaining emotionally distant. This often has a negative effect on the stability of their relationships, confirming the model’s hypothesis on paradoxical consequences of trauma.125

After this short summary of individual and psychological consequences, I come back to the social and sociological dimension of sexual violence, since the same symptoms are read and understood differently according to the researcher’s perspective and discipline. For example, on a psychological level, one of the consequences of sexual violence is often described as the victims’ incapacity to act. But on a sociological level, it is impossible for a person not to act at all, although the social actor may be unaware of his or her actions on an individual and psychological level. Even not doing anything at all should be sociologically seen as an action, often preceded by a decision and linked to a specific meaning. Subject-orientated sociology, furthermore, links actions to meaning, primarily attributed to the acting individual person even though the actor may not necessarily be aware of the individual and social significance of his or her actions.

As mentioned above and applying PTSD to rape victims, rape can be connected to an extensive body of research on treatments that seem to be

---

124 According to Fischer (Fischer and Riedesser 1998, 72) a traumatic situation never ends after an objective period of time, but it needs the reconstruction of the inter-human and ethic relations by means of the acceptance of causes and guilt.

125 Traumatic events often question basic human relations (Quina and Carlson 1989, 31-32). They increase the risk of breaking the bonds with one’s family, one’s friends, one’s love and one’s community. They often shake up and debilitate one’s self-construction and self-confidence, as well as one’s confidence in others. In this sense, they can undermine systems of values and faith, which generally provide meaning for everyday experiences. Trauma obliges the majority of victims to reexperience all their previous conflicts regarding autonomy, initiative, competency, identity and intimacy (Herman 1992, 52). In this sense, their intimate relationships are conditioned by the necessity for protection, care, fear of being abandoned, and exploitation and they oscillate between retreat from intimate relations and the desperate search for intimacy. By seeking security, some victims look for people with strong authority (Herman 1992, 111).

Very often, the victims’ sense of confidence is damaged. A lot of traumatized people feel abandoned, lonely, expelled from the human system of care and protection which maintains life. Consequently, a sensation of alienation and disconnection transcends all relations, beginning with the most intimate and private bonds up to the more abstract affiliations of community and religion.
extremely valuable for the victims’ treatment (Morrison 2007, 3). In this context, it is necessary to mention that traumatic events have a tendency to disconnect from their source and to continue existing on their own. In this type of fragmentation, the trauma breaks down the victim’s complex system of self-protection, of perception and values. On an individual level, this is demonstrated by physiological mechanisms which may produce a partial or complete memory-loss and a disconnection between emotional and rational memory. But a similar phenomenon has been described at a social level regarding the appearance and disappearance of sexual violence as a social topic and problem. It may very well be that the individual detachment of an event and its consequences are partly transferred and reflected in the historical and social dimension of sexual violence (Herman 1992, 34; Wasco 2003, 312).

In order to recapitulate what I have discussed this far within this chapter, the probability of suffering symptoms of posttraumatic stress depends primarily on the nature of the traumatic event. Nevertheless, individual differences and the specific cultural and social context play a fundamental role in the way the disorder develops (van der Kolk et al. 1996, 142), according to the ecological concept of trauma. Furthermore, traumatic events may produce damage in affective relationships and the victims’ social environment. Reactions and responses in support of the victims may mitigate the impact of the event. On the contrary, a negative response may aggravate the damage and the traumatic syndrome (Herman 1992, 61).

Both on an individual and social level, a sexually violent incident seems to represent a social as well as life event, one that is so tremendous and so complex in all its varieties and consequences -both on an individual and social level- that it cannot be assumed by the social system in its entirety, given its overwhelming character. Its integration into social and collective consciousness appears to be a process which integrates and incorporates extensive knowledge of sexual violence step by step. This is why, most frequently, social attitudes tend to deny the violent character of sexual violence, reducing its complex web of nature of sexuality, violence and victimization to the apparently simple item of sexuality. Therefore, some call it simply «sexual intercourse», others «violence against women»
and others «a violation of human rights». This results in the fragmentation of the social phenomenon sexual violence and induces -at least partly- its social invisibility. This lack of a clear definition and terminology increases its complexity and permits doubt and uncertainty to reign among victims and society. But it also seems to inhibit both the emergence of a sense of community among victims and their social recognition.

3.3. Some victimological words on sexual violence

According to Fattah, “the issue of victims’ rights has been largely a valence issue”\textsuperscript{126} due to the fact that crime victims are “natural targets for human sympathy” (Fattah 1992, 3-4). But as already shown in the previous chapters, this is not always the case for victims of sexual violence, who often have to face ambiguous, conflicting and morally and emotionally charged reactions and stigmatization from their social environment. One of the main issues concerns to be a «true, innocent and ideal victim». Although innocent and vulnerable children seem to be the «perfect and ideal victims», even the sexual abuse of children is highly polarized and polemized, partly due to the social fear of false allegations. Hence, victimization is an “interactional, discursive process rather than simply an objective fact about some persons or groups. Victim category membership must be appropriated interpretively; it cannot be assumed.” (Davis 2005, 529) After having already referred to problems regarding the concepts of victimhood and aggressor status, in this chapter, I will go on to study this issue from a victimological point of view\textsuperscript{127}.

\textsuperscript{126} Barbara Nelson (1984) distinguishes between valence issues and position issues, terms coming from electoral research. According to her, a valence issue, "is one that elicits a single, strong, fairly uniform emotional response" whereas a position issue "engenders alternative and sometimes highly conflictual responses" (according to Fattah 1992, 3).

\textsuperscript{127} Victimology does not represent a scientific discipline, nor an academic field (similar for example to criminology or ecology). It is academically influenced by law, sociology, psychology and criminology. Moreover, some consider it to be simply a specialty within criminology and not an independent discipline. Victimology includes two areas: first and infused by humanitarian and reformist ideals, it deals with society’s response to the plight of victims; and second, it studies the social and psychological processes determining criminal victimization (Fattah 1991, X). The term victimology was used for the first time by Benjamin Mendelsohn and simply means the study of the victims. Since victims’ rights have been a major issue in criminal law and procedures for the last two decades, the understanding of victims has become of more interest, as has victimology.
3.3.1. The victim – aggressor relation

Victimological studies (such as Meidinger 1999, Michaelis-Arntzen 1994, Katz and Mazur 1979, Fattah 1991 and Fattah 1992) concentrate mainly on the analysis of specific socio-demographic, behavioral, temporal and situational characteristics of the victim and the aggressor, including the victims' levels of resistance, mainly asking «Who is the victim?», «Who is the rapist?» and «What was the victim-aggressor relationship?». An example of an early specific typology regarding the victim-aggressor relation in rape is the following (according to Meidinger 1999, 25):

1. Victims of sight: Stimulus for the rape always comes either consciously or unconsciously from the victim. There is no victim-aggressor relation.
2. Victims of situation: Rape happening after a neutral or erotized pre-contact.
3. Victims of a plan.
4. False victims.

This (early) classification of rape seems to be rather incomplete, because all victims who do not fit to any of the first three types are supposed to be false victims or at least not completely innocent victims, including women raped by their partner or husband and most women suffering date-rape. Furthermore, it includes a major participation of the victims and responsibility (if not culpability) for the rapes.

Michaelis-Arntzen (Michaelis-Arntzen 1994), for example, lists 10 different situations of rape as regards the specific implications of previous (sexual) contacts between the victim and the aggressor, different levels of consent and misunderstandings due to cultural and social differences and lack of knowledge. Therefore, another and more comprehensive

---

128 In this sense, victimology remains quite close to criminology, by means of screening and profiling victims.
129 See pp. 86-90 on victims’ classifications.
130 According to Michaelis-Arntzen (1994), a lot of “false rapes” were considered to be “provoked rapes” due to previous sexual contacts between the victim and the aggressor or sexual excitation (either concerning the victim's clothes, the specific situation (night, discotheque, etc.) or the implication of alcohol). Furthermore, she discusses the problems regarding: the victim's partial consent to sexual interactions (such as petting), but their refusal of sexual penetration or specific sexual practices (such as anal intercourse), which then might be experienced by the victim as sexual violence; the victim's previously withdrawn consent to sexual intercourse (often young or alcoholized victims); the victim's posteriori corrected and withdrawn consent; lack of victim resistance; repeated rape by the same aggressor; and rape after previous consented sexual intercourse with the same aggressor.
classification -including some of these items- lists (Schwendinger and Schwendinger 1983, 46):
- date rape – between persons who have known each other for a brief or a long period of time;
- hitchhike rape – no previous relationship;
- blitz or sudden-attack rape – without warning and without prior interaction;
- felony rape – not planned but a by-product of a robbery;
- confidence rape.

In contrast to the first typology, the last one does not hold anybody (nor the victim nor the aggressor) responsible for the rape, but simply describes the previous situational type of contact between the victim and the aggressor. One of the central issues is that “there is strong empirical evidence suggesting that criminals in general do not choose their victims at random” (Fattah 1991, 16). Therefore, random victimization evidently does not exist, which means that there must be at least some kind of relation between the victim and aggressor, even in the case of a blitz rape with specific situational features, such as the aggressor recognizing and taking advantage of the victim’s vulnerability.

In this context of attributing responsibility or culpability for the sexual violence, the victim-aggressor-relationship is a crucial feature, because the legal system mainly looks at the “co-culpability” of the victim (Meindinger 1999, 33) in order to -at least partly- exculpate the aggressor. Consequently, difficulties arise regarding the assessment of the reliability of testimonies on rape crimes (Michaelis-Arnzen 1994, 28-45) due to contradictory but typical victim behavior: victims may present themselves voluntarily at the crime scene; they may accept oral-genital interactions; they may leave the crime scene together with the aggressors; they may spend the night with the aggressors (before, this was not considered as a rape); they may report the offence in a contradictory way; etc.

Knowledge of the victim-aggressor-relationship is also important for another reason, because “the existence and closeness of the relationship have a strong impact on the traumatic effects of sexual victimization” (Fattah 1991, 171). According to Finkelhor (1979), it has been proven that experiences with close family members are potentially more traumatic than
those with acquaintances or strangers. Therefore, he suggests a number of explanatory possibilities:

“1- the closer the relationship, the greater the violation of the child’s trust and security;
2- the closer the relationship, the more complicated the family dynamics triggered by the sexual relationship;
3- the closer the relationship, the more serious the taboo violated and, hence, the greater possibility for guilt “ (according to Fattah 1991, 171).

Furthermore, victimological studies have shown that there seems to be a constant movement between victim and aggressor roles. There is an ostensibly high risk that the victims of today become the victimizers of tomorrow. In this sense, we may say that the passage from victim to aggressor does not seem to be a difficult one (Fattah 1991, 150).

### 3.3.2. Some victim classifications

Apart from the victim-aggressor-relationship, “victim characteristics have always had a measure of significance for the treatment of offenders. Throughout history, the probability of arrest and prosecution, as well as the severity of the punishment, has varied according to the respective statuses of the victim and the offender” (Walsh 1992, 295). And these statuses are mainly conditioned by different sources of victimization. According to Fattah’s classification (Fattah 1991, 7), the present dissertation refers only to victims of human action and by means of concrete human actions by others, excluding self-inflicted victimization and victimization by nature. Furthermore, and although structural victimization may play a role in the general social context in which the sexual assaults take place, I will concentrate mainly on criminal victimization\(^{131}\), because most of the victimizing assaults reported by the interviewees, although never having

\(^{131}\) Criminal victimization is “victimization caused by, or resulting from, a criminal offense, which is an act committed in violation of the criminal law” (Fattah 1991, 10).
been reported to police, would represent a crime.

Figure 9:

Victim Classification by Different Sources (Fattah 1991, 7)

Another typology distinguishes between primary and secondary victimization. Whereas primary victimization refers to the direct involvement and assault of the individual victim in a face-to-face offense and its consequences; secondary victimization, at least in the case of victims of sexual violence, occurs largely within the victims’ social environment - families, friends, police, social services, health services, etc.-, mainly by questioning the victims and their reactions and behavior, by holding them at least partly responsible for the sexual assault, by exposing them to more physical and psychological stress and by not protecting them (Fattah 1991, 12; Krahé and Scheinberger-Olwig 2002, 64-65 and 71).132

132 Gilfus (Gilfus 1999, 1251) criticizes the definition of posttraumatic stress and its symptoms, because the concept is ostensibly based on one-sided assumptions which reflect a white, middle class and not victimized profile. Greater sensitivity regarding variables like gender, class and ethnic origin might be needed in order to achieve a broader understanding of the phenomenon. In one of the few studies done outside the previously mentioned context (white, middle class, not victimized), female refugees of El Salvador, for example, mentioned hot flashes as consequences of sexual violence (Wasco 2003, 314).
Furthermore, instantaneous victimization describes the stereotypical conception of victimization, looking upon victimization as a single event of brief duration. This concept is opposed by continuing victimization, multiple victimization or series of victimization. On the one hand, information about the victim of sexual violence has also come from studies based primarily on aggressors (Katz and Masur 1979, XII), biased by the aggressors’ perspective. There is a common attempt to find characteristic types and factors which are specific to aggressors. In a comparison of different studies treating the aggressors’ alleged profile(s), Feldmann distinguishes three central characteristics: first, hostile and aggressive intentions in 55% of the aggressors; second, the wish to wield power in 40% of the aggressors and, third, sadistic satisfaction linked to their drives in 5% of the aggressors (Feldmann 1992, 8). Other characteristics refer to sociopaths with a high level of criminality (between 30% and 40% of the cases) situational strains which result in stress vented through violent acts, conflicts with one’s male identity, psychosis in less than 10% of the cases and sadism (Feldmann 1992, 11). But any research into the aggressors’ traits poses questions regarding or demonstrates the relationships between the key concepts like power, violence or socialization and culture.

On the other hand, victim studies seem to concentrate on the following variables:
- Type of offence (specifically: penetration (yes/now; with what?); use of force; number of aggressors; type of language and gestures used to express non-consent by the victim; committed vs. attempted offence);
- Type of complaint (time passed between assault and complaint);
- Dark figure of crime;

133 Compare p. 57 on the overlapping of different types of violence against women.
134 According to Katz and Masur (1979, XII), one of the first empirical studies of rape victims was done in 1962, in Denmark, by Svalastoga. He included victims of all ages and excluded victims of other forms of sexual assault.
135 The aggressor’s profile or the aggressors’ possible profiles are often treated and analyzed. In the present study, the term «profile» is not used largely for two reasons: first, the results of different investigations which attempted to study and detect the aggressors’ alleged profiles show lots of variations according to the focus and the methodology of the study. Consequently, it is possible to say that there is no single and consistent profile, but different characteristics and features which change regarding their influence and importance according to the methodological approach used in the respective studies (compare Feldmann 1992, 8). Second, to present the aggressors’ profiles -as well as the victims’ ones- would generate the sensation of «knowing all about the issue» and «that is the way it is». It would hide the main questions which are still to be answered regarding sexual violence and its actors.
Factors of victim’s proneness and vulnerability;
Age of subjects (victim and aggressor);
Sex of subjects (victim and aggressor);
Previous relationship between victim and aggressor;
Victim-victimizer interactions (typology of responses, resistance level,…);
Spatial patterns (proximity / distance).

Following Katz’s and Mazur’s early study (1979) on *Who is the rape victim?*, the profile of a rape victim is the following: female, aged 14 or 15, belonging to an ethnic minority, coming from unusually large families with many children, physical health problems in family, parental problems between parents, drug abuse among family members, crime and delinquency among families, and emotional deprivation (selected and summed up from: Katz and Mazur 1979, 33-55). But, as mentioned earlier regarding aggressors’ characteristics, profiling does not reflect the complexity of sexual victimization.

One of the central features, which appears in main victim-classifications, is the blame or parted blame of the victim. In Mendelsohn’s typology, victims are classified as follows:
1- The victim with minor guilt;
2- The victim who is as guilty as the offender;
3- The victim who is guiltier than the offender;
4- The guiltiest victim;
5- The imaginary victim.

The born victim -in vogue in the early times of victimology- but considered today a fatalistic notion influenced by determinism, is being replaced by other concepts of probability such as predisposition, propensity, proneness and vulnerability to victimization (Fattah 1991, 96).137

---

136 That is the reason why victimology is often associated with the concept of “blaming the victim”.
137 Nevertheless, recent findings in epigenetics show that, for example, extreme stress caused by abuse in childhood, leaves an epigenetic mark that influences people’s genome. This specific epigenetic mark seems to be passed on to the offspring (Szyf et al. 2009). Please compare also footnote nº 271, p. 259.
The previous classification reflects the social perception of sexual violence and of its victims. According to Wolfthal’s study, medieval and early modern rape images often depict the women’s real reaction to rape, showing the victims as lifeless corpses, broken bodies discarded on the ground or resembling mourning figures (Wolfthal 1999, 182-183). These pictures as well as the myths regarding sexual violence socially influence its perception and its evaluation. Some of them are:\footnote{138 The chapter on the historic dimension of sexual violence refers to and specifies some of these myths in their cultural and social context.}

1- Women’s alleged masochism according to which women experience rape as a moment of pleasure.
2- Victims’ contribution to the action.
3- Victims’ dubious reputation.
4- The impossibility of raping a woman against her will due to technical and anatomic factors.
5- Doubts concerning the victims’ credibility.

(Feldmann 1992, 18-21)

The majority of these myths have already been mentioned and contextualized in previous chapters. They are closely linked to the social perception of women and their position in society, as well as the lack of real understanding of the role of violence in general. They are mostly based on the social construction and cultural script linked to women and men and their social image. According to Bourdieu’s analysis of male domination and his synoptic scheme of pertinent oppositions (Bourdieu 1998, 17), there is a socially constructed division between the sexes. Primarily using the body as an element of distinction, it causes a specific perception of incorporated male and female attitudes and features. In accordance with this list, it seems difficult to think of «female violence», because the use and practice of domination is clearly attributed to the opposite gender.
Some aspects and concepts, attributed to femaleness, are:

Figure 10:

<table>
<thead>
<tr>
<th>MASCULINITY</th>
<th>FEMALENESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>dominant, dry, above, outside, open, empty, fire, sun, gold, sky, red, heat, south, day, noon, summer, white knife, gun</td>
<td>dominated, humidity, below, inside, closed, full, blood, dream, earth, cold, north, night, darkness, winter secret, magic, bitch, traitor or insidiousness</td>
</tr>
</tbody>
</table>

Bourdieu’s Synoptic Scheme of Pertinent Oppositions (Bourdieu 1998, 17).

Respectively, men—in accordance with social prescription of masculinity—can never be victims, although they may have suffered serious violence. This social stigmatization is still reflected in the treatment which male victims receive.\(^\text{139}\)

Furthermore, it is easy to understand why women are socially seen as victims and connected to victimization. Bourdieu’s attributions also explain the lack of faith in the female and the victims’ credibility and actions, since female image is linked to characteristics such as «secret», «bitch», «traitor» and insidiousness\(^\text{140}\). Moreover, society only recognizes victims if they behave according to social expectations which are closely linked to Bourdieu’s concept of symbolic violence and his previously presented synoptic scheme of pertinent oppositions. A victim has to play the role of victim by dressing and acting in accordance with the socially established image: she has to be a morally correct person, there should be no doubt concerning her innocence, she should be seriously hurt (physically or psychologically), she should express her discomfort, she should react

---

\(^\text{139}\) Apart from this symbolic explanation, the often used quantitative argument is that—at least proportionally—there are more male aggressors and female victims than vice versa. But, these numbers conceal the social image both of the victim and the aggressor.

\(^\text{140}\) As already seen, religion had and still has an important influence in this regard, idealizing women, on the one hand, as virgins and saints and condemning them, on the other hand, as sinners and morally weak individuals.
emotionally\textsuperscript{141} and she should not wear provocative clothes. Only when the victim fulfills these necessary conditions may society feel sympathy and legitimize her situation. If she does not fulfill these social expectations, social actors may negate her status as victim. In this sense, in one regard the victims’ image may correspond with the women’s image in terms of weakness, domination and blood, for example. But on the other hand, women’s attributes contradict the ideal profile of a victim, for which reason women are often considered «participant» or «collaborative» victims (Davies 2005a, 38) and therefore false or socially unacceptable victims. Hence, any proactive behavior which would transform the victims-at least theoretically- into more participatory and responsible social members, is officially required of them, yet at the same time, society transforms any active conduct on their part into an accusation, (partially) negating their victim-status. Consequently, a variety of social attitudes produces a kind of perverse and false imaginary, reducing acknowledgment of violent assaults. Thus, the reduction of (sexual) violence against women seems to be an idle promise, yet little sincere will to change its reality is displayed.

According to Badinter (2004, 14-15), feminism partly fostered this imagery by upholding the social connection between femaleness and victimization. The heroic figure of fighting female spirit and superwomen apparently were slowly substituted with the imagery of helpless, defenseless victims of male dominance. This systematic victimization of women -and the respective accusing and condemning of all men- helped the feminist movement to unify its external discourse (Badinter 2004, 17). The main protagonists of this movement were Susan Brownmiller on rape, Catharine A. MacKinnon on sexual harassment and Andrea Dworkin on pornography. They described the continuum of male violence against women for radical American feminism and asked men to change their sexuality. Dworkin even compared women with survivors of concentration camps\textsuperscript{142} and regarded violation as “a synonym for intercourse” (Dworkin 1987, 122-123). Thus, this feminist strategy consisted of amplifying the

\textsuperscript{141} Only if a victim testifies in court, she is asked to display a rational and moderate attitude. Discrepancies might affect her credibility.

\textsuperscript{142} Survivors of concentration camps might be considered as the victims of all victims.
concept of sexual violence and of female victimization, sometimes approximating an almost arbitrary assignment. But according to Barbara Kavemann (Kavemann 2001, 2), it represented an important moment in a necessary and sometimes painful struggle to obtain a broad public recognition of violence against women in everyday life. Although it may have been important for feminist political struggle, it generated and intensified female fixation on victimization and male fixation on aggressiveness. In conclusion, victims of sexual violence may display some specific features, such as the denial of the harm that has been done them, and they are blamed by a society that devalues, denigrates and disparages them (Fattah 1991, 140). They thus become a group with a specific relation to victimization.

3.4. Research question and objectives

Guided by my first impressions working in the field of sexual violence and counseling its survivors\[143\] and Erikson’s first study on survivors of a natural catastrophe, the present dissertation parts from the general hypothesis that there is an “enormous gap in experience” (Erikson 1976, 11) between people affected and non-affected by sexual violence. Since this gap has primarily been described by means of medical and psychological symptoms or deviant and pathological behavior, but scantily in its sociological dimension, the central research question of the present dissertation is the following: How do victims of sexual violence cope with their everyday lives? Do they have specific forms of conducting their everyday lives? And if so, how can such forms be described?

Consequently, and due to its descriptive character, the present study can not aim to quantify the incidence of the phenomenon in the general population of victims and non-victims and to compare affected and non-affected women (both victims and non-victims), because its characteristics and variables have yet not been described and are still unknown. Hence, I follow the research perspective of “narrative sociology” (Oltra et al.

\[143\] Compare p. 10.
Accordingly, the present study can not be based on hypotheses in their narrow sense and their verification, but on guiding research questions. This procedure corresponds with the standards of the chosen research methodology, presented in the next chapter, which does not attempt to verify a theoretical assumption but to discover a new (small) theory during the analysis of the data itself, guided by the research question(s) and objectives of the research.

Hence, the following specific research questions have guided the present study:

1. What is the impact of the paradoxes generated and linked to sexual violence, both at the individual and social levels, on the victims' everyday lives and how do they become visible on a daily basis?
2. Do victims of sexual violence conduct their everyday lives in specific ways and how can they be described?
   2.1. How can the different dimensions of their Conduct of Everyday Life (thematic, temporal, spatial, social, medial and rational) be described and what is their underlying logic?
   2.2. How do victims perceive their Conduct of Everyday Life and what meaning do they attribute to it?
   2.3. How can their Conduct of Everyday Life be described in relation to their daily flexibility and autonomy?
3. How do victims perceive themselves on a daily basis?
4. What is the impact of the victims' Conduct of Everyday Life on their social milieu and society?

Therefore, the study’s objectives are the following:
- Describe the everyday life of victims of sexual violence.
- Find different types or moments of Conducts of Everyday Life which are specific to victims of sexual violence.
- Study the specific and non-specific aspects of the Conducts of Everyday Life influenced by sexual violence.

144 According to Oltra and others (2004, 2), “narrative sociology” is a practical perspective which joins the scientific sociology with the meaning of time, the individual and / or collective biography and the fundamental necessity of the relation and the written text.
- Contextualize the victims’ Conduct of Everyday Life.
- Analyze the social perception of the victims’ Conduct of Everyday Life and the interaction between their social awareness, their impact and consequences from a sociological point of view.
- Reflect on the impact of the sexual violence both at the individual and social levels.
- Evaluate the social consequences of the individual and social strategies for coping with sexual violence.
4. Methodological approach

The present dissertation is centered on a new field which has been little studied on a sociological level and which is still in the first phase of exploration and consolidation. As seen in the previous chapters, its main objectives are the description of the Conduct of Everyday Life of victims who have suffered sexual violence and of their attribution of meaning regarding former. This objective corresponds precisely with the functions of the qualitative methods, which are supposed to depict and to convey the subjectivity of personal experiences. Furthermore, research on the topic of sexual violence has shown that important aspects of the phenomenon are difficult to recognize in quantitative studies due, for example, to an estimated high number of unreported cases and aspects such as memory loss, shame, guilt and stigmatization. Therefore, I have chosen qualitative methods in order to explore the phenomenon studied here and to describe and typify its complex realities. Specifically, the Grounded Theory of Strauss and Corbin (1996) and the L’Entretien compréhensif of Kaufmann (2004) were used to access, collect and analyze sensitive data on victims’ everyday lives and how they attribute meaning to it.

Methodological development has included the following elements: First and starting from the central question of the study, a qualitative interview guideline was developed, based on Helfferich’s prototype (Helfferich 2004). Second, the data was collected following the rules of theoretical sampling and includes 16 in-depth and semi-narrative interviews with women who have suffered sexual violence in their lives and some additional data such as medical reports and medical certificates. Third, I transliterated the interviews according to the system of analytic transliteration of conversations developed by Selting (Selting et al. 1998).

145 Qualitative methods pretend to describe persons’ realities by means of their internal emic perspective. The goal is to reach a better understanding of social situations and to highlight the structures, processes and patterns of interpretation of the studied social reality, through access to an inside vision. The exact and dense description of the phenomenon studied is not meant to merely represent reality, but tries to explain complexities and aspects of reality which deviate from the social norm. In this sense, qualitative methods open up new possibilities for knowledge. The point of qualitative research is to discover the new to promote understanding of complex situations. A literal translation from the French title into English is not possible. A close translation might be the following: the comprehensive / comprehending interview.
146 Compare p. 103.
147 Further, I conducted one interview with a non-affected woman. Please compare p. 110.
148 Compare annex 10.4., p. 334.
Fourth and finally, I analyzed the data following the principles of Grounded Theory according to Strauss and Corbin, using the computer-program Atlas.ti.

4.1. Methodological design

4.1.1. The methodological frame: Grounded Theory

Grounded Theory is mainly based on a specific process, characterized by a permanent dialogue between the researcher(s) and the social reality studied. It was first developed by Glaser and Strauss, through several studies in the medical field, dealing primarily with the subject of death and dying. Examples are: the Awareness of Dying (Glaser and Strauss, 1965); the Time for Dying (Glaser and Strauss, 1968); and The Social Organization of Medical Work (Strauss, Fagerhaugh, Suczek and Wiener, 1985). Furthermore, Grounded Theory has been used principally in the sociological field, but also in information technology and management.

Previous information on the phenomenon is meant to generate sensitive concepts (according to Strauss and Corbin 1996) which help to structure the researcher’s perception. Although this previous theoretical basis and sensitivity is often necessary, the starting point of Grounded Theory is not a theoretical assumption which is supposed to be verified; the objective of this methodology is the discovery of a new (small) theory during the analysis of the data itself. Therefore, the researcher generally does not start

---

150 Starting in the 70s and 80s, Grounded Theory developed into two directions. The first one guided by Glaser (and Charmaz) and the second one by Strauss (and Corbin). Of its differences, the following aspects might be outlined: First, Glaser insists on data-analysis based only on the data, «forgetting» all previous knowledge regarding the topic, whereas Strauss asks for and allows the use of previous knowledge by means of theoretical sensitivity, meaning that literature, professional and personal experiences, etc. are used to generate questions about the phenomenon studied and data, to guide the theoretical sampling and to supervise the theoretical results. Second, Glaser outlines different models in order to classify the codes and to generate the categories, whereas Strauss’s work is characterized by the paradigmatic model (a causal model which orders the categories according to: causal condition > context > phenomenon > intervening conditions > strategies of action and interaction > consequences). Regarding the diffusion of the two directions, it seems that Glaser receives more attention in the Anglo-Saxon context and Strauss in the Germanic context (Strübing 2004, 62-73).
with a deductive theoretical hypothesis, but a more or less general research question.\textsuperscript{151}

Through continuous moving back and forth to and from the field and between data collection and analysis, preliminary concepts are verified, changed and saturated. This whole process is called “circular” (Strauss 1987, 18).\textsuperscript{152} Collected data are considered to be «documents» providing a live register of human actions. Through interpretation of largely textual data, a model or theory is developed for the field and phenomenon studied. During the process, new techniques of data collection can be included, according to necessities of concept-development. Consequently, data collection is guided by the principle of “theoretical sampling” (Strauss and Corbin 1996, 148),\textsuperscript{153} which does not follow the guidelines of a representative sample, but the specific search for contradictory and contrasting examples\textsuperscript{154} in order to illuminate different aspects and levels of the phenomenon. Generally speaking, the data collection continues until no new aspects emerge from new material, following the principle of theoretical saturation.

As soon as data are collected, they are theoretically codified, a systematic and creative technique which assigns concepts, called “codes”, to specific paragraphs, called “citations”, which represent phenomena (Strauss and Corbin 1996, 43-44). Coding includes, for example, raising questions and providing provisional answers, as well as the permanent comparison with other (contrasting) data. All ideas and comments are recorded in protocols, called “memos” (Strauss and Corbin 1996, 169). In the beginning, the data is analyzed line by line, and later other techniques like axial or selective coding are used. The codes are concentrated into “(core) categories” (Strauss and Corbin 1996, 43-44) and their

\textsuperscript{151} Since the present phenomenon and its context are characterized by the lack of more detailed preexisting information (apart from clinical literature), I decided not to start from a specific theory and a specific hypothesis, at the beginning of the research, but to let the hypothesis and findings emerge from the data themselves, by means of Grounded Theory techniques. Hence, my first aim was simply to describe the victims’ everyday lives.

\textsuperscript{152} Compare figure nº 12, p. 113.

\textsuperscript{153} Compare chapter 4.2.1., pp. 104-119.

\textsuperscript{154} Extreme and atypical cases often reveal further or additional information, as they may reveal more actors and more basic mechanisms in the situation studied. Therefore, the selection of data - according to theoretical sampling- is oriented towards information, looking for extreme/deviating cases, cases with a maximum of variation or critical and paradigmatic cases (Flyvbjerg 2004, 45).
interrelationship is described. Thus, codes and categories build a dense network of concepts which are grounded in the data through linked citations, describing the specific grounded theory for the field studied as they emerge from it.

4.1.2. The in-depth interview

Corresponding with this general methodological frame, I chose the technique of the *entretien compréhensif*\(^{155}\) by Kaufmann (2004) for the in-depth interviews, because it enables us to become more conscious about the sensitivity of a topic and to reflect on its closeness to or distance from the delicate phenomenon that is studied.\(^{156}\) Hence, I have chosen this technique to guide the interviews and my role as an interviewer, as well as initiating a deep reflection on the obtained (interview) material. This specific method of a qualitative interview reveals many similarities with other techniques of guided interviews. In accordance with Grounded Theory, its objective is not the mere collection of data, but also the development of theoretical concepts (Kaufmann 2004, 9). Furthermore, it assumes the social construction of reality and denies a clear division between object and subject, between individual and society (Kaufmann 2004, 23). In this context, interviews on everyday life may even include doubly-constructed data: first, the interviewees may socially construct their actions and attributions in the palpable and common field of everyday life and, second, they may reconstruct their everyday life on a narrative level. As this double construction is further carried out in close interaction with society, the comprehending interview seems to be the adequate technique, following the same assumptions and guidelines.

Thus, the interviewer should be aware of the fact that the interviewees construct social reality at the moment of the interview. The comprehending interview does not tend to organize and consider the

---

\(^{155}\) Compare footnote nº 146, p. 97.

\(^{156}\) This is of special importance in the context of interviewing (mainly) highly traumatized people, because their narrations are often characterized by two main tendencies: either a great desire to talk about the traumatic event and consequences, in order to get relief, or high resistance to telling their story. This ambivalence between wanting to talk and wanting to remain silent at the same time has to be considered regarding the design of the narrative interview (Loch 2008, 3). Furthermore, the present research includes talk about sensitive, stigmatized and emotional topics, which require a certain technique. The interviewer should neither insist too much on these topics nor avoid them.
interview as a natural and normal situation, but it explicitly qualifies the situation as exceptional and experimental. Nevertheless, it functions as an “echo of the ordinary situation of identity fabrication”\textsuperscript{157} (Kaufmann 2004, 60). This means that the singularity of the meeting between the interviewer and the interviewee should be accepted and from this starting point the will to normalize the situation is generated.

The \textit{entretien compréhensif} technique, as is the case for all in-depth interviews, obliges interviewees to express themselves in a sincere way. If they do not, but rather provide inconsistencies and contradictions in their summaries, they will have to face the consequences of their contradictory narrative.\textsuperscript{158} Therefore and according to Kaufmann, the comprehending interview produces “effects of truth”\textsuperscript{159} (Kaufmann 2004, 69). In addition, the interviewee is situated in a field of tension between two poles. On the one hand, there is a feeling of getting completely involved in the interview and partial abandon of self-control and, on the other hand, there is a drive to establish limits and maintain control.\textsuperscript{160}

In order to detect and if possible prevent some of the aforementioned strategies, the comprehending interview allows and permits a reflection on the role of the interviewer, interaction with the interviewees and possibilities of intervention during the interview in order to modulate and guide the mutual interaction. Hence, the \textit{entretien compréhensif} does not require

\textsuperscript{157} My translation. Original version: “L’entretien fonctionne en effet comme une chambre d’écho de la situation ordinaire de fabrication de l’identité » (Kaufmann 2004, 60).

\textsuperscript{158} Regarding the representation of their everyday life, the interviewees might revert to two modus operandi:

1. They may tend to present their actions and expressions as something coherent, presenting them in a clear and structured way, either corresponding to general social norms or to social norms linked to victimization.

2. They may self-analyze their situation by questioning themselves, maybe even taking on the responsibility for the assaults.

The interviewer is supposed to identify the interviewees’ behaviors and to adapt their style to the corresponding interview.

\textsuperscript{159} My translation. Original version: “Les effets de vérité” (Kaufmann 2004, 69).

\textsuperscript{160} As a result of this duality, many expressions represent hidden discoveries, which can only be read between the lines. For example, very often, the interviewees do not talk of “I”, but use the neutral and impersonal form. Consequently, it is the interviewer’s task to discover and distinguish when an interviewee hides behind the opinion or actions of other people. Regarding the present study, as many of the interviewees have had previous contact with clinical and therapeutic settings, there is the danger that interviewees simply repeat their clinical biography, hiding, for example, behind clinical terms. Another difficulty seemed to be dissociation in the interviews, which might be shown either by laughing (Loch 2008, 7) or by the interviewees’ narrative orientation towards the present (Loch 2008, 15). Both strategies produce more distance and allow the interviewee to adopt an outsider view on an emotionally difficult topic.
impersonality on the interviewer's side, because the impersonal interview - although constructing a fictitious situation in which a minimum of two people are always involved - impedes interaction (Kaufmann 2004, 77). The technique demands a discreet, but strong presence of the interviewer.\textsuperscript{161} Interventions should not confirm or judge the interviewees' account, but they should foster the interviewer's understanding of their narration, even in case of ambiguity. Furthermore, the interviewer should never confirm the interviewees' roles, as victims for example, or their depreciation of others, in order to maintain the possibility of rectifying their narration and to prevent re-traumatization\textsuperscript{162}.

The chosen style for the in-depth interview of the present study is semi-narrative, the interviewees relate what seems important for them and the interviewer follows their path and direction, slightly structuring the interview by means of a questionnaire guideline.\textsuperscript{163} Kaufmann's approach, developed for the \textit{entretien compréhensif}, specifies and completes the Grounded Theory developed by Glaser and Strauss (Strauss 1987). Its principles require a specific modality of permanently going back and forth between understanding, active listening, distance and critical analysis. According to this technique, theory should be established from bottom-up, grounded in data. It might seem that these two techniques do not meet the apparent rigor of the standard interview and the quantitative techniques, yet we could argue that the imposition of a supposedly strong and more rigorous model seems to detract from qualitative possibilities of discovery (Kaufmann 2004, 25-26). The approach suggested here is meant to permit systematic understanding and deep description of the object that is being studied.

\textsuperscript{161} On a practical level, this means active listening, encouraging the interviewee by means of affirmative expressions like «yes» or «eh», the attentive and open position of the body, attentive gestures and eye contact.

\textsuperscript{162} In order to reflect on the distance and techniques used during the interviews, I wrote a protocol of observation right after each interview, describing what had happened before, during and after the interview took place. This is of considerable significance for the analysis which is often carried out long time after the interview. In this sense, the protocol helps to recall and remember details of the interview and its interactions.

\textsuperscript{163} Compare the following chapter, pp.103-104.
4.1.3. The questionnaire guidelines

The questionnaire guidelines for the qualitative in-depth interview were developed according to Helfferich’s outlines (Helfferich 2004), based on an investigation on victims of domestic violence in Southern Germany. This framework was chosen for its proximity to the topic and for its flexibility, which permits focus and topics to emerge from the interviewees themselves, while at the same time structuring the interview and (partly) controlling which topics are discussed and which are not. Helfferich’s scheme is based mainly on some central questions which are meant to generate a narrative. On a second level, key aspects are specified and mentioned. If the interviewees do not refer to these central topics, the interviewer is supposed to ask specific questions in their regard. On a third level, there are some specific questions which the interviewer has to ask in every interview at the appropriate moment. On a fourth level, some specific techniques of maintaining and guiding the interview are outlined.

Figure 11:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Initial question</td>
</tr>
<tr>
<td>2.</td>
<td>Key terms for control</td>
</tr>
<tr>
<td>3.</td>
<td>Precise and formulated questions</td>
</tr>
<tr>
<td>4.</td>
<td>Specific questions</td>
</tr>
</tbody>
</table>

Pattern of Interview Guideline (according to Helfferich 2004, 166)

On the basis of this pattern, I developed a three part interview structure: everyday life, lifestyle and future. Each part is introduced and initiated by a question of general character, designed to generate narration.

---

164 After having designed the first draft of the questionnaire, preceded by an exhaustive brainstorming and brain-mapping of the relevant aspects for the phenomenon studied, I presented and discussed it in Prof. Dr. Carol Hagemann-White’s colloquium at the University of Osnabrück. On the basis of this discussion and their feedback, I developed a second more synthetic draft which -after further revisions- developed into the final draft. See annex nº 10.2., pp. 329-330, for the questionnaire in German and English.
Although the questionnaire has a structure and some predetermined sequences, it is not obligatory to follow them literally. The questions on the questionnaire are preformulated; nevertheless, it is not compulsory to use these exact formulations. They are more of an aid which can and should be adapted to the specific interview-situations; according to Kaufmann (Kaufmann 2004, 44), it is an adaptable tool.

The main questionnaire does not include any questions on violence or socio-demographic data. I chose two different approaches to collect this additional information, with regard to the different settings in which I conducted the interviews. First, regarding the interviews in a hospital, questionnaires with the corresponding data which I was allowed to access (after previous authorization from the interviewed women) already existed. Second, in the other interviews, I added a similar questionnaire at the end of the main interview, in order to get a similar data-base, for all studied cases.

4.2. Methodological implementation

4.2.1. Field access and sampling

Given the sensitivity of the phenomenon I studied linked to taboos and stigmas on a social level and to emotional reactions such as shame or fear, on an individual level, sampling and contacting of interviewees requires a specific approach, conditioned by two main restrictions: the need to obtain a valid sample without knowing the general population of the study and to establish a relationship of confidence with the interviewees. Corresponding to the general methodological approach chosen, the sample\textsuperscript{165} was constructed and saturated by means of «theoretical sampling»\textsuperscript{166}, on victims' Conduct of Everyday Life, their histories of

\textsuperscript{165} I use the term «sample» according to the terminology used in Grounded Theory, which refers, for example, to of theoretical sampling. Theoretical sampling is usually used when the general population that is studied or some of its features are unknown. Its procedure includes the repeated random sample survey, each time according to different criteria. The number of cases included in the sample is unknown at the beginning of the sampling. The sampling is finished when it has reached theoretical saturation.

\textsuperscript{166} Compare chapter 4.2.2., pp. 119-122.
violence and their socio-demographic data. Therefore, I chose the following steps to design the theoretical sample and collect the data:

Since data-collection, according to the principles of Grounded Theory, is not a single procedure but is interrupted by the analysis of the already collected data, moving back and forth from the field and analyzing it in a circular format, I will describe the whole process chronologically, including analytical steps. The main problem was that the total population of victims is unknown (in spite of the prevalence studies which were able to reveal only part of the dark figure). Therefore, the sampling and the method of sampling were restricted by an unknown total population, by a hidden population to which I had restricted access, a highly stigmatized and shame-ridden population which is less likely to respond to surveys and interviews than most, as well as by ethic and psychological concerns regarding the risk of secondary victimization. Therefore, I chose different ways of approaching the victims-following the principles of the theoretical sampling-, in order to reach different parts of the total population.

To facilitate initial access and the first interviews, I decided to choose a clinical setting. It allowed me to meet with experts in the field, who would then in turn help me with initial contact in accordance with the ethical principles meant to avoid re-traumatization and with whom I might discuss my first impressions, and who might also -in case of need- assist interviewees after the interviews\textsuperscript{167}. All this would allow me to become more familiarized with the field and to concentrate -from the beginning- on the interviews and cases.\textsuperscript{168} There are various adequate hospitals in Germany.

\textsuperscript{167} For years, there has been a discussion among experts about the possibility of interviewing traumatized people. On the one hand, it was argued that the harm and revictimization produced by the narration did not allow this proceeding of data-collection. But currently, and on the other hand, interviews with victims are considered to be justified under the condition that psychological support is guaranteed once the interview has been conducted.

\textsuperscript{168} I have chosen not to conduct interviews with experts, because this would have meant a completely different approach and special analysis. And as I wanted to emphasize the words and content of WHAT the victims say -concentrating on their emic perspective-, specific expert-interview would have distorted the data in this sense. Nevertheless, the interviewees -and considering their different level or reflection- can be considered to be «the main» experts of their lives. But, indirectly, expert-knowledge has influenced the whole investigation. On the one hand, there has been permanent contact with therapists and «experts», who answered any of the questions arising which are mostly reflected in the multiple memos I wrote over the course of the whole research. And on the other hand, the regular discussion and common interpretations of my data with other Ph.D.-candidates, most of whom were doing research in related fields, allowed me new insights into my data and offered new and fresh ideas, lines of interpretations and codes to follow.
of Osnabrück, who introduced me to the staff at one of the hospitals, I made a first contact via mail and telephone with the head of the specialized department for traumatized people. I then presented my project personally to the head and the senior physician, who -after having included a few modifications according to the internal ethics of the hospital- approved my approach and methodology. We agreed upon a two week stay which I carried out in spring 2006. At the beginning of my stay and after having signed the necessary documents of confidentiality required by the hospital, I presented my research at the weekly therapists’ group meetings, asking for their collaboration regarding the sample and contact of the interviewees. In close cooperation with the therapists, who generally contacted me when a patient with the corresponding profile was admitted, we discussed the case to contact.

1. The interviewee should not live in an acute situation marked by violence, as the objective of the study is the description of the (reconstructed and chronic) everyday life and not the acute coping strategies of survival.

2. All people interviewed should have experienced at least one sexual assault.

3. Diversification of the sample regarding the socio-demographic variables should be sought.

4. The interview should by no means produce any suffering for the interviewee or disturb her therapeutic recovery.

Generally speaking and after having discussed the background of the interview candidate, the first contact was carried out by the therapists. If the women agreed to be interviewed, the therapists gave me their names and room-numbers and I contacted them for the interview, presenting myself,

---

169 In order to protect the anonymity of the interviewed women, I will not further describe the characteristics of the hospital, which is an acknowledged center of expertise in trauma-therapy and treatment, with more than 50 victims in treatment permanently. Furthermore, as demonstrated by their personalized and warm welcome of my research stay (They even offered me a room in the clinic and to sleep and eat there, but I preferred to stay in a little hotel next to the clinic in order to maintain a certain distance to the field and the interviews I was conducting), the staff of the hospital is interested in both the practical treatment of the women and the fostering of research in the field.

170 Since I had no guiding hypothesis regarding the victims’ Conducts of Everyday Life, this first period can be called explanatory and, therefore, the only criteria I was able to provide in order to maintain a certain homogeneity and comparability of the sample were socio-demographic variables and the violence-history.
the topic, objectives and process of my study (putting special emphasis on their anonymity).

The hospital also offered me the chance to access the interviewees’ clinical documentation with socio-demographic and health background information. On arrival at the hospital, all women have to fill in an exhaustive questionnaire regarding their current family and work life, their perception of their health situation and the objectives of their stay. They have an initial conversation with their therapist in order to explain their current situation and concerns. Sometimes, some of their previous external medical reports are also included. Thus, to avoid unnecessary repetition and possible revictimization, the hospital directors decided to grant me access to existing data, with prior authorization by the future interviewee. Therefore, I was able to read these reports before conducting my interviews. In most cases, I had also a short conversation, before or after the interview, with the respective therapist, in order to clarify some aspects or to confirm or reflect on my perceptions and observations. This access to the background information was indispensable, since one of the main guidelines of the hospital is to NOT ask specifically about the violence suffered by the women. Therefore, I was not allowed to ask specific questions on this topic and I had to rely on the existing medical information.

During my stay, the hospital granted me a separate room in the central building of the clinic. Although it was a relatively neutral setting done in grey and white colors, it had a medical, clinical appearance. On the one hand, access to this setting helped me, as a researcher, to gain confidence and to concentrate on the central interview, especially since hospital therapists would be on hand in case the interview upset the victims. But, on the other hand, the clinical surrounding also had a (negative) influence on the interviews. Nevertheless, most of the women became engaged in the interview and did not confuse me with a therapist. Only in rare moments did the women interviewed use me as an external person to complain to about the hospital and its procedures. In order to record all this information, I wrote protocols on all the interviews, conversations with the therapists and the medical documentation of each interviewee. Furthermore, I kept a field
diary about my everyday life in the clinic and about situations and (informal) conversations I had with the nurses, physicians and psychologists.\footnote{During my stay at the hospital, I usually entered the hospital before 8 o’clock in the morning and left the hospital between 6 and 8 o’clock in the evening, except for Saturdays and Sundays.}

In total, I conducted 9 interviews\footnote{Only one woman who was contacted declined to be interviewed, because, according to a conversation with the nurses, she was so upset by her psychic and physical situation, work demands and problems with her partner, that she did not want to be bothered and disturbed by an interview. All the other women contacted by clinic therapists agreed to participate in the study.} during the two-week stay, which I recorded digitally and transcribed personally. I then coded them, according to Grounded Theory-methodology\footnote{See chapter 4.2.2., pp. 119-122.}. About a year later, I presented the first codes and categories in a Grounded Theory-workshop at the ZUMA in Mannheim (Mruck and Mey 2007). The main criticism I received was that my codes were either influenced by the existing clinical literature (with codes named dissociation, flash-backs or anomie), they were too close to the cases or too abstract (e.g. general power relations in job). I became aware of the fact that the interviewees’ everyday lives were completely missing from my analysis. Although their daily lives were the subject of my interviews, this had somehow failed to coalesce. I was obliged to acknowledge that I had to free myself of my personal and subjective perspective on everyday life, accepting the interviewees’ presentation of their lifeworld.

Due to the fact that my first interviewees had no «everyday life»\footnote{This represents an advantage and a disadvantage, at the same time: First, the women were able to talk about their everyday life before their clinical stay and how they imagined their everyday life after leaving the hospital. This gave them the possibility to reflect with more distance their everyday life and to admit possible problems and difficulties. But at the same time, most of the women arrived at the hospital after a period of crisis, breakdowns or other stays in psychiatric hospitals. Therefore, it was sometimes difficult to decide WHICH everyday life they should explain to me: the apparently normal before the crisis, the one during the crisis and so on.} at the time I interviewed them, I supposed a certain bias in the existing data. Therefore, for the next step of data-collection, I decided to conduct additional interviews with victims currently submerged in their everyday life, thus eliminating distortion of the data. Furthermore, this first set of interviews was limited by the clinical setting itself. First, only those women who draw the attention of the health system reach the hospital. Second, and although the hospital permanently treats a great number of women who have suffered sexual violence, in most cases, an interview is not advisable for therapeutic reasons. Due to this double bias of the clinical setting, it was
clear from the beginning that I was only able to reach a specific type of victim through the hospital and that I would also need other forms of approximation in order to saturate the theoretical sample.

Therefore, I continued my sampling by placing an advert in two local newspapers, presenting my research and asking women affected by sexual violence, to contact me. It was a short note\textsuperscript{175} and I was not sure if there would be any response or if I would be inundated. Finally, six women contacted me via mail.\textsuperscript{176} Some used false names, some contacted my openly and directly, in one case, a woman’s friend contacted me (lacking a personal access to the internet). In the end, I interviewed 5 of them.\textsuperscript{177} Except for one interview, for which I used an office, I conducted the interviews at the women’s homes, which also offered me additional information about their everyday life.

In order to obtain similar data from these women, I decided to use the same interview guidelines I had already used in the hospital, and to use the hospital’s questionnaire to collect the same socio-demographic, violence related and health data, in the second part of the interview. But, as I had seen in the interview process, many more stories emerged while answering the questionnaire. Thus, in the end, the medical questionnaire came to form part of the same interview, since it generated additional narration and explicative stories.\textsuperscript{178} After the transcription of these 5

\textsuperscript{175} See annex nº 10.3.1., p. 331.
\textsuperscript{176} After long discussions, I decided to simply put an email-address in the notice and no cell phone number, in order to protect my own privacy. As shown by the woman who contacted me through a friend due to her own lack of access to the internet, this was not an impediment.
\textsuperscript{177} There are some specificities regarding the data, which I want to briefly refer to, because it is important that they are taken into account during the analysis:
First, on a practical level and at the moment of contacting the women, I had to overcome some reservation voiced by the women. Some were worried that they «had not been sufficiently victimized» and that they were therefore not the kind of cases I was looking for. Another concern was that many women were afraid of «saying the wrong thing» or that what they said would not be interesting for me. They often considered the interview to be an exam. But despite these objections, I was able to reassure all the women and to establish a relationship of trust in order to conduct the interviews. Nevertheless in some cases, I had to convince the women that they were the right people and that I was interested in their story.
One of the women did not contact me again, after our first telephone conversation. The only information, I have of her, is that she was in her 70s, she was still living with her aggressor and that she had never spoken to anybody (except a friend of hers) about her victimization. She was very worried about maintaining her anonymity. Hence, I assume that she finally was too afraid of talking to me and exposing herself to a certain risk.
\textsuperscript{178} During these interviews, I also wrote short protocols about my body awareness and bodily reactions during and after the interviews. As I gained more confidence, I was able to open myself up and to let my body reflect what the women told me. These memos (In Grouded Theory, short protocols are called memos.) offered me a different perspective on the data.
interviews, the first similarities and patterns linking interviews and behavior began to emerge, yet some codes and categories continued to be influenced by medical terms.

Furthermore, I was still questioning the difference between my initial expectations and the data I had obtained. Therefore, I decided to look for a contrasting example and to conduct an interview with a woman who had not experienced sexual violence. Through the snow-ball technique, I contacted a woman who was said to be a happy and independent woman.\textsuperscript{179} Initially, she was surprised by my request, but then she agreed to the interview. This time, the interview completely coincided with what I had imagined it would be like. Having partially confirmed my assumption, I began to ask, why there was such a huge difference, in everyday life for victimized and non-victimized women.

At the same time, following an emerging interpretative scheme developed from previous interviews, preliminarily coded with “wanting to help other victims”, I interviewed another victim because of her public involvement in the prevention of sexual violence. I found her through snow-ball sampling techniques and an expert’s tip-off. She also represents an example that contrasts to the previously interviewed women; although others had expressed a wish to help fellow victims, in most cases, it was nothing more than an unrealistic and utopian statement.

After our first contact and after having introduced her to my research, she allowed me to interview herself and the partner who has been living with her for a long period of time, who has accompanied her in her recovery and who supports her in her public commitment.\textsuperscript{180} Despite my initial

\textsuperscript{179} This single interview can not be considered a control interview, in its classic meaning, because I only conducted one of this type. Nevertheless, in the process of analysis, it helped me to confirm and modify my hypothesis. This procedure also corresponds with the principles of theoretical sampling, because one of its main features is the search for opposite cases.

\textsuperscript{180} The idea of also interviewing partners and children was an idea which has been a regular topic in discussing my sample with other researchers. On the one hand, it was argued that I would not be able to create an objective description of the victims’ everyday lives without also interviewing their intimate environment. But, on the other hand, the objective of the present study is not the objective reality of the victims’ everyday lives, but their inside view of what everyday life represents for them and how they arrange their activities on a daily basis. The view of partners would have been interesting, but -and in order to get a more general vision of the victims’ lives- I would have also had to interview colleagues, friends and other people, who form part of their daily contacts. Furthermore, and as described referring to my two last interviews, there were serious concerns regarding the victims’ privacy and trust and the lacking inside-view of the partners, which finally made me decide not to conduct specific interviews with partners.
concerns regarding comparability with the other interviews, I decided -after further consultation with both\textsuperscript{181} - to interview them at the same time, in order to find out if our exchange on the topic of everyday life would bring out topics and codes that had hitherto been hidden. The only thing that emerged in a more detailed way, although already present in previous interviews, were their sometimes different perceptions of situations, especially concerning moments which are only perceptible to the victims, remaining hidden to members of their social circles. Therefore, and based on analysis of this interview, I was able to go back to the previous interviews and discover similar codes and dimensions. But apart from this clarification of specific dimensions, no new codes and categories emerged from the interview.

Furthermore, this interview can be partly seen as an expert interview, since, after having finished the guideline interview and questionnaire, in a second part, I also asked them about my concerns, difficulties and assumptions regarding the data already collected. Due to their expertise in the field, both as a result of their own story and their support for many other victims, they mainly confirmed my preliminary core categories and codes, adding greater detail. This aided me in further coding and categorizing the interviews.

It was during a research stay at the Berliner Graduate School of Social Sciences (BGSS) at the Humboldt University Berlin that I found the theoretical approach to everyday life which provided a theoretical categorization and frame for many of the codes I had already discovered but which I had not been able to organize and summarize adequately. During that time, I was finally able to come to grips with the victims’ everyday lives and to describe the core categories explained in chapters 5 and 6.

At the same time, concerning the socio-demographic data of the theoretical sample, I had noticed that I was missing interviewees aged 20 to

\textsuperscript{181} In this specific case, and mainly due to their common work on and commitment to the prevention of sexual violence, there was no concern regarding mutual intimacy. Nevertheless, I decided to conduct the interview with both of them at the same time, first, in order to avoid negative side-effects, such as «what did she ask the other?» and «what were they saying about me?», and second, to foster an exchange and a discussion between them.
30. First, I put notices on bulletin boards at some universities in Germany, without any results. Second, I contacted several help-lines, self-help groups and support-organizations, but the notices they put on their bulletin boards were also to no avail. Other support groups had already made it clear from the start that they had no women under 40 in their groups. Consequently, I was not able to find any interviewees by these means, either because there was no women with the right profile or because nobody wanted to be interviewed.

Therefore, I recontacted one of the previously interviewed women who had mentioned some younger victims whom she knew in her interview. After several attempts, she wrote me back and sent me contact data for two of them. Finally, having surmounted several obstacles, one of them agreed to an interview. Unfortunately, it was not possible to interview both of them. Since they are a couple, it would have violated their intimacy, if I had talked to them about each other. This is another reason for not doing any further interview with partners. At the least, interviews with both parties, victims and partners, might in some cases have violated their mutual intimacy and trust and offer me two different versions of the same, making it impossible for the victims to control the coherency of their «story». It could have had a negative influence on the confidence established between me and the interviewee.

This interview did not offer any new insight into the phenomenon studied, but simply confirmed most of the already existing codes, dimensions and categories. As this tendency of saturation had already started with the interviews obtained through the newspaper advert and saturation had also been confirmed by the last two interviews, I decided to finalize the theoretical sample for the present study, given the fact that the

182 In the first place, the woman refused a face-to-face interview and wanted to be interviewed via chat or telephone. This would have represented major difficulties regarding the comparability of the interviews and data. The compromise I was able to reach was to do a face-to-face interview, but we did not sit down (as was the case in the other interviews), but rather went for a walk and talked while moving. As she normally has serious problems talking about herself, she thought that it would be much easier for her to talk while walking. I recorded the interview (as I did with the others), carrying the recorder in a little bag between us. Nevertheless, some parts are difficult to understand, because of the passing cars, trains and other disturbing noises. Furthermore regarding analysis, I noticed that not facing each other, but walking side-by-side, I was not able to observe and focus on expressions and gestures. Thus, I perceived a certain lack of supplementary data. Nevertheless, the compromise of the "walking interview" did not seriously change the content of the interview, which I would have missed otherwise.
detected Conducts of Everyday Life were already sufficiently pronounced for dense description. Therefore, my sampling consists of following forms of contact and approximation: first, through an institution, specifically a specialized hospital; second, a newspaper advert; third, the snow-ball-technique. Contact through independent support organizations and notices on university bulletin boards failed. In total, the data consists of 16 interviews with victimized women and 1 interview with a non-victimized woman.

Due to the specificity and singularity of the cases and concerns regarding the victims’ anonymity, I am not able to present a case per case-analysis of the demographic and violence related data, but, in the following paragraphs, I will present a general summary of the whole sample. As a

---

183 All names, ages, socio-biographic data, cities and other information are slightly changed to maintain the interviewees’ anonymity.
result of the high number of undetected cases and the qualitative character
of the study, a proportional and statistical representation of the sample is
not required and not possible. Nevertheless, it is absolutely necessary that
the cases cover a broad range of variables and possible combinations.

- Gender: For several reasons, I decided to limit the present study to
female victims of sexual violence. Although it may have proven very
interesting to study both female and male victims of sexual violence,
introducing gender as a variable in an exploratory research on the everyday
lives of victims of sexual violence would have made matters extremely
complicated, first, given substantial differences in male and female
socialization and everyday life. Second, Conducts of Everyday Life of
women and men proceed according to completely different social
conditions and rules making them extremely difficult to compare.
Furthermore, the impact of sexual victimization seems to be completely
different for women and men, as relating to their corresponding gender
roles. Consequently, this would have increased the complexity of the
present dissertation exponentially. The collection of the data would have
been impossible for me as a female researcher, and I would have been
obliged to ask a man to conduct the interviews with male victims of sexual
violence. Yet it may be interesting for future research to consider both
genders and to bring them together in one single study.

- Age: The women interviewed are between 27 and 69 years old. As
already referred to in the previous paragraphs, the data showed an initial
concentration of women between ages 30 and 50. In order to
counterbalance this concentration, I specifically looked for younger and
older women before finalizing sampling. I found it was extremely difficult to
contact women aged 20 to 30. This difficulty in finding younger
interviewees already seems significant, indicating an avoidance strategy
within a certain age range. Yet since the Conduct of Everyday Life is

184 This is mainly a result of the different connotations that sexuality has for women and men, linked
to aspects like the risk of pregnancy, the attribution of the active vs. passive roles during sexual
intercourse, the cultural importance of penetration in patriarchal and Dominator societies, etc. (Lenz
185 To borrow terms applied to another social phenomenon, it seems that they are still living in the
closet and, as Julia explains, she simply does not want to be bothered by the subject. Another
reason which I explain further on in the analysis may be the avoidance of the memory of the sexual
assumed to vary according to age, it seemed necessary to cover a broad range of age.

- **Origin:** The sample consists of 13 women, from West-Germany, 2 women from East-Germany and a woman of Turkish origin who was born in Turkey and who arrived as a child in Germany, where she did most of her schooling. Although the women of the sample come from different cultural and social backgrounds, I decided to include all of them, first because all of them speak German perfectly. Second, in all cases, the women have been living for several decades in (West-) Germany. In addition, they present themselves as people who are integrated and conscious of their different cultural and social contexts. Thus, their inclusion expands the variety of the sample, and is able to reflect at least in part the current social situation in Germany, where immigration has been extremely important. Nevertheless, my sample does not claim to be representative in this sense, but simply includes some cultural differentiation.

- **Training and profession:** Regarding the victims’ professional training and professions, all women had at least finished their general education certificate. But since there are only a few cases in which the women have A-levels and a university education, there seems to exist a slight downward pull. Yet taking the women’s average age into account (43,8 years), this slight anomaly becomes less expressive, since A-levels and university studies were less common a couple of decades ago.

  Generally speaking, there is a variety of job types included in the sample: freelancers, housewives, secretaries, teachers (in kindergarten and school), nurses, prostitutes, tram-drivers, travel agents, mail carriers and accounting-clerks. There seem to be an absence of women with high incomes and more prestigious professions. As already explained, there was one woman in the hospital who refused to be interviewed and who would have fit this type. The only information I have about her is that she left the hospital earlier than planned because she had some professional meetings she was not able to cancel. First, it seems to be very difficult to access these women, because they are apparently focused on their career and job and do not want to be bothered. Second, according to my analysis and results, it may also be assumed that this resistance to being interviewed is
also part of the hyperactivity-conduct.\textsuperscript{186} They simply may not have any problem or they may not be aware of it. Consequently, the sample may have a slight downward bias.\textsuperscript{187}

- **Current family situation:** The sample includes a high number of divorced women and widows, as well as women who have had many short-term relationships. Furthermore, there are several women without any partners or children. This largely coincides with the results of the prevalence study, which shows a significantly higher number of partners for women affected by sexual violence.

- **Experiences of sexual violence:** The present sample includes a wide range of different victimizations. Regarding the women's age when assault(s) took place, it varies between early childhood (2 years) and adulthood. The type of assault also varies, from single rapes by strangers or a single oral sexual abuse to multiple abuses and rapes by known people, such as neighbors, family members or caregivers.\textsuperscript{188} Furthermore, a lot of women have also experienced physical, emotional, psychological or sexual violence from some of their partners and a couple have suffered or are still suffering sexual harassment at the work place.

- **Experiences of therapy:** Most of the women interviewed have been in therapy or are still doing it. Yet it has been possible to contact at least a couple of women who have never been in therapy. Initially, we had some concern regarding the women's different levels of distance and reflection and the biasing effect this might have on the interviews. But it has been shown that therapy itself did not make a difference at the moment of the interview. Another concern had been that some of the interviewees have already written their biography and, therefore, have already developed a coherent story of their lives. But taking a closer look at the sample, most of the women have written down their story, either in the format of a

\textsuperscript{186} Compare chapter 5.3.1., pp. 186-196.

\textsuperscript{187} - Income and current professional situation: Although the medical questionnaire includes a specific question regarding women’s economic situation, most of them do not answer it. Therefore, there is no specific data available concerning economic income, nor regarding their individual level or the aggregated level of their households. But based on the women’s current professional situation, it is possible to make some rough estimates: It seems that the sample is more or less divided between half the sample with low or very low income and half the sample with middle income. Consequently, women with high incomes seem to be absent from the sample.

\textsuperscript{188} Regarding the description and definitions of the interviewees’ experienced sexual assaults, I follow their own words and I use the terms, they used to describe the assault.
biography, a fairytale or poems. Not all of them did this within the context of their therapy. And some women in therapy never wrote their story down at all. Therefore, the act of writing also forms part of the women’s lives and biographies and should not be eliminated from the data. Nevertheless, it has to be assumed that the level of reflection of the interviewed women is much higher than the average, because at least some of them were proactive and contacted me, instead of being contacted. Hence, they apparently have a special concern or interest in explaining and understanding their situation. These detailed reflections on the different variables of the sample indicate that it is saturated both theoretically and in terms of most socio-demographic variables.

Regarding the theoretical sample, its main problem may be the fact that I specifically looked for victims of sexual violence and I did not address myself to them as women, but as victims of sexual violence. This probably conditioned their response and they may thus have had the tendency to interpret their everyday lives from the point of view of their victimization. This may have given a completely different connotation to interviews than it would have, had they been approached through another kind of pretext or context. On the one hand, possible consequences may be the emphasis of the deviant behavior and the focus on their victimization. But, on the other hand, victims, simply addressed as women, may have tried to hide deviant behavior in order to present themselves as «normal» people; furthermore, such an approximation would not have been practically and ethically possible. Nonetheless, my analysis has demonstrated that the interview-data collected do allow an interpretation in accordance with the object and objectives of the present dissertation. Hence, the concerns mentioned above can be minimized.

A further specificity of the qualitative sample is the fact that I did not approach the women in order to interview them. With the exception of the hospital context, in which the women were «chosen» by me and their therapists, then approached by their therapists, the women chose me to talk to and to be interviewed. This particularity might raise particular issues for analysis and interpretation, as the following questions arise:
- Why do they want to talk to me?
- Do they want to relay a message?
- Does this message fit my interview guidelines and my research question?
- What message do they want to pass on?

Therefore, another question which was important at the moment of coding and interpreting the data was the women's motivation for the interview and the role they attributed to me.

Figure 13:

Researchers's Role seen by Interviewees (Own elaboration)

In this context, my role as a researcher was seen and interpreted differently. For some interviewees, I was simply the interviewer or stranger to whom they had to explain something. Others specifically looked to me as an expert, hoping that I would answer specific questions. Others saw me as a publisher and mediator, one who translates and publishes their message, such as how to cope with everyday life after sexual assault (Jane). But mainly, I was considered a listener, interested in something nobody usually wants to know anything about. Hence, I automatically became their confidante.
Despite these concerns, the sample has been saturated according to the method of theoretical sampling, having reached a theoretical saturation as outlined in the present chapter. Yet, as is the case for any qualitative sample, it is not possible to talk of representativeness, which is never achieved, nor required or looked for. In the end, these restrictions are not necessarily handicaps, but rather first opportunities to access the data and to create lines of interpretation which have to be considered during the coding process.

4.2.2. The grounded analysis

“Most writing on sociological method has been concerned with how accurate facts can be obtained and how theory can thereby be more rigorously tested. In this book we address ourselves to the equally important enterprise of how the discovery of theory from the data – systematically obtained and analyzed in social research – can be furthered. We believe that the discovery of theory from the data – which we call grounded theory – is a major task confronting sociology today, for, as we shall try to show, such a theory fits empirical situations, and is understandable to sociologists and layman alike. Most important, it works – provides us with relevant predictions, explanations, interpretations and applications.” (Glaser and Strauss 1967, 1; emphasis in original)

By this means and on the basis of the collected data, the aim of the present dissertation is to develop a model or “middle range theory” (Mruck and Mey 2007, 19) for the field studied. Consequently, the chosen approach for interview analysis is not limited to the mere description of the empirical phenomena, but aspires to explain them through «understanding» in a Weberian sense. For these purposes, it requires an intensive process of interpretation, through a specific coding-procedure made up of different steps. Its aim is to develop codes, dimensions and categories, directly based on the data, while simultaneously carrying out the phases of collecting data, analyzing data and theory-constructing, as explained previously.

In the following paragraphs, I will present the procedures used for the coding and analysis of the interview data.

1. The complete transcription of the interviews was done following the rules of the system of analytic transliteration of conversations189 (Selting et al.

---

189 My translation. Original name in German: Gesprächsanalytisches Transkriptionssystem (GAT).
1998). It allows different degrees of details following the «onion principle» which conserves the legibility of the interviews and secures their clarity. It establishes a distinction between the basic transcription and some levels of greater precision. In the present study, I have only carried out a basic transcription of the interviews, which include elements such as overlaps, pauses, intonations, non-verbal communication and stress placed on syllables and words. Furthermore, and in order to maintain the interviewees’ anonymity, all names, cities, regions and other specificities have been changed in order to make them unrecognizable.

2. After the data-collection in the hospital (including the first 9 interviews), I used the available medical documentation in order to gather the corresponding socio-demographic data. For these purposes, I then wrote out a biographical worksheet including the interviewees’ ages, nationalities, marital status, current situation, family, health, education, work, social network, leisure time, victimization, general comments, my first impressions and protocols of the interviews.

3. Following the guidelines of Grounded Theory and at the beginning of the coding-procedure, I started with a line-to-line interpretation of one of the interviews, which I chose for its exceptional clarity. During this phase, called in vivo-coding, I developed questions concerning the data and carried out the first coding, using and paraphrasing the interviewee’s words. I then went on to “interrogate” my data, opening up its possible dimensions, such as alternative options of action, items which drew my attention, metaphors, tactical strategies and consequences (Strauss and Corbin 1996, 43-74).

4. Joining and relating the in vivo-codes, I developed some more abstract codes and, little by little, included other interviews in the cyclical process of going back and forth between the previously mentioned steps. The analysis of more data and the detection of more codes produced some first conceptual and denser connections. In addition, the integration of the codes led to some central categories still influenced by the existing clinical literature, as explained previously.

190 Compare the list of rules in the annex nº 10.4., p. 334.
5. Through presentations given to experts in Grounded Theory-methodology, workshop participations and open discussions with other researchers, I enjoyed a variety of interlocutors during the whole process, discussing with them further procedures, further sampling, issues of sample saturation and emerging codes and categories.

6. The contrasting examples and data, including the interview with the woman who had not suffered sexual violence, guided me towards a deeper and denser understanding of the phenomenon. My initial problems regarding the victims' everyday lives, which I had recorded in the first memos, became one of the first results \(^{191}\), insofar they were revealing of differential attribution of meaning and importance to concepts and a persistent lack of mutual understanding between the interviewer and the interviewees. Further analysis of the data helped to overcome these difficulties.

7. During *axial coding*, I used both Strauss's and Corbin's *coding paradigm* \(^{192}\) (Strauss and Corbin 1996, 76-85) and the theoretical concept of the Conduct of Everyday Life in order to combine and link categories. Hence, I used both the sometimes rigid frame of the coding paradigm and, after having seen and confirmed its restrictions for the present study, I decided to use the flexibility of Grounded Theory in order to introduce another frame of coding, which seemed to be more adequate for the phenomenon studied. In this context, the approach chosen, based on the Conduct of Everyday Life \(^{193}\), is similar to Tiefel's (2005) coding frame for biographical research on education, which includes three levels of analysis: meaning, structure and action (Berg and Milmeister, 2008).

8. By means of *selective coding* and the confirmation of the corresponding and fitting code-citation-category-combinations, the nucleus of the emergent theory was condensed.

\(^{191}\) Compare chapter 5.1.1., pp. 127-136.

\(^{192}\) Their paradigmatic model includes the following connections, organizing the codes and categories according to: 1. causal conditions > 2. context > 3. phenomenon > 4. intervening conditions > 5. strategies of action and interaction > 6. consequences (Strauss and Crobin 1996, 76-85).

\(^{193}\) Compare chapter 2.2.2., pp. 46-50.

The Conduct of Everyday Life includes six levels: 1. thematic level; 2. temporal level; 3. spatial level; 4. social level; 5. medial level; and 6. rational level.
9. During this whole process, I wrote memos to reflect on the process and to take note of ideas and hints. This methodological strategy corresponds with the constructivist approach formulated in the theoretical part of the study.

4.2.3. Excursus on subjectivity or the relationship between research question, interviewees, data and researcher

My methodological approach seems to encourage writing with a more personal style than is usually employed in a dissertation, a need that flows from the specificity of the collected data and the phenomenon studied. Hence, the following chapter is aimed at bringing more transparency to the research process, the data and the analysis. In this context, subjectivity, which intrinsically forms part of the qualitative methodological approach chosen, is not considered to be a disruptive factor. Therefore, its impact should be neither ignored nor hidden; the subjective role, both of the researcher, the interviewees and the data, should be made transparent, in order to delineate its influence and to turn it into a resource and information for the analysis.

Regarding my role as a researcher and paraphrasing Brownmiller (1992, 16-18), it would be possible to simply explain that while I had several years to digest the content of my research, the reader receives and is forced to assume the essence of the data in a couple of hours. Yet - although I completely share Brownmiller’s concern regarding the reader- I would like to pause a moment and delve further into this «digestive process» which formed and forms part of the present analysis and which has largely influenced and guided the interpretations and results.

My position during this research could be described as one of an observer following the tracks of violence on everyday life, but who is living and has been socialized as a woman in a violence-prone and Dominator-society. Furthermore, and as a stranger to the lifeworld of sexual violence, my interviewees and I did not share the same horizon of experience. Consequently, I was caught in a paradox between two contrasting blind spots: first, the one of observing by “drawing a distinction” (Spencer Brown 1971, 3), a distinction I was not able to make, because for the most part
society lacks the tools to distinguish between «violence-influenced» and «violence-free» behavior; and second, of not having access to the victims' experiences and attributions of meaning. Although I was a stranger to the life-world of sexual violence, I took it for granted that the interviews would follow a logical, rational, perhaps emotional but easily understandable and interpretable pattern.

Contrary to my initial expectations\textsuperscript{194}, I was not able to discover such logical patterns within the interviews. Thus, first, I had to free up my own perception of everyday life, in order to be open and thus understand my interviewees' point of views. I had to step out of my life-world and open my mind up in order to get a perception of the victims' life-worlds. As shown in the chronological process of my data collection and analysis, it took me quite a while to attain an access to the data and to re-discover the victims' everyday lives. During the whole process, I received permanent supervision from several researchers belonging to different disciplines, which thus became one of the main tools to minimize and sometimes eliminate blind spots. Furthermore, there was a persistent need for physical, cultural and linguistic shifting, living and working in different cultures and in different languages at the same time.\textsuperscript{195} This persistent shifting and change helped me to maintain critical distance and control, as well as the curiosity to continue asking questions and not taking things for granted, because aspects which seem to be understandable in one context might be difficult to express in another language. Hence, my role as a researcher was accompanied by continuous reflection on and supervision of my impact on the field and data and my responsibility regarding the interviewees and the research process.

As outlined in the first chapters, my initial aim was to study the victims’ everyday lives. Despite several concerns regarding the narratibility of everyday life and due to the impossibility of observing it, the only possibility remaining for accessing the phenomenon studied were interviews. But after conducting the first interviews, my principle question

\textsuperscript{194} As shown in detail in subchapter 5.1. on the narrative absence of everyday life, pp. 127-143.

\textsuperscript{195} The countries were mostly Germany and Spain, but the languages, in which I wrote memos and discussed my findings, were English, German, Catalan, Spanish and French.
became: What are the victims talking about in their interviews? After the first interviews, I was actually disappointed, because my first impression was that the interviewees were not talking about their everyday lives. Analyzing the interviews, it seemed to me that there was no data regarding what I was really looking for. In the beginning, I hoped to track routines, regular activities, normality or specific activities, but what the women were talking about was the lack of normality, irregularities, the lack of rituals, permanent disruptions of their activities and tales. Yet gradually, through contrasting examples, data and theories, adequate access to the data slowly took shape, as previously explained. Therefore, one of the principal questions became: What kind of data do I have? What is its specificity?

Following the pathways provided by subject-oriented sociology (Bolte 1983), my data is the victims’ narrative of their constructed everyday lives - a construction of a second order. Therefore, the data does not show what «really» happened and happens in their everyday lives and their «objective» reality, but their own subjective perception of their life-worlds and everyday arrangements. Following this constructivist assumption which is basic to the qualitative and Grounded Theory-based methods chosen for the present dissertation, reality is always interpreted and constructed by individuals. Therefore, and as a central issue for data analysis, although I do know what the women tell me about their everyday lives, I do not know what «really» happened or happens.

For example, it is possible that an interviewee tells me that she cannot manage her everyday life, although from the outside it seems to be quite normal (Cathrin). Therefore - an essential point in this case - the interviewee subjectively experiences her everyday life as overwhelming. Or perhaps another interviewee - subjectively - feels great loneliness, although she - objectively - tells me about her big family and her always crowded house (Kate 834-844). Thus, the data offers a specific access to the victims’ arrangements of their everyday lives and the meaning that these arrangements have for them. Consequently, the focus of analysis will be upon the victims’ arrangements and perceptions of their Conduct of Everyday Life and the meaning they attribute to it.
Furthermore, the different layers of insight and knowledge about the interviewees’ lives are another main topic of the interviews. The interviewees often refer to the question of who knows what about their lives and everyday conducts and especially the meaning it has for them. It has been possible to perceive that the victims carefully distinguish between types of information and those who receive them, respectively. Consequently, it has to be assumed that the present data represents a specific moment in their (constructed) everyday lives. I believe I have been able to access previously unstudied part of victimization. I have been at least partially able to access the specific meaning, victims’ attribute to their Conduct of Everyday Life, an element which is generally completely hidden and not revealed by the victims. Furthermore, it has been possible to access victims who form part of a large obscure population. Thus, notwithstanding existing methodological limitations, the following analysis provides new and specific insight into the victims’ daily lifeworlds, linking still unconnected parts of knowledge and generating new understanding for victims.
5. Looking at how victims conduct everyday life

The present chapter is guided by a double search: first, my search for the victims’ Conduct of Everyday Life, hidden between the differences of individual and sociological perspectives and behind a curtain of narration and specific attributions of meaning and different assumptions; second, the victims’ struggle to cope with their everyday lives, combining the singular and overwhelming with the ordinary and normal. Hence, in the first part of this chapter, I will reflect on narrative moments regarding everyday life, following the direction of “narrative sociology” (Oltra et al. 2004)\(^ {196} \) and, in the second part, I will describe the different expressions of the victims’ Conducts of Everyday Life.

5.1. Narrative moments

5.1.1. The narrative absence of everyday life

As already outlined in chapter 2.2., everyday life is characterized by invisibility. It is assumed that it is naturally and normally there; that it is not worth mentioning; that it is grey and unimportant; that everybody has it automatically; and that everybody knows what it should look like. Therefore, everyday life is simply lived. Actors take their everyday lives -based on routines and interactive conventions- for granted (Giddens 1995, 53), including all type of activities, attitudes and objects handled on a daily basis but which are not normally talked about. Since everyday life does not include singular events, everyday life is often considered to be immaterial. Furthermore, everyday life may not seem important, because generally nobody is interested in the normal, but rather in the exceptional and outstanding. Therefore, it might be difficult to talk about, precisely because people are generally not aware of their everyday life.

Despite these general methodological concerns regarding the verbalization of everyday life that we have already referred to in the previous chapter, the women I interviewed talked readily about their

\(^ {196} \) Compare footnote nº 144, p. 94.
everyday life arrangements. But often what they were talking about did not represent everyday life for me, and what I expected as an interview on everyday life was not what they were experiencing and living on a daily basis. Therefore, my struggle to find the victims’ everyday lives in their interviews taught me that it was not the women who were not talking about their everyday lives— which had been my first suspicion—but me who was not understanding what they mean by everyday life and what everyday life means for them. According to Giddens, we did not share the sensation of a common reality (1995, 53). Hence, in the beginning, I felt like a stranger visiting an unknown world, talking to natives about their everyday life in their world, but the lack of common horizons made understanding difficult if not impossible to achieve. Consequently, from an outsider’s perspective, day to day life is seemingly absent in the victims’ discourses and they apparently do not perceive their everyday life as a regular pattern.

**The puzzling interest in their everyday lives**

First, some of the women interviewed had difficulty understanding my interest in their everyday lives. This may be partly a result of the general and previously outlined specific characteristic of everyday life, possibly reinforced by symbolic gender hierarchies that attach social worth to professional life while other forms of work or activity, such as housework, the bringing up of children or the care of older people, mainly female occupations, are considered to be less important.

But apart from these more generalized moments, some women seem to be completely focused on their life-stories marked by violence, its

---

197 Compare Erikson’s citation (Erikson 1976, 11) on p. 10.
198 As already outlined in the previous chapter, I also interviewed a woman who had not been affected by sexual violence in order to see what might be an alternative narrative pattern on everyday life. This single interview can not be considered a control interview, but it helped me to correct my false assumptions and expectations and overcome the lack of understanding of the victims’ narratives. In this sense, I followed Grounded Theory-techniques looking for contrasting comparisons.

Regarding narration, it is possible to distinguish two main story lines in this interview: The first one refers to everyday routines: what, when, where, with whom and how things are usually done, sometimes including the emotions which accompany the activities and the sense attributed to them. But generally speaking, it can be considered an casual narration, reflecting evolution due to a changing context and priorities. Even constraints from outside, such as illnesses of family members are normalized and presented as something that simply happened, reinforcing an already existing tendency. The second story line, which is introduced towards the middle of the interview, refers to variations regarding the first story line and the general and daily routines. It reflects the flexibility and dynamisms of the standard routines explained in the first story line.
memories and consequences. As a result of this singular fixation, it seems to be difficult, if not impossible for them to understand why somebody should be interested in their trivial and peripheral daily patterns and not in their main story and concerns. For them, their everyday lives are constituted primarily by this main story and it is this predominant story line that keeps them going, in a way that they have not voluntarily chosen. By telling their own main story, they are apparently trying to exorcise it and its side effects, wishing and hoping to be freed. They do not seem to mind the unremarkable moments of everyday life, because they do not worry about them. Yet at the same time, they seem to long for a life without incidents, as Elaine (347-354), who dreams of sitting under an apple tree in her garden for days without any interruption, stated. In contrast, they may feel driven by a kind of fate they have to face. Therefore, some of the interviewees seem to assume a mission which they also try to follow in the interviews, trying to pass a certain message to the researcher that it is possible to overcome the repercussions of a sexual assault.

“I think that I can give people something with my poems; eh, somehow I also want to encourage them that it’s possible to find oneself through these turbulations of life and through these horrible things; that you can find yourself. I would like to somehow encourage this. I would like to give something to these people; so that they may find themselves also with this longing or with the .h this rage which then comes, that this fact of finding oneself that they may find a way to find themselves. Yes." (Jane 826-831, (1))199

Apart from Jane, there are also other women, such as Blythe or Pia, who want to encourage other victims with their example, showing that it is possible to partly overcome this suffering.200

In this regard, they apparently follow a general trend that consists of neglecting daily routines and considering everyday life as something minor. This attitude probably gathers intensity with the feeling and the awareness of living an overwhelming and overwhelmed life. This conflict of interest

199 The citations have been translated as close as possible to the victims’ original words (in German), following the principles of a genuine rendition, including the doubling of words or the unusual use of words. Grammatical mistakes or unfinished sentences in the translation refer to similar errors in the original. The original citations are listed in the annex 10.5, pp. 335-364. The signs are used following the rules of transcription, according to the Gesprächsanalytisches Transkriptionssystem GAT (Selting et al. 1998). Compare annex 10.4., p. 334.

200 Compare chapter 5.3.5, pp. 215-221.
between some of the interviewees and the researcher sometimes even generated an atmosphere of mutual disappointment; the interviewees may have thought that the researcher missed the point while the researcher in turn would become annoyed because the interviewee did not stick to the questions. Some interviewees directly expressed their incomprehension, either by requesting more precise questions or explaining their disappointment in the post-interview contact, asking why we talked so much about their everyday lives and not about their childhood or youth, which they consider to be more affected or problematic. Hence, the message they wanted to pass on to the researcher or the reader did not correspond with the focus of the interview, which in some cases caused irritation and misunderstandings.

The shameful connotation of everyday life

Second, linked to the previous point, another specific feature which might make my informants unwilling to talk about their everyday lives could be the shame that some of their everyday patterns might produce. Some of my interviewees seem to be aware of the differences between their everyday lives and presumably normal daily patterns. Consequently, they may feel ashamed or even afraid of not being understood and accepted, reluctant to talk about something they generally try to hide. Since they are probably not used to being understood and few people ever seem interested in their lives, some are completely surprised by this interest, which places them in a totally unknown situation. This contradicts their usual behavior which mainly consists of hiding their specific concerns and problems and trying to appear as what they would describe as «normal».

However, their hiding of some attitudes and behavior that they see as deviant may even generate more shame, since the women perceive themselves as incoherent and false, as if they were lying to those around them. This contradiction between protecting oneself by hiding behind a façade of normality201 and revealing one’s everyday life might be a paradox for the victims, because most of the time -almost always- they hide the

201 Please compare the next subchapter, 5.1.2., pp. 136-143, on the role of normality in the interviews.
reason and motivation for their activities and both behavioral strategies cause shame.\textsuperscript{202} And these are exactly the activities that, within the context of our interviews, they are asked about. For example, one of the interviewees often interrupts her narration by asking “Is this understandable?” (Julia, 130 (2)), thus demonstrating her doubt of the researcher’s interest and eliciting further confirmation. Consequently, the general interview might represent a completely paradoxical situation for them.

Furthermore, and as some of the cases seem to suggest, interest in their lives may produce awareness of the paradox that they perceive themselves as different and that they assume that they are perceived as different, even though they make every possible effort to hide their circumstances.

“In the past and during years, I’ve thought that it was written here on my forehead and everybody could see it. Also then this effort not to look into anybody’s eyes, because I immediately had the feeling, they can see it. They can see it.” (Kate, 1151-1154 (3))

Kate thus talks about a physical and visible mark or stigma she perceived and which made her change her behavior towards other people, limiting her interaction and communication with them.\textsuperscript{203} In a way, the victims try to act as if nobody can see their distinctness and stigma, while knowing and wishing, in a paradoxical way, they were understood and heard. They fear nothing more than being discovered and revealed, which makes them put even more effort into hiding their assumed stigma. This apparent contradiction is accompanied and maybe even ruled by a loss of communication between victims and non-victims, referred to in chapter 6.2.

\textsuperscript{202} Compare pp. 193-194. Some interviewees even talk about wearing a mask.
\textsuperscript{203} Courtoise (1988, 105) also mentions the victims’ sensation of stigma and feeling different from others.
A motion of confidence

Third, victims have often learnt not to trust other people and to doubt people’s sincerity (Herman 2001, 51-52). To talk to a stranger, although a woman, about their private everyday life might represent another unknown and paradoxical situation for them. In this context, it seems to be completely normal and natural that the victims either do not talk about their everyday lives or hide them behind other conversational topics. Consequently, I assume that the interviews reveal only a small part of their everyday lives, probably because they dare not talk about, are not aware of or are simply ashamed of the omitted parts. Furthermore, in the interviews, they clearly state to whom they tell which part of their lives, and their everyday lives. For example, Kate told her husband and older sons about her abuse, but not her younger daughter, and Mary only told her now-defunct husband. Hence, they seem to be very self-conscious, attributing and constructing a conscious hierarchy to their words and those who hear them. This control over the revelation and distribution of information partly restores their control over their stories and it allows them to get hold of their life through defining the limit between private and public issues.

The denial of everyday life

Yet, not withstanding these objections, the women report on their everyday life, although not in the sense I had initially expected. Fourth, some interviewees explicitly deny the existence of everyday life and ritual patterns, when directly asked, for example, about morning routines or rituals.

“Karolin: When you get up in the morning, is there any ritual that you have?
Elaine: No, not at all.
Karolin: Not at all...
Elaine: SURE YES. Er I get up and then I brew some coffee. And then, when I have had my second coffee=cup of coffee, then the dog gets up, and then we go out. (-) To do a wee. (--) Well and then then I start something and .hh I guess it’s at about 10 or 11, then everything is over. Then I’m in my .h then even in summer nothing makes me go out. In the garden (-) mh (2) I also don’t know, well I come the most silly thing .h that’s a burden for me, at the moment. Such banal things, for example when our neighbor downstairs doesn’t
take out the waste container. You can tell her TEN times „Come on Rose.“ Everybody has
their weekly tasks and you always have to see to it. And then sometime I blow my top and
then, well, I’m angry again and then I have again my picture of an enemy, no? I don’t have
any rituals.” (Elaine, 33-48 (4))

Elaine tells this story between two denials “I don’t have any rituals”. She
seems to describe an explicit daily routine, but by means of the negating
narrative frame, it is unclear if Elaine only makes the story up to satisfy the
interviewer, or if she simply does not perceive her daily behavior as
routine. Her narrative emphasis may lie in the interruption of her everyday
activities, which she probably does not interpret as a routine or a ritual. It
even marks the end of everything, “then everything is over”. Her answer
sounds like she is being guided by her wish to be seen as normal.

From her personal point of view, her everyday life is interrupted and
she has lost what she considers to be her daily pattern. But, from a
sociological point of view, even the interruption can be perfectly considered
a characteristic of her specific everyday behavioral pattern. In this context,
everyday life is absent in the interviewees’ conscious narration, but present
in its content. Therefore, it may be invisible at first glance and it only
becomes visible upon developing further understanding of the victims’
situation and being able to join the fragmented signs together. Only by
means of an accumulation of evidences and symptoms are we able to fuse
together an integral picture of the victims’ everyday lives.

The constraints of everyday life

Fifth, routines and repetitive patterns are often referred to as
constraints. Therefore, the description of the repetitive patterns does not
initially seem to portray routines. The women mention them casually, either
because they are ashamed of them or because they present them as
involuntary constraints or compulsions. An example of such behavior would
be excessive cleaning -both of the house and of their body.204 Hence,
everyday life becomes interwoven into other narrative lines and,
consequently, seems to disappear on an explicit level. It may also be that

204 Compare pp. 188-189.
these routine activities are perceived as stigmatized or deviant and the victims pretend to hide and cover them up, fearing being disappointed by the interviewer and the effect of the interview, not knowing what will happen once their well-hidden secret has been revealed. Due to the previously described double effect of shame -both regarding the hiding and revelation of their stories- they are somehow caught in a trap of an irresolvable paradox and doubly negative expectations. Once again, everyday patterns seem to be differently interpreted by the interviewee and the interviewer. That which for the victims represents a loss of everyday life, insofar as it interrupts socially-accepted daily activities, represents a specific characteristic and behavioral pattern for the researcher, one which interrupts the victims' activities.

**The trivializing of everyday life activities**

Sixth, and also concerning the issue of excessive cleaning, everyday life activities may also be disguised and covered by their apparently trivial meaning. In the following citation, Julia refers to her sleeplessness and what she does at night, when she can not sleep.

“Julia: As stated, either I force myself to rest. Or I clean a little bit, watch cartoons, or do something else, something foolish? Having a shower. But that’s quite difficult, well. […]
Karolin: And then, what do you do on the weekends?
Julia: Well cleaning. Yes, a lot of cleaning, also showering, (-) and at the moment, I’m trying to set up a plan. Scheduling each hour and then sticking to it. Well, establishing a kind of structure, er for everything. Yes that’s what I’ve been trying to do recently. So that nothing can overwhelm me. And well also meeting with friends or something like that. Sport. I’ve been going running recently.” (Julia, 59-61; 76-82 (5))

Julia explicitly tries to trivialize her activity “having a shower”, giving it the connotation of “something foolish”. And in the second part of the citation, she fits activities, such as cleaning or showering, which apparently take a lot of time and space in her life, into a wider frame, partly disguising and trivializing them, by putting them next to socially more acceptable activities, such as meeting friends or sport. Hence, activities, which might be
considered normal everyday actions, often seem to have a specific importance for the victims, for example structuring their day or cleansing themselves of shame. In the narrations, they are often introduced by according them very little or null importance. This may very well be a strategy of hiding and testing the interviewer, whether she guesses the intrinsic meaning of the activities and captures the attention of the interviewee, despite its hidden meaning. In this context, the interviewer apparently plays a specific role for the victims: as mediator, caretaker, diplomat for a cause, yet without being attorney or representative.\footnote{This role seems to be close to Goffman’s \textit{Stigma} (1975, 30) and the role he attributes to the sage people.}

**The disappearance of everyday life**

Seventh, some victims describe how they get lost during the day, meaning that they are not able to manage normal everyday routines any more. From their individual point of view, they interpret this as losing their everyday life, but from a sociological point of view, they are coerced by external triggers and surfacing memories which often show up and make them react in a regular way. It is possible to talk of their specific everyday life routines, although they do not correspond with what is commonly expected to be routine. But -as these behavioral patterns are not socially recognized- my informants do not present them as such. They are often not aware of the role and connection between their sexual victimization and their Conduct of Everyday Life, as they do not link common everyday life with the singular and exceptional violent assault.

What seems even more important is that they do not perceive their everyday life as such. It is apparently covered by a general impression of alienation and abnormality. In this sense, they seem to lack what would be considered a classic and ideal everyday life, and in the interviews, this ideal everyday life often seems to disappear, while only the nuances and variations seem to emerge. Their everyday lives often seem to lose their structure and the only things that remain are the exceptions and variations, such as illnesses, day-dreaming or addictions. Therefore, from an individual
perspective, the Conduct of Everyday Life often seems to disappear for them, although sociologically, it can be perfectly described.

Hence, the victims’ narratives are not only doubly but triply constructed: first, they socially construct their actions and attributions in the field of victimization; second, they socially construct their actions and attributions in the palpable and common field of everyday life; and, third, they narratively reconstruct their everyday life. Therefore, their victimization works as a filter which covers and often hides their everyday lives. Consequently, it makes normality non-existent.

5.1.2. The narrative absence of normality

Apart from the general discursive line regarding the absence of everyday life, most of the interviewees discuss the topic of being different or feeling alienated from the real world.

The victims’ perceived difference of their everyday lives...

They seem to perceive themselves, their bodies and their behavior as not normal. In order to refer to this difference, they often compare themselves with a “normal person” or an alleged normality.

“[…] then again things which which I simply wasn’t able to classify. Simply as maybe a normal person is able to do or simply smiling or simply having an opinion about something immediately. hh Then that that was not possible. That was absolutely not possible.” (Pia 852-855, (1))

Pia often feels overwhelmed by the exigencies and problems of her surroundings. She compares her problems managing these situations and her lack of emotional distance to a “normal person”, who supposedly would simply be able to manage and integrate the situations, she -as an allegedly abnormal person- is not able to.

Features, which seem to mark this assumed difference, often refer to problems dealing with everyday life. Examples are:

- not being able to have a common mailbox with one’s neighbors because of privacy concerns (Elaine 324-335);
- not being able to enter a restaurant, because one is afraid of being noticed and being looked at (Kate 480-491);
- not being able to go shopping or, on the contrary, going shopping for hours (Thelma 274-289 and Angela 71);
- different kinds of disorders concerning eating, hygiene or sleep, such as having a shower several times a day (Ayla 249-255, Angela 114-115 and Julia 469-472);
- feeling lonely although being with many people (Kate 836-843);
- not feeling free and living under permanent pressures and constraints (Elaine 6-32 and Blythe 56-76);
- not acting according to one’s age, such as wearing girlish punk-dresses at over 50 or playing in a paddling pool at over 50 (Nicole 330-347 and Elaine 374-378);
- having the perception of wearing the stigma of sexual violence on one’s forehead (Kate 1152-1153);
- dressing in different ways in order to hide, pass unnoticed or appear unsexy and unattractive (Julia 225-237, Angela 235-250 and Mary 510-523);
- following socially not accepted or rare behavioral or temporal patterns, such as starting work in a normal office at 5 o’clock in the morning as a result of serious sleeping problems (Julia 17);
- giving a false reason for one’s actions or hiding one’s motivations (Julia 68-75);
- and so on.

...in comparison with an alleged normality...

But while talking about what the interviewees perceive as different, their discourse refers automatically to what they consider normal. They repeatedly deal with normality, referring to it as follows:

“ [...] that are things which don’t bother a normal person any more, or?” (Elaine 333-334, (2))
“And that are somehow things, well, I say trivial things for others and for me they represent such a mountain.” (Kate 510-511, (3))

“Or if this is normal, if it’s the same for other people. No idea?” (Kate 987-988, (4))

Consequently, they permanently construct a contrary horizon of experience, they refer to things from which they are excluded and they do not know as “normal” or “trivial”. But at the same time, none of the interviewees explicitly describes what she considers to be normal or what normality consists of. It seems as if normality is considered to be naturally there, without requiring further explication. But although they do not directly refer to normality, they often construct a horizon of experience and meaning contrary to the alleged normal one. Therefore, generally speaking, the women interviewed seem to construct everyday normality as the normality of a non-victimized person. Consequently, they, as victims, perceive themselves as different and they alienate themselves from their own existence with each comparison, even when not necessary or required.

Moreover, for the interviewees, the normality of a non-victimized person is supposed to be worriless, without major problems, without permanent drama and catastrophes, and without the “byproducts” (Ayla 78) of sexual violence or major obstacles or “mountains” (Kate 478). Therefore, normality is constructed as a carefree life, neither influenced nor disturbed by violence, a vision shared by most of the interviewees.\(^{206}\) In contrast, most of the interviewees describe their own everyday lives as “oh, difficult” (Angela 15, (5)) or “I am simply not getting on with my daily life” (Elaine, 15 (6)). Only a few seem to have attained an everyday life which they describe as “quite carefree” (Blythe 17, (7)).\(^{207}\) Consequently, they compare their own everyday lives with what they perceive in their environment and construct it as an exception, a singularity and a burden. They feel in some ways unique and special, even though the pain they endure is common to all victims.

\(^{206}\) They are not aware of the fact that violence is present in everybody’s life and that its impact depends on the type and scope of violence experienced and one’s own resilience to it. Ritchie et al. (2006, 37) define resilience as following: “the process of adapting well in the face of adversity, trauma, tragedy, threats, or even significant sources of stress.” Factors to resilience are: seeking help and building support networks; believing in recovery; focusing on the positive effects of trauma; viewing themselves as in control; avoiding denial and the use of addictive substances (Ritchie et al. 2006, 39).

\(^{207}\) Compare chapter 5.3.5, pp. 215-221, on commitment.
...and an abnormal normality

Retrospectively, Blythe describes the difference - which she and her family had always perceived as a “quirk” (“Tick” in German, Blythe 503) - which has been producing conflicts with her social environment for decades. But since they were not able to put it into a broader context, it was simply considered her “personal quirk”. Hence, this “quirk” was something unintelligible, different, sometimes producing conflict and alienating. She only acknowledges her “quirk” retrospectively, because she “simply did not notice that this is not normal” (Blythe 811-812, (8)). But despite this normalization and unawareness, the “quirks” were noticeable and created conflicts and problems with her social surroundings.

Others try to normalize their difference by putting socially accepted labels on it, such as being ill. There may be an intention to translate their perceived specific situation into a socially-recognized, known and labeled event. Contrarily, others emphasize the difference between socially-defined disorders and their own perception of the situation, with sentences such as “I’m not ill but weird” (Ann 127, (9)). In contrast to “ill”, with its social and medical connotations, “weird” stands for something, society can not work with. “Weird” refers to social alienation and exclusion. “Weird” people are lunatics, living in another world. At the same time, some postulate that they have not only been shaped by their experience of sexual violence, that their character is formed by many influences, yet at the same time, they perceive and describe themselves as highly stigmatized, imagining that the stigma of the sexual assault is written on their forehead and that everybody is able to perceive, see and read it. It seems that they feel condemned and constrained by the violent incident, while emphasizing that it is only one part of the whole picture. Paradoxically, they recognize its enormous influence and they want to free themselves from that, at the same time.

Apart from their own perception of being different, some refer to the process of social stigmatization and exclusion by others, such as colleagues or friends. Some might be even be openly called “not normal” by their friends or even “crazy” by their colleagues.
In this context, Jane explains how her friend’s remark made her really angry. She considers it unjust, that she has become stigmatized, because of the fact that “one became ill as a result of a rape” (Jane 285-286, (11)), not only by her friend, but also by her colleagues. Thus, some perceive themselves differently and others are told to be different by their social environment. Consequently, a major narrative line of the interviews, which mainly deals with difference and normality, discusses strategies of hiding and masking one’s distinctness, by means of friendliness or a performed and constructed normality.

“and always playing the strong one. Always really friendly. (-) They can’t attack me, I’m wearing such a thick armor.” (Angela 55-57, (12))

Hiding the difference, hiding sexual violence

By this means, they apparently try to mask the difference with the purpose of being protected or becoming invisible and normal. Consequently, the difference is often perceived only by the victims. If the cover were perfect, those around them might even not be aware of the victims’ alienation, involuntarily intensifying their agony by asking for a more and more perfect mask, fostering a vicious circle. This has to do with the fact that the victims have to make a constant and permanent effort to construct their identity, which in turn they perceive as artificial. According to Giddens (1995, 80; following Laing and Winnicott) too radical a discrepancy between the daily accepted routines -an apparently normal everyday life- and the chronicled biography of a person -in the present study their victimized biography- generates a “false self”, being a manipulated object or instrument. The maintenance of this “false self” requires a huge effort, because a perfect facade has to be built and managed, portraying an allegedly coherent reality. Consonant with Goffman’s metaphor of the theater in the Presentation of Self in Everyday

---

208 Regarding the victims’ mask, please compare chapter 5.3.1., pp. 193-194.
Life (Goffmann 1983), some of the women perceive themselves as being permanently on stage, as actors in their lives, without really assuming the role. Hence, the interpretation remains alien and false, and retrospectively aggravates the “false self”. In the end, this vicious circle becomes exhausting for the victims, enforcing their alienation even further. This intent to hide one’s singularity not only covers their alienation with layers that put a heavy burden on them, demanding a lot of personal effort, but also makes their victimization invisible and makes it even more difficult to overcome the gap which seems to exist between the victims and society.

First, the victims are often so fixed on their specific problems that they may become blind towards other opinions and realities. They seem to be unaware of the fact that there is no such thing as an easy life. Every person has to face his or her specific problems and victims often seem to believe that by overcoming their victimization, they can solve all the problems in their lives.

Second, by becoming invisible, the victims often do not perceive that they are not alone in their agony and that there are other people with the same problems. They may deny an awareness of being a group, a population that could be of some meaning to society and also share some interests, like creating solidarity among victims which might help them to find a common identity and a common voice to communicate with the rest of society.

“Everybody deals with it in a completely different way, I assume, no? Everybody deals with it differently. (4) I really would like to come across a woman who has the same as I do. I would like to talk to her.” (Angela 248-249, (13))

Although Angela is currently doing group therapy with many other victims of sexual violence, she feels lonely in her situation, expressing the wish to know other women who have the same problem. Yet despite the possibility for creating solidarity-bonds with others, she is not even aware of the fact that she is not alone in her situation. Paradoxically, she is bound to her sexual assault experience, in the literal sense of bondage, and she is not able to create bonds with other victims.
Third, in a certain way, the mask makes the consequences of sexual violence chronic and transforms them into a latent pattern which maintains the violence in an undetected and undetectable status, working as the hidden script of a play. Sociologically speaking, it could be said that victims apparently do not share the same horizon of experience with society, because terms like confidence, trust, security, expectations and expected probabilities have another meaning for them. These are the central aspects around which social institutions base their functioning. Without this common ground, it would be difficult to cooperate, build social bonds and solidarity. Consequently, while everybody lives in their own world, violence marks and transforms the victims’ world in a very specific manner.

Following Scarry’s concept of the “unshareability” of pain (Scarry 1985, 4), sexual violence also seems to be “unshareable” as a result of “its resistance to language” (Scarry 1985, 4). Pain does not only resist language, “but actively destroys it” (Scarry 1985, 4). According to Scarry, it is impossible to share one’s experience of pain with somebody else, because there is no object to talk about, there is no objective dimension and there are no adequate words to differentiate the tones of pain. The same thing seems to happen with violence and its consequences. A person in pain can not be compared to a person not experiencing pain. Or even further, a person who has never ever in his or her life experienced pain has no possibility of understanding what pain might feel like. Their different horizons of experience alienate these two people up to a point where mutual comprehension is impossible. And if there were so few people suffering pain, how would they feel in a society which does not understand or only partly understands what pain feels like? Or if there were quite a lot of people suffering pain, but there was such a great taboo on it that nobody spoke about it, how would these people feel? It is possible that they would try to cover their pain, make it disappear, despite its existence, feel lonely in their agony, feel isolated in society, perceive themselves as different and construct a positive horizon of a normal society without pain.

This might illustrate the paradox victims of sexual violence live in. They apparently believe that normality is a carefree and non-violent life, but within their biography and situation, they live a perfectly normal life. Only
compared to non-victimized people, do they seem to have a “false self” (Giddens 1995, 80; following Laing and Winnicott).209

“I say, well, I think that it probably wouldn't be like this without my therapy, but there I have simply learnt that this is not so exotic, that I'm nevertheless normal or whatever. Yes.” (Pia 922-924, (14))

It may be easier for them to consider their own life, to be the exception, perceived as agony and a burden, maintaining the hope of a utopian normality and a life free of violence.

“And I think that’s my essential problem; because I've NEVER experienced it in a different way yes?” (Carla 317-318, (15))

In her citation, Carla refers to her problems tolerating and enjoying sexuality. Since her first sexual contact consisted of being raped by a stranger, she has carried this experience as a burden throughout her life. After having overcome her addiction to alcohol and living currently in a «violence-free» partnership, she expects her sexuality to reemerge and recover. For this reason, she has started therapy, because she wants somebody to tell her how it works. Since nobody is able to offer her a recipe, useful for her, she becomes frustrated. Hence, once victims have reached their utopian normality, they start discovering that there are more shades to life than black and white and that there is no such thing as only violent or absolutely violence-free, only facing problems or living an absolutely easygoing life. However, it seems to be difficult to overcome dichotomous ways of thinking.

5.2. Some case reconstructions

Before describing the more abstract categories and patterns, characteristic of the Conduct of Everyday Life of the women interviewed, I will present the everyday life of five of them. This may facilitate a better understanding for the reader and serve as an introduction to the data.

209 Compare footnote nº 206, p. 138, on resilience.
Therefore, I will begin by summarizing everyday life for each case, adding some necessary biographical information.\textsuperscript{210} Afterwards, I will analyze their everyday life activities and attributions through the theoretical framework of the Conduct of Everyday Life and, at the end of each case, I will put the case-analysis into a more general sociological context.

\textbf{5.2.1. “Until December I still had a work; then nearly everything was OK“ (Thelma 15-16, (1))}

**General description of Thelma’s life**

<table>
<thead>
<tr>
<th>Thelma loves getting up very early in the morning, sometimes even at about 3 or 4 o’clock, because staying in bed is agony for her. Since she has a lot of nightmares, she waits for the day to get started. First thing in the morning, she puts the radio on. Thelma feels less lonely then. Since she has been unemployed, she has tried to organize some activities and appointments during the day, in order to maintain the daily rhythm she had while she was still working. In the evening, she tries to go to bed early, but often she has problems falling asleep.</th>
</tr>
</thead>
</table>

Thelma was raped as a teenager. Later, she married a man who was an alcoholic and proved to be unfaithful. They have two children. While her children were younger, they shared roles: her husband worked and earned the money, while she worked mornings as an office clerk and in the afternoon she undertook different activities with her children. She was not really happy in her marriage, but she enjoyed being a mother. They lived in the German Democratic Republic and in 1989 they fled, with great difficulties, to West-Germany. Since then, she has worked in different jobs, mostly as an office clerk but sometimes as a factory worker or caring for the elderly.

Currently, Thelma is in her 50s. Since her husband died several years ago, she now lives on her own. Her two children have already left

\textsuperscript{210} The summaries are based on the complete set of data, including the medical documentation, protocols and interviews. In order to facilitate the reading of the text, I do not document each single data, because the information is often taken from several documents, for showing a more complete picture of the case, filling the information gaps of one source and contrasting contradictory data.
home and are studying somewhere else. In addition to her husband’s death, there have been a few more deaths in her social and family circle within a very short period of time. Among them, it is her father’s death that has most affected her. Since these events, she has had some episodes during which she has been unable even to leave the house. She stayed in her pyjamas and stopped washing her hair. She sometimes got up for a couple hours in the afternoon, to watch TV or to see her children when they visited. She felt fine while somebody was with her, but the rest of the time, she felt extremely lonely and sad. Thanks to her children’s intervention, she was able to change her behavior, begin to leave the house and take up some regular activities. A consequence of this retreat-episode is the fact that she will still not go shopping on her own. She gets anxiety-attacks upon entering shopping-malls or supermarkets. She tries to hide this avoidance strategy by not telling anyone about her problem. She writes long lists of what she needs and when some of her friends go shopping, she simply accompanies them, making huge purchases which will last for a long time. She has lots of friends to do things with during the week. She especially loves dancing and going to the sauna and the solarium. Since she does not consume alcoholic beverages, her friends always ask her to drive them around. They regard her primarily as a happy, strong and active woman. When she tries to share her problems and anxieties with them, they are often surprised, because this does not coincide with the image and perception they have of her.

Thelma suffers from multiple pains which are not necessarily linked to physical causes, including hypochondriac tendencies. Her body also produces what she perceives as strange sensations, such as a swollen belly and tired and heavy legs. These symptoms and discomfort often limit her level of activity and her movements. But they also make her everyday life unforeseeable and unpredictable. In total, she is being treated by about 16 physicians and a psychologist. In order to manage all these appointments, she has to write everything down in her diary. She hopes to find a new job as an office clerk and to buy herself a flat. She dreams of building herself a nest. She needs security in her life and tries to be a perfectionist.
Thelma’s Conduct of Everyday Life

Thelma’s general everyday conduct is characterized by great flexibility and adaptability, seen for example in her fleeing with her family from the former German Democratic Republic to Western Germany or her ability to find new jobs. Therefore, she is seemingly well integrated into society, through her family, her work life and medical and therapeutic care. She has a lot of skills and interests which widen her space of interaction, allowing her a certain freedom of choice and more flexibility. Nevertheless, she states that she needs an external time-regime. This was previously provided by her children and by her jobs. Since she is currently unemployed, it has become difficult for her to organize her day. Her sleeping disorder generally aggravates her time-management plan, making her begin her day very early because of surfacing memories linked to sexual assault and grief, which disturb her nights. Nevertheless, she tries to maintain a certain structure through engagements, such as medical appointments or leisure activities with her friends. Therefore, she maintains a well-kept and rigid diary with several activities and appointments a day. She thus seeks to maintain a certain structure in her life, which represents and offers her security, possibly linked to the context of socialization in a socialist country and to her self-esteem, injured by the sexual violence she suffered in her youth. Evidence of her need for material and emotional security is the fact that she was not willing to end her marital relationship, although she was quite unhappy with it.

She has a vast and supportive network of friends and contact with her family members on a daily basis. On the one hand, she has people to rely on and she can talk to them about her problems. But on the other hand, she also feels extremely lonely and misunderstood, because she generally shares her nice and active side with her social surroundings. Sometimes, when she tries to show her more passive, depressive and sad side to her friends, seeking, for example, emotional support, they have problems in assuming what for them constitutes the opposite character of what she has shown them and accepting her sadness or suffering. In these moments,
Thelma has to explain herself and make a major communicative effort in order to allay their surprise and doubts.

The loss and mourning of several loved ones has destructured her daily rhythm and triggers feelings of shame, since she grieves more for her defunct father than for her dead husband who had made her suffer because of his alcoholism and unfaithfulness. These disruptive life events have produced an acute life crisis, characterized by arousing memories and symptoms linked to the sexual assault of her childhood. Hence, in answering the medical questionnaire, she gives "rape" as the reason for her current problems and situation. Yet, Thelma is a resilient person and has the necessary social network and tools to cope with this crisis or at least to seek or obtain the help she needs. Nevertheless, for a couple of months, it made her lose control of her previous Conduct of Everyday Life, as it had been determined by her job and family obligations. During that period, Thelma reduced her activities and living space, limited her social contacts to close family members and time «ceased to exist» for her. But the external intervention of her children and therapeutic treatment helped her to overcome this period of self-isolation and retreat from social life that she went through right after the deaths of her father and husband.

At present, she sees herself as an active person, pushing herself to the forefront. She is prepared to work hard in order to achieve her own happiness. Therefore, Thelma takes «time-out» from her common Conduct of Everyday Life and she experiences her stay at the hospital, as “10 hours working” (Thelma, 83-84 (2)) in order to improve her situation. The hospital seems to provide her the distance and time-frame to approach her problems. This is how she shows that she is resilient and assumes responsibility for her actions and life. She is willing to work on the former and still ongoing bondage and dependencies -such as her unhappy relationship with her husband and the impact of a sexual assault in her youth.

However, her recovery is conditioned by her body, by means of her physical pains and physical disorders which have a double and paradoxical impact on her social integration. On the one hand, they reduce her social contacts and living space in an arbitrary way and disturb her time-
organization. Hence, they hinder her integration, for example, by complicating her job hunting. But on the other hand, and because she has lost hold on her external time-regime as a result of unemployment, her body offers her an alternative time-regime; because she has to care for it, for example, by attending medical and therapeutic treatments. These medical appointments currently structure her day and make her leave the house. Furthermore, since her husband’s death and her children’s emancipation, she has at least someone -her body- to care for. In this way, her illnesses also foster her integration by forcing her into medical and therapeutic treatments, which are supposed to re-introduce her to social life.

Hence, her body with its unforeseeable symptoms and illnesses partly rules her daily life, by changing her needs and by letting physicians and therapists intervene in her life. Thus, her body both disturbs and emphasizes her need for security and structure: interfering with her tendency towards control and perfectionism; altering her daily rhythm in an unforeseeable way; requiring even more flexibility in her everyday behavior; generating new worries; and creating a new time-structure. This dimension is captured in Turner’s notion of a “somatic society”, which he defines as “a society within which major political and personal problems are both problematized in the body and expressed through it” (Turner 1996, 1). In chapter 3.2.1 and referring to the historic evolution of sexual violence, it has been shown that construction of the body as the scene where somatic illnesses, such as hysteria or multiple personality disorders, take place, plays a major role in the discovery and recovery of victims. This produces different types of paradoxical patterns: first, a contradiction between the integration fostered and hindered by means of the body in pain, and second a contradiction between her propensity toward control and perfectionism and the structure-disturbing body. By this means, her body introduces elements which Thelma has problems accepting, obliging her to deal with plans and forcing different arrangements on her. Hence, it alters the way Thelma sees herself as a determined and active person who is in control of herself and her everyday life.

Nevertheless, Thelma is generally able to hide her tendencies to retreat and her incoherencies, maintaining the appearance of a happy, perfect,
involved, active and integrated woman. For example, she manages to hide her panic regarding shopping malls. She performs this role in the presence of other people. But sometimes paradoxical patterns become too obvious and she is unable to maintain the previously mentioned facade, losing control over her performance. Despite the surprise this causes within her social circle, which has difficulties in joining her generally visible active side to her mainly hidden, passive side, she nonetheless receives support in surmounting these depressive, helpless and disturbing situations, as in the case of her children’s intervention.

Sociological reflection

Generally speaking, Thelma has an active, interactive and flexible Conduct of Everyday Life. Nevertheless, her flexibility is contrasted by her seeking of an external time-regime and structure. Only the two previously mentioned interruptive behavioral patterns -her temporary tendency to seek isolation and her attention-seeking body- cause her to lose control over her life, reducing its adaptability and changing her active pattern into a mere reactive attitude, governed by the exigencies of her body. She alternates permanently between seeking and losing control, which has become a persistent and paradoxical pattern in her life. These contrasting conducts are likely to generate a kind of global confusion in her environment, because her reactions and emotions are often puzzling, surprising and sometimes even threatening for her family and friends. Thus, she becomes an unforeseeable person, who, on the one hand, seems to have both feet on the ground and, on the other side, has an anxiety or panic attack when entering a shopping mall. Due to this lack of consistency, her social circles often do not know how to treat her. It must be difficult for family members or friends to cope with this kind of instability and arbitrary behavior, ranging from the active and joyous mother and friend to a depressive, sad and retreating (unknown) stranger. Depending on which dimension outweighs the other, her surroundings become strained by the permanent changes in moods, feelings, attitudes and behavior. In addition, her controlling and perfectionist attitude also puts a lot of pressure on her immediate and close social network, leading to discussions of limits, boundaries and power; her
permanent struggle for perfection demands other people’s acceptance and cooperation, especially since she is not able to extricate herself from the difficulties she finds herself in. Hence, she depends on her family members and her friends - e.g. for going shopping with her - and she again loses control over her life.

In this context, her attitude is misunderstood and falsely interpreted, as her reality presumably contradicts her feelings and her aims, putting her in a situation of appearing pretentious and exaggerated. From outside, she seems to be a strong and powerful woman, which contrasts with her (inner) sadness and helplessness. The latter contradict her formal and public appearance, generating a paradox her family and friends have difficulties assuming. For example, when Thelma tries to talk about her problems with her friends, she has problems in communicating her feelings and her friends and acquaintances do not feel able to assume her weaknesses. Hence, and in combination with her pretension of perfectionism, the contrast between her real feelings and her intentions is apparently too extreme to be understood by others. For those in her environment, she loses coherency. This paradoxical situation is likely to hinder the development of self-confidence and endanger her social acceptance and inclusion.

Furthermore, her aching body requires a lot of attention, from society - through the health services - and from her environment, producing palpable costs for the health and social system. This attention-seeking can be seen as a selfish strategy, centering everything around herself and further intensifying the paradoxical tension between seeking and losing control. However, as previously mentioned, Thelma also has the skills to cope with her attention-seeking body. One of these techniques is «forgetting»: for example while dancing, she forgets her heavy and aching body and she feels “feather-light” (Thelma 117) and soothed. Another strategy is the «hiding» of behavioral patterns, such as her phobia regarding shopping. Despite these two avoidance patterns, Thelma does not present herself as a victim and her social circle does not perceive her as one either. Generally, it seems that she has sufficiently integrated her traumatic memories. Only in combination with other external crises, such as grieving
for loved ones, does she lose her external structure, which usually keeps her going. In this way, a later life event, unconnected with the sexual assault she experienced, seems to arouse memories and symptoms of past sexual assault, aggravating her troubles.

Socially, Thelma is only present as a victim through the health problems which emerged within the context of her life crisis around the deaths of loved ones. Previously, there was apparently no need for help or it was expressed differently. Therefore, it is her body which speaks for her, in the beginning disguised as simple illnesses and further on, establishing a link with the violence suffered, disclosing a past memory. Hence, one of the socially most remarkable and striking features is Thelma’s very high health costs, borne by social institutions, which make her perfectly visible. Nevertheless, her episodes of illness, disclosure and retreat are often not correctly diagnosed, as they are often assessed independently and not in their context. Thus, Thelma easily becomes an expensive member of and for society. Through a sensitive health system that is increasingly sensitive toward possible traumas and their consequences, Thelma has been sent to a specialized hospital, where she gets a holistic treatment, including both her physical and psychological symptoms. But apart from this «symptom», she remains invisible as a victim.

In addition to the health system, there are more significant others who offer her support. First, her children intervene to extricate her from specific situations, such as her self-imposed isolation, and, second, her friends involuntarily help her not to overcome but to hide her anxieties and behavioral disorders. They are apparently not aware of their role, which consists of aiding and abetting her avoidance-strategy, which simply prolongs her agony. In a paradoxical way, her friends and supporters have good intentions but do not know how to deal with the situation, merely intensifying her agony and contradictions; keeping her panic and avoidance behavior hidden only reinforces her situation, without guiding her toward any solution or escape from it. In this way, each time she manages to hide her weaknesses, anxieties and fears signifies a defeat in a never ending

\[^{211}\text{Compare annex in annex n}^{\circ} 10.1., \text{pp. } 323-328, \text{on the social policy regarding sexual violence and victims in Germany.}\]
struggle against herself, because it shows her dependency on others, contradicting her need for self-control.

At first glance, from the outside, the mourning for loved ones appears as the main cause for the changes in her Conduct of Everyday Life. But Thelma attributes her current problems to a remote incident of sexual violence, which for most social actors either never occurred or occurred such a long time ago that it is no longer considered relevant. Only very gradually has society assumed her attribution of meaning, providing her with the support she needs to build the bridges that can ease her isolation. Nevertheless, the burden of communication lies more on Thelma than on her social surroundings, whether at a medical, familial or friendship-based level, because it is Thelma who mentions her trauma to the health system. Paradoxically, the victim has to convince her friends and family and society of her condition, overcoming a structural and social lack of communication.

5.2.2. “I have worked as much as I could. I have simply (-) like BEAMING oneself away.” (Angela 19-20, (1))

General description of Angela’s life

In Angela’s words, her everyday life is difficult. She literally attacks her day. After getting up, she normally has no breakfast, but immediately begins her daily activities. Of the total hours in a day, she works nearly 20, splitting them up between cleaning the house, working as a kitchen assistant, gardening and washing. But she has also episodes of staying in bed or in her room, without drinking or eating, taking complete absence from everyday life.

Angela is about 40 years old. She was sexually abused by family members as a child. Later on, she had a relationship with at least one violent partner. She has 3 children with different men. She has always been employed, but she has never worked in the profession she was trained for. Recently, she has been living with a new partner and has moved to a new
house in a new city. She does not like the place and she does not get along with her partner’s family members, who are living in the same house and who remind her of her own family. Furthermore, she is permanently reminded of her abuse by the presence of one of her new neighbors who personifies her abusers in her imagination. On a daily level, her major aim is to occupy her day and time. Therefore, she uses the maximum time for every activity she does. For example, she explains that she uses a toothbrush to clean the toilet bowls or that she spends hours in the supermarket, although she hates crowds and shopping. She also takes a shower several times a day, staying under the shower for ages.

She makes her family and friends believe that she goes about normal activities and that she has a normal circle of colleagues and friends, thanks to her job and her leisure activities. In contrast, she always feels lonely and she is not able to trust anybody. Furthermore, she does not know how to deal with her weaknesses and insecurities other than hiding them. She is not able to talk to anybody about her situation. Therefore, she metaphorically hides behind “a thick armor” (Angela 57, (2)), as she calls it, which consists of a brisk, harsh and defensive attitude, combined with nice, friendly manners. Another strategy of hers is wearing sports clothes, in order to go unnoticed. She portrays herself as a person of strong character. As a consequence, she explains that she feels as if she is living in a castle. Sometimes, she tentatively opens the door to let somebody in, but she is generally ruled by a mistrust which further intensifies her loneliness and alienation. In this sense, the central motivation for her social interactions is: first, to occupy time and, second, to remain hidden and unseen. According to her own words, she usually manages to hide her compulsive activities, including attacks of rage, even from her children. Her care for them is ruled by an enormous fear, implementing a strict code of rules they have to follow. She shifts her own fears and anxieties onto them. Her concern for them makes her forget herself and her own needs, too. She wants them to have a happy life that she has not had.

Apart from the periods filled with activity, Angela also has episodes of “beaming herself away” (Angela 20-22 and 231, (3)). Then, she stays in bed or in her room, does not eat or drink anything and takes complete
absence from everyday life, avoiding any social contact and isolating herself. At these times, she needs someone to intervene and rescue her, because she says that she is not able to break this pattern by herself.

Regarding her body and intimacy, she says that she has no contact at all with her body. Only recently, she started talking to her feet. She cannot imagine going to the swimming-pool or solarium either. She feels completely alienated from her own body. Furthermore, she has started having serious health problems. As a result of them, she is not able to work anymore and had to resign from her job. After having suffered a partial paralysis to her legs a couple of months ago, being forced to use a wheelchair and even being threatened with permanent paralysis, her physicians asked her to talk about her memories of her traumatic past. They explained to her that speaking up would be her only means of getting out of the wheelchair and changing her situation. During her stay at the hospital and at the time the interview was done, Angela still used a walking stick for more security, but she has no major problems in moving her legs any more.

**Angela’s Conduct of Everyday Life**

Angela’s Conduct of Everyday Life is mainly characterized by multiple and compulsive activities, whose aim is to fill up her time. Time seems to have no value on its own, beyond that of being occupied. For Angela, being busy seems to be more important than the essence of what she actually does. In this context, she concentrates her activities on the house, tidying up and cleaning. Consequently, all her activities have a double meaning: first, the proper meaning of the respective activity, having a clean house; and second, an intrinsic and hidden meaning which consists of occupying time, finding no rest and avoiding thinking. Hence, her actions do not have the primary meaning, which they would have in a general sense. Or even more precisely, social attitudes interpret her actions in a different way than Angela does, as a result of this double attribution of meaning. There is a persistent generalized and global misunderstanding at work here. This produces conflicts, alienation, exclusion and a further sharpening of Angela’s (hidden) victim-status, because Angela -as an invisible victim- is able to flee from her victimizing memories, disguising
activities which make her forget her traumatic experiences. Thus she is able to cover up the emerging conflicts and tension, but feels lonely in her struggle, alienated from her family and friends who do not share her motives or misunderstand them. Excluded from society, she takes on more rigid behavior patterns and disguises the motives behind them, and so on. In this sense, Angela is caught up in a vicious circle.

Furthermore, the content of her actions, which mainly consist of tidying up or cleaning, can be considered to be a very common pattern in connection with sex and violence, shame and guilt, stigma and feeling tarnished. In this context, cleaning has a very symbolical value, becoming ritualized in specific ways. Hence, Angela seems to have the need to cleanse herself from the shame and stigma which stick to her. Consequently, her actions represent a hidden, symbolic message to her associates, who yet do not understand its meaning. Since cleaning is closely linked to the classic female role, it is a perfect cover for her and totally accepted by society. It is even likely to be regarded as a perfect adaptation of her gender role and social requirements, being a perfect mother and housewife who cares for her children and keeps the house clean.

From the outside, it seems that she has many friends and social contacts, but despite these visible interactions, she feels lonely. She explains that she perceives contact as a challenge, always testing her counterpart, a behavioral pattern which forms part of her survival strategy. In an interactive situation, increasing contact would result in cooperation. But in Angela’s case, contact becomes part of a pattern of fluctuating boundaries which have to be continuously discussed and reestablished. Her own limits and those of the others have to be permanently checked and controlled, because she is not able to trust her limitations and her own ability to protect herself or to be protected. Referring to this oscillation, Angela uses the metaphor of walking on a thin layer of ice. Consequently, she lives in a permanent fear of slipping or even worse breaking through it. As she is not able to trust anybody, not even herself, she continuously checks others’ reactions and pictures the consequences her own actions might produce in others.
Furthermore, she does not want to show her weaknesses and insecurities to others, something that bears a negative connotation for her. She presumably attributes this to notions of vulnerability, helplessness and exploitation which are closely linked to the abuse she has suffered. Therefore, she hides behind a mask of friendliness and strength, intensifying her loneliness and creating a gap between her and others. In this way, her behavior becomes contradictory and puzzling for any person, who would expect greater reciprocity. In fact, she may never be able to create real cooperation as a result of rigidly fixing and not trusting her limits, and not being able to differentiate friends from enemies. This represents a kind of vicious circle. She mistrusts society and society, not knowing what is going on, probably mistrusts her. This consequently generates conflicts which are impossible to solve due to the lack of mutual knowledge and also due to the lack of skills allowing her to build any trust in bonding. For example, such a conflict exists with her children, who, on the one hand, have a friendly and strong mother -at least that seems to be what her masks shows- and, on the other hand, an overprotective mother who is ruled by fear or often mentally «absent». Hence, their mother alternates in their perception and probably generates a general insecurity which is difficult for her children to deal with.

The other contradiction -wearing a mask of friendliness and having attacks of rage- produces the same kind of misunderstanding and conflict. In addition, it also generates a deep mistrust within the children themselves, because, as the rage seems to be absurd, it is automatically projected by the children onto themselves. Even though Angela does not physically abuse her family, the rage she feels inside also affects her surroundings. It alters her personality, a perfectly observable transformation, yet one that is not understandable to others. Moreover, the family is not in a situation to understand what is going on or to react in a proper way, since they are unaware of Angela’s victimization. This leads to a constant fear that her rage could fall upon one of the family members at some point, contradicting the concept of family as a shelter and provider of security.

In this sense, she shifts her own anxieties and her rage towards her children and family, who -without knowing why- are not able to understand
the reason for this attitude, especially when they compare their mother with other mothers. Moving from one partner to another, which may be a consequence of the misunderstood incoherencies and unsolved conflicts emerging in Angela’s environment, and the fact that her children have all moved out—all of them are either living with their respective fathers or on their own—reflect this generalized conflictive atmosphere, changing moods and levels of activity and the lack of mutual understanding. Although her youngest child is direct in asking her about her changing moods, she does not know how and what to answer him, maintaining this general situation of insecurity.

From time to time, Angela’s general pattern of hyperactivity and masking becomes interrupted by episodes of retreat in which she is not available for anybody, neither family nor society. This behavior leaves those in her circle puzzled and generates even greater misunderstandings, because it contrasts with the general image she tries to create. Her total absence is a signal that should alert those around her, but only if they have the resources to handle the warning. Otherwise, the alarm just creates a conflict that is attributed to her character, which thus hides her victimization and permits avoidance of responsibility.

Moreover, Angela’s strategy of running away from her memories by “attacking” her everyday life exhausts her, and she suffers the physical symptoms of a body that is increasingly closing down on her. This is triggered by the imagined and constructed presence of her abusers, represented by her partner’s brother and a new neighbor. Although the people surrounding her have nothing to do with her former abuse structure, she projects her experiences and anxieties onto some men in her social environment. By this means, she transforms reality to meet her own needs, driven by a need to remember and to re-experience a certain violent structure. For this reason, she constantly reproduces the abuse and feels threatened by abusers, even though they do no longer exist.

In this context, her body has even forced her into a wheelchair, something which poses a contrast to her general behavioral pattern, characterized by running away. As she, on the contrary, does not know how to “communicate” with her body, her body apparently has to use strong
weapons in order to calm her down and prevent more exhaustion. Also, the paralysis itself puts her in the hands of others and her only option is to trust those who handle her, because she is completely lost and unable to act any more. Suddenly the social bonding becomes obligatory and a real necessity. Hence, once again, it is not Angela who acts and takes responsibility; rather, she experiences the symptoms of her body as activities of an alien being. She does not assume any responsibility for the ongoing events, because they simply «happen to her» and she experiences them.

**Sociological reflection**

On a social level, Angela’s behavioral pattern of hyperactivity reflects a perfect adaptation to social requirements and good integration into society. She is considered to be a completely normal woman and only when people get to know her better are they able to find, see and feel the gap between her different roles. From the outside, Angela seems to be a strong, self-confident woman, who works, cares for her children and family, changes partners from time to time, keeps her house in a perfect state, has friends and is perfectly adapted to social expectancies. But from a closer perspective, for example as seen by her family, she can be an incoherent person, someone from whom you never know what to await. Sometimes, she is the overprotective mum; sometimes she is physically there, but mentally disappears; sometimes, she has attacks of rage and nobody knows who will suffer the next attack where and when; sometimes, she is compulsively tidying up, having no time for anything else. And from her point of view, the single aim of her actions is to avoid the overwhelming memory of her abuse. Her changing moods can be perfectly understood within this context. But since besides her, nobody knows her reasons, she and her family and friends live in a permanent situation of misunderstanding, mistrust and conflict. In this context and without sufficient knowledge and communication as to the origin of her troubles, it seems to be almost impossible to resolve emerging conflicts.

This produces a responsibility void, because responsibility can only be assumed by acknowledging one’s role and communicating its impact to
others. Hence, responsibility is always linked to awareness, self-awareness, trust, communication, mutuality, independency and knowledge. In contrast, guilt or shame are sensations or feelings which do not require a certain level of awareness, but are produced and influenced by governing social rules, morals, dependencies and unconsciousness. Therefore, avoidance of knowledge and the lack of communication represent a conscious or unconscious strategy to avoid responsibility, regarding one’s actions and towards society.

Furthermore, Angela covers up the meaning of her activities with a mask which intensifies the difference between the outside attribution and her own feelings even more. Thus, Angela can be considered an actress who tries to play the role of the non-victim, by simply not mentioning, avoiding and annihilating her motivation. Yet the inconsistencies and contradictions of her performance make her mask and role fragile. Hence, she is confronted with a permanent struggle regarding her own coherency and hidden existence which demands her permanent attention and mistrust.

In this context, her self-isolation and episodes of retreat from her life represent simply another kind of «hiding», comparable to the «hiding behind the armor of activity». Beyond that, the episodes are only visible to her family, who -without knowing why- try to help her and to release her from her situation. Although Angela presents herself as a strong, friendly woman, her behavior towards her children is ruled by fear and she attempts to overprotect them. Another consequence of these permanent inconsistencies is shown by the conflicts and power-struggles previously outlined. Consequently, rules and triggers that depend on structure of the violence she has undergone govern her relationships.

For a long period of time, Angela apparently has not been aware of the gap, the inconsistencies and the paradox she is living in, but in a certain way, her body shows her their limits, by imposing some rest and reflection and by asking for external medical and therapeutic help. Major external intervention is needed in order for her to break her behavioral pattern and to make her face her past, partly motivated by outside reminders, such as her partner’s family and her new neighbor, who push her compulsively into
remembrance. Hence, her body starts speaking for her and replaces the lack of communication and work inhibited by the traumatic memories, representing another paradox which triggers the system to become visible. With any little rest imposed on her by her body, the memories surface and she can not escape them any longer. In this sense, her illnesses now force her literally to sit down and remember. They are forcing her way into awareness and consciousness even though she tries to block them out.

Moreover, Angela does not feel, accept, interact with, trust, love or care for her body. In this sense, she perceives her body’s attention-seeking as an outside intervention from a third person, not herself. In this sense, she is completely alienated from her body, not knowing whose limits begin and end where, when and why. On the one hand, her body is completely absent for her and on the other hand, it shows her the limits of her hyperactivity. By talking to her feet, she starts a first attempt at communication with her body, which is mainly dominated by mistrust. This seems to be a perfect reflection of her isolated and mute position in society.

In general, Angela shows high fluctuation on different levels: first, she has never worked in the job she was trained for, but has worked in other subsidiary jobs. Second, she has a high turnover of relationships. Third, she moves persistently between different levels of activity, such as hyperactivity and total retreat with completely reduced activity. Fourth, she has permanently shifting boundaries and limits. Fifth, she has fluctuating, inconstant, permanently changing and alternating everyday life patterns, such as compulsive hyperactivity, rebellious paralysis and retreat into isolation. These permanent fluctuations refer to a specific feature. On the one hand, they foster Angela’s invisibility, converting her into a chameleon who adapts permanently to its surroundings in order to pass unnoticed. On the other hand, she escapes any commitment and responsibility, by permanently altering connections, dependencies and frontiers. These fluctuations help her to disappear from the social surface.
5.2.3. “I think right now our everyday life is quite carefree“
(Blythe 16-17, (1))

General description of Blythe’s life

Currently, Blythe lives a calm and active life with her husband. She calls it quite carefree, structured and flexible. Both of them are retired. Blythe is nearly 70 years old. She lives in a small town. She gets up early in the morning and has breakfast with her husband. Blythe dedicates the whole morning to her social commitment, organizing prevention campaigns against sexual abuse and helping victims’ of sexual violence. After having lunch with her husband, they spend some further time together, enjoying leisure time with activities like riding their bicycles, reading or working in the garden. In the evening, Blythe dedicates more time to the organization of her social activities. On a regular basis, they care for their little grandchild. But although her husband helps her with her prevention campaigns, they live quite independent lives, with both of them having their own leisure activities. Blythe is more responsible for the inside of their house, while her husband takes more care of the outside contacts and activities.

This calm and structured everyday life is only interrupted by Blythe’s numerous public lectures and prevention campaigns, for which she has to travel a lot.

Blythe suffered continual sexual abuse and sexual violence over a large period of time and during different periods of her childhood and youth by different aggressors within her social environment. When the abuses stopped, she managed to block these memories from her mind and started living an apparently normal life. In this new life, she wanted to achieve something. Everything had to be 100% perfect. She was successful in school, university and her job. But she was driven by insecurity and fear of permanent failure and low self-esteem. Since she was convinced she was worthless, her control and perfectionism were only a strategy to hide her imagined incapacity. Thus, if someone tried to disturb her rigid everyday structures, she simply panicked. These conducts were sometimes difficult
to bear for her family and colleagues, because they allowed no spontaneity and flexibility. Then, Blythe would over-dramatize little changes, considering them a catastrophe.

On her job, she spent the day with children, because she hoped to be able to establish a relationship with them and she felt closer to them than to adults. She married and had several children. But as already mentioned, her everyday life was ruled by constraints, perfectionism, control and frenetic conduct, always caring for others but never letting anyone come too close. Apart from her husband and her children, she kept everybody at a considerable distance and did not let anybody get near. Her mask of perfectionism and control protected her against memories of abuse, but it limited her life considerably. For example, she controlled her feelings and emotions for decades. Therefore, it is very difficult for her to reactivate them today. She sometimes fled her situation by day-dreaming, an escape which reminds one of Alice’s Adventures in Wonderland. Alice also lands in an underworld -after following a white rabbit- which teems with paradoxes and absurdities.

Furthermore, always she felt guilty about anything that happened in her life or with her family. This general feeling of guilt became nearly independent and imposed itself on everything. Even if the salt on the dining table was missing, she interpreted this as her fault. Furthermore, she felt the need to justify everything, because she did not think that she was trustworthy. For example, she would show the purchases to her husband to demonstrate that she had indeed gone to the supermarket. But control also meant control over interactions, because she was afraid of losing her loved ones. Therefore, she had to permanently and compulsively reconfirm or reassure their love and ask for evidence, by, for example, maintaining a permanent bond with her husband. She apparently needed somebody to hold on to. Regarding her behavior, her husband noticed that she was different, but as he did not know the reason, he thought that is was a “quirk” (Blythe 503).

At one time, she suffered severe physical pains, which made her start therapy. During therapy, she became more and more absent from everyday life, her family and her job. This resulted in her retirement. For her
closer circle, this time was very difficult, because they did not know how to help her. The great sensitivity and understanding of her family and a close friend provided much-needed support for her during this time of anxieties and agonies. But even today, it is still difficult for her to feel pain and she often switches her body off. When a physician asks her, for example, to describe the pains she has, she is often not able to and then she invents something, because she is ashamed of her inability.

Blythe’s Conduct of Everyday Life

Blythe’s everyday conduct of life can be divided into three main periods.

- Period before retirement: For decades, Blythe locked her memory away, by controlling her daily regime of both space and time. She also controlled social distance between herself and others, keeping them as far away as possible. Her husband and children were the only exceptions. Frenzy was another strategy to occupy time, avoid memories and not feel she was falling into a hole. This rigid, static and inflexible everyday conduct helped her to start a new life after assaults she suffered. But it did not permit any flexibility or spontaneity. Blythe talks of fixed and rigid patterns, which periodically generated problems in her social environment. This kind of attitude caused severe conflicts in her marriage and family.

She had a vast living space, but she always had some tendencies towards the inside and retreat, a conduct which, moreover, perfectly fits the female social role. She had lots of social contacts, especially thanks to her work with children. This was a structure that favored her needs to feel powerful and to redeem the abuses suffered in a disguised and commonly accepted way, doing something good with and for children, caring and nurturing them. But at the same time, she had few or nearly no close friends.

Socially speaking, she was perceived as a well adapted and successful woman doing a good job and caring for her family. But her great capacity to adapt to social requirements resulted from her experiences in childhood and youth in adapting to abusers’ wills and permanently hiding the abuses from her family and friends. She played the role of a perfect
actress, maintaining her mask of innocent child and successful woman. This mask helped her to hide her insecurities, feelings of guilt, fears and anxieties. In this sense, the social understanding and interpretation of her social role was completely different from her own, because her motives were completely different. Social witnesses would have probably interpreted it as her aim to be successful -representing a motive «in order to»-, but Blythe considered the outcome as a «because of». Consequently, society, for example, thought that Blythe must have had great self-esteem because of her successful life, but Blythe recognized that her success only served to cover her lack of self-esteem. Having been very deeply hurt from the inside, she felt a stigma, which she always tried to hide, mainly by means of her mask of perfection. Therefore, she did or did not do a lot of things for the only purpose of seeming normal and not standing out. In a paradoxical way, as her mask became increasingly effective, she was further accepted by a variety of social actors, confirming her good skills in camouflaging herself, until she became just that, a mask. Even her closest intimates did not realize what is going on, because of their lack of knowledge. Therefore, their only possibility was to accept her the way she was. Sometimes, she rested and retreated from her hectic and constrained life by day-dreaming and fleeing to an imaginary world.

- Transitional break: A pain, which had no physical cause and which could be interpreted as attention-seeking or a disclosing reaction of her body, forced her into therapy. During therapy, her forgotten memory emerged and she was completely overwhelmed by past and present events. Thus, she was forced to take a time-out, because she was not even able to care of herself, for example, forgetting to eat. She was not able to give attention to her family or her job and completely lost previously established control. During that time, she was absent and she was also not able to enjoy anything, such as -in her own words- the smell of spring (Blythe 757).

She completely curtailed her activities, movements and her time-management. Everything was simply and exclusively focused on the assimilation of her memories. During that time, she had few social contacts. She received enormous help from her therapist, her husband and a friend,
who -while maintaining their own lives and limits- supported her in everything. Since she was not able to continue with her social activities any more, social institutions offered her retirement and a step out of her former life. At that time, there seemed no other feasible possibility or option available.

- After retirement: After finishing therapy and retiring, Blythe has established calm daily structures, balanced between regular activities, such as caring for her grandchild or staying in touch with other victims, and sporadic activities which require high flexibility, adaptability and a capacity to organize. Apart from some fixed activities, Blythe possesses great temporal and geographic flexibility, which allow her to attend lectures all over Germany. She feels free to do what she likes and can. By helping other victims, she has learned a lot about her own recovery and about her own story. But she feels free to help or not to help, to answer their mails or not. Others might still interpret her everyday life as very organized and strict, but in comparison with her former life, it has become extremely flexible and dynamic.

She feels integrated into society and she has finally realized that she is not strange, different or alien to society, but that her life-conducts and reactions were and are a normal consequence of the violence she experienced. She is very active, fighting for her right to exist and for the right to be free from the stigma by breaking the taboo of silence on this matter. She still possesses some of her former problems, such as not allowing closeness or feeling guilty, but knowing about her difficulties, she manages to integrate these conducts into her life, so that they do not harm anybody, neither her nor her surroundings.

Sociological reflection

Upon retirement, Blythe completely changed the character of her activities, her time-regime, her social mobility and her social contacts. Leaving behind a driven and compulsive everyday conduct, she began a more creative one, which has allowed her time to relax and given her space and time to invent and try new things.
What is outstanding in Blythe’s case is the influence of specific others in the evolution of her everyday life conduct:
- First, the abusers seem to have had a major impact on her everyday life by means of psychological and psychosocial consequences, such as guilt, low self-esteem and insecurities. Her longing for success and performing well can not be understood without these inner and personal characteristic features, mainly caused by the abuse.
- Secondly and after having her trust being abused, Blythe tried to maintain social distance and superficial involvement in her environment. She avoided the influence of specific others as a result of the previously negative experiences.
- Third and due to this distance, nobody, not even her husband nor she herself knew of her hidden motives and memories. Thus, everyone –herself included- permanently misunderstood her and misinterpreted her actions. This reinforced a tendency to look for confirmation, explanations and interpretation by permanent comparison with social surroundings (such as consulting the Kinsey Reports) regarding their sex life. This pattern might be misinterpreted as being an open-minded and socially approachable pattern, but on the contrary, it can also be seen as the consequence of loss or unsolved conflict. What, at first glance, seemed to be extroversion may be considered a sort of handicapped introversion, seeking a definition.
- Fourth, during her recovering, she received amazing support, first from her therapist, but also from her family and a friend, who acted as specific others, supervising her recovery, assessing her evolution, caring for her and offering her hope.
- Fifth, Blythe can be currently considered a specific other for a lot of other victims of sexual abuse and violence, for whom she provides help and support.

In addition, Blythe has felt guilty about the sexual attacks she suffered for decades. She felt stigmatized. In the beginning, she followed her abusers’ rules by not telling anybody about the abuse. Later, she went on to put the memories aside in order to live an apparently normal life. Since she did not mention anything to anyone, those in her milieu were not aware of her situation. Therefore, and as long as Blythe did not reveal
anything, nobody looked any closer. It was only when her body began to
speak that the process was set into motion.

In this context, one of the most relevant aspects is that she broke a
 taboo with the abusers in the first place. Then, and even before coming out
 of the closet, she must have broken many taboos and felt guilty about it.
 And now, she has broken a new taboo, by communicating endlessly and in
total depth, breaking the taboo to such an extent that she could be a
missionary, a situation which seems to be completely opposite to her
previous life. In this paradoxical way, she now does exactly the opposite of
what she was doing before, revealing, declaring, denouncing and
explaining her victim condition. It may be that she has now triggered
reconciliation between the past and the present by permanently breaking
the taboo and challenging social awareness in a fully provocative way,
-facing the general public, aggressors and victims. But paradoxically, by
uncovering the taboo, she still serves the taboo, insofar as society is not
ready to take the necessary steps to integrate the knowledge she provides
into culture and develop reconciliation on its own. Today, a great part of the
task is still left to the victims. This represents a social misconception about
communication skills between victims and social institutions, despite
sincere efforts to reconcile victims and non-victims. Blythe challenges
widespread social attitudes which seem undesirous of accepting her
message. Hence, she still serves the taboo, insofar society is not ready to
take the necessary steps to integrate the knowledge generated into culture.
Furthermore and paradoxically, a variety of social institutions asks victims
to make the effort of breaking the taboo, fostering integration and speaking
up, while society, -at best- listens and applauds, but does not make any
real effort to change. It is apparently still the rule that the victim has to pay
for the violence endured.

At any rate, it is necessary to point out that although Blythe has
reoriented her life by integrating the traumatic experiences, she will never

212 Compare annex nº 10.1., pp. 323-328, on social policy regarding sexual violence and victims in
Germany. There is also an ongoing debate on the advantages and disadvantages of good practice
and pro-active counseling, regarding service provision for victims of domestic violence and sexual
assault. Pro-active counseling consists in automatic and direct contacting of the victims by the
helpline or support-organization, without waiting for the victims to seek assistance (Hanmer et al.
2006).
overcome engraved memories. The direct suffering has ended and she is likely to be the victim of less unpredictable triggers, but she still considers herself a «survivor» of sexual abuse. Using herself as an example, she tries to motivate other victims to work on their own integration showing them the «successful» example of an untroubled survivor of sexual abuse.

5.2.4. “Because if you, in the end, have had no freedom for 48 years, except for 5 or 6 years in-between.” (Elaine 318-320, (1))

**General description of Elaine’s life**

In the morning, Elaine gets up and has a coffee. Afterwards she takes the dog out. Then she starts tidying up the house, but very often at about 10 or 11 o’clock she can not concentrate on her everyday tasks any more and she starts with, what she calls, her “head-cinemas” (Elaine 16, (2)). They consist of the following: She arbitrarily selects a person -such as a neighbor, a shop-assistant or the bin man- and projects an enemy-image on them, as if they were her former aggressors. Then, she produces attacks of rage against the image she creates. While she is in this mood, she is not able to concentrate on anything, except her thoughts and imaginings and she does not leave the house. Since she feels possessed, she generally does not finish any work that she had started and the housework remains undone. She is not even able to write down what she is supposed to do and to keep a proper agenda.

Elaine is in her mid-fifties. She grew up in a house with violent, bad-tempered and neglectful foster parents, where she was regularly beaten and probably sexually abused. After leaving their house as a teenager (or being thrown out by them), she consumed drugs, tried to commit suicide and spent time in a boarding school for difficult teenagers. Afterwards, she trained for many different professional jobs, but worked in them for only a few years. When completing her medical questionnaire at the hospital, she referred to herself as a housewife, but in the interview states that her former husband, who was a pimp, had forced her to work as a prostitute and a
dominatrix. Medical reports demonstrate that she was taken to hospital several times during that period with serious injuries, such as broken bones and severe injuries to her face and her back. In her own words, she lived in permanent fear of death for decades. She speaks of this period in a nearly paradoxical and schizophrenic way, first, because she presents herself as two different people: being a strong woman, while working, and being weak and defenseless, while at home.

After decades working as a prostitute, Elaine reported her situation to the police, because she wanted to protect some children whose initiation into prostitution she was forced to witness. She received special protection from a victim support organization and had to move to another city for her personal safety. She then started working as a cleaning lady and an office clerk and made contact with her present husband through an internet-chat room. She describes her current situation, as follows:

“Elaine: Er; well in a certain well I’m getting in over my head with everything. I’m well (-) since I’m 48:: I’m in a lucky situation, (-) that from the outside (-) I’ve a carefree life (-) have a good husband, (--) we’ve just married (-) this time he’s not a psychopath.
Karolin: Er...
Elaine: [...] Only (--) here and there I’m not able to enjoy it, I go into (-) I’m simply no able to manage my daily life any more”. (Elaine 6-15, (3))

Once again, Elaine refers to a paradox which she senses in her life. The outside conditions are, maybe for the first time in her life, favorable and positive, but -despite her trouble-free and tension-free environment- she is not able to manage her daily life. She likes the place where she and her husband live, and he is a nice, loving, caring man. He is a truck-driver who works many hours a day, leaving the house early and coming home late. Hence, she spends her days alone. As described in the introduction to this case, Elaine apparently is not able to cope with her daily routine. Memories surface and she has attacks of rage. Thus, when her husband comes home, he normally helps her to calm down, cares for her and does the remaining housework that she has not been able to do. Later in the evening, she watches TV or sits at the computer, as she does not want to disturb her husband who has to go to bed very early. She simply waits for
the tiredness to overcome her and does not attribute any value to her evening activities.

Although she suffers because of her husband’s long absences, she is not able to establish a closer contact with neighbors or anybody else in order to cope with her loneliness. Apart from superficial contacts with her neighbors, greeting them on the street and chatting, she has almost no outside contact, having lost all her trust in people. She has no friends, mainly because she does not know if she is trustworthy. She pays a lot of attention to her privacy, protecting it to the point where she is afraid of somebody else reading the senders’ names on her letters, and has installed her own letterbox next to the communal one.

When Elaine feels insecure, she hides behind her little dog, in the sense that he attracts all attention and she can pass unnoticed. She calls herself the dog’s mum. The dog works as a shield and, at the same time, it is a child-like pet. Opposing all seriousness, she loves doing childish things, such as bathing in a paddling pool in her garden, playing with her little dog in the forest or decorating her house over and over again, as a child would do with his or her toys in a child room. As a consequence, her neighbors often look at her strangely, as if she were weird. She loves painting and she loves retreating into what she calls an ideal world. From the outside, she describes this ideal world as a castle with several padlocks and a watchdog, with restricted access for others. But she does not want to describe the inside view. Currently, Elaine is unemployed and has requested a pension. In this context, she is currently in hospital that has to assess her incapacitated status. But also in this context, she tries to protect and hide her privacy, rejecting most of the therapeutic offers that have been made.

Elaine’s Conduct of Everyday Life

Generally speaking, Elaine’s Conduct of Everyday Life is ruled by a specific kind of occurrences, such as attacks of rage, health problems, and conflicts with her surroundings -already starting in her childhood- or childish behavior. As a result, she is largely unable to meet the demands of a regular working life or household management. The only regularity seems
to be disturbing and structuring episodes which she is not able to control. They rule her time and her living space by appearing on a regular but also random basis, annihilating time and space. Then, time passes without being perceived and is completely dominated by moods or rages. Space is also extremely reduced to the house or the neighborhood.

Most of these occurrences increasingly separate her from social life, since many of them are visible to her social circle and produce misunderstandings, alienation and incomprehension. Since she does not adapt to the requirements of social life, her non-conformist actions generate conflicts with her social environment. Nobody understands her behavior, which does not correspond to a woman in her 50s, and she explains that people look and laugh at her. This even reinforces her general mistrust of others and herself, mutually intensifying her tendency to protect her own private sphere and isolating herself as well as receiving social rejection and exclusion. Apart from her husband, who accepts her as she is -according to Elaine because of his own family context and biography-, her only company is her little dog, which protects her from the outside, allows her more childish behavior, opens other living-spaces, and forces her to go out of the house. The tiny pet-dog as bodyguard, toy and caregiver represents another paradox in Elaine’s life.

Although the permanent threats and episodes of violence have stopped, Elaine continues to live a life influenced and echoed by violent patterns and intrusions. She admits that she is so deeply socialized by the violence-influenced patterns that she is unable to imagine a life without permanent pressure and threats. She feels completely lost without them and involuntarily tries to hinder and avoid any freedom of choice. Her nearly exclusive fixation on her memories and these patterns might be closely linked to the great amount and the wide range of different types of violence she has suffered throughout her life. In this context, her daily episodes of getting lost, having attacks of rage and unspecific pains can be associated with situations governed by violence. Because they also appear randomly, involuntarily and without warning, they confirm her helplessness and seemingly base her life not on herself and on her free decisions, but on independent external factors. Although external triggers, such as people in
her environment, telephone calls at night or horses -according to the nurses' medical sheet-, apparently and rationally have nothing to do with her past, her memory connects these apparently trivial moments with the violence she has suffered in the past. On occasions, they might be considered echoes of this violence which still linger and influence her life. In this sense, these episodes can be seen as a kind of disguised latent pattern of violence, sometimes disclosing its identity. Consequently, Elaine still relives these scenes, reproducing them on a daily level. Nevertheless, she now has the opportunity to cope with her memories, to work on them and to recover from them, a possibility she did not have while the life-threatening violence was still going on.

In addition to this disturbing and revealing pattern, Elaine often retreats into a creative ideal imaginary never-never land and a dolls' house, where she feels protected, secure and relaxed. She only finds protection and happiness in her imagination and in a non-material world. Therefore, the contrast between this «imaginary» world and the real and material violence and insecurity she is permanently facing in the «real» world is ever more intensified.

Sociological reflection

Elaine has problems adapting to her new-found tranquility, characterized by the absence of violence or the permanent threat of it. This presents major challenges for her as well as she represents many challenges for her family and friends:

- First, on the one hand, she tries to recuperate lost time, such as her lost childhood and youth, by, for example, being childish, naïve and carefree. But, on the other hand, she can not live without a certain amount of pressure, which is currently reproduced by means of her “head-cinema” (Elaine 16) and attacks of rage. But Elaine also tries to obsessively repeat what she went through, and she feels the need to talk about her memories constantly. Therefore, regular and calm everyday life is in itself a challenge for Elaine, because she still seems to live in a permanently exceptional situation, although the violence has stopped. She desperately tries to regain some normality, by creating the opposite: childish and aggressive
behavior. But both generate mutual conflicts with her surroundings: sometimes it is Elaine who projects fits of rage against one of her neighbors and sometimes it is they who do not understand her childish or aggressive behavior. Furthermore, Elaine’s behavior is in itself a paradox, because she can shift from childish to aggressive in a very short period of time, which consequently produces even greater misunderstanding in her social surroundings.

- Second, by this means, Elaine’s husband has taken on a real challenge with her, consciously taking care of her and her needs, for a specific reason that apparently has to do with his own background. He was forced to free himself from an exploitative family. Elaine calls him “a white sheep in a black family” (Elaine 141, (4)). Elaine portrays him as a very calm and placid person, who has put a lot of effort into constructing his own identity free of social constraints with the help of therapy. He does not seem to be triggered by a masculine prototype of aggressive reactions, but the contrary.

In a certain way, Elaine represents a challenge to masculine identity and can be understood as a pioneer in its (re)construction. The most important aspect is the very tempting contrast between the «whore», everyone can have, and the distant and absent, sensitive, childish and innocent «pure victim», because she is a total victim. Nonetheless, her husband does not fall into the trap of classical male roles, such as playing the pimp or the heroic protector, and simply accepts her as she is. Thus, it can be said that Elaine forces a new identity onto masculinity. In this sense, she and her husband exemplify possibilities in the construction of new masculine identities. This new and exceptional way of being a man seems to be characterized by being caring and attentive.

- Third, while Elaine needs and asks for help on a regular basis, she not infrequently rejects forthcoming assistance from other people and institutions that want to help her. Paradoxically, she receives quite a lot of help and support, although she is often not able to admit it. Even in the early period after her declaration, when she still needed a special regime of protection, the victim-support-organization had problems convincing her of all recommended security measures. She followed their advice only with
reluctance. Disagreements frequently ensue around her needs, because she often presumes to know what is best for her, whereas her view does not correspond much with the institutions’ or helpers’ offers, possibilities and willingness. Helping always and automatically reproduces a power imbalance between the helper -who pretends to know what the other needs, by projecting his or her own needs on the other- and the helped who -at least socially- are supposed to be thankful for the help they get. Therefore, interaction around helping always represents a conflict of interests and often a power-struggle regarding who knows what is best. Although helping might be linked to the best intentions, it generally produces this imbalance. As Elaine has lived a life dominated mostly by violence and by other people, accepting help seems to be difficult for her, because she mainly focuses on power-struggles which manifest themselves in her head-cinemas and her attacks of rage which sometimes even include her therapist. This produces conflicts, which keep her in the situation of a person who lacks the knowledge and experience of how to live in a violence-free context.

- Fourth, Elaine puts great attention on the social roles and labels attributed to her, such as the name given to her health problems or disorders. Some call her a border-liner and others say, that she is “simply traumatized” (Elaine 169-170, (5)). This classification seems to be very important to her, her surroundings and her position in society, because she is much concerned with the labels given to her. Furthermore, Elaine officially states that she was a housewife for nearly two decades, using a completely innocent, inoffensive and socially accepted label, while in reality she was working as a prostitute. She has probably bore the brunt of the socially stigmatized label «prostitute».

Her preoccupation regarding the labeling of her health disorders must be strongly influenced by this general attitude, as she knows how labels can produce social exclusion and lifelong stigma. Hence, it seems understandable that Elaine does everything she can to get rid of the socially stigmatized label «borderline», which also often has the effect of causing social exclusion, giving a very “diffuse picture” (Elaine 164, (6)), often considered impossible to treat. In this regard, it is important to see what
labels did to her during her work as a prostitute. She was constantly faced with contradictions of being an excluded prostitute, a bossy dominatrix, a dominated wife, a bound, weak woman and a helpless victim.

5.2.5 “It was lucky, with all that I went through, that I was in Germany“ (Ayla 343, (1))

General description of Ayla’s life

<table>
<thead>
<tr>
<th>Ayla gets up late in the morning. Since she often does not sleep well, she has difficulty waking up. Sometimes her mother comes round and they have coffee together, in the late morning. After getting herself going, Ayla tries to prepare something to eat for her small nieces, who come every day after school for lunch. They normally have a light, simple meal. Then, Ayla helps her nieces do their homework or play games for some time. But Ayla tires easily and is often exhausted. In the evening, her sister-in-law picks up her daughters. Then, Ayla tidies up, eats something, listens to music, knits or watches TV. Sometimes, when she is nervous or too excited, she paints mandalas. When she is anxious, she also tends to binge. She is insatiable.</th>
</tr>
</thead>
</table>

Ayla was born in Turkey, where she lived with her grandparents, her mother and her younger brother, on a little farm. At the age of 9, her father, who was living and working in Germany, asked his family to come over. For Ayla, integration was quite difficult. On the one hand, she was not able to communicate with anybody, due to language problems, and the cultural gap between her grandparents’ house in Turkey and life in Germany produced a sense of «cultural shock». For example, since she was only used to pit latrines, she initially thought the toilet bowl was a chair. But on the other hand, her family did not provide her any support (except from giving her a dictionary) and her father even obliged her to take up her education at a level that was too difficult for her.

Ayla was sexually abused by her aggressive and violent-tempered father. Her mother was helpless in the face of this situation, because she was completely subjugated to her husband. When Ayla noticed that her
father also was abusing her younger sister, she went to the police and reported her father, thus acting to protect and care for her family members. Her father was convicted and was deported to his country of origin. Ayla convinced her mother to get divorced. During the proceedings, Ayla was offered therapy, which she started but did not like and did not continue at that time.

After having finished school and an apprenticeship, she worked as an office clerk 8 hours a day. In the evenings, she worked as a waitress - also 8 hours- and sometimes she had even a third job which consisted of cleaning other people’s offices, flats and houses. Consequently, she had at least two full-time jobs simultaneously. She did this for more or less a decade. In addition, she was and still is ruled by an enormous pressure to do well. In the end, she had a series of nervous breakdowns and exhaustion attacks. She became ill and her family doctor convinced her to start therapy. As she was incapable of working, she was referred to a rehabilitation hospital specializing in traumatized patients. There, she started therapy, which she continues to this day (From time to time, she is forced to discontinue therapy, because public health services only pay a certain number of therapy-sessions and then some time has to pass before continual funding for therapy is granted). She has been admitted several times to the specialized rehabilitation hospital during the last decade.

Ayla is now nearly 40 years old. She retired some years ago. Since her father has threatened to kill her, she lives in permanent fear, because she never knows if and when he might come back to Germany illegally. Today, Ayla is a German citizen. Despite everything, she is thankful that the abuse happened in Germany, where she got support and help from police and the justice system, from social services and the public health system. A short time ago, she received a monetary compensation from the German state, which she has used to buy a house for herself and her family. Her brother and his friends helped to renovate the building. She got some nice, new furniture, some of it in Ottoman style. There is still a lot to do, but she is very happy with her new flat and the beautiful garden. Ayla shares her flat with her sister. She has no friends and only leaves her flat for very short
periods of time. On weekends, she sometimes goes shopping with her sister.

Ayla has very low self-esteem which she tries to compensate by requiring high levels of self-performance, self-control and perfectionism from herself. She started gaining weight with the first symptoms of exhaustion. Today, she is seriously overweight, due to an eating disorder she is unable to control. She has no boyfriend and she can not imagine having one or building a family. Furthermore, she has serious physical problems and she suffers from chronic pain. She does not express her fears, weaknesses and doubts to her family, but tries to be the strong and caring older sister. She considers herself very unstable. She often thinks about starting to work in an aid program for Turkish women, but this seems more utopian than realistic. She has no prospects for her professional nor private life.

Ayla’s Conduct of Everyday Life

There seem to be three distinct periods in Ayla’s adult life which can be noted.

- Period before retirement: Ayla had a very tough and strict everyday regime and her time was dominated by work and activity. Time was mainly occupied with workaholic behavior and hyperactivity, ruled by control and perfectionism. At the same time, she moved around in quite a large area. Nevertheless, her jobs were closely linked to her social and cultural background, for example «typical» immigrant jobs such as a waitress or cleaner. Thus, her actions were restricted by the job options open to her and opportunities that she had. She seems to have done her best to care for her family (especially her mother and her sister, who at that time was still studying at university), providing them with the necessary resources. At the same time, it seems that her behavior allowed her to disengage her memories of the sexual abuse, by simply being occupied -both physically and mentally-, avoiding any spare time and relaxation and not allowing herself any moments of reflection or «weakness».

Although she had lots of social contacts outside her family, for example with colleagues, guests or clients, most actions and interactions
were centered on her family. She was quite tied to her family, thus permanently reinforcing her own bondage. Her interdependency with her family was mutual and paradoxical, because her family represented the place and environment where her abuse took place, and her mother continued to live in the flat where it had occurred. Hence, Ayla was focused primarily on her family and all her behavior was closely linked to her father and to the other members of her family. Since she was living in Germany, she was at least partly free to build a new life and to choose the kind of relationship she wanted to have with her family. In this context, it can be said that Ayla loved her family and built bonds of solidarity with all the family members who have directly or indirectly been victimized by her father. This was apparently rewarding and it may also be necessary for her.

But at the same time, by adopting the role of the bread-winner, she paradoxically substituted her father and aggressor. In this sense, the previous family structures were maintained, with the central role of a bread-winner who possesses power within the family, left intact. Only the actors changed: before, it was the violent aggressor and, now, it was the victim, but the role itself remained. While the abuse was occurring, Ayla received no help from her family and it was she who had to stop the abusive situation from breaking down the family structure, at least partly. It was not her father (who disappeared but still present through his threats) who had to pay for his actions, but Ayla who tried to keep the family together by filling the void. This void was apparently generated by her father -the absent aggressor- and her helpless mother. Taking the role of the head of family, Ayla assumed responsibility for the whole family as well as for the past. Therefore, at the family level, it was the victim, Ayla, who seemed to pay -both literally and metaphorically- for her father’s violent behavior, taking responsibility for something she was not responsible for. Furthermore, it seems that she was paying for the shame she has brought upon the family, even more intensified by the Muslim tradition and code of honor. In this sense, replacing her father, Ayla paradoxically reproduced the same family-structures as before. Thus, she performed her role as family protector and provider, following the traditional and patriarchal model of the bread-winner-family, organizing her life around power and dependency.
Socially speaking and from the outside, her everyday conduct might appear dynamic, because she adapted perfectly to social expectations, combining the roles of bread winner and professional perfectionist, both highly-valued socially. Yet on a microsociological level, her everyday behavior was driven by social dependence, binding her to certain kinds of behavior that demonstrate restricted her own freedom of choice. Therefore, this Conduct of Everyday Life might even be considered compulsive, unfree and static.

- Transitional break: Nervous breakdowns, illnesses and anxieties forced her to seek medical help and to reduce her daily work rhythm to the point that she was incapacitated and had to retire. During her several stays at the rehabilitation hospital, Ayla had no everyday life, since the latter was completely blurred and dominated by hospital requirements and her therapeutic necessities. The hospital tore her away from her family and her bonding structure. She lived in a kind of void, where she was able to concentrate completely on herself, recovering from her exhaustion and replenishing her energies. This represents both an individual and personal time-out as well as a social time-out, a time of recovery which different social institutions offer its members.

- After retirement: Ayla gained temporary freedom by retiring, because her time is no longer occupied by work routines. Yet she has difficulties organizing this freedom. Her only occupation and task during the day -caring for her nieces- helps her to structure her day and to get herself moving. Yet at the same time, even this minor task exhausts her. She restricts her activities mainly to the house and does not go out. She has reduced her social contacts mainly to the intimate members of her family. She has nearly no outside contact. In a certain way, Ayla uses skills which come from her cultural background: as the female head of household, she stays at home, cares for everybody and is available. But in contrast to the women represented on the wall-carpet in her living room, which shows self-confident Ottoman women drinking coffee and smoking, Ayla regards herself as unstable, incapable of acting and insecure. Her apparent incapacity and insecurity are further enforced by the pressure she is under to do well and to do everything perfectly. As she clearly states and
demonstrates, there is a great gap between her hopes and feelings and real-life.

Her memories of sexual abuse seem to be permanently present and to hang over her everyday life like a veil. In therapy, she has learnt different techniques to manage her memories, but due to the unsolved conflict with her father and because she feels very threatened by the uncertainty of not knowing where her father is, her memories have no possibility of coming to rest. She is in a constant state of anxiety.

Ayla thinks that she became ill as a result of the sexual abuse. When her therapy started, she hoped that she would recover within a couple of therapy sessions, and then be able to continue her previous «active» life. But her physical problems and the passing of time have shown her that it is not that easy. This insecurity regarding the evolution of her «illness» produces a lack of a clear perspective for the future which increases her general insecurity even more. It is a vicious cycle. For herself and her social environment, her weight and body are considered the scale to measure her recovery. Her obesity is interpreted -both by herself and by her friends- as the failure of her therapies and her recovery. On the one hand, Ayla is ashamed of her body-size and she has tendencies to hide herself. On the other hand, her body reveals on a daily basis her «failure» to control her eating and herself and of not recovering from the sexual assaults. This worsens her already low self-esteem, especially because she overvalues control and perfectionism. A consequence of this is, for example, that Ayla has very few friends.

As explained regarding the period before retirement, Ayla has a strong link with her family, which apparently always throws her back into established structures. Even after retirement, Ayla partly continued being the family’s bread-winner and protector. Although her mother, sister and brother work and have their incomes, she keeps on caring for her family. With the monetary compensation she received from the German state, she chose to buy a house for herself and other family-members. On the one hand, this obliged or allowed her mother to move out of the flat in which the abuse took place, to which Ayla did not want to return. In this sense, the compensation allowed her to break the last physical and spatial link to the
place where the abuse occurred. On the other hand, it allowed an important improvement in the family’s quality of life and social standing as successful immigrants, protecting the family from a possible loss of social status. Therefore, the monetary compensation seems to have had a double effect: it put more distance between Ayla and the sexual abuse, eliminating the permanent reminder of the assaults. But it also enforced her bonding with her family, creating even more dependencies on both sides, because her family-members now live in her house, and she needs them to do the home refurbishing and decoration. Physically, the family has moved closer together. Ayla has intensified the contact with her family, but at the same time, she has reduced or eliminated contact with non-family-members.

Her family is also the place of «no-help», where any weakness has its consequence and where Ayla has to be strong and defend herself. In this context, Ayla has managed to hide her weaknesses and her low self-esteem, hiding behind a mask of the strong, caring and protection-offering oldest sister. Since this "mask" (Ayla 334) is directly linked to the family-context, Ayla apparently needs her family in order to maintain it a task which requires lots of effort and energy. In this context, it is only her body that reveals her inner tensions and conflicts to those around her. Another paradox is the fact that Ayla is able to help other family members, but she has difficulty helping herself. She introduces all of them as active and successful members of society, thus further increasing the gap between them and herself, highlighting her apparent incapacity and inactivity.

As in the case of caring for her nieces, Ayla needs her family to structure her everyday life, to give meaning to her everyday life and at least a little bit of self-esteem and a reason for being to herself. But at the same time, her family exhausts her. It seems that she is not able to completely assume the responsibility, function and position towards her family discussed previously. Retirement and retreat have helped her to establish a kind of flexibility which she needs because of her sleeping difficulties and physical problems. But due to her bodily reaction -illnesses, her eating disorder, sleeping problems and pain- Ayla is not able to make free choices and enjoy this freedom. Thus, she is simply fleeing into the moments of
retreat, waiting for yet another attack of pain or symptoms of eating disorder.

**Sociological reflection**

Ayla’s everyday conduct is characterized by a major gap between her family life and social life, through a double contingency.

- First, Ayla keeps silent and is silenced in her own family as a victim. She did not denounce her own abuse while it was ongoing, and even now she is not able to talk to other family members about her anxieties, weaknesses and feelings. Hence, the silence which began with her father’s sexual abuse continues to silence her feelings. Therefore and -despite her father’s conviction- the abusive relationship, in part, carries on. Communication patterns of avoidance and silence seem to remain unchanged. In therapy, she reflects and works on these processes, but she is apparently unable to change these established structures within the family. Consequently, her family does not, for all intents and purposes, recognize her victim-status, and she is not fully integrated into her family; her victimized part, at least, remains outside. But at the same time, Ayla paradoxically fulfills the classical victim-role of paying the price for her own abuse, compensating others for the shame brought upon the family. The result is that a seemingly positive familial bonding also can contain many traps.

- Second, Ayla is accepted as a victim by a variety of social institutions. She gained this status by denouncing her sister’s and her own abuse. Due to the general social mistrust regarding victims, she must have been extremely convincing and strong-willed in her victim-role performance. Therefore, she has received a large range of offers, support, help and compensation. But most social actors still seem to lack the knowledge of what exactly is most convenient, because either the offers were formulated in a way that Ayla refused them or they did not offer any substantial change to Ayla’s situation; perhaps bound her further to her victim-status.

- Third, up to a certain level, Ayla has obtained nearly all the socially available time-outs, attention, compensation and reentries into social life. Hence, she is an exceptional case, because generally, victims do not
denounce the assaults, they are not recognized as «true victims» or they do not receive the whole package of available support. In return, widespread social attitudes expect the victim’s reintegration into society. Although Ayla hoped to achieve this, she has not been able to, thus failing in her own eyes and disappearing from the social scene. Therefore, notwithstanding societal endeavors to reach her by building bridges, society remains alien and the originally intended integration failed.

- Fourth, the misconception is that most social systems consider Ayla’s acute victimization as concluded, given the aggressor’s conviction and the victim’s compensation and treatment. But for Ayla, the abusive situation remains, first through her father’s persistent threats and, second, through the continuing abusive structures in her family and, third, the resurgent memories and symptoms. Hence, Ayla is caught in a trap of different attributions of meaning. After exhausting all available help, society has allowed Ayla to retire. This represents a kind of paradox, because it closes off her access to social life and blocks her integration. Therefore, socially speaking, she can be considered «an old woman» who does not contribute to society but receives a pension and compensation. She is and feels socially rejected in a paradoxical way, even though a variety of social institutions has done «its best». But this reflection is only valid in the German context. Within the context of her Turkish background, her retiring from society and taking care for her family represents a perfectly accepted social pattern. The result is therefore ambivalent.

- Fifth, her family offers her an ideal world, where she can hide and retreat. At the same time, she can stay at home and care for her family thanks to social compensations and the social welfare system. Consequently, society allows her reintegration into and the maintenance of the previous family structures, by maintaining her role as the family protector and wearing her mask of the strong and exemplary sister. This seems to be the only way for her to gain recognition and to keep her position and function in her family. In addition, the skills available to her for coping with the situation are closely linked to her cultural background. On the one hand, there is the code of honor which intensifies her bondage by means of feelings like shame and guilt, and on the other hand, there are the
difficulties of cultural and social integration due to her immigrant and foreigner status, which tend to exclude her from society and push her back into the family domain.213

- Sixth, these opposing and contrasting expectations between Ayla’s family and society place her in a position of no return. Many social attitudes also reinforce her family bonds, while her family does not accept her victimization. Her family inadvertently reinforces her victim status, because they expect her to maintain her role as head of the family, which she is only able to preserve with the help of her social recognition as a victim. Everybody, Ayla, the family and society, probably thinks that they are doing their best. But given the lack of communication between the different actors, it seems to be difficult to reconcile the different expectations. Apparently, Ayla is not able to mediate between them and, hence, she is held in their dutches.

Consequently, Ayla’s everyday conduct faces two major forms of dependence: interdependence with her family and the dependency on her recognition as a victim. She is unable to loosen the complex bonding and bondage214 with her family and society does not help her in this task, partly due to the lack of comprehension and communication but also due to her stigmatization and exclusion as a Turkish woman. Before retirement, her everyday conduct, characterized by hyperactivity, was driven by her will to compensate her family and herself for the loss produced by sexual abuse. She is still bound by her memory of the assaults. Then, revealing moments in her body force her to change the pattern of her everyday life, mediating between the different possibilities and hopes she is facing, her own, her family’s and society’s. Nevertheless, the bridges offered by many social institutions do not result in Ayla’s reintegration into society. As a consequence, she retires from social life and retreats into her family, but maintaining the previously described interdependencies.

213 It seems that the merging of cultures in a global context poses a major challenge, demanding a better understanding of other cultural patterns and reinforcing the need for a transcultural approach and research.
214 Riane Eisler distinguishes between bonding and bondage. According to her, bonding represents the voluntary establishing of links, mainly linked to pleasure and love, whereas bondage does not only mean tying up or chaining -a metaphor often used in sadomasochism-, but also taking away freedom (Eisler 1995, 218).
As regards the meaning of Ayla’s Conduct of Everyday Life, it is necessary to understand «why» she acts in this way-for example regarding her family- and «how» the bonds get established. In this regard, we should keep in mind that Ayla has many options to choose from. For example, she bought a house with the monetary compensation, but there were also many other investment possibilities. Therefore, she has not focused on her own security or stability, but on improving her and her family’s standard of living, as compared to the situation, they were in as recent immigrants. By this means, she attributes a specific meaning and significance to her acts which justify her choices. There may be also emotional pressure coming from the family, or at least some expectations, which might not match her primary needs, but which she might nevertheless listen to, accept and follow. Hence, generally speaking, Ayla seems to be well integrated into her family, but not into society. She generates short-term stability and success by means of her hyperactive behavior whereas the revealing pattern creates instability and her retreat apparently offers her certain flexibility.

5.3. Specific patterns of the interviewees’ Conduct of Everyday Life

Based on the Grounded Theory-guided analysis of the interviewees’ narratives on their everyday life, it has been possible to detect five different forms of Conduct of Everyday Life, characterized by the following core categories:
1. hyperactivity,
2. retreat,
3. time-out,
4. revelation and
5. commitment.

Although these conducts are perfectly distinguishable, they should not be understood as separate and exclusive concepts but rather as a continuum of the same -the manifestation of sexual violence in everyday life. As the data show, in some cases and depending on certain factors, one conduct prevails over the other, under certain conditions they alternate (either in different life periods or during the day), and finally in other cases they even
coincide in time\textsuperscript{215}. By this means, the limits between the patterns and the transitions from one conduct to the other are not completely fixed and clear-cut, but fluid.

Factors which influence the development of these conducts are: external triggers, reminiscent of the sexual assault or the aggressor; sudden and abrupt changes in the victims’ lives, such as incisive life events (deaths of loved ones, emancipation of children, separation from partner, etc.); changes in the victims’ physical condition, for example menopause; the wish to forget the sexual assault; feelings of shame and guilt; or emerging problems and conflicts with colleagues, employers, family members or friends. Furthermore, the conducts described represent the victims’ perception of their everyday lives. Thus, the following conducts are often invisible from the outside, since external perception tends to be different from the victims', especially regarding the attribution of meaning. Hence, my analysis follows the women’s words and their stories in order to see how they perceive their everyday lives and what meaning they attribute to their activities, without neglecting the impression and impact this might produce on society.\textsuperscript{216}

\textbf{5.3.1. Hyperactivity: between running away and bonding constraints}

This pattern seems to be generally characterized by a visible and noticeable compulsive hyperactivity, marked by hectic and repetitive actions concerning different fields such as work life, leisure activities, hygiene or caring for others.

\textsuperscript{215} Please compare the case reconstructions in chapter 5.2., pp. 143-185.

With the following analysis, I do not claim that all victims of sexual violence experience the mentioned features or at least not all of them at the same time. What I am going to describe is a kind of Weberian ideal type, a densification obtained through the codifying paradigms of Grounded Theory.

\textsuperscript{216} In this context, if I am speaking of not having an everyday life, this does not mean that the women do not have one, but that they do not perceive it as such. Everyday life activities might sometimes diminish, but they might also loose importance for the women.
Running away

“and before that mhh I had always quite a heavy program. I’ve followed a course in alternative medicine for 2 years. Then I’ve enrolled to study Spanish. I went actively dancing for 2 years well competitive dancing, gym; (2) yes; I think that’s it. Well I’d say, thinking back it’s as if I was not only doing a marathon as if I was really running through life for the last 15 or 16 years, without finding any rest, and what I’ve done, well, my own demand is very high; well everything has to be simply perfect. I wanted to be the perfect mother and housewife; I also wanted to do everything in an excellent way. And the same time whatever, when I’ve done some sports, that I’ve really mobilized my last strengths. Something like that, yes, now I say, that I’ve widely overstretched my boundaries, right?” (Cathrin 90-102, (1))

Cathrin explains her rigid schedule, which she has followed for the last years, including her job, professional training, leisure activities and family. She presents this period of her life as a permanent marathon lacking any respite. This marathon, in her words, is characterized by her own exigencies of perfectionism, but exhaustion and not accepting one’s limits as side effects. Retrospectively, other women also refer to this pattern as “Er running away, (1) but you only run away from yourself. That is simply a running away and it catches you again and again.” (Angela 475-477, (2)) or “I have only found an escape in my job” (Nicole 111-112, (3)). Thus running away seems to be comparable to an escape or a flight from something which is permanently persecuting them and tracking them down, making them restless, similar to an invisible but frightening ghost. In this context, they also perceive themselves as “a working-animal” (Ayla 103, (4)).

“I even had from time to time two full-time jobs. 8 hours office 8 hours waiting on tables. Then I reduced the waitress-job to week-ends only; then I had some cleaning jobs and I was like a working-animal, but it was also a question of time.” (Ayla 103-107, (5))

Ayla explains that, during some periods, she had several jobs at the same time, working more than 16 hours a day. But in her words, it was not money, her career or other factors that constantly made her work non-stop, items she does not even mention in her interview; what lay at the root of her restlessness was “a question of time”. She compulsively filled time and
made time inexistent. She literally killed time, as if having time in itself were a source of trouble. In this context, Angela also refers to the importance of time and her longing to occupy it.

“I’ve always looked for occupation, occupation that takes a long time; I’ve never looked for an occupation which only lasts 10 minutes or a quarter of an hour; that didn’t exist. Even going shopping took me hours. <<whispering> That was a real obsession.>” (Anglea 69-72, (6))

Angela retrospectively compares her attitude with an obsession or a compulsion, a kind of workaholic behavior or time-consuming addiction. According to her, her only aim was to occupy time and the activity itself lost its importance and was only relevant in its time-consuming aspect. Hence, during the hyperactive pattern, victims feel haunted by the possibility of being alone with themselves and their memories. It seems as if visits from an inner ghost, representing the memories of the violent assaults, were a constantly dreaded possibility. In order to avoid the situation of having time to be exposed to one’s memories, any activity promises -at least short-term- salvation and is acceptable.

Examples of these time-filling activities are: having several full- and part-time-jobs at the same time (Ayla 103-107); occupying every single minute of one’s day with work, family and leisure activities (Cathrin 90-102); spending hours shopping for a few items, which consequently becomes completely inefficient as the purpose is simply to consume time (Angela 72); cleaning as an obsession both with the house and their own bodies, including, for example, cleaning the toilet bowl with a toothbrush (Angela 38-39) or showering several times a day (Julia 77-78 and 469-489). Apart from the time-consuming aspect, the activities seem to be «typical» female jobs and therefore highly -gendered.

*Nicole: [...] er still you simply have these .hh structures in you, I’d say er I’d just like to have it clean now, well this urge for cleanliness is, in fact, continues going through everything; no? Through the whole life. (--) Karolin: And how is it shown?
Nicole: Yes if it’s now er (ready) or er simply having to do with hygiene, no, this is well this has been impressed. <<the parrot sings> that’s a pattern and that simply persists. I also can’t get rid of it, anyhow.” (Nicole 287-293, (7))

Referring to her cleaning-mania, Nicole opens a longer time-frame and presents her corresponding activities as a life-long pattern, which extends into many fields of her life. Apart from its gender-bias and female connotation, cleaning is automatically linked to dirt and stains, in this context, also referring to aspects like guilt and shame\textsuperscript{217}. As mentioned before\textsuperscript{218}, the experience of a sexual assault is often perceived, both by the victims and their surroundings, as a stain, of which not the aggressor but the victim has to be cleansed. Hence, the hyperactive pattern of cleaning should also be understood in this context. The victims display a compulsive conduct of cleansing themselves and, in the case of not being able to wash their shame and guilt away, trying to run away, wanting to escape from the haunting stain.

Furthermore, their actions of fleeing and avoiding unoccupied time are closely linked and motivated by the fear and panic, produced by reminders and memories of the sexual violence.

“Julia: There are situations like that. And some men, or whatever, I really become scared. Then I’ve had enough. I feel just very small and powerless and I think that I attracted him somehow, well <<very fast and staccato; difficult to understand> I really have to, (what day are we? And what time is it?)> And he can’t do anything to me here. (1)
Karolin: What do you do then?
Julia: Yes I recall just, I remind myself of that he can’t do anything to me here. What day is it today and things like that. Or I just leave. But that’s quite extreme.” (Julia 402-411, (8))

Julia refers to situations in which she feels stained and sexualized by the presence and behavior of men. She feels guilty of (unconsciously) “attracting” them and, at the same time, she perceives herself as “very small and powerless”. These situations of helplessness cause her to feel scared, a fear which nearly paralyses her and which she is only able to overcome by physically leaving the setting or by retrieving and recalling the

\textsuperscript{217} Compare p. 79 and p. 81 on guilt and shame.
\textsuperscript{218} Compare pp. 130-131.
facts of the situation. This phenomenon is referred to in clinical literature as fear conditioning, expressed in phobic fears, generalized hypervigilance and the avoidance of specific objects and situations (Feldmann 1992, 38-39). Hence, guilt, shame and fear are connected and represent some of the main factors which influence the victims’ hyperactive behavior.219

Nevertheless, activities, such as cleaning, apparently can not free them, on the contrary, the victims always seem to be thrown back to the centre of their actions, which underline and give them their specific meaning. As already mentioned, the purpose of this pattern apparently is to occupy and fill time, by any means, in order to avoid any empty moments. The victims seem to occupy, tire and stress themselves in order to suppress the memory of sexual assault. Nevertheless, it does not disappear, but is represented in compulsive activities such as cleaning. Some women literally «attack their day», by fleeing towards activity, action and the outside where they are not confronted by themselves.

“Yes in the morning I got up, well when there was nothing to do about (evening / sleeping), and then I first started, .h having a quick breakfast was unknown for me, my partner then had something .hh chop chop chop chop and then I started from upstairs to downstairs and from behind to upstairs, I really cleaned .hh eh the toilet bowl with a toothbrush all around that A LOT OF time passes; or going to work 8 hours .h nursing home 2 hours more of cleaning, in between at home (-) also at home; I had really permanently something to do. That was quite a long way in the end; no? You only don’t notice it. (---) Quite difficult then.” (Angela 34-43, (9))

The memory is avoided by any means, because it is directly linked to anxiety and fear. When it can not be avoided, they attempt to trivialize it, calling it a “silly experience” or a “dream”.

“Yes, you simply block something out; you disavow something, it’s not true and it’s a silly experience, you’ve simply dreamt of it; but each morning, the same thing is there again (-) or in the evenings depending on when you calm down.” (Angela 268-271, (10))

218 Giddens (1995, 61-62) refers to anxiety as a fear which has lost its object as a result of emotional tensions. But, as seen in Julia’s case, her fear does not seem to have lost its object, because it is still and clearly linked to the sexual abuse. Nevertheless, and also according to Giddens, anxiety can be seen as a sign of a personally developed system of security which is based on one’s biographical experiences and one’s self-esteem.
But as a self-reproducing thing, it reappears each morning or each time Angela has some respite.

Regarding the social dimension of the present hyperactive pattern, the interviewees generally explain that they maintain lots of superficial social contacts. Asking Cathrin about friends, she answers:

“They were only linked to the activities. I’ve noticed that I for example competitive dancing was such a scene, where I’ve had, let’s say, more contacts, which were marked by distance. There was certain superficiality in them and I also didn’t want more, I didn’t want to engage in more relationships which hurt which break up. Well then simply I felt also quite often very lonely and then I’ve again tried not to feel it by again powering a lot.” (Cathrin 125-133, (11))

In this citation, Cathrin refers to a kind of vicious circle: feeling lonely, engaging in numerous superficial contacts but avoiding closer and more intimate relationships and thus feeling even lonelier. This ambivalence between feeling lonely and seeking contact but being afraid of engaging in a closer relationship or friendship and of being hurt alienates Cathrin from herself and her feelings and makes her do things she really does not want to do. Also Angela refers to a similar internal contradiction:

“Yes with the sporting group it was possible by means of the sport, but that was, well, I’ve always covered it, I’ve also acted as if I was all right; all of them, they don’t know anything. I’ve also acted as if I was perfectly fine. Doesn’t go too bad or, does it? I’ve NEVER shown how never shown, that I can be vulnerable. Eh. I might show my weakness. Showing one’s weakness means (far away / ass away). He. Yes.” (Anglea 85-91, (12))

Angela does not only mention superficial contacts but also explains how and why she acted and reacted in her sporting group. She was afraid of showing her weaknesses and vulnerability, which might be exploited by others. Hence, she covered herself with an adopted role of a nice, powerful and untroubled woman.

By this means, the women often do not feel real, because they perceive themselves as always hiding something. Their selves seem to be
in the invisible and hidden background and they feel as if they have no real life. Hence, they seem to live in a permanent film or bubble. An expression of this is, for example, that they feel isolated in the middle of a crowd (Kate 837). Some women even refer to metaphors such as “castles” (Anglea 263), “a thick armour” (Anglea 57) or “thick bed of thorns” (Blythe 364), which they put up for their protection and which have to be penetrated by any person who wants to come close to them.

Consequently, this pattern, seen from a social point of view, represents a perfect adaptation to social norms and requirements. The victims portray themselves as active social members, although the motivation for their activity may be misunderstood by society. In this context, they might even set and define social norms. Furthermore, most of their conducts are closely associated with success. During this pattern, they are apparently considered successful and powerful women. Consequently, they become untouchable in a social setting, performing the role of a super and multi-tasking mum, of a perfect professional or an excellent athlete (Cathrin 88-102). They apparently fit well into a society, which is patriarchal and dominated by predominantly aggressive patterns of everyday life. They seem to be normal, even though they are often hyperactive and sometimes excessive.

**Binding constraints**

Blythe desperately tried to cover her lack of self-esteem and her fear with hyperactive behavior, dominated by control and strict rules.

“Yes, of course; well first of all by means of this perfectionism and this planning that nothing happens <<staccato> in a different way from what I have been imagining>. I’ve really created such really rigid structures for my daily life; therefore I always say that I’ve lived with constraints in absolute constraints; without being aware of it. And (-) yes; and I’m quite happy that this isn’t currently happening, but at that time I simply didn’t notice that it was not normal. With all those constraints, it didn’t matter if I organized my day or if I for exams for example; I learned like an idiot, because I also thought that I was rather stupid;” (Blythe 806-815, (13))

---

220 A lot of victims seem to temporarily overcome their trauma, transforming their pain in a kind of creative “sublimation”, only to be later again overwhelmed by their memories and desperation in a kind of fixation on the past (van der Kolk et. al. 2000, 27).
In her interview, Blythe refers to some aspects which intensify and modulate the structure of the hyperactive pattern, characterized by rigid structures, ruled by constraints and invisible patterns and guided by fear.

First, perfectionism seems to be one of the internal guidelines, being closely linked to control and order. It eliminates spontaneity and flexibility and generates fixed everyday life strategies. By this means, it tends to annihilate free choice while fixing and predetermining structures, representing a self-imposed rigid bondage for the victims and their social circles. In addition, hyperactivity seems to be further influenced by hyperorganization and a strict time-regime, ruling the victims’ everyday minute and binding their decisions to a framework of strict rules and schedules.

Second, and as already seen in some of the previous citations, the topic of boundaries is construed as a problem by the victims: they do not know their own limits, cannot manage the boundaries between work and private life, and are not able to define the boundaries between themselves and others. Consequently, their boundaries appear to be fluctuant, which may represent a permanent point of conflict with the victims’ surroundings, since boundaries have to be permanently discussed, often resulting in conflicts of power. This might result in the victims’ exhaustion and total loss of energy.

Third, some interviewees mention facades, such as “always [being] nice and friendly” (Anglea 56, (14)), which form part of their act of hiding. This means, they try to disguise or mask their weakness and vulnerability.

“At home one hell ha-ha but yes eh the mask so the other Ayla she always wanted to be eh good at school or function and eh achieve something.” (Ayla 333-335, (15))

Ayla even calls it literally her “mask”, which -up to a certain point- splits her personality, shown by the fact that Ayla refers to herself in the third person singular. But by using a “mask” to hide their weakness, vulnerability and fear and to appear strong and active, the victims produce a kind of

---

221 In linguistical terms, the word person or «mask» is related to the notion of personality, a social self represented to the world (Hall 2003, 290).
insurmountable gap between themselves and their social environment. In addition, they feel even lonelier and more alienated. Furthermore, the subterfuges as well as the entire everyday conduct seem to consume a lot of energy, permanently lowering energy levels and often ending in a breakdown, severe illness or burn-out syndrome, leading to other patterns such as retreat or temporarily time-out.

The meaning of this pattern of compulsive hyperactivity is -according to the victims- the following: avoiding (or fleeing from) the negative memory of the sexual assault and occupying the maximum time, space and energy in order to prevent the memories from emerging.

“Memory is commonly agreed to be a person’s capacity to recall or summon up information stored in his or her mind.” (Coetzee and Rau 2009, 3).

Therefore, remembering can be seen as a mental act, characterized by the absence of the (remembered) things, recalling them at present. 222 Consequently, as long as the memories of the sexual assaults are hidden, they are -at least consciously- absent, but their reappearance recalls the traumatic situations of the past and transfers them to the present. This reconfrontation with sexual violence, as a result of emerging memories, causes fear and anxiety in the victims. Therefore, and as they are scared of being reconfronted by their past, they try to run away from it. Since this pattern is linked to the avoidance of the memory of the sexual assault, it is generally enacted while the memory is still hidden and lost or while the victims refuse further therapy thinking that they can manage the memories on their own. 223 Therefore, the specific behavioral pattern is not only characterized by WHAT the women do, but especially WHY they do it this way and FOR WHAT purpose. Yet to forget and avoid the memory of the sexual assault is apparently not the only purpose. To forget the deep loneliness which many victims experience seems to be another objective. Paradoxically, by hiding their memory or the real reason for their conduct, they even widen this gap and their feeling of loneliness.

222 Although being a mental act, memory has also an embodied aspect to it, which will be referred to in chapter 6.1.3, pp. 249-257.
223 Compare p. 82 on memory loss.
“Karolin: And when you start working so early in the morning (Explanation: Julia starts working at about 5 o’clock each morning), this might be strange for your colleagues. How do you explain this, for example, to your colleagues?
Julia: I’m an early bird and why should I er still sit around at home when I might already start working.
Karolin: Ehm.
Julia: And when I don’t feel like it, then I simply say, IT’S LIKE THAT.” (Julia 66-71, (16))

As explained by Julia, she only presents part of the explanation to her colleagues, leaving out the reasons for her difficulties regarding sleep. Hence, the victims and those in their milieu base their decisions and their interactions on different attributions and motives and the subsequent creation of conflicts and mutual disappointments seem to be inevitable. A mutual understanding would seem nearly impossible, because the principles and basic foundations of their communication and interaction are different as regards trust, confidence, sincerity, prevision, attention, attribution of meaning and perception.

Fourth, and although this conduct is characterized by hyperactivity, it does not represent an active and responsible strategy to achieve a result, to finish a project successfully or to simply please oneself, but is marked by self-imposed constraints. Nevertheless, the victims portray it as if someone or something from outside forced them to do things in a particular way. They feel like actresses in their own lives, unable to write their own script and to direct their lives. This something is described and paraphrased differently: as an obsession which rules the women from outside; as an illness which makes them do certain things or which impedes them from doing others; in passive voice, something happens to them which eliminates the active subject and presents themselves as passive objects; and as living according to rigid constraints. The victims seem to have no choice, but to act hyperactively, trying to hide behind their perfect performance and to go by unperceived. They are valued and appreciated members of society.

To sum up, hyperactivity seems to be characterized by many activities and actions that occupy a lot of space. This space is marked by an inside/outside division, since activities are directed towards the outside -
attack - in order to avoid the confrontation with the inside-flight. Their main purpose is to fill and occupy time and activities are chosen not according to their pleasure-factor or social or monetary reward, but based on the constraints and pressures produced by the sexual assault and the unwillingness to assume the memory communicatively. Hence, fleeing and hyperactivity are non-communicative strategies which seem only to increase the gap between the hidden or suppressed memory, the non-knowing social environment and the victims. This pattern, seen from outside, may represent a perfect adaptation to social norms and requirements. The victims act as active social members, although the motivation for their activity is unusual. The interviewees seem to have no problem pointing to this pattern. Yet regarding its meaning, there are aspects that, linked to shame, fear and panic, may impede or complicate their narration.224

5.3.2. Retreat: between avoidance of the world and creation of an ideal one

The next pattern is characterized by the victims’ retreat from everyday life, a refusal to participate in everyday activities and interact with their surroundings. Hence, it seems to describe an opposite pattern to the previously mentioned hyperactivity, consisting of different shapes, such as closing oneself up or dreaming one’s life away. But as shown in the following interview-extract, the boundaries between these two patterns and the transitions from one to the other are not completely fixed and clear-cut, but fluent.

“I’ve only worked, well of 24 hours, I think, I’ve worked 20 hours. I’ve slept little and worked a lot; that I somehow could cope with it. Then I’ve done so incredibly much. I’ve simply (-) LIKE BEAMING MYSELF AWAY no? Well when I was in a really bad mood, then I’ve simply beamed myself away for a week. The whole week. I haven’t eaten or drunk anything (-) I didn’t notice anything of the world.” (Angela 17-23, (1))

224 Regarding the sample, there may be a bias towards poorer and worse cases, thus allowing the present pattern to appear less important than it really is. In other words, these women are very obviously cases that present very strong problem patterns. As such, they are probably too extreme regarding the extent of the hyperactive effect on society. Those victims that go undiscovered will leave a larger footprint yet do so more subtly than those extreme cases.
As in this example, the patterns might alter from one moment to the other. Angela describes this confusing transition from a conduct marked by hyperactivity to the annulment of nearly all her activities and her quasi disappearance; by using the expression “to beam away”, she conveys the feeling that she was changing from one state to another, similar to being in a science-fiction movie.

Avoidance of the world

It seems that retreat represents a closing off from the world, refusing even basic needs, such as food and drink or attention to personal hygiene. During this pattern, everyday activities are cut down to a minimum, sometimes even coming close to zero, not doing anything during the day but sleeping. The victims’ everyday conduct is apparently no longer manageable; even simple activities like preparing food can not be dealt with.

“[…] that I hid myself away at home, that happened quite often and ehhh that I somehow didn’t do anything at all – well the day simply flew past and I also had no interest in doing anything - .h well even little things like cooking were too much for me. Then sometime I preferred taking my car and driving to my parents (-) than somehow .hh having to think of preparing myself something. Then that wa:s already (---) that was a task – which I simply didn’t manage at home any more.” (Susan 27-34, (2))

As Susan states, time loses its importance. It passes without being noticed and without being filled with activities. But she is still able to leave her flat and to care for herself, by going to her parents’ house.

In contrast to her attitude of looking for external help, retreat is generally focused on the home, especially on the bedrooms and the beds or sofas, which are rarely left. Only the inside seems to exist for the victims, because of the complete or partial retreat from the outside.

“I stayed (-) in bed the whole day; the whole day in A in pyjamas. I didn’t wash my hair, I didn’t get dressed, (-) yees I didn’t go shopping I didn’t eat; (--) everything was ok when somebody came, then I was all smiles .h and er I looked forward to it; but apart from that I
lay in bed until 5 o'clock, briefly watching TV 2 hours and then back to bed again.>”(Thelma 50-56, (3))

Apart from Thelma’s description of her daily activities, which were almost completely confined to staying in bed and watching TV, giving no importance to time, she also refers to her reduced social contacts. Generally speaking, they are apparently limited to close family members, such as children, parents or partners.

“Karolin: And apart from that, do you have any friends?
Nicole: (---) No friends here in this street, there is one; but besides him here since I’ve moved to this place, everything, well also earlier, everything has .hh yees my former colleagues I’ve no contact at all with any of them, although I’ve been there for x years? Friends I say (---) no in fact .h here in B-city very few. My circle of friends er has become smaller and smaller, (---) the reasons, I can’t explain. Maybe, because I live quite a reclusive life, preferring my own 4 walls (-) yes, (3)
Karolin: And in your leisure time, what do you do?
Nicole: In my leisure time, yes, well first of all I have a huge garden in the backyard which is quite then yes; we also go to live concerts or (--) yes what else do we do? (1) Not a lot. Hobbies; yes reading. And I’m able to sit down for hours and read.” (Nicole 225-237, (4))

Nicole attributes her reduced social contacts to her wish to remain within the privacy of her home. By this admission, she opens a wider perspective and presents retreat as a long-lasting conduct. She has reconciled herself with the situation by accepting her loneliness.

Consequently, retreat might, on the one hand as we have already seen, be a conduct which rarely occurs and which takes place over a more or less short period of time. Its beginning might not be clear-cut and conscious, but, as Angela has shown, there seem to be slow transitions from other patterns. In this context, it might be linked to a kind of general illness and malaise or indisposition on the part of victims. They apparently do not feel well or even feel permanently ill. Susan even explains it explicitly “yes well now eh the whole time when I was ill at home” (Susan 22-23, (5)).

On the other hand, and as seen in Nicole’s case, retreat might also represent a general and continuous conduct, shown by tendencies such as “preferring my own 4 walls” (Nicole 232). Furthermore, some of the women
talk about techniques they use to make themselves leave their homes. They need to force themselves with an excuse and a good reason. This, without being explicitly mentioned, implies that they have a tendency to stay at home.

“.hh yes in addition er I also have a housemate, the dog, for whom I must also care, this is also intended, this is also quite good, .h eh he forces me to go out at least sporadically, well sporadically, I must regularly go out with him,” (Ann 40-43, (7))

Ann’s dog forces her to leave the house regularly. By using the words “intended” and “forces”, she makes it clear that at least one reason for having the dog is to make her leave the house. He becomes a tool which she uses in order to open her space up and go outside. But her doubt regarding the sporadic or regular occurrence of this fact shows that she perceives it as a sporadic activity, probably due to her unwillingness to leave the house regularly, whereas the activity could be a regular one.

But apart from dogs which make the women leave their houses (Susan, Elaine, Ann, Pia and Kate have dogs), there are also other activities which show the victims’ ambivalence regarding staying inside and going out. In this context and on a practical level, shopping seems to play a central role.

“Thelma: [..] I don’t go out on my own. Today I went out on my own here. I’m quite proud of that. I’m happy, but at home I didn’t go shopping. I avoided, covered it. When someone said, I’m going here and there; eh would you like to come? Of course, I would, I already had a large list, of things I needed. And thus, nobody noticed anything, and only I know it, and this means I replenished everything, which I hadn’t been able to buy for weeks. When I enter any buildings; being Aldi or or furniture showrooms; I would never go there alone, when there’s somebody else, then I can go inside <<whispering> If not ah my inside dreads.> I’m panicking.
Karolin: Mmh.
Thelma: Absolute panic. My heart is racing, I’m sweating and then I say; I have to get some fresh air. (-)" (Thelma 277-292, (8))

Crowds or shopping centers are places that seem to produce attacks of anxiety or at least malaise to many people. But, their avoidance implies
major restrictions and a considerable reduction of activities, space and movement for my informants. Thelma explains her technique, how she masked her avoidance strategy towards other people and how she managed to arrange her everyday life, despite these self-imposed restrictions. Thelma tries to hide her panic and tendency to retreat, as she probably wants to be seen as an active and strong woman and not a panicking and dependent one. In this context, retreat is also closely linked to shame. Nevertheless Thelma is obliged to go shopping. Thus, she enters into a deep dependency on others, making her feel helpless, needy and at other people’s mercy. Furthermore, and in Thelma’s case, avoiding shopping seems to represent a symptom and reminder of the more acute previous period of withdrawal, as seen previously.\footnote{225}

In other parts of the interviews, a lot of victims talk about communicative problems that they have, for example, with their bodies. They often state that they encapsulate their bodies and their mind, for example not being able to communicate with some of their body-parts.

“Angela: My body? I’ve little contact with it.
Karolin: Hm.
Angela: I already talk to my feet. Yes, I do moisturize them. I pay attention to them, sometimes. I’m already allowed to go up to my knee. Everything else, mh. I know that everything is there,(-) but it doesn’t exist for me. Well I shower a lot and everything with care products. <<Whispering and murmuring> hhh (---) (4 seconds not understandable) Then I said, well my body, if you want to or not. We’re going to the solarium, now.”
(Angela 331-338, (11))

Angela reproduces some conversations she had and has with her body, which demonstrate her communicative problems with it. With some body parts, she is not able to communicate at all. This may lead to paradoxes, such as paralysis, as in Angela’s case (she ended up in a wheel chair, despite the absence of organic problems) or to an extreme need to feel their own body, by means of self-mutilation or self-injury, such as running with stones in one’s shoes (Julia 465-467).\footnote{226}

\footnote{225}{Compare Thelma’s citation (nº 3) on pp. 197-198.}
\footnote{226}{For more details on the body, please compare chapter 6.1.3., pp. 249-257.}
The creation of an ideal world

A completely different form of retreat seems to be referred to by the interviewees as day-dreaming. Probably as a result of its difficulties at the moment of explaining it and putting it into words, they use different and sometimes very lyrical and metaphorical expressions: Blythe describes it as an escape through “wall hangings” (Blythe 364), through which she floated towards another world, in which men treated her nicely and she was allowed to play and eat whatever she wanted. It was a kind of constructed and imagined paradise for her, in which she lived. From there, a girl, looking like her, was sent to the «real» world. This «escape through the wall hanging» towards a «beautiful world of fantasy» seemed to help Blythe survive the violence she suffered and to overcome -at least partly and temporarily- her pain and anxiety.

Elaine refers to a similar concept, which she calls her “own ideal world”, which helped her to survive.

“because I said “I want to be back in my ideal world“ and er there I feel good (-) or also (---) again such an own world, because that again a friend from X-city has said to me, well ((clearing her throat)) he called me, he has probably known me for over 20 years, he said to me, that with everything what happened to me, I had always created my own world for myself and lived in my own ideal world. Somehow it was written all over my face, that I (1,5) created my own patterns of behavior, my own measures of value and that I didn’t become depressive. Maybe that’s it now that I again want to retreat into my own ideal world and my world” (Elaine 258-267, (9))

Elaine presents her “own ideal world” as a kind of castle that she can retreat to, in order to hide from the cruel outside world. There, she can be herself, because this world is ruled by principles, values, and patterns that she has established. Referring to a friend of hers, she opens a larger time frame and presents this conduct as a long-term coping strategy, which -in her and a friend’s words- has helped her to cope with the violence she has experienced in her life.

These illusions are surprisingly similar to the fairytale Alice in Wonderland, where Alice escapes from her reality and starts living in a fairytale, but in her case and little by little, this (also) becomes a nightmare.
Hence, retreat partly seems to help to escape the cruelty of the real world. But at the same time, it helps the victims to make the «real world» more bearable, because it permits a certain degree of adaptation and conformism, as the retreat is only an imagined one. Even after the sexual and violent assaults have finished, this pattern they have learned might continue, such as day-dreaming, which might become a daily pattern:

"well (-) unpleasant or must-do-things I prefer doing in the first half of the day, and afterwards it becomes slower or less hurried or then I also dream somehow or yes eh whatever." (Ann 81-84, (10))

But since daydreaming is not a socially accepted adult behavior, Ann does nearly not dare to talk of it.

Generally speaking, victims may become numb, blind, deaf and dumb during retreat. They might try to deal with their pain and fears -either by negating them or cutting them off- although none of them really refers to what they are doing during this hiatus, apart from «nothing». In one interview, I explicitly asked about her thoughts and activities, but Elaine (290-291) avoided answering my question and instead at such moments described general concepts. In the short term, avoidance seems to be a victims’ strategy in order to diminish overwhelming consequences. The consumption of alcohol and drugs may also form part of this avoidance strategy. According to Whiffen and MacIntosh, depressive symptoms may relate childhood abuse and interpersonal difficulties, while symptoms of dissociation bridge abuses during childhood and revictimization 227 (Whiffen and MacIntosh 2005, 25-33). Dissociation consists of the capacity to ignore one’s pain, of hiding (and forgetting) one’s memories, of altering one’s sensation of time, of space and of people, or of inducing hallucinations. Sometimes these alterations of one’s consciousness are deliberate, but they often turn into an automatic process and thus appear and disappear in an alien and involuntary way. 228 Therefore, dissociation does not only

---

227 The definition of sexual revictimization requires that two episodes of sexual victimization be clearly distinguishable. Investigations show that two of three individuals who have suffered sexual violence might be revictimized (Classen et al. 2005, 103).

228 As a consequence of all the previously mentioned features, it is possible to say that trauma is contagious. The lack of integration of traumatic events and the incapacity of many victims to
develop as a defensive adaptation, but as a fundamental principal of the organization of one’s personality (May 2003, 284-285).

In psychological terms, this pattern might be understood as ranging from depressive episodes, characterized by low energy, sadness, loss of concentration and low activity levels to dissociation, which might range from normal day-dreaming to pathological disconnection between one’s experience and memory, splintering and fragmenting one’s consciousness, identity and perception (Reddemann et al 2004, 3). On a sociological level, retreat means that victims disappear from the social surface. By this means, the victims eliminate risks from their lives and avoid any human contact that may include closeness and responsibility. Uneasiness, pain and fear rule their lives and they perceive themselves as being very small and vulnerable. The problem is that, insofar as they disappear as social members, social institutions are not able to help them or to care for them.

Regarding its narrative moments, there seem to be few words to describe this pattern. In contrast to hyperactivity, which seems to be easily describable, because many actions and things are going on, retreat appears to be more difficult to put into words. This might be the reason why Angela uses the metaphor of “beaming oneself away” (Angela 20) to describe her actions or why Susan speaks of an illness to describe her situation and feelings. In this sense, retreat -for want of a better word- is expressed as «not feeling well» or «being in a bad mood». Hence, it seems to be closely linked to feelings of «being hurt», «feeling pain», «being afraid» and «rejection of one’s own life».

In this context, some interviewees simply describe a contrasting attitude, in order to emphasize the inexplicable retreat.

---

229 According to Fischer and Riedesser (1999, 32) and referring to Janet, dissociations are caused by a overstraining of one’s consciousness, often concerning one’s coping with traumatic or overwhelming experiences. The consequence of this lack of coping mechanisms can be the separating of one’s memories of the traumatic experience from one’s consciousness, called dissociation. But these memories mainly reappear after a certain amount of time, either as emotions, physical symptoms or behavior. Compare also the chapter 6.2.1., pp. 258-271, on knowledge and memory.
“And this was different before (-) before that happened. Yes? I was a true rebel; I’ve defended my twin; (I’ve always managed that / I’ve always hounded boys); well I wasn’t able to defend myself ANY MORE yes? And after this event my whole life has completely changed; I was NEVER anxious yes? Until that day;” (Carla 286-291, (6))

Carla, who talks about her general mood and character, which -in her words- has changed since being sexually assaulted, describes her retreat from the world as a result of her fear. In the end, what Carla describes is not her retreat, rather something opposed to it, her own rebellion; nonetheless, in doing so, her retreat is evoked. She refers to her previous attitude as one of always defending others and being “a rebel”. In contrast, Carla describes her general attitude towards her everyday life, which has been ruled for decades by fear. This often causes inaction, retreat from the scene and leaving things to others. Hence, it is possible to assume that retreat is little mentioned in the interviews, perhaps due to its connection with shame, fear and lack of trust regarding others, as well as victims’ difficulty in putting this feeling of total numbness and apathy into words.

To sum up, the retreat-pattern is characterized by reduced activity which could even be surprisingly close to zero, not doing anything during the day but sleeping. The space is reduced to a minimum (either their own four walls or the bed and sofa). Only the inside exists, because of the complete or partial retreat from the outside. Only minimal social contacts are maintained and the person’s energy level is extremely low. She is almost inexistent as a member of society.

5.3.3. Time-out: between overwhelming memories and therapeutic confrontation

In this pattern as well, the victims do not continue with their daily activities, but in contrast to the previous pattern characterized by a passive, depressive attitude of retreat, they take a -voluntary or involuntary, conscious or unconscious- time-out, representing either a therapeutically guided or involuntarily triggered confrontation with the sexual abuse.

---

230 Compare p. 208 on revelation regarding her handling of this general conduct.
“Sy: Yes one perceives well you didn’t perceive the world any more. Well me still a little bit; but also not much; no, only when when you were in a bad shape and when you needed help but .h apart from that the children also, only, well,
Blythe: Mmh. Yesyes.
Sy: And the the surroundings not at all. No? And that was a long process bringing you back to that. No?
Blythe: Yes, and now I’ve experienced that this is really bad in cases of people with little children at home, because the small children need a mother. And my children were, thank goodness, not of that age any more. And that’s that’s really bad then. Well eh I still know that from time to time I realized a little bit this situation and I thought of myself that I had turned into an absolute egoist. I only think of myself. And then I thought that I had to do something for him and for the family and so; but that was not naturally there, somehow. That was not possible then.” (Blythe 786-800, (1))

Sy and Blythe, a married couple, reconstruct this period of time-out and they remind each other of the difficult time. Blythe, before directly answering Sy, explains even worse cases, in order to mitigate the impact of her own. Even she, who has largely overcome her trauma and who is conscious of her everyday life patterns, apparently does not feel at ease talking about that time, about how she was “absolutely selfish”. Both Sy and Blythe confirm that time, space, things and people in the victims’ environment are not even perceived, during their time-out conduct. They lose importance, because the victims become completely self-centered. They are not even able to complete the easiest daily duties and they do not show initiative; if they start doing any work, they do not care whether they finish it or not. In addition, external expectations or pressure of fulfillment do not have any influence on them.

Overwhelming memories
“I then go in the (-) I simply can’t manage my daily life any more. I go in my head-cinema:, (-) that means, I take any current or former (-) situations, (-) up again, and then I talk to them. And er at the moment the main problem is .hh that I’ve to take out one person and that’s the king of the world, to make a picture of an enemy out of it. That can be the neighbor vis-à-vis, that can be the man from the garbage collection, .h and there is also a lot aggression and rage and there is even hate, up to cold rage, up to hate and that captures me in a way, that I’m not even able to write down daily, what I’ve to do, in order to
Elaine, for example, refers to it as her “head-cinema”. This “head-cinema” is the translation of a state of weirdness or obsession, that she is aware of and where the emotions are encapsulated but very present at a time. She reexperiences and reproduces scenes of violence over and over, which show up as memories.\textsuperscript{231} Apparently, all energy, emotions and actions are drowned or withdrawn from daily life; the victims are overwhelmed, occupied and involved with the confrontation of their traumatic memory, similar to actresses who follow a previously written script. This might either happen on a voluntary (but not always controlled) level, with the aim of coping and integrating the traumatic experience, or on an involuntary level by means of external triggers, such as seen in the previous citation. Hence, this pattern seems to consist of two dimensions: either it is linked to the context of therapy or is produced by triggers on a daily basis.

\textbf{Therapeutic confrontation with memories}

By this means, confrontation with the memory during therapy is mainly referred to as “work” (Thelma, 81).

\begin{quote}
“Yees. By all means everything comes close; I’m working; eh. Everything, I think, is there; well then I think of what has happened today. and eh it’s very exciting; and exhausting. It is like 10 hours work for me. I would like to be (-) happy again and therefore I’m intensively on it and er I want to do everything everything er possible to move on to be happy again to laugh .h maybe start a new partnership. (--)
” (Thelma 81-87, (3))
\end{quote}

Therefore, although the women have given up their usual daily activities, they are enormously active and they become exhausted by the work they do. Hence, it could be said that the victims take time-out. They live in a kind of black-box, without notion of time, space or their surroundings. Hence, time and space lose their importance, because they are completely occupied and consumed by the confrontation with the memories of the sexual violence or its reminders. In psychological terms, this might be

\textsuperscript{231} Compare p. 82 on memory and emotions.
referred to as flash-backs or dissociative episodes.\(^{232}\) A battle seems to be waged, either the therapeutic confrontation with the trauma or the trauma triggered by different events. At the same time, the victims apparently need a lot of attention and they suck up all the energy that is available from their surroundings. They even describe themselves as extreme egotists and as being almost antisocial, because they are not able to care for anybody other than themselves. They become completely self-absorbed.

Furthermore, from a social perspective, general social attitudes often consider the victims to be ill (due to the sexual traumatization) and they are awarded a social time-out in order to recover (or they take this social time-out on their own terms). They are allowed to stay at home or they are offered therapy in order to recover. But the social system limits the diagnosis and periods of recovery to a standard time and to a standard process. If the victims do not fit into this socially accepted time-out, for example, by needing more time or not fitting the diagnosis of the social system, this pattern might easily shift into the previously explained retreat-conduct or the disclosure-conduct, referred to in the next chapter. Consequently, the victims’ behavioral patterns, if not diagnosed correctly, seem to (re)emerge in society and undergo various processes of alternation between hiding and becoming omnipresent. The victims often have to go through several stages of potentially severe illnesses, which seem to be not easy to diagnose medically unless their origin is discovered and time-out can be granted.

### 5.3.4. Revelation: between visibility and exclusion

The fourth conduct detected, revelation, seems to be characterized by an unveiling of the women’s uneasiness—a coming to attention—, which might either take place on an individual scene, such as the victims’ bodies and everyday arrangements, or between the victims’ Conduct of Everyday Life and their social surroundings. Consequently, this pattern ranges from little to total social visibility, on the one hand, and, on the other hand, the same pattern leads from minor to total individual and social acceptance.

\(^{232}\) Compare p. 203 on retreat and dissociation.
Seeking visibility

First, drug or alcohol addictions seem to perform a visible but often and especially in their beginning- unrecognized revelation of the memory that is being hidden and avoided, producing a paradox between, on the one hand, constituting an intended tool to avoid and to erase that memory and, on the other hand, being a medium to ease the emergence of the images of the sexual assaults, given their function as a de-inhibitor.

“...And I really think that that er this drinking of alcohol, this deadening, not wanting to have this feeling yeh? Also this story from Y-city then; through the alcohol it got worse and (-) worse yes, then all these pictures showed up again” (Carla 120-124, (1))

Therefore, according to Carla, alcohol, in the first place served to forget, yet in the end, memories became worse and more acute, intensified by the inhibiting effect of alcohol, which in addition to the undesired effect of inhibiting the memories, also facilitated intimate contacts.

“...And er yes then sometime I realized that this perfectly worked with alcohol. [...] Because I had to learn again, (-) admitting closeness, experiencing and enjoying sexuality .h yes letting a man get closer, before it was only possible with alcohol. Well, of course not getting completely stoned; but simply always .hh to (-) my inhibitions er yes (-) it was about that.” (Carla 291-301, (2))

Carla used alcohol to modify her contact with her surroundings. In the beginning, it was an unconscious process and evolution. She compensated for her lack of trust and problems in setting boundaries by means of an at least partly socially accepted tool, alcohol. But she became obsessed by and addicted to it. When her addiction became too obvious, she lost her job but received social help through therapy. Since then, she feels freer and better; however, in the absence of her former tool of adjustment, she has had to start learning to live with this new freedom, reconstructing and reestablishing her social and intimate contacts. Therefore, her addiction was both a covering up and an unveiling of her sexual assault experience.

233 In this context, it is often linked to hyperactivity.
Second, and socially classified between addiction and illness, there are, for example, eating disorders, which, at the same time, incorporate and externalize the sexual assault.

“And the thing is that I from meal to meal that I’m not FULL, so, and this or that, after an hour, well I think that I immediately pass out, and then, I think, no, you’ve just eaten; so but there’s such an inner tremble, and so and yes. Which I compensate through eating, well. UNFORTUNATELY.” (Ayla 251-255, (3))

Ayla explains how she tries to fill, what she calls an inner void, which makes her tremble and gives her the sensation of passing out, by eating constantly. The consequence is that Ayla is seriously overweight. It seems that ingesting food is meant to fill a void created by Ayla’s former and current relationship with her family members. Yet she never succeeds in filling up the huge and all-devouring hole. At the same time, she is never satisfied by the food taken in. Thus, she permanently overeats as a compensation for accumulated frustration, fear, insecurity and low self-esteem. Hence, any policy or treatment, which only focuses on the eating disorder does not touch upon nor deal with the real problems of the victims.

“Karolin: And friends?
Ayla: <<loudly> .h hhhhh> <<softly> none> few and sporadically then yes because most of them er have family, and so and it has also become er difficult, because they also can not always understand that; that well despite therapy for years, that it has not gone. .h And then I feel misunderstood (-) <<expiring> yes> and .hh hhh that’s also exhausting in a way and .hh eh yes that’s also this physical part, I was here for the first time end of 97 and since then until now I’ve gained 50 kilos in this time. Well, for me I know that it’s like a byproduct or side-effect .h and that little by little=outsiders who are not so familiar with the subject or who haven’t such a feeling for it .h for them it simply seems that something doesn’t go right or something like that that I’m apparently worsening. .hh And ah that’s h (--) exhausting and also difficult .h to explain, especially in the beginning even I eh had the hope; well I do therapy for a couple of years and then everything is fine. (-) <<softly> so (-) mh (1)>>” (Ayla 69-85, (4))

As seen in the previous citation, Ayla’s eating disorder and its consequences seriously affect her social relationships. Her recovery is
measured by her physical appearance. As explained in the previous pattern, time-out, Ayla was given a socially-determined time for therapy, but she did not manage to recover «sufficiently». Her failure in recovery is even visible at a physical and external level for outsiders. Consequently, it is often a source of frustration for her as well, and a source of misunderstandings and exclusion from her environment, which in turn only serves to reinforce her previous frustration of having failed.

But apart from eating disorders, there might be also other physical disorders, such as illnesses, which might also be the starting point for unveiling a sexual assault that is buried in the past, for example by means of migraine (Blythe) or paralysis (Angela).

“They can live with it forever and a day. I can’t. I couldn’t walk any more.; in A-city. I was sitting in a wheel-chair; then the physicians told me, if I didn’t do anything, I would be sitting in a wheel-chair; And nobody knew at first glance, why I couldn’t walk any more.” (Angela 159-163, (5))

After a long period of running away from her memories by means of hyperactive conduct235, Angela’s body literally forced her to sit down, rest, calm down and remember the sexual assaults she had experienced in her youth. In this way her body was able to divulge a secret that she had tried to hide by any means. But as also seen in other examples, this revelation or disclosure does not occur suddenly without any warning. It seems to be part of a gradual process characterized by minor details, which, little by little, form a mosaic and give meaning to the occurrences. Nonetheless, both victims and their social surroundings tend to misinterpret it over a long period of time.

“thus I have started therapy; I had always horrendous headaches. Of course, it was always called migraine. That’s just the first thing, when something is barely noticeable. I’ve done everything I could against this supposed migraine.” (Blythe 446-449, (6))

In Blythe’s case, this misinterpretation was even fostered by experts and physicians, who diagnosed her migraine erroneously. Only after several

235 Compare 5.3.1., pp. 186-196.
attempts at «classic» treatment did a new doctor propose she start therapy. Both in Blythe’s and Angela’s cases, their physical disclosure coincides with a stage, characterized by hormonal changes and menopause which can be seen as a physical and inner life event.

As a first conclusion, it seems that disclosure always conditions and changes the women’s previous everyday conduct or interrupts their general conduct on a daily level. It apparently has the function of being a kind of mediator, both covering and revealing the sexual assault, voluntarily and involuntarily. It generally reduces the women’s social contacts and limits or at least changes their everyday time regime and the movements in space. In this context, alcohol or food excesses seem to be visible signs of a process of social exclusion. For example, searching for and preoccupation regarding new sources of alcohol as well as hiding extensive alcohol consumption from partners or friends is time-consuming and conditions one’s actions far beyond the drinking itself. Furthermore, as a person who is an alcoholic already feels guilty, a victim who is an alcoholic probably feels doubly or exponentially guiltier. What these different dimensions have in common is that they include the body and physical reactions and, therefore, have -apart from the women’s active reaction to the symptoms- always shown passivity and suffering. As a lot of the disorders are socially classified, the reactions are often -at least in their more acute dimension- recognizable and socially accepted as deviant behavior, allowing women to receive help and support, although such support frequently does not produce the adequate solution in an immediate context.

The victims must often undergo a long journey before they discover the real explanation for the illnesses, disorders or dependencies that are illustrated by the following paradox: On the one hand, the women try to forget, hide and cover up their traumatic experience, and, on the other hand, there is an impulse to disclose it by any means.

**Producing exclusion**

Apart from these socially named and partly accepted disclosing patterns, my informants also seemed to employ disclosing patterns on a socially more visible level, which often produced social discomfort and
misunderstandings and even the women's (partial) exclusion from society. In this context, some interviewees express their wish to make up for lost time and to enjoy a violence-free life.

“Because when you’ve had no freedom in the end for x years except 5 or 6 years in between, then you first have to learn to live with this freedom” (Elaine 318-320, 7)

But, according to Elaine, it seems to be difficult to adapt to this life, which apparently follows different rules and requires other behaviors than does a life that has been ruled by violence.

Some victims express their wish to recover the “lost years” (Jane 268, 8) by doing what they were not able to do during their childhood, adolescence or earlier stages of adulthood. They often do not care about social norms (are not aware of them or do not accept them) and perform activities that are considered inappropriate for their social status or age, invading space and time and producing confrontation with their social environment, “stretching the limits» of social tolerance. For example, in the following interview-extract, Nicole relates that she wears dresses and styles her hair the way she wants to, without considering social norms and esthetic patterns considered appropriate to age. Her aim is to enjoy the freedom she did not have for a long period in her life.

“Nicole: Girlish t-shirts and you wouldn’t find any dress or skirt with me. (1) In the closet. (2) Well that’s weird I’ve always thought of or let’s say also what concerns my haircut, no, that’s quite brave and so. That’s the way I want to be and if other people don’t want to see it, then they shouldn’t look in my direction. Yes, it’s quite risky at my age but .hh either one likes me like that or they don’t (-) like me like that; no= (-) Yes sporty, not so much due to my shape but yes rather different of women in their 50s .hh when I look around, for example, my brothers and sisters are older. I have 2 sisters and THE brother, they dress in a conventional way and yes dirndl maybe and so .h then the haircut rather 60s perhaps? Hehehe .hh yes for example also the piercings it was said that it's mutilation and -) I think it's embellishment; the Indians already had it and the massais and yes. That's for me I rather live my youth now. Yes, Karolin: Mh.
Nicole: That's now my youth, let's say. Eh roguish and yes not at all .h no however a simply experienced woman. I also take part in any nonsense if it's necessary well (-) yes
I'm not such such such a serious person. [...] If somebody <<soft syllabic laughing> had known me there>, he would have said well the wrinkly she's crazy no, but that's the way I am. I want to be like that and .h l=l was never allowed to be like that? And now, l=m allowed to. (;-)" (Nicole 333-357, (9))

Nicole, who is in her 50s, explains her way of dressing, which consists of wearing girly, punky clothes. She has an almost completely shaven head, except for some red and green colored strands of hair. In addition, she wears several piercings in her ears, face and body. She is aware that she shocks those around her with the way she dresses, but she assumes the consequences, such as slight rejection from some and social exclusion in other circumstances. She argues that she was never allowed to do what she wanted and to be who she wanted to be when she was young.

From the outside, this behavior might be considered «crazy», «strange» or simply «weird», maybe even «insane», because they are perceived as not being acceptable for a woman of a certain age. They do not correspond to general social rules or conformist behaviors. Hence, Nicole makes herself stand out by directly provoking society and its conservative dress codes which resist even though social mores have become increasingly open and tolerant. Generally, her attitude attracts attention. Since getting this attention is connected to her victimization, it may actually aggravate her estrangement from society, while at the same time satisfying her private needs. Even within the general context of increased diversity of lifestyles, Nicole does not fit in, producing social exclusion and estrangement.

Furthermore, this disruption of styles does only not concern dress codes, but also general behaviors.

„And eh all of them always consider me a bit of a crackpot. But that's really fun. And I like doing childish things. With my little cur back in the forest there’s a brook and then playing there around or er a paddling pool in the garden and I squat down in it. All of them say that I’m touched in the head, but that’s like that then (-) yes I've a lot of (-) childish naïveté. And often I would like to go in there. No worries. And then the adult world gets hold of me again, although my childhood wasn’t carefree.“ (Elaine 372-380, (10))
In contrast to Nicole, Elaine does not mention childlike or girly dressing, but similar attitudes and behaviors. Their behavioral patterns seem to have the same origins and effects. This confrontation tends to produce conflicts between the victims and their social environments, due to misunderstandings and social intolerance. It seems to be difficult for the social environment to deal with «the child in the adult», due to its ambiguity: first, the victims’ innocence is considered to be inappropriate for an adult who is supposed to bear responsibility. It might even remind of childish patterns of senile people, such as patients affected by Alzheimer; second, childish innocence is also socially associated with women as sexy prey and the image of *Lolita* linked to a sexual obsession with young girls. Thus, childish behavior, by evoking innocence, seems to promote irresponsibility and negate mutual communication between two equal partners. It might also be possible that society eventually perceives the victims’ disruptive and disclosing lifestyles, behaviors and attitudes as an innovative and singular performance often producing new cultural paradigms.236

Fifth, the exclusion, alienation, pain and desperation felt by the women may lead to extremely self-destructive behavior, aimed at making their situation more real, for example by feeling their own bodies. In order to re-establish contact with their withdrawn bodies, they may respond with different types of disclosing patterns, like running compulsively and putting stones into their shoes, trying to inflict pain in order to finally be able to feel their bodies.

“Yes and I think er well. I don’t feel my legs. Well I’ve no feeling at all in them. And I think that with running, that this might be good. Also with the running away. Because I always think, that I can’t go way. And the running might help me a little bit. (-) I hope so. Yes and sometimes I put some stones in my shoes. Sometime it should hurt then and maybe sometime I’ll feel my legs. Yes. That doesn’t leave any scars." (Julia 461-467, (11))

236 Victims of sexual violence seem to have a noteworthy participation in the development of the popular culture, often due to their great capacity to both adapt to different situations as a chameleon and to confront society with its own limitations at the same time. Examples are famous actors such as Marilyn Monroe, Romy Schneider or Roger Moore, famous singers as Madonna, or artists such as Louise Bourgeois or Nicki de Saint Phale.
In this citation, Julia only tells of the more attenuated part of her self-injuring behavior, the one which does not cause any scars. Therefore, it has to be assumed, that there are other behaviors, she does not mention. Paradoxically, on the one hand, she tries to overcome fragmentation and her alienation from her body by means of her self-injuring, but the scars and shame, generated by this behavior, exclude her even further from society.

Consequently, the disclosure pattern makes sexual violence visible in everyday life, but it is mainly misunderstood and, most of the time, the victims are either considered odd or crazy by society. In all its dimensions, time flexibility is needed and created - for example by retirement or by absenteeism -, because activities become unpredictable, both for the victims themselves and for their environments. Concerning the spatial dimension, there seems to be a confrontation between «inside» and «outside»: the «inside» exposes secrets and thus confronts the «outside» with a new or unpleasant reality. On the one hand, the women perceive their bodies as revealing and invading their lives and, on the other hand, society perceives the victims as different, crazy and rebellious. Therefore, disclosure might be sometimes interpreted as a rebellious tendency. On a social level, value systems may be constantly confused and the victims largely stray from social norms, since they are motivated by a desire to disclose their memories and live out their newfound freedom from violence. In this phase, only a comprehensive and tolerant environment can deal with their attitudes, which from the outside seem to be highly irrational, and lacking in coherence. Victims challenge social structures and solidarity. During this pattern, their ego is very prominent and not understood by society.

5.3.5. Commitment: between integration and denunciation

The fifth pattern is characterized by the fact that the women perform an active role in their individual and social lives, integrated into society (at its most basic dimension) and endowing their surroundings with their life experience its most expressive dimension).
Integration into everyday life

Regarding its most basic dimension, integration into society seems to be achieved through work life or family, friends and/or therapy.

“Yes until December I was still er I was still in the middle of working life; then nearly everything was fine. I had my rhythm er .hh I woke up early in the morning [...]” (Thelma 15-16, (1))

Thelma’s work life helps her establish a daily rhythm and to feel integrated into rather than alienated from society. Consequently, it seems possible that some victims live their emancipation from violence by simply integrating the memory and the knowledge about their sexual assaults into their lives. Nevertheless, and as seen in Thelma’s case237, there may be situations and circumstances, which interrupt this integration and daily arrangement.

In this context, the knowledge about one’s experience gains importance.238

„Sure well simply to understand it better; well .h er of the abuse I think (•) I rather know or er for me it became evident to me quite late that it forms part of my life, in fact I think not until 2004 and in fact at the time when I er after the separation I went back to my family; when I also had very direct ((clearing her throat)) conflicts, .h eh then all these little mosaic pieces, which I’ve collected in the course of time and during my life, they then reassembled. Er now retrospectively it was like that [...]”
(Ann 827-835, (2))

According to Ann’s words, the knowledge and awareness of her abuse has made her see her life through different eyes. It enables her to interpret the occurrences in another context, attributing another meaning to them. An understanding of many things which were previously fragmented allows her to reconstruct her life and give it new coherency and meaning which were previously lacking. Furthermore, the simple fact of being interviewed for this study already forms part of this pattern, because, as explained

237 Compare chapter 5.2.1., pp. 144-152.
238 Compare chapter 6.2.1., pp. 258-271, on the role of knowledge.
previously\textsuperscript{239}, some of the women made the decision and took an initiative to participate in the study.

“Do it because maybe there are many women like you. That they don’t want to admit it to themselves. Or they simply want to hide it and aren’t aware of the fact; how they harm themselves. That was it that I thought yes maybe .hh maybe there are many or not many have … that isn’t so evident. No idea. Or simply also for me; to get to the point. Because well I perceived it always that there were so many different things in my case and I have there to get to the point somehow that (--) no idea that it also makes sense for my head because I always have the sensation that it’s so much, .hh and now somehow to condense it on on on yes something; no idea. Well there was this this prevention when I thought that can’t be wrong hearing something. And because so many things became clear through therapy when I again and again thought why haven’t you done it earlier. .hh This were always trivial things when I thought, you should maybe but simply no, why should I? And then you forgot it again then something else happened and this or that and then you thought, well doesn’t matter. These mechanisms of distraction, they have always worked neatly until they didn’t work any more. And I think yes maybe there are many women like that?” (Pia 859-876, (3))

In this citation, Pia refers to her motives for participating in the interview. Aside from her personal motivation, to “get to the point” and to sum up her own situation, corresponding to the end of her therapy, she is also motivated to explain her story because she thinks that this might help other women. She is not sure about this and has problems expressing her motives which she describes in a very fragmented language\textsuperscript{240}, characterized by short and often unfinished sentences, many filler words and frequent repetition of the phrase “no idea”. Thus, at least some of the women interviewed hope to help other victims through telling their stories, using the interviewer and researcher as a medium to convey their experience and message to others.

\textbf{Denunciation of sexual violence}

Regarding the expressive dimension, this is done either by writing down their life stories, handing them informally over to friends, trainers or

\begin{flushleft}
\textsuperscript{239} Compare pp. 117-118.
\textsuperscript{240} The recount of a traumatic memory or matters, linked to it, is often characterized by multiple repetitions, speech fillers and confusion regarding events or motives. This also clinical phenomenon is called “fragmentation” (Rosen 2004, 147).
\end{flushleft}
others, publishing them as auto-biographies in books or on homepages or by offering help, assistance and support to other people in need, both similarly affected victims or others. What these activities have in common is that, on the one hand, the women help themselves, by remembering, restructuring and reworking their life story, by getting in touch with experts or other people in need, exchanging common experiences and learning from their experiences.

“Most of all in the beginning, at that time, I’ve learnt a lot. Through the discussions and things, which also affected me.” (Blythe 344-346, (4))

And, as Blythe puts it into words, these exchanges with other victims and their common experiences sometimes touched and affected her and when this happened she was able to confront herself with the situation and work on it.

Or they simply touch other people and are touched by other people as a result of, for example, a general increase in their ability to empathize or to feel closeness through common objectives, as for example in courses for professional trainings for assistants in terminal care (Kate 480-526).

“Well now I have a really lovely friend in the meantime, with whom I often talk about the topic, through the Red Cross, I’ve well we were at that time in the team which was trained and there were really really great and amazing people whom, before I had never met the likes of. We .hh hhh have well she has the people have touched me and I have touched the people and that was yes. That has something spiritual and there I have a really really endearing friend and er she she also knows it most of the team at that time know it er we emotionally grew together through the training .h and er what I have experienced there embracing, cuddling, tell me, and er real interest, which was there and and er who held me and that I simply cried that was a thing I had never experienced before.” (Kate 777-788, (5))

As described in the testimony above, the commitment gives them more abilities, power and energy, the feeling of being needed, accepted, valuable

---

241 In order to maintain the women’s anonymity, their names are not mentioned. Although these women would not mind being recognized, because they have published their autobiographies under their real names, for scientific and ethical reasons, they receive the same treatment as all other interviewees.
and helpful, overcoming their fears of being focused. In Jane’s words “it has something spiritual to it”, transcending previously known conduct and opening new doors. Hence, new knowledge and new experiences emerge, facilitating new communicative channels and new choices, increasing the victims’ and society’s freedom of choice.

On the other hand, the women share a painful but maybe successful recovery with others, in order to set a good example. Writing their biography or poetry represents one possibility for communication with others, victims or non-victims, in order to transmit their knowledge and create a new communicative space.

“I think that I can give people something with my poems; eh somehow I also want to encourage them that it’s possible to find oneself through these downs in life and through these horrible things; that you can find yourself. I would like to somehow encourage this. I would like to give something to these people; so that they may find themselves also with this longing or with the .h this rage which then comes, that this fact of finding oneself that they may find a way to find themselves. Yes.” (Jane 826-831, (6))

Or they want to offer help -which most of the times, they were longing for but which they did not receive when they needed it most- thus projecting their own losses and compensations towards the outside.

“I would, of course, like to; well m:y WI:sh is to (-- ) reach maybe a point sometime that I’m more stable and and maybe work on a helpline, so that the whole thing becomes somehow more positive and especially regarding compatriots who don’t speak German very well; .h and then er that what I’ve also always needed and been looking for, so this for example; some=one who has managed it. Well <<mumbling> that’s rather> very difficult.” (Ayla 124-130, (7))

But as we have already seen in some of the previous testimonies, it seems to be difficult to achieve this goal, even for those who definitively have the wish to do so. In Jane’s case, she has already started preparing herself and she has overcome the first obstacles. Yet her family situation does not permit her to totally dedicate herself to her project. Nevertheless, she presents her ideas as a realistic plan for the future and she seems to have decided to follow her ideas. In contrast, Ayla simply expresses a wish which
apparently is still vague and distant, without having decided on which precise steps to take.

Commitment is generally characterized by the women’s active role regarding their life and environment, but without forgetting their limits. In this context, some of them present themselves as very conscious of what they are able to offer society and up to which point they have to protect themselves. Although the next citation primarily talks about help-seeking people, Blythe explains a completely clear, autonomous and free time regime regarding her dedication to them.

“Blythe: (1) But maybe something else, which called my attention in other cases, when they contact me; that er that again and again or do I annoy you. Or, do I get on your nerves?
Sy: Yes.
Blythe: Well that happens a lot and I also know from my case that it was like that in the past; and therefore I always answer them; no you don’t get on my nerves, when I don’t want to answer I don’t, or when I have no time; and I try to assure them again and again. That happens quite a lot.” (Blythe 999-1009, (8))

On an individual level, commitment can be of varying importance. In some cases, it looms large, partly structuring the overall Conduct of Everyday Life, as seen in Blythe’s case242. In other cases, such as Jane’s, it represents a positive perspective for the future, with positive reflections on current life, such as overcoming fears and loneliness that had been brought on by exposure to unpleasant situations and acquiring contact with new people. But due to external obligations, as mentioned earlier, this pattern does not yet play a role in the structure and time-management that characterize her Conduct of Everyday Life. Apparently, commitment requires a certain kind of time-flexibility as well as the resources at the victims’ disposition. In some cases, it is simply integrated as a leisure activity into their Conduct of Everyday Life, such as in Jane’s case.

“Most survivors seek the resolution of their traumatic experience within the confines of their personal lives. But a significant minority, as a result of the trauma, feel called upon to engage in a wider world. These survivors recognize a political or religious dimension in their misfortune and discover

242 Compare chapter 5.2.3., pp. 161-168.
that they can transform the meaning of their personal tragedy by making it the basis for social action. While there is no way to compensate for an atrocity, there is a way to transcend it, by making it a gift to others. The trauma is redeemed only when it becomes the source of a survivor mission.” (Herman 2001, 207)

Socially speaking, they perform a highly valued social task, either by being simply integrated and valuable members of society -after having made the effort to reconcile themselves with their memories and with social life- or by offering society specific services, integrating or applying new knowledge on a general basis. Hence, the social commitment-pattern is generally highly appreciated in society, as it offers sensitivity and space for differentiation. But nevertheless it seems paradoxical that it is the victims who have to make this effort, most of the time on their own and while still living in social exclusion. At the same time, and as mentioned earlier, sociologically speaking, helping, caring and performing social tasks maintain a certain level of power play, because the helping person feels superior and more important than the needy one. Hence, even in this case, a certain level of conflict and dominance continues to exist.

To sum up, hyperactivity has been described as mainly focused on the outside and the consumption of time, while both the women and their social surroundings are either not aware of the meaning of their Conduct of Everyday Life, or they compulsively try to hide their stigma from society. The behavior in itself often seems completely normal, conformist and adapted to social requirements and it may be even highly valued. Yet it has been proven to be unsustainable as a conduct, because most of the time it ends up in exhaustion or break-downs or it alternates with other conducts such as retreat or disclosure. Furthermore, hyperactivity is closely associated with success, whereas social attitudes generally have difficulty in accepting the victimized and weak side of the women. The impression and the message they send out with their conduct, does not correspond with the general image of a hurt and suffering victim. Therefore, it seems to be nearly impossible for society to accept and recognize them as victims, a

\[\text{243 Compare p. 174.}\]
problem which lies at the source of many misunderstandings and conflicts between the two groups.

In contrast to hyperactivity, retreat is directed toward the inside. Therefore, it becomes partly invisible on the social surface. In most cases, its main motivation is escape from social life. But as soon as it is detected by the victims’ social surroundings, it tends to provoke a social reaction in which the social circle wants to help the victim and to get her out of her self-elimination and isolation. Therefore, and although retreat is directed towards the inside, the conduct is socially recognized as deviant behavior and tends to generate the corresponding social intervention.

Time-out -similar to retreat- takes place on the inside and is also often accompanied by a rejection of everyday life. But at the same time, there is a permanent ongoing exchange with the outside, either because it is induced by outside triggers and factors, such as specific life events, or because therapy forces a permanent exchange between the two. In both cases, time-out represents a break, mostly officially conceded by a variety of social institutions.

The conduct of disclosure is mainly characterized by a kind of conscious or unconscious attention-seeking. It represents an attempt at communication between inside and outside, accompanied by paradoxes and leading to misunderstanding, confrontations, conflicts and frustration on both the victims’ and society’s side. Fragmentations of behavior and non-conformist conducts become visible. Sometimes they are recognized and accepted, either by the victims or by their surroundings, but often society is overstrained by the victims’ actions and excludes them, due to a lack of mutual understanding and tolerance, thus provoking confrontation between inside and outside.

In contrast, commitment can be in part described as a state of reconciliation, where the inside and outside begin to permeate one another, sometimes even partly overlapping. But achieving this conduct seems to depend exclusively on the victims’ efforts -sometimes accompanied by significant others-, although a variety of social actors may support this social re-construction and re-integration through different social measures.
As already outlined in the beginning of this chapter, none of the five different Conducts of Everyday Life appears along, but rather, connected as part of a pair: hyperactivity/retreat and disclosure/commitment, with time-out being an intermediate exception. Generally speaking, a tendency exists whereby hyperactivity and retreat are temporarily closer to the sexual assault and its memory, both at least in part having the aim of avoiding memory of assault. Therefore, both seem to describe the two sides of the same coin: the avoidance of the overwhelming memory and the salvation in either the construction of ideal worlds or the total control of one's everyday life, either through running away, hyperactively, or hiding. Time-out is a specific pattern because contrary to the previous two, it represents the triggered or therapeutic confrontation with memories during which everyday life completely disappears. Due to the exhausting nature of hyperactivity and retreat, disclosure is mainly the way in which memory shows up or for living one’s new and non-conformist freedom. Its counterpart is commitment, both of the memory and the person into society, through creation or adoption of knowledge, the generation of new channels of communication and social commitment. In the victims’ lives, some of these patterns may last for years; others may show up for only a short period of time; some of them may alternate over the course of the day; or some might never show up at all.
6. Specific moments of the interviewees’ Conduct of Everyday Life

After having described different Conducts of Everyday Life, I will now analyze some of the specific scenarios and inner semantics of these everyday behaviors.

6.1. Scenarios from the victims’ everyday lives

As discussed in the previous chapter, the victims’ Conduct of Everyday Life is mainly performed and concentrated within scenarios of work life, the family and the body which mutually influence each other. Their role -especially concerning the connection between individual subjects and their social surroundings and society- will be analyzed in the following three sub-chapters.

6.1.1. Work life: from pleasant to constraining forms of normalcy

Work life plays a central role in nearly all interviews, whether through presence or absence. This is illustrated, for example, by the fact that most interviewees start their interview with the topic of their job:

- “At present well I’m working.“ (Julia 11, (1))
- “er I work in an office, I’m working full-time, I’ve three children, .h and er I’m relatively new er well a year ago in a new relationship and er I’ve been living in a profound situation of stress.” (Cathrin 27-30, (2))
- “Well I’m not working any more? And I’ve been working at the post for 20 years , and I quit 3 years ago, because I was complEtely UNhappy.” (Kate 13-15, (3))
- “During the last weeks months. .h Yeshhh last weeks months. Well it occurred that I that I got ill and now I have problems with my employER?” (Jane 26-28, (4))
- “Mh yes I’m eh working as a freelancer, eh” (Ann 11, (5))
- “Yes until December I’ve been er still working; then everything was quite OK. I had my rhythm er .hh” (Thelma 15-16, (6))
- “Yes: (-) well first of all I’m currently unemployed,” (Carla 12, (7))

This seems to be a socially common and conventional introduction linked to social norms. As work life is something that is clearly defined and socially accepted, it helps to classify members of society and helps its members to
situate themselves in social life. Through their work life, they adopt a specific social position: having a job, being unemployed, working as a freelancer or being retired. Hence, one’s job represents one of the main features of personal demographic data. In this regard, my interviewees stick perfectly to the social norm, beginning their interviews with this type of self-definition. Furthermore, it provides them a social task and a certain social value through which they are legitimated.

As discussed earlier\textsuperscript{244}, it is common to talk about one’s biography, in contrast to one’s everyday life. It is particularly so for these women, who are in medical and psychological treatment, who are looking for a job or have applied for a pension, and must explain their background and their curriculum vitae, which mainly consists of their professional training and career. Consequently, it seems to be a normal and easy starting point for the interview. But aside from this general social connotation and as indicated by the data, work life also plays a specific role for the victims on an everyday basis, ranging from giving structure to their everyday conducts to being an unbearable burden.

The pleasant normalcy of work life

Thus initially, work can be considered a relatively neutral scene, which -at least generally speaking- is based on the evaluation of one’s performance and capacity and not on one’s identity. It is possible that it is therefore a pleasant scene for the victims, not linked to their emotions or identity but to their capacity to adapt and perform specific and isolated tasks.

“Alas there is always so much work. Even if you were working 24 hours, you wouldn’t notice, that anything had been done. That’s ok though.” (Julia 63-65, (8))

Julia, fitting into her hyperactive everyday conduct, can be considered a workaholic, because she starts work at 5 o’clock in the morning and sometimes works as much as 18 hours a day. But in her words and due to the fact that there is so much to do in her office, nobody has noticed her

\textsuperscript{244} See chapter 5.1.1., pp. 127-136.
hyperactive pattern, which she uses to forget her memories of the past. Thus, through its specific organization and structure, work life allows her to hide a lot of her feelings, motivations and attitudes and integrates her into social life. It also allows her to maintain a certain distance from her emotions, her memories and sometimes to other people.

“Karolin: And your colleagues?
Julia: I don’t let them come close; there are 15 of us, young women. All in their twenties. That also doesn’t really help regarding the er working atmosphere. I only say cat-fight. I’m currently trying to look for something else. (1)
Karolin: And then you would like to work in the same field?
Julia: I think so, also again in the field of counseling.
Karolin: And then you also have no private conversations with your colleagues?
Julia: NO." (Julia 34-42, (9))

Therefore, the contacts established through work life may help one to remain anonymous, not to expose oneself emotionally and to maintain and control one’s distance with social surroundings. But in addition from control of the environment, work life also often gives a structure to the interviewees’ Conduct of Everyday Life, controlling time, by, for example, determining specific working hours and occupying specific hours a day.

“hhh hmm yes it was of course easier to pass the day; then one was occupied well in the morning getting up early er half five the night’s over; yes and then working .hh I work more or less until: yes 4, until I’m at home it’s past 5;" (Susan 36-39, (10))

In this context, work life seems to have the function of a strap which holds the day together, through an external and artificial structure. As in Susan’s case, it takes up more than half a day, structuring and giving sense to the time. Hence, it is closely linked to hyperactivity; because it is the scenario in which victims have the possibility of escaping and fleeing from their memory of sexual victimization and to face up to their lives in society on a daily basis. Thus, it helps them to forget and to live an apparently normal life.
Thus, work life facilitates the victims’ at least partial integration into society.

“<<softly> Yes administrative clerk or (administrative clerk)> or school secretary in this field I’ve worked; and I was happy. And that's security; that radiates security.” (Thelma 189-192, (11))

Thelma, who is currently unemployed, is looking for a job to offer her security. By using the unusual word “radiate”, she emphasizes the positive and supportive function of work life for her. Consequently, it can be seen that the interviewees largely associate work life with normality. And as they are seeking normality -for them, something which is often unknown-, a lot of them place special emphasis on their job and job performance. Hence, it plays an important role in the construction of the women’s normality, integrating them into society, sometimes helping them to avoid their (unpleasant) memories and becoming appreciated social members.

Yet the meaning of their alleged normality can be considered a specific one, distinguishable from the normality of other -non-victimized- people. One of their central motivations is shown by their fear of failing and being detected. Hence, they desperately try to hide their stigmas, stains and weaknesses with a perfect performance (Blythe, protocol). Consequently, their actions are motivated by a «because of», in order to prevent and avoid feelings and situations, and not an «in order to», in order to achieve something. In this context, their sometimes good academic qualifications or job efficiency are often simple strategies for hiding.

As a consequence, they often have the tendency to overdo their hyperactive behavior, which is mainly dominated by perfectionism and discipline.

“Eh yes I’m er working as a freelancer, er that requires but that I only noticed with time that it requires a major degree of discipline concerning time that you then really er yes hh eh discipline in the way not that I’ve to force myself to work, but I’ve to force myself to stop working, to take more free-time that I simply in the end, er then I find, and eh I notice that that’s also not good for me and (---) well in that I don’t have a good er feeling in that I really must discipline myself once again” (Ann 11-18, (12))
Since Ann, who - as a freelancer - is her own boss, it is hard for her to organize a work and time-schedule; she has difficulties in marking boundaries between her working life and other daily scenarios. Hence, we see the victims’ Conduct of Everyday Life is often completely dominated by their working life, limiting their flexibility and becoming an unbearable burden.

“Well the working hours were, (-) I was more or less able to, we had a core time, this was from 11 to 4 and er (-) the remaining hours I could set in a more or less free way, .h since I also er headed the institution, I wrote the duty-roster myself and also needed a lot of extra hours, because I needed a lot of time for counseling hours with the parents (…) ((softly and mumbling)). Also no regular starting time, .hh also no regular finishing hours, because I took work home and there I continued working, well I haven’t established any boundary between work and home. (---)” (Betty 30-38, (13))

Although Betty has extremely flexible working hours and she is her own boss, thus able to set up her own time regime, similar to Ann, she is not able to limit work to a normal and bearable amount. Therefore, she experiences it as burden and bondage that she is not able to free herself from. This creates a paradox, because it is she who arranges her own working hours, a task which - at least partly - seems to overwhelm her. Consequently, her freedom seems to bond and limit her, in a paradoxical way.

Another strategy is to copy the techniques of working life into leisure life, such as rigid time regimes, similar to time-schedules at school or work.

“Well cleaning. Yes a lot of cleaning, also showering, (-) and currently I try to set a kind of time schedule. Scheduling each hour and then also sticking to this. Well creating such a structure, er for everything. Yes that’s what I try recently. That way, nothing can surface.” (Julia 77-80, (14))

By this, Julia binds her free time into a rigid structure, as flexibility and freedom apparently are not easy to manage for her.
The binding normalcy of everyday life

In contrast to the structuring normality of everyday life, it can also be perceived as binding. There is a paradox insofar as, on the one hand, work life integrates the victims into society, and, on the other hand, it also often excludes them from society, through unbearable bondage. Inflexible work hours can be a problem and cause anxiety and conflicts. Even flexible time regimes often do not seem to fit the victims’ needs, such as in Betty’s case, seen previously, or Julia’s case, who would love to work at night because of her sleeping disorder.

“At present I’m working. I’m working in an office. (---) I recently try to work only 10 to 12 hours a day. I try to, before I also worked 18 hours. Yes, 18; I would also have worked 20. So nothing can arise. But that isn’t so good. I try eh try to get it under control. I luckily work flexi time. That makes it much (-) easier. But I force myself to start not earlier than 5. But I would start at 3 or 4.” (Julia 11-18, (15))

Furthermore, Julia interprets absolutely normal and daily events, such as meetings, scheduled by her boss for the next day, as intrusive events, which make her feel powerless.

“Also things like, and when the boss says today well tomorrow at 10 we have a meeting. (-) Er well that’s for me already intrusive then I feel immediately powerless. That’s rather silly and I really can’t do it. Well I only can well work for myself in a freer way.” (Julia 411-415, (16))

Hence, Julia perceives a need for what she calls freedom, in order to be able to perform her job.245 As already seen, Ann has solved this problem by opening her own business, which allows her to work despite her illnesses and physical limitations.

“although on the other hand er it allows a great deal of flexibility, that er I think is also quite important because I have to deal with quite a lot of er health problems and er for me er it would I currently can’t imagine really er to be 8 9 hours er all that time at your working place because it’s simply because it’s simply so shaky (regarding my health); when I then

---

245 Herman (1992, 136) considers the victims’ emotional responses to any person in a position of authority as having been “deformed by the experience of terror”.

- 230 -
have a really bad day, then I can just leave the things as they were and catch up later. That’s great, but the danger is, as said, that I eh take relatively little er <<rises voice> yes time outs for myself> doing something good for ME; well I don’t really treat myself with care. Yes. (1)” (Ann 20-31, (17))

Hence, Ann, working as a freelancer, can adapt her work and timing to her state of health, but the danger is that she does not take sufficient rest, because she never stops working.

Yet bondage does not refer only to rigid time-regimes, it can also be linked to colleagues, which might revile the victims and exclude them from their circle.

“Well pf:: that I got along well with older men or something like that one of them slugged me off or .hh ehm she has there or so then I passed by << very fast> and then she says> hey there she comes in a snide way somehow and then they called me arrogant, […] but anyway it was somehow always something (-) that I noticed then or about my dressing they have talked about me behind my back .h and well yes she dresses like a lady and so and so snidely somehow and well such silly things” (Jane 328-345, (18))

Apart from the conflicts, Jane has had with her colleagues, work life can also be a scene of (sexual) harassment or constant violence, as mentioned in a few interviews (Ann, Susan, Carla and Kate).

Furthermore, some specific jobs are socially stigmatized. Therefore, work life is also likely to be a scenario of hiding and social exclusion, such as in Elaine’s case. In her official story, she claims having been a housewife for over 20 years and does not mention working as a prostitute. This denial of one’s job and profession also can be considered a form of bondage, linked to social stigmatization, marginalization and exclusion, connected to moralizing social discourses that either victimize or criminalize, as in this case, regarding prostitution.

Further results of the lack of flexibility on work life seem to be revealed by a high fluctuation and fragmentation of their professional training and jobs. A lot of the interviewees have completed different professional study courses.246

---

246 The social effects of traumatization on victims’ work lives have been studied regarding survivors of concentration camps. They have been shown to have less stable professional biographies with
“Jane: Professionally it was as following, I was yes h I first started academic studies teaching degree for primary and secondary school, this I’ve abandoned for health reasons, because then out of a sudden the psychological things joined up. That was 1 year after the rape? Then this has then shown up so when I then suddenly was standing in front of a class and so and so I had to give training lessons; then I suddenly had a nervous breakdown. Then I also was for the first time at a psychologist then in the year that was in 96 and yes hh then it started slowly so:: gradually so that I was worse and worse. That was then cleaning-mania then somehow there, and then out of a sudden a sensation of heaviness, and .hh hhh somehow (-) uneasiness and longing and (--) and I felt very lonely so I've always felt lonely I've then often felt extremely lonely;
Karolin: Hm.
Jane: (1) yes and then I came that I did a retraining as a design draftswoman” (Jane 129-144, (19))

Apart form Jane’s story, which links her sexual victimization to her health problems and her constant moving from one vocational area to another, also other interviewees have not finished their training (Ann), have changed from one training program to another (Susan, Carla, Cathrin, Ann and Jane), have finished their training but never worked in their trained profession (Angela), or have done training they did not want to do, either because their marks were too bad to do the job they wished to do (Kate), or because their parents simply «bossed them around» (Jane and Kate).

“Karolin: And what did you want to be at that time? What would have been your dream job?
Kate: Kindergarten teacher.
Karolin: Kindergarten teacher. And how did you get your job at the post?
Kate: I had er a damned bad report, and (-) at that time these jobs were already much in demand well one had no chance. Basic secondary school and really bad; er then I attended a school for home economies that was really because I did not get anything as a trainee, .h and er that with the child well educator that was nOT possible with my school report well and er yes. Then my father told me, see if you get something with the State there er there was something in the newspaper, and you send an application there and eh yes. There you have a safe job.” (Kate 677-687, (20))

frequent changes of work places, residences and jobs in contrast to their control group. In 25% of cases, the survivors showed a change to a less qualified and worse paid job, while, the prevalence in the control group was of only 4% (van der Kolk et. al. 2000, 155).
In summary, we have seen that work life plays a key role in victims’ social integration or exclusion. On the one hand, its intrinsic characteristics help the victims’ in their endeavor to forget their sexual assault and to live a normal life, but, on the other hand, the organizational rules of work life often are too harsh for them. Therefore, while the world of work represents a setting where victims can flee from their memories of sexual assault by adapting to the scenario’s requirements, this flight has no destination and often leaves the women exhausted. Consequently, they often withdraw and reappear from work life in alternating rhythms and patterns.

6.1.2. Family: origin, continuity and disruption

The role of the family is more ambiguous than the one of work life, probably due to its less neutral and more emotional and intimate character and also to the fact that families are often the origin or the setting where violence initially took place. In this context, two types of families should be contrasted: First, the family of origin including natural, step, adoptive or foster parents, sisters and brothers, and, second, the new family, including the victims’ partner(s), husband(s), daughters and sons.

Between victimizing and supporting

Regarding the family of origin, one of the key points is the families’ reactions to sexual assault, ranging from the encouragement, toleration, covering up or denunciation. They are more troublesome, when close family members -such as fathers or brothers- are the aggressors and / or origin of the violence suffered. In these cases, a disturbing aspect for the victims is that their relationship with the sexual abuser(s) can never be severed, because the formal family connection is unchangeable. Even after the death of the abuser(s), they often remain present.

“And being able to say, here stop; that has happened to me, I’m still alive, (-) my wrinkly is dead, he can’t harm me any more. But that’s not yet possible; I can say it, but (-) I can’t implement it. That’s the problem.” (Angela 282-285, (1))
Angela can rationally assume her father’s and abuser’s death, but emotionally and mentally she is still triggered by the fear and reminders of the abuse. Consequently, her father continues living on in her fears and dreams and is not dead for her. For other people, this might be confusing and difficult to understand, because she acts as if another (threatening) person were in the room. But as this phantom is not visible and not real for her social circle, it can generate conflicts, especially insofar as others may not be aware of her fear.

Nevertheless, as we have seen in Ayla’s case\textsuperscript{247}, families may be able to counteract some of the negative effects by successful banishing the violent person, but in a paradoxical way, this absence may also cause different although similarly hurtful problems. Ayla, the victim, for example, replaces her father, the abuser, filling the void left by him. She becomes the bread-winner and caregiver of her family, binding herself to her family and thus compensating them for the vacuum she created by her accusation. Her acceptance of responsibility is mainly caused by her mother’s total apathy while the abuse was going on, not being able to protect her daughters from their abusive father.

Furthermore, the interviewees refer to different reactions within the family context, which are mainly characterized by the avoidance of the topic, mostly from their mothers\textsuperscript{248}:

> "then we somehow got we got to this point, where she practically told me, that er there where I was fostered, er that I had bruises injuries especially in the, let’s say, in the abdominal area well, eh whatever, and eh and then it was to me somehow er er the whole thing made sense and I was I that was for me er I was, of course, very ehm (--) yes I also don’t know at all. I eh (--) she anyway had driven me crazy and irritated but for me it was quite difficult to figure this out. But I I thought that it was really bad. <<softly> as a mother>.” (Ann 923-933, (2))

This avoidance can be of different nature: First, in Ann’s case, her mother was aware of the abuse of her little daughter, who she felt obliged to leave

\textsuperscript{247} Please compare chapter 5.2.5., pp. 175-185.

\textsuperscript{248} There exists a long and most of the time a polemic discussion about the mothers’ role (focusing mainly on their responsibility and their guilt) in cases of sexual abuse and incest. As this only slightly touches the phenomenon treated in this Ph.D.-thesis, I will not refer to it further.
with foster parents, since she was single mother at that time. In over 30 years she has never mentioned the subject to her daughter, although her daughter suffered specific illnesses and typical symptoms of sexual abuse. Furthermore, during her daughter’s childhood and youth, she always described her as promiscuous, a thing Ann was not able to understand and which hurt her a lot. Ann is disappointed and confused by her mother’s attitude. On the one hand, she presents her mother as a victim, vulnerable person: she was as a single mother with two little children who had no other option but to leave them with foster parents. Thus, she partly excuses her; but alternately portrays her as a nasty and irresponsible alcoholic, cynical and hard-hearted person who neglected and voluntarily hurt her children. Thus, Ann expresses confusion and some deep hurt, which she is not yet able to articulate coherently. In this context, she also voices her incomprehension regarding the fact that her mother did nothing to prevent other children from also being abused. By transferring her own questions to others, it seems to be easier for Ann to talk about her situation. But apart from her mother’s neglect and failure to protect, she also makes her mother responsible for the fact that she did not tell her anything and, by so doing, prevented her from understanding her own situation for decades. Thus, Ann recognizes the importance of awareness of sexual assault, that which would have explained many of her physical and social problems.

Second, besides the conscious denial of knowledge, avoidance may also be the result of ignorance and lack of empathy and a lack of resources to adequately face the issues.

“And it was also never a topic at home to (-) .hh yes: talk about; I felt quite bad and like shit; when they .h when they drove me back and (…) yes? My mother she had prepared a meal this Sunday, I still remember it; and she has a .hh she didn’t mean it like this; but I sensed it as something really really horrible. She prepared a really nice table with white tablecloth and candles and .hh that was really (-) bad for me. I er (--) I wasn't able to understand it. So many things happened which I didn’t understand, then I thought; .h yes, whom may I contact and anyway and .hhhh That was really bad, I generally dealt with it on my own (--) yes really on my own yes.” (Carla 340-350, (3))
Sometimes, the families might simply lack the will, tools and knowledge to deal with their victimized family members. Carla does not acknowledge any ill will towards her mother, but she experienced her mother’s solemn and ceremonial preparation of the Sunday lunch as something horrible. Her mother’s attempt to welcome and reintegrate her into the family did not have the desired effect, in fact just the opposite.\textsuperscript{249} Hence, her family was not able to interpret her reactions properly; they were simply not able to react correctly. Thus, it became a balancing act: her mother is supposed to know and to react correctly, although the victim does not mention anything, and as soon as she does something, the victim feels misunderstood, closing up and feeling even more hurt, generating a paradox and vicious circle. Hence, in light of this communication breakdown mutual understanding and trust seem to be very difficult if not impossible to achieve.\textsuperscript{250} Furthermore, this vicious circle of poor communication, misconception and incomprehension -based on a simple imbalance of knowledge- creates problems by permanently changing rules, expectations and values.

In addition to direct avoidance of the topic, there is also the issue of how victim and aggressor are handling their roles and social stigmatization, which may generate problems. In this context, an extreme but not uncommon reaction is the change of roles. This means that sometimes it is the aggressor who receives support from the family and the victim who has to bear not only the injury and shame, but also guilt and responsibility, a situation which is particularly detrimental and hurtful for the victims.

“My mother is well she has always protected the father more \textsuperscript{251}. I think she still does this today. Well now I have no contact, for a couple of years, and everything tailed of ((clearing her throat)) but that what really hurts me from day to day? <<parrot sings>> That all of

\textsuperscript{249} Carla experienced rape in the context of a burglary. As she does not mention anything about the rape to anybody, her family and friends think that she simply experienced a burglary, and remain unaware of the rape.

\textsuperscript{250} As proven by literature, the family’s reaction to and definition of rape are greatly influenced by social and cultural views. If they are able to externalize blame for the rape, they will be less vulnerable to long-term negative consequences from the disruption the rape has created. But this is impossible in the case of the victim’s silence. In contrast, not talking about the event is the victim’s way of attempting to restore equilibrium (White 1981, 104-106 and Karapel 1980, 296).

\textsuperscript{251} Explanation: After being sexually abused by her brother, Nicole became pregnant and gave birth to a child. Hence, the father of her child is her brother. The child was born with a handicap which seriously affects his health and Nicole permanently fears for his life.
them so so turn away, and and say <<parrot sings> er they don't want to be bothered especially now in the time when now well it'll be seriously difficult for me> no?” (Nicole 67-74, (4))

Although this happened some decades ago, Nicole is still deeply hurt and she still misses the support of her family and the acknowledgment of her role. After being expunged as a mother in the first place -the official family version was that her brother was the father of the child and that her mother (the child’s grandmother) had to care for it, because the (invented) mother was not able to do so, Nicole was only allowed to go out with the baby at night that so she could not be seen by the neighbors and identified as the child’s true mother. Some years later, Nicole was left on her own with her then older but handicapped child and nobody cared for them any more. These two extremes -erasure and exclusion- are further highlighted by avoiding the topic. By switching roles, sexual violence takes on another meaning: either it has never occurred or it was the victim’s fault. In both cases, the sensitive and hurtful issues are excluded and avoided. Since there has been a visible and tangible consequence of the rape, the sexual abuse is extended in space and time, through an extreme secondary victimization exerted by the whole family.

Another type of avoidance is represented by the fact that the families often consider the victims’ focus on their sexual victimization exaggerated. They flee from the topic, either because they do not want to or are not able to listen to and understand the victims, guided by a deep disrespect for them.

“and my father never listened to me. That was such a long time ago. Why do you still worry about it? And my mother then only said, think about it that it’s your family and what you will cause with that. Think of the consequences. .hhh and then I dropped it. Well. And I’ve come to terms with it; that they haven’t and now since I’m living far away, that's also not so, well there's more distance and as long as I don’t mention it, then it's fine.” (Julia 311-317, (5))

Julia’s parents refuse to talk about the assaults, because they consider that the only right thing to do is to forget them, either because too much time
has passed or because it would affect and harm the family. On the one hand, they might be ashamed of not having been able to protect their daughter, abused as a little child by other family members, and, on the other hand, they may be ashamed of having a stained daughter. In both cases, protecting the family structure that generated the abuse is granted more importance than the protection of the victim. By this means, Julia’s parents also reverse the roles of victim and aggressor, and it is the victim who is paradoxically, accused of destroying the family, not the aggressor. Julia reacts by not talking any more about her abuse. Consequently, Julia - the victim- is stigmatized and excluded from the family and only Julia -the daughter- is accepted. By this means, Julia has two possibilities: either she refuses her family’s demands, which means talking about the abuse, making any contact impossible, or avoiding the topic of the abuse and having contact. In both cases, the victim is not allowed to raise the issue of the victimization. Hence, a taboo is created -or maintained- in the family, which generates a gap and void, impossible to overcome.

“as said well we were a huge family in a flat with 3 rooms and in the end 10 people, and that I nevertheless always felt completely lonely in the family. Well for a while I thought that I was adopted because I simply .h thought that I was somehow completely different to my sisters and brothers and I feel different, and something isn’t right, and er and today looking back I can say, I was the loneliest child in the world in this family; because also er my sis'sisters and brothers eh ignored my my person, but we also ignored each other” (Kate 835-843, (6))

Loneliness and alienation seem to be two of the main consequences of this gap. Although Kate lived with a huge family in an overcrowded flat, she calls herself “the loneliest child in the world”. In her case, it was not only the abuse which was avoided, but she as a person was ignored. As seen before252, she had to make a great effort to overcome this loneliness and to allow herself to “be touched”.

Generally speaking, as already seen in Ayla’s case, it seems to be very difficult to step out of well-established family structures. They can be either directly linked to the sexual assaults and the aggressor’s role in the

252 See Kate’s citation (nº 5) on p. 218.
family -as in Ayla’s case- or to the lack of empathy from the families -often a result of strict and rigid family rules and structures influenced by Prussian virtues and the Protestant ethic (Blythe, protocol). In this context, the victims are supposed to accomplish key roles in their families.

“And but now that's for the last years really the first time since September until now. h That I can say for the first time tranquility. Yes. (--) And that's somehow yes (---) yes also simply difficult because, have a look, my mother can't understand many things, she knows neither neither from from the childhood nor from my husband', I also would never tell that;” (Pia 140-144, (7))

Most of the time, they feel obliged to manage the family, fulfilling a responsibility which is not necessarily theirs. They often put their own needs aside, sometimes even stepping into the role of the aggressor, by caring for the family and not being cared for. This fact of caring instead of being cared for is a paradox, similar to the switching of roles between victim and aggressor. But the lack of common knowledge also makes it more difficult, because the social circle, as a result of their ignorance of the victims’ victimization, has not even the possibility of offering care.

But, in contrast and based on a mutual communication, there are also interviewees’ who can rely on their families of origin.

“The family was difficult. Well my mother first of all to get on with it for her it=was problematic and for my sister .hhh I’ve always been a little bit incomprehensible I’ve had this depressive thing for a long time, (-) and well I was it was difficult between us then. h but the more I’ve then somehow developed the more it was ok; then they also showed interest my mother has really tried hard and she has helped me again and again and she has given me a lot of power, because she again and again she has cared again and again cared for me and she has has encouraged me and she has believed in me that it would become better, .h well she was incredibly she was really there for me well without her I probably wouldn’t have survived it and also my sister and my nephews, .hh they were always there for me without this I wouldn’t have survived; because this encouraged me again and again well when I was in a depressive mood that I thought that I didn’t want to live any more then I thought of my family I thought yes they need me they need me I can’t do that to them so I can’t do that to them that I go now. I can’t do it to them. Well that has given me this will to live somehow.” (Jane 381-399, (8))
At the beginning of her testimony, Jane mentions her family’s problems with her difficult and depressive character and her condition as a rape-victim. But with considerable effort on both sides, her own development and with her mother’s and sister’s insistence, her family became an important and unconditional emotional support for her. In Jane’s words, her family actually saved her from committing suicide and fostered her will to live. Hence, her family’s support and intervention can even be called life-saving and essential. But it seems to be necessary that the family accepts the victim, as she is, loving and supporting her unconditionally. At the same time, this does not mean that the family accepts all of her attitudes and behavior.

**Between continuity and disruption**

Regarding the victims’ new families, it is possible to argue that previous family structures often continue. Ann, for example, was and is deeply hurt by her mother, who apart from concealing her sexual abuse, neglected her as a child and has subjected her to persistent teasing. Later, Ann was also deeply hurt by her partner, who -according to her- cheated on her with multiple lovers in order to satisfy his own needs while provoking and upsetting her, not caring about her feelings at all.

“We are we were then it was no nice time we were together for 2 years, it was really like cat and mouse, he has totally hurt me, I have then it was like drilling in an open wound; I have I couldn’t look as fast as he had some other stories, that was simply hurting and then I’m yes really that that I fled then;” (Ann 916-920, (9))

Certainly for the same reason that Ann always went back to her mother, although she knew that she would be hurt again, Ann apparently was not able to leave her partner, bound by their common story. From her perception, she literally had to flee from him, paradoxically fleeing to and seeking shelter at her mother’s place.

Hence, moving out of a context which fosters violence, such as one’s own family, a neighborhood or separation from a partner, does not necessarily mean the rupture of the previously established pattern. Some of the subsequent partners may also be violent towards the women -
emotionally, psychologically, physically or sexually. In this sense, the violence which they had experienced before continues. This often causes a high fragmentation of their intimate relationships, which are also often influenced by a general lack of basic trust in human relationships, a result of the damage caused by the sexual assault.\footnote{According to Herman, “traumatic events have primary effects not only on the psychological structures of the self but also on the systems of attachment and meaning that link individual and community” (Herman 1992, 51). In this sense, “traumatic events destroy the sustaining bonds between individual and community” (Herman 1992, 215).}

But sometimes, they are able to escape rigid family structures that have locked them into loneliness, lack of respect, negligence and violence. In Jane’s case, this was even her motivation to contact me. She wants to understand why she had been able to get out of a relationship with a violent partner and find a new partner and start a new life without violence, while some of her sisters are still completely caught up in a its chain. Sometimes, new partners and husbands seem to provide security and refuge, playing the role of protector. They generally show a high level of empathy and tolerance, as we have seen in Elaine’s and Blythe’s cases. This might be due to previous -maybe personal- contact with the topic of violence or simply a complete acceptance of the women.

“And then I entrusted it to him. \(<\text{whispering}> \text{I said}> \text{now you don’t want me any more, no?} \text{<><whispering}> \text{He says, that’s not possible. .hhh I say, yes> my cousin; that was well a school companion of my husband. And then he said, I’ll kill him. And yes; he might have told him that, no idea. ((sniffing)) Then he said, you know what? We do it through a report. I know that, at that time I was so ignorant. I also wasn’t able to trust my father, […] But I had such a fear in me, only my husband knew it. Even my children still don’t know anything today.\)” (Mary 382—394, (10))

Her partner’s -at that time still boyfriend’s- empathy and horror made her feel valuable, respected and accepted. He became Mary’s only confidant and protector. But consequently, her husband’s death produced a kind of life-crisis, with reemerging memories of the sexual victimization, feeling abandoned and misunderstood and unprotected. Hence, it might be said that respectful and empathetic partners mean absolution and also a new kind of isolation once they have passed away or out of the women’s lives.
Other interviewees, such as Blythe, Elaine and Julia, have partners who live an independent life and who support them unconditionally.

“And my husband simply accepts it.” (Elaine 405, (11))

The partners often seem to act like specific others, reflecting the attitudes, emotions and changes of their (victim-)partners, sometimes intervening, but never forcing anything on them. The unconditional support seems to be a completely new experience for the victims, which may even produce conflict, since they are accustomed to the pressure of conflict and violence. Simple acceptance and respect for them as persons seems to be disarming, because it contradicts myths and values related primarily to male culture in which, for example, rape is still often considered to be a legitimate strategy of war.

“and the problem is, that my husband also doesn’t exert pressure on me? When he comes home and the washing isn’t done and it isn’t cleaned up and no food is prepared, .h then he simply says “Well sit down. Have a coffee. I prepare something to eat. It’s fine and if it’s too much for you, then I’ll do it this weekend.” (2) Sometimes I simply miss this pressure which I had (-) all my life. (2,5) Yes and…” (Elaine 27-32, (12))

In order to use Eisler’s distinction254, the bondage, the victims were used to, is replaced by bonding links, such as those Elaine describes. Communication, understanding and tolerance seem to play a central role in their partnerships. Even in Blythe’s case, in which the victim and her partner did not know anything about her sexual abuse, the problems and conflicts in their relationship were discussed openly, with the only restriction being their still hidden and ignored memory. Through proactive communication, they were able to cope with their relationship. This helped to overcome problems which were sometimes directly related to the sexual assault, for example, those concerning sexuality.

Second, regarding the victims’ children, continuity and disruption also represent major dimensions. First of all, the victims often try to overprotect their children, driven by fear and control.

254 Compare footnote nº 214, p. 184.
“Well .hh yes and I was rather always then an anxious mum, a lot of people call me overprotective hhh .hhh” (Kate 201-203, (13))

But as most of the children do not know anything about their mothers’ victimhood, they are not able to understand their attitude, which might either be simply troublesome or completely confusing and irritating to the children.

“That's really like that. .hhh I don’t know how I did it I also can't explain it further to you, but somehow I’ve done it with my children, that they didn’t notice anything. I had rather I’ve somehow treated my children like baby chicks; well was terrified no? I was really afraid eh. .hh I’ve never let them somehow go out on their own. Well they were allowed to have a sleep-over at a friend’s place or something like that, .h but .h I always had to know where they were. When I noticed that they hadn’t written a note where they were or when they would come home then I was completely oh; .h then I was really terrified for my children. I was terrified for my children. And now they’re independent now they have and nevertheless I always have to be (---) able to ask them.” (Angela 124-135, (14))

Angela is terrified by the idea that her children may suffer a similar experience. But as her single measure for their protection, she mentions control and surveillance, treating them “like baby chicks”. She presents the fact that she has not explained anything to her children and that her victimization has passed unnoticed as a great achievement. She is not able to explain it in more detail, but she says that “they didn’t notice anything”. Yet paradoxically, if there was nothing unusual happening, she wouldn’t even need to mention it. Therefore, she confirms that there was something in her behavior, which she, in her own words, has been able to hide from her children. Yet now she faces the problem of how to relate and explain it to them. In this sense, Angela is in a double bind:

First, she has obliged her children to deal with her paradoxical behavior\(^\text{255}\). They were not able to assume it, because they did not know

\(^{255}\) In the aftermath of an experience of overwhelming danger, the two contradictory responses of intrusion and construction establish an oscillating rhythm. This dialectic of opposing psychological states is perhaps the most characteristic feature of the post-traumatic syndromes. Since neither the intrusive nor the numbing symptoms allow for integration of the traumatic event, the alternation between these two extreme states might be understood as an attempt to find a satisfactory balance between the two. But balance is precisely what the traumatized person lacks. She finds herself caught between the extremes of amnesia or of reliving the trauma, between floods of intense, overwhelming feeling and arid states of no feeling at all, [...] The instability produced by these
what had really happened to their mother. In contrast, although the victims try to avoid the topic with their children, thus continuing the avoidance strategy employed by most of their families of origin, their everyday conduct often reveals them.

“That’s difficult. You want to please everybody, do it right and yourself. (1) Mum what’s the matter with you? Since we have lived here you have been rather weird? Then I say hello my child. What shall I say? I say well I don’t feel all right here and (6)” (Angela 383-387, (18))

Therefore, their dearth of communication generates a general lack of understanding. Consequently, it seems that the children perceive their mothers as incoherent and not always functional. This is likely to produce a kind of insecurity for the children, leaving them feeling extremely abandoned and lonely. They might be aware that their mothers are different, but they often do not know why. Paradoxically, it is the victims who maintain the strategy of avoidance, stigmatizing and excluding themselves from a better relationship with their children, thus continuing and promoting the taboo. All of Angela’s children (all in their teens and early twenties) have moved out and live with their respective fathers or on their own. This seems to show that they probably were and still are irritated by her behavior, trying to find external models. Angela found this threatening, and so she acted in ways which reduced their space of action and controlling their social contacts.256

Second, Angela does not know how to explain her story to her children. Paradoxically, by trying to disrupt the abusive structures of her family of origin, she reproduces one of its major features: avoidance. As we have already seen, one main issue is her attempt to protect her children by not telling them about the abuse.

periodic alternations further exacerbates the traumatized person’s sense of unpredictability and helplessness. The dialectic of trauma is therefore potentially self-perpetuating” (Herman 2000, 47).

256 As I do not have any input from the children, because of the focus of the present sample and study, it is not possible to further analyze the victims’ relationships with their children, including their children’s point of view. Hence it would be interesting to focus further studies on this crucial and interesting relationship.
“I would like to let him enjoy his youth. Because I have to care for myself first. I can’t let him participate in my suffering. That’s not good. (...) He doesn’t understand it at the moment.” (Angela 433-435, (16))

In previous testimony, Angela states that her children always tell her everything and that they keep no secrets from each other. But since she hides her most precious secret from her children, there can be no sincerity and reciprocity between them.

Apart from this tendency to overprotect, victims often try to be super mums, a behavioral pattern that is closely linked to hyperactivity.

“Well I’d say, thinking back eh it’s as if I wasn’t only doing a marathon as if I was really running through life for the last 15 to 16 years, without finding any rest, and what I’ve done, well, my my own demand is very high; well everything has to be simply perfect. I wanted to be the perfect mother and housewife and .h and at the office, I also wanted to do everything in an excellent way.” (Cathrin 93-99, (15))

They desperately try to be perfect, protecting their children from everything and trying to prevent any harm from coming to them. Thus, they tend to see their children as potential targets for abuse, which means distorting the children’s realities in the first place and portraying them as weaker than they are, keeping them in a state of alarm which might often be unnecessary and transmitting their own generalized anxiety and fear to them and others.

Furthermore, they often tend to treat them not as children but as partners and friends, overburdening them with a responsibility that is inappropriate for their age, thus projecting on their children what they have not accomplished themselves. This in turn may stigmatize their children in their own social environment, leading to their being perceived as different from other children.

“They were not only my daughters, they were also my friends; it was such a relationship. We could tell each other anything, at all ages. Yes my son he still tells me everything. Everything. Well really.” (Angela 454-457, (16))
All these strategies seem to share a common thread, insofar as victims try to interrupt previously existing patterns of victimization, negligence, ignorance, lack of trust and loneliness. They want to offer a better life to their children and they want to do a better job than their own mothers did. Therefore, they (over-)protect their children or try to be as close as possible to them, either as mothers or friends.

Another paradox regarding the victims’ children is the fact that, within the general context of overprotection, wanting to spend more time with the children and being their friends, the victims refer to educational principles such as being well-bred, polite and tidy and having respect. These formal rules appear in many interviews yet really do not seem to fit the respective contexts. A clash between outside principles and inside rules exists.

“Yes, well I would have loved always being present for him. And er (2) yes, that he always had good, healthy food, that was important for me. Also that he was neatly and tidily dressed, well eh as he wanted it, that was then important for him. And that (---) he had a calm and organized life. That’s a thing I didn’t achieve always,” (Betty 144-148, (17))

Hence, they do not seem to perceive the specific needs of their children, but -as shown by Betty’s testimony- project their own fears and obsessions on their children in an egocentric and almost disrespectful way.

Consequently, although the victims desperately try to overcome the structures of their own childhood and family, they often fall back into the same traps. By avoiding the topic of the sexual abuse, avoidance-patterns are maintained and the difference between the claim of being friends and having trust and being overprotective reveals its contradictions. Hence, the victims are likely to project and transfer the roles they had to play in their own family of origin towards their children, either directly or indirectly, by applying opposite patterns:

- As we have seen, victims’ lack of protection in their own family may be either transferred as cynical and careless behavior towards their children or their total overprotection (Angela, compare citations on p. 243-244).
- As the victims often were neglected or at least not sufficiently cared for in their families, their children are likely to assume the role of their caregivers,
thus interrupting the victims’ reclusive behavior (Thelma, compare citations on pp. 197-199).

- By maintaining the taboo, victims prevent their children from acquiring a shared understanding of their past that could breach the gap between them (Angela, compare citation on p. 243). Instead, they project onto and assign them inappropriate roles, ones that do not correspond to their status as children. Their children become their friends and partners (Angela 454-455); caregivers and counselors (Thelma 63-64); those who set the pace of their everyday lives (Betty 91-93); treasure (Kate 305); source of power (Cathrin 192-194) and defiant enemy (Cathrin, medical documentation). In Cathrin’s case, her children represent a source of both power and danger. She loves and enjoys being with her youngest son, but she is afraid of her oldest son, with whom she is in a permanent power struggle and who gets violent towards her. He is a drug-dealer and threatens his mother with tarantulas and grasshoppers, although he knows about her spider-phobia (Cathrin, medical documentation). Thus, one of the most extreme consequences of the maintenance of structures of violent and power within the family seems to be the fact that some of the older children exploit their mothers and provoke them, using the mothers’ vulnerability to their gain, entering into a mutual conflict of power and dependency, similar to an abusive relationship between adult partners.

Providing structure vs. overwhelming demands

Another issue concerns the fact that the children seem to provide a kind of structure and meaning to the victims’ lives, comparable to the effect of work life. They need a well-organized time-schedule and the victims’ gain a precisely-defined role through socially valued motherhood. When the children grow up and leave home, there is potential for crises, insofar as this structure and identity cease to function.

257 Since the present theoretical sample only includes the victims’ -and therefore mothers’- voices, it is not possible to access the children’s perspective. Consequently, the list of items presented must be biased towards the victims’ point of view and, therefore, incomplete. Another limitation affected here is the inability to explore more fully what consequences this has on the children.
“And my son moved out 2 years ago. This was tremendously difficult for me, because he (- -) was a big well eh he was a major structural factor in my life. Even if in the end he was already half grown up,” (Betty 91-94, (19))

In this regard, their children’s emancipation may have the same consequences as did the previously-described death of a partner. In apparent contradiction to this situation, the victims often do not seem able to care for their children.

“.hh now my daughter she has breakfast in the morning on her own because I I need my time to myself then. Well I wait until everybody has left, and then I have my coffee and bread hehe. (-) Well I simply need the tranquility then for me.” (Kate 84-87, (20))

Although Kate adores her daughter, who is 7 years old, she leaves her on her own in the morning. Though, this behavior might seem normal for society in general, when referring to victims, it represents their transition to a conduct in which they are completely absorbed by their own things and not able to attend to their children’s needs. This may have an alienating effect on children and mothers.

“Yes, so I’ve experienced that it’s really bad with people who have small children at home, because small children need their mother. And my children were, thank God, not of that age any more. And that’s really bad then. Well eh I know that from time to time I noticed it a little bit and I thought that I have now become an absolute egoist. I think only about myself. And then I thought I have to do something for him and for the family and so; but that was not so natural somehow. That wasn’t possible then.” (Blythe 793-800, (21))

Blythe refers to this problem specifically, but only as outsider and observer. To be unable to care for one’s children seems to weigh so heavily that nobody else refers to this matter, perhaps due to the shame and guilt it produces. Yet when the mothers who are victims begin to work on their memories and have no everyday life -being either in retreat or time-out, or sometimes even in revelation-, they lapse into absence, physically present notwithstanding.258

258 Due to the double shamefulness of the situation, being a victim and being a dysfunctional mother, this topic can only be mentioned in the present study. Further studies might need another and even
Another aspect of avoidance is that of not having partners or not having children at all.

“<<strong expiration > hhhh> yes I can’t think of any relationship. (2) er (3) I can’t imagine it at all. (--) Totally difficult.” (Ayla 140-142, (22))

But by stepping out of the socially expected role, women put themselves in a kind of isolated position. Their former friends get involved in relationships and have children, and soon they no longer have any common interests and topics of conversation. Thus, they are indirectly excluded from their former social circle and forced to look for new friends or are thrown back to their family of origin. Consequently, not having partners or children does not free them from previous patterns, but, paradoxically, rather reinforces their former bondage and intensifies their loneliness and social exclusion.

To sum up, avoidance seems to be the central category in the family setting, governing most of what occurs therein. It might be both promoted by family members or the victim herself, yet in both cases it produces insurmountable paradoxes, conflicts, misunderstandings, disrespect and loneliness.

6.1.3. Body: between silence and screaming

The body represents the third site where the victims’ Conduct of Everyday Life unfolds and where issues regarding their inclusion into or exclusion from society are dealt with. Although the following analysis seems to describe two opposite characteristics, the silent and the screaming body, they should be understood as a continuum of the embodiment of sexual violence. Sometimes, one prevails over the other; other times they alternate, and sometimes they are even simultaneous. They represent two different forms of embodied sexual violence, the first one offering conciliation with other dimensions of social life or family life, through hyper-
adaptation to social norms and social requirements; the second one seeking disclosure, attention from and conflict with others.

A sexual assault represents a highly physical experience for the victims, overwhelming and etched into memory and mind. This emerges through a specific discursive line in the interviews, from to the victims’ descriptions of the sexual assault they have experienced, characterized by explicit mention of body parts:

“Well he has me well it was a friend well a good friend of my cousin’s, I was also in love with this guy, and I was at his place, and he harassed me sexually well he forced me to satisfy him with the mouth; and this was something well what I hadn’t even thought of when I was 17. Well this was for me he took me by surprise then he pushed my head down and .hhh he did not ask me if I wanted this or if I didn’t want that and I wanted to think of it I didn’t want to do it really, and .hh he didn’t give me any opportunity even to think of it and this was no he forced me really he said that I had had my orgasm and now he would have his one because he had satisfied me with his mouth before and eh he wanted to have his orgasm absolutely; the strange thing was that well I would have been willing to sleep with him I wanted that; but to satisfy him with the mouth that was a thing I wasn’t disposed to; that was something strange for me at that moment eh it still put me off and then his cum squirt into my mouth and .hh eh that was something yes I couldn’t deal with it at all” (Jane 1076-1093, (1))

In Jane’s description of her sexual assault, similar to a testimony, the body seems to become a tool, the aggressor takes possession of, using it, “pushing” it and taking it away. Hence, it becomes an injured, hurt, scared and marked body.

**The silent body**

As the data reveals, the silent body has the tendency to disappear. In this context, there are apparently different conscious and unconscious, individual and social strategies to silence the embodiment of sexual assault. But this physical presence of the body becomes encapsulated by not looking closely (Angela 572-573), not inquiring in an adequate way (Carla 340-350) and not reacting responsibly (Ann 923-933). These social interactions form the context in which the phenomenon of the absent presence of the sexually abused body is conditioned. On the one hand, the
body-centered descriptions of the sexual assault\textsuperscript{260} as seen in the previous testimony seem to allude to the legal practices of collecting visible evidence, catering to the social requirement of reliable evidence. In this sense, the victims’ accounts do not center on the pain experienced, due perhaps to the unsharability and unspeakableness linked to pain\textsuperscript{261}, but on the invisible and visible scars. On the other hand, the body is often transformed into a silenced body –its message ignored and its garbled language not understood by the social surroundings.

A second strategy is to ignore and not to listen to one’s own -sometimes even ill and painful- body by refusing any care either as a preventive or curative measure. Apart from not caring for oneself -although aware of the harmful consequences of one’s behavior- the body frequently appears as a productive machine which must function perfectly. This might involve the work life, e.g. carrying several full-time jobs at the same time\textsuperscript{262}, or through a perfectionist behavior, affecting even leisure activities or playing the role of a super-mum and super-woman\textsuperscript{263}. This often results in a never-resting body which contrasts with the ill body that I will discuss below. Both concepts can exist at the same time, alternating between their two extremes. After going through ups and downs, some victims perceive themselves as different and “weird” (Ann 127), as alienated, always fulfilling their children’s wishes and/or those of partners, parents and society in general, performing their role without incorporating it. Similarly, the body plays an important role in hyperactivity, by never coming to a stop, and in retreat, where its needs are completely neglected.

“If this and that and .h I negated myself completely; totally ignored my own body igno=ignored, my illnesses ignored, everything that was painful; well that passes by;” (Nicole 117-119, (2))

\textsuperscript{260} The implicit incoherence of this memory-based and reconstructed narration of a sexual abuse fluctuates between wanting and not wanting, and not being able to communicate one’s feelings and wishes. It already indicates one of the possible consequences of the silent body. For a reader, it might be difficult to understand, because Jane mixes her own thoughts and interpretation with a description of the actions.

\textsuperscript{261} Compare p. 142 on Scarry’s concept of the “unshareability” of pain”.

\textsuperscript{262} Compare Ayla’s citation (nº 5) on p. 187.

\textsuperscript{263} Compare Cathrin’s citation (nº 1) on p. 187.
The fact that the victims often ignore their bodies seems to lead to an apparent absence of the body, in spite of terrible pain.

Another strategy to circumvent the body is drug use, which may help to overcome the physical and psychic limits of disgust. One informant had never in her whole life been able to engage in sexual intercourse without resorting to alcohol consumptions, as a means of dealing with her revulsion. Once she stopped drinking, she stopped having sex. Thus, her body has become a completely de-sexed object.264

“Angela: My body? I have little contact with it. 
Karolin: Hm.
Angela: I talk to my feet. Yes, I’m moisturizing them. Sometimes I pay attention to them. I’m even allowed to go up to the knee. Everything else, mh. I know that it is there,(-) but it doesn’t exist for me.” (Angela 331-335, (3))

The victims’ relationship to their bodies is often disturbed, and in the most extreme cases, communication with their own body may fail completely.

Another aspect of this apparently absent and ignored body-syndrome is the clothing preferences of some of the interviewed victims. They do not pay attention to their attire, considering how they dress or adorn themselves as an unimportant issue. Another strategy involves cloaking the body in order to keep it secret or to make it disappear. In this context, the choice of colors seems to be another tactic.

“Yes clothing. hhh hhh what shall I say? I wear lot of sporty things. Well .hh sporty, not too not so pushy; might be dangerous. Well I can also make myself up no? So really nicely turned out. No::; I don’t feel well then; make-up mnje. I might do it sometimes, but I would only do this if I knew, that we are going out in a group of 5 or 6. <<Whispers and murmurs>> I’ve lots of light-colored things. I’ve also a lot of dark-colored things, I also like wearing dark pullovers. Then I know at least, when I’m wearing dark-colored things, dark jeans and so on, then I go outside ducking down. Then I’m ignored. With light-colored things I’m always seen; but dark-colored things that is eh. That’s my choice.” (Angela 235-245, (4))

264 Compare Kate’s citation (nº 7) on pp. 253-254.
In the previous testimony, the body and its boundaries disappear through wearing dark clothes, whereas light and white clothes apparently underline and emphasize the shape of the body, creating potential danger.

Another scheme concerns bodily presence in public and semi-public spaces. Victims seem to avoid further contact with the outside world by making their bodies nearly inexistent, a form of aesthetic retreat.

"or yes, (---) I live quite withdrawn right now; well I have quite withdrawn eh since (-) eh since 2000 alone and I also don't go to the city center as often; the crowds disquiet me. I prefer being between my 4 walls, and yes, (3)" (Nicole 176-179, (5))

This may be one of the factors why victims of sexual violence do not get any further public attention. Victims also perceive it as a lack of concern on the part of their social environment. They feel extremely lonely, deserted and betrayed even in the presence of many other people, which represents a paradox.

"Mh (--) well this thing about my infancy, I would actually like to mention because as I have said we were a big family in a 3-room-appartment and in the end 10 people, and that I nevertheless felt totally lonely in this family. Well I had a time when I thought that I was adopted because I simply e .h thought that I had everything different of my brothers and sisters and I felt different, and that something was not right, and e and today with hind-sight I can say, I was the mo’most lonely child in the world in this family; because also e my brothers and sisters eh ignored me as a person but that happened also among them; nobody was really interested in each other," (Kate 834-844, (7))

Thus, the body seems to be ignored in all its senses and all its dimensions, both by its bearer and by the surrounding. As a consequence, bodily absence is total and complete. Even when the body becomes noticeable due to physical changes, such as in adolescence, tactics of negation may continue.

"Well it was difficult because .h the time came when well needless to say ehm my breasts were growing when I got .h pubic hair and that was disgu:sting for me and I didn’t want I didn’t want to become a woman. No way. And it was so disgusting and skuzzy when ehm when I got that hair under the arms and such things .h and well the confrontation with my
own changing body was horrendous; and I wasn’t able to look at my naked body for example” (Kate 876-882, (7))

In this example, there is even a double negation, the first concerning the (naked) body and the second referring to becoming a woman and one’s gender.

As a consequence, as the interview-data indicate, on the explicit level, the body is absent from the victims’ narratives. Although their discourses revolve around everyday practices, well-being and medical problems, most of the time the body is an issue avoided in the interviews. The injured or hurt body is shunned in what seems to be a conciliatory gesture. The silent body is meant to overcome the communication gap or clash between victims and people who have not been affected by sexual violence. An example of such a collision would be Ayla’s friends’ rational perspective on her wellbeing and recovery, which clashes with the embodiment of sexual violence shown by her important weight gain. Silent bodies try to evade these conflicts and tend to do anything in order to generate consensus, adapting to social requirements.

Sometimes, these silencing strategies work all too well and the women completely lose contact with their bodies. This silence may become unbearable for the victims, such as in Julia’s case. In order to get in touch with her body and to make it react and speak, she hurts herself, cutting herself or putting stones into her running-shoes.

“Yes and I think er well. I don’t sense my legs. Well I have no sensation in them at all. And I think with the running, that that’s good then. Also with running away. I always think, that I can’t run away. And the running might then help a little bit. (-) I hope so. Yes and I also put stones in my shoes sometimes. It may hurt then sometime and maybe I sense then sometime my legs again. Yes. That also doesn’t leave any scars. (---)” (Julia 461-467, (8))

She is desperate to feel her body and to get in touch with it, doing anything to provoke it, including brutality and pain. As such, the consequence of the silent body seems to be loneliness and exhaustion, sometimes even desperation.
The following quotation reveals another strategy used to get in touch with the body and with others, by seeking warmth and recognition.

“I have that yes we were a team then which was trained and they were really really amazing people. Something like I had never known before we .hh hhh have each other well the people have touched me and I’ve touched the people and that was something spiritual and there I got that really really really sweet friend and ehm she knows everything well most of this team know it eh doing the training we really grew together in an emotional way .h and eh what I’ve experienced in this context regarding embracing, hugging, tell me, and ehm real interest, which was there and and eh who hold me tight and where I could simply cry a thing like that I’ve never never experienced before.” (Kate 778-788, (9))

Kate has thus apparently overcome antagonistic positioning between conflict and consensus by increasing vital complexity. She assumes another social problem by becoming professionally trained in patient terminal care. By means of her altruistic involvement, she gives and receives interest and care. Hence, she puts herself outside the dichotomy of the screaming/silent body, promoting her commitment and integration.

**The screaming body**

The second dimension of the embodiment of sexual violence takes shape as the screaming body, its antagonist. In spite of the previously described silenced, silent and resisting body, which has the tendency to disappear, it cries for attention by means of an ill, rebellious and seismographic body. By this, the screaming body presents both dominant and submissive attitudes and performances such as physical paralysis (Angela), non-diagnosed illnesses (Kate) and anxiety attacks (Jane and Thelma) on a somatic level, and eating disorders (Ayla), drug consumption (Carla), prostitution (Elaine) or high risk conducts (Susan) on a behavioral level. In this context, the body obviously takes the role of the surface or border, wherein the “byproducts” (Ayla, 78) of sexual violence appear and act as already seen concerning Ayla’s considerable gain in weight. She reports that her body is always hungry, and reacts with feeling of nausea and Shakiness after going only one hour without food. Accordingly, her

265 Compare Ayla’s citation (nº 4) on pp. 209-210.
body does not know any limit concerning food intake. In other cases, it is the clothing and hairstyle, which exemplify the disclosing body. After wearing “normal clothes” for most of her life, Nicole, now in her fifties, has decided to relive her lost youth by shaving off part of her hair, coloring the rest and dressing like a “girly punk” (Nicole 331). For her, this forms part of her personal recovery, although it produces rejection from part of her social environment and can provoke social exclusion, a consequence she assumes deliberately.

The body also turns into an ill body which shows and experiences symptoms like paralysis, spasms or unspecific pain. These symptoms are an obvious sign and strategy of an unconscious or forgotten memory referring to the sexual assault suffered.266

“There are those who can live with that forever and 3 days. I can’t. I couldn’t walk any more; in X-city I was sitting in a wheelchair; then the doctors told me that if you don’t do anything, you will sit in a wheel-chair forever. In the beginning nobody knew why I couldn’t walk any more.” (Angela 159-163, (10))

In this respect, the body seems to fulfill the function of a regulating mechanism which reveals hidden aspects of the camouflaged and embodied sexual violence. It may even take up radical measures and strategies to be finally heard, such as the previously mentioned paralysis.

Other body reactions are represented by an extreme sensitivity to smells (Angela and Nicole) or other triggers, claiming an obsessive hygiene regime by showering several times a day (Angela and Julia) or not tolerating liquids on their skin (Nicole). One of the interviewees even calls herself a “seismograph” due to her permeable cover and protection.

“Well I believe that I am like a seismograph, well I’m able to detect eh things, which other people don’t observe at all, but it’s also a burden from time to time. Well (--) because you are so thin-skinned and you absorb all sort of things and naturally also things which aren’t so beneficial. Those which hurt for example.” (Ann 402-407, (11))

266 Compare pp. 265-268 on knowledge and the influence of the health system and the label «ill». Turner defines disease as “configurations of pathological abnormalities” and illness as “clinical manifestations which can be regarded as either symptoms (subjective sensations) or signs (objective findings discovered by an expert observer)” (Turner 1996, 38).
The seismographic body consists of open limits and boundaries, revealing everything in its surroundings, partly lacking control.

The summary of these strategies illustrate the dimension of the screaming body, which attempts to attract attention and to divulge the (often) hidden memory of the sexual assault. As revealed through their testimonies, the victims often perceive their own bodies as incoherent and unsteady. It seems that they lose confidence and basic trust. As seen in the previous chapters, the screaming body is the major scenario of revelation, often requiring the intervention of outsiders such as physicians or therapists. Therefore, in order to overcome this pattern, new knowledge and new connections between attributes and issues which seemed to be dispersed, fragmented and not belonging to each other are created. This apparently helps to generate new meaning and to overcome the victims’ deep sensation of alienation. In this sense, the screaming body discloses incoherencies which demonstrate the persistence of the embodied sexual violence, through confrontation and conflict with the victims’ social environment. Thus, it has been shown that the impact of sexual violence usually destroys a person’s physical and psychological limits. On the explicit level -naming body parts or referring directly to the body- the body is strikingly absent from victims’ narratives on sexual violence’s impact on their everyday life, which tends to focus mainly on emotional and psychological aspects. But on a larger and more implicit level, the body is omnipresent, either as a silent or screaming.

6.2. The semantics of the victims' everyday lives

As seen in the previous chapters, the meaning attributed to the victims’ behavioral patterns represents one of the central dimensions to understand their everyday lives. In order to put this meaning into a wider sociological context, I will, first, analyze the specific role of knowledge and, second, the impact of the paradoxical absent presence of sexual violence.
6.2.1. The meaning of knowledge about sexual violence

Memory, in its multiple expressions -such as forgetting or remembering- has been present throughout the entire analysis of the interview data and has played a major role in the context of the development and occurrence of the different patterns of the victims’ Conduct of Everyday Life.

"Some things I only know partly and I’d like to know this forgotten part and I think, that if I’m confronted with it again, but with such a security in the back and simply giving vent to my pent-up fear and not swallowing it, but these fears, which one had, which yes ranged up to (--) where one says, that’s a mortal fear, but which then ends, then one simply wants to die and hopes that it’s finally over and then there’s no adrenaline there any more, no? I don’t know, I’ve had no adrenaline fit for years, even with and now now I’m only jumpy. And then that there’s someone with me, whom I can show that in this moment and that then maybe someone is with me, who has a consoling word or somehow something like that. (---) That was really rather rather a mess." (Elaine 196-208, (1))

First, there are a lot of women who literally do not remember what has happened to them or -as in the previous citation- they remember only part of it. But Elaine expresses her urge to remember the different assaults she has experienced in order to reexperience and overcome the fear which still rules her. In her view, her unremembered memory of the violence suffered binds her to the past, by means of her “jumpiness” and fears. She hopes that through remembering she may overcome this situation and step out of her victimhood. Second, other women have no possibility of remembering their assaults «rationally», because they were too young to have a verbal memory of the sexual abuse. Nevertheless, they show symptoms of non-verbal remembrance which are difficult for them to understand, such as previously seen in Ann’s case, who has no other possibility than putting the “mosaic-pieces” (Ann 833) of her life together. Third, some of the women, although they do remember, desperately try to forget what has happened, running away or hiding from the memory, expressed by specific everyday conducts, such as hyperactivity or retreat.

Therefore, the common feature of a traumatic sexual assault is its overwhelming nature which is very hard for the women to assume. The
result is a kind of chaos, mess and disarrangement -a fragmentation-, not only regarding the scenarios of everyday life, such as the family, work life and the body- but also regarding knowledge and meaning. As seen in the previous chapters, the victims’ lives are primarily characterized by disruptions and inconsistencies, such as sudden switches in their behavioral patterns, breaks and cracks in their work life or alienation from their bodies. Often, this fragmentation is a result of a lack of knowledge and combinations and links between different pieces of knowledge.

There seem to be two critical issues regarding knowledge: first, not having it and second, its unequal distribution. First, on the victims’ side, lack of knowledge is due to their tendency to forget sexual assault. As a result of its overwhelming nature, memory of sexual assault is fragmented and not transferred to the speech center in one’s brain -through the interference of hormonal and biochemical mechanisms- (van der Kolk 1994 and van der Kolk et al. 2000, 296), thus hindering its interpretation and assimilation. Simplifying, it could be said that the fragmented memories mainly remain in the amygdala and they are not transferred to the left side of the cerebrum. The link is cut and, therefore, the various memories can not be brought together. In this sense, knowledge is dissociated by fragmenting the links in the brain. Symptoms of this fragmentation are, for example, that victims feel stained and sexualized without knowing why; they feel guilty about

---

267 Knowledge can be defined as expertise or as skills acquired by a person through experience or education and the theoretical or practical understanding of a subject. Generally speaking, it is what is known in a particular field or in total, including facts and information.

268 Meaning refers not only to the information about something, but its significance and value, linking it to understanding and communication. In this context, nearly all the women interviewed seek more knowledge and meaning regarding their sexual victimization, while some clearly do not want to know anything about it.

269 It must be assumed that the data is biased towards women who seek knowledge and want to know more about sexual violence and its meaning, because not wanting to know anything about or not wanting to talk about sexual violence would exclude them from study participation.

270 “Traumatic memories come back as emotional and sensory states with little verbal representation. This failure to process information on a symbolic level, which is essential for proper categorization and integration with other experiences, is at the very core of the pathology of PTSD.” (van der Kolk et al. 2000, 296)

271 The new research field of epigenetics has recently found evidences of the epigenetic effects of stress caused by abuse in childhood and youth to the coping with stress situations in later life, linked with the epigenetic regulation of the glucocorticoid receptor in human brain (Szyf et al. 2009). Please compare also footnote nº 229 (p. 203) on dissociation.
everything, without being able to overcome the internal in-communication between their feelings and their mind.

“What can I tell you?(-) Well, guilt, that’s also such a big topic for me. Well this morning for example. Er I dropped a glass in the kitchen. Simply slipped out of my hand. And then I felt immediately guilty. Well that’s then I can’t even hold a glass. What am I good for? I’m guilty for that. I’m no good for anything else than that. I can simply straddle my legs. I can’t do anything else. Everybody sees it immediately. Why don’t I do simply that, what I’m good for? (2) Do you understand that? (?) Is it understandable?” (Julia 375-383, (2))

Although rationally, Julia knows that she has no guilt and that dropping a glass is a minor incident, she suffers strong emotional reactions which link anything that happens to her with the abuse she suffered as a young child. Guilt always involves a focus on the wrongness or evilness of one’s actions. Therefore, involvement in a taboo activity often results in feelings of guilt, low self-esteem and stigma. These negative connotations are often communicated to the child through experience and they then become incorporated into the child’s self-image (Taylor 2006, 17 and Courtoise 1988, 121 and 133). Yet she does not only feel guilty, she also feels sexualized. Her low self-esteem tells her that she is only “good” for having sex. Nevertheless, she feels guilty and she does not tell anybody, probably because she is ashamed of her behavior and reaction. In contrast to guilt, shame involves a global labeling that one is a bad and useless person (Taylor 2006, 17). Even during the interview, she asks for the interviewer’s support and confirmation, asking her for comprehension of her narrative. Therefore, aside from the victims’ fragmented knowledge, another consequence of guilt and shame is that it makes knowledge invisible, transforming the meanings of actions. Since victims do not explain themselves and do not communicate the meaning of their actions and their feelings but rather hide them, they generate a gap in common knowledge and communication, thereby producing misunderstandings. And paradoxically, at the same time they know that they are creating a gap and following a vicious circle, they feel guilty for the very gap they produce without ever being able to overcome it.
As seen before, the body is also annihilated in order to forget, reflected by an in-communication between the victim and her body. Accordingly, the only part of the body which seems to be really present in the interviews is precisely the head or mind. It appears in different situations, for example linked to sleep disorders, illnesses such as migraine, bad backs or problems with everyday routines.

“.hh hh (--) There’s so much in my head; (-) that I can’t sort it out. Mh. How shall I explain this? I think, everybody should make the best of it. Everybody should be happy for still being alive. And this every day.” (Angela, 467-470, (3))

Hence, there is an apparent contrast between the nearly inexistent and neglected body and the overcrowded mind which seems to control and govern the body, obviously representing a condition for the absent presence of the abused body.

“I still remember I went with the cleaning rag in my hand through the corridor and I had a song on my lips and out of a sudden I had had to stop this day as a movie appeared in my head. It was like being at the movies. And I’ve never experienced a similar thing before or after. It was; and really I even had eh it was a really hot summer 30 degrees outside .h and as he put me on his lap and I my face well he pressed my face like this ehm the sun was shining boiling hotly on my cheek it nearly burnt this half of my face. (-)” (Kate 434-443, (4))

In this citation, the memory reappears as if from nowhere, suddenly and without warning. Although the sexual assault is literally burned into the skin and the body, the body hides and disguises its own memory. Hence, it is the head -or better the mind- where the movie materializes. Elaine even refers to it as her “head-movies” (Elaine 16).

In contrast, the integration of knowledge seems to help to overcome fragmentation referred to as “mosaic-pieces” (Ann 833) or “all these different parts” (Jane 57, (5)). Only by means of the knowledge of her sexual abuse as a very young child, does Ann start to comprehend her body, its reactions, its illnesses and its signs.

---

272 Compare Angela’s citation (n° 3) on p. 252.
“when she told me, that ehm while I was staying with a foster family, ehm that I had let’s say massive bruises and injuries well in the abdominal area ehm however (…) eh and then all that made sense to me” (Ann 924-928, (6))

Moreover, this knowledge is then transformed into a deeper comprehension of herself, overcoming the disruption between body, mind and self. In a certain way, knowledge helps to resolve the puzzle of her life and it allows her to communicate with it.

At the social level, lack of knowledge seems to be either the result of a lack of interest or the impossibility of a common knowledge. The first point is easily understandable, because sexual violence is just not a pleasant topic to deal with and somebody who has not been affected by it may simply not want to be bothered, especially on a personal level. This reaction might be slightly comparable to the victims’ reaction of forgetting or avoiding the matter. In both cases, the aim is one’s own protection. Regarding the second point, the impossibility of common knowledge, the horizon of experience often appears to be so different between the victims and non-victims that mutual understanding seems nearly impossible without great common effort. Hence, the fragmented basis of mutual understanding and common experience makes the construction of a joint knowledge likely to be difficult.

In this context, misunderstanding and rejection form part of the reactions which the victims receive from their social environment. For example, Ayla characterizes her social contacts as followed:

“<<loud> .h hhhh> <<low> nobody> a few and sporadically because most of them ehm have got family, and it became also ehm difficult because they can’t always understand that; that it doesn’t disappear in spite of long lasting therapy. .h And then I feel misunderstood (-) <<breathing out> yes> and .hh hhh it’s exhausting in some ways and .hh ehm yes and it’s also the external thing, I’ve been here for the first time end of 95 and from then on until now I put on more than 50 kilos of weight. Well I know that this is simply a byproduct or side effect .h and that outsiders who are not familiar with the subject or who can’t imagine how it feels .h it seems to them that something isn’t right or something like that that I’ve obviously deteriorated.” (Ayla 70-82, (7))
As illustrated by this example and by means of high psychological pressure and frustration, the social environment (such as friends, family members, neighbors or colleagues) often manifests incomprehension and sometimes intolerance regarding the embodied vestiges of sexual violence. In addition to weight gain -according to Ayla a “byproduct” of sexual violence-, persistent lack of understanding reciprocally increases not only the victim’s isolation and exclusion but also disruption between her body and mind. As explained in chapter 5.3.4., this intolerance may even lead to the victims’ exclusion from society, such as in Elaine’s and Nicole’s case regarding their disclosing dressing code and childish behavior.

In addition, the data have shown that the memory of the injured, hurt and traumatized body often cannot be assimilated, neither by victims and their surroundings, due to the inappropriate reactions and interactions on the part of those involved, such as close family members, policemen, teachers, therapists or physicians.

“No I’ve talked about it I’ve well said like I once talked to a psychotherapist about it I said that I let myself be raped, and then she said that that wasn’t a real rape. Charming from the psychotherapist. Her very sensitive <<syllabic laughing> very sensitive> hh that was then really great, I have eh stopped the therapy then and then I haven’t talked about it for a long time. Not at all. Ehm yes.” (Jane 1121-1127, (8))

Memory, pain and embodied trauma often do not surface -consciously or unconsciously-, as a result of social negation and refusal, perceived by the victims as social isolation and stigma.

Concerning the victims’ everyday life, this fragmentation of knowledge has also been detected and illustrated, by the very fact that victims do not concede its importance. Even in the case of victims who are aware of the consequences of their sexual abuse and who have already integrated this knowledge, they are often not able to link the specificities of their everyday life with the sexual violence they have undergone because of a general lack of knowledge in this field. Hence, this dissertation is one way of generating knowledge regarding this void.

One of the major difficulties regarding knowledge is linked to its paradox regarding subjectivity and objectivity. The very definition of
psychologically traumatizing events incorporates this ambiguity, because, and as distinct from physically traumatizing ones, they must be cognitively appraised in order for their impact to be felt. Therefore, “a force delivered to the skull can damage the brain irrespective of the one’s appraisal of the experience. But a psychic trauma carries its force through the meaning the event has for the person. For example, a person threatened with a gun can only be psychically traumatized if he or she knows what a gun is.” (Rosen 2004, 5) Therefore, trauma depends primarily on the interpretation of the stressor. And, according to Rosen, this is influenced by historical and cultural factors, such as taboos and morals. In this manner, the victims' physical surroundings and the cultural symbolic attribution of meanings become relevant to the way assault is perceived and evaluated. Consequently, the stressfulness of an event depends on its subjective appraisal, but nevertheless, cognitive acceptance of psychological stressors does not constrain the objective features of the event (Rosen 2004, 5). Hence, the existing lack of knowledge produces a lack of intercommunication between different scenarios and actors, impeding their closeness and interconnection. It reduces vital complexity and generates a vacuum that needs to be filled. This means that victims who create and communicate participate in the construction of knowledge. They give their memories a linguistic and integrated shape, not the fragmented and speechless one of the memories, described above.

Hence, the second aspect regarding knowledge is represented by its unequal distribution. In this regard, it has been shown that the main areas where knowledge concerning sexual violence has been produced and developed are law and medicine. In this context, law plays a central role and reflects the evolution of the social definitions. Generally speaking, it is intrinsically linked to the semantic choice between guilty/not guilty or lawful/unlawful. Furthermore, at least insofar as the presently active western interpretation of justice is concerned, punitive principles are followed and there is a concentration on the aggressor and the victim is

---

273 Compare chapter 3.2.1., pp. 59-71, on the historic evolution of sexual violence and annex nº 10.1.2., pp. 324-327, on the policies on violence against women and the German violence-protection-law of 2002.
barely considered. Therefore, for the victim, semantic choice is reduced to a simple dichotomy: one is considered a true or false victim. Psychiatry and medicine have only recently entered the scene of (sexual) violence, but they have immediately assumed a key role. This is seen, for example, in interview data. There were very few informants, who had contact with the justice system, whereas all of them had and have contact with the medical system. Its general functioning is based on the semantic choice between ill/healthy.

As seen in the previous chapters, the health system plays a central role in identifying victims, although it has to be acknowledged that it is only able to detect «ill» victims, who have the «correct and corresponding» symptoms.

“Elaine: I have (---) I have that has taken a lot of time that has only come out recently in the last years that I’m ONLY affected by trauma. They have, as long as I’ve been in psychiatric treatment since 2001, everybody has always assumed that I’m a borderliner.
Karolin: Hm…
Elaine: So and that’s, of course, quite a borderliner is well rather a diffuse picture, but there exist, of course, many opinions about what’s going on with such a person. And for me it was rather always, I walk on the edge and have to watch that I don’t tilt towards abnormality. (-) and then it has been tested during the last years one has then in B-land such a specialist for borderliner has tested me and then he has said, that I am simply traumatized. (--) I’d never thought of that, that I (-) I’ve simply said, “Well, I didn’t have a simple life, and somehow also shitty experiences, but that can’t be much.” (Elaine 157-173, (9))

The medical classification of the victims’ illnesses and disorders seems to be of major importance for the victims, determining their recognition in society, their level of social exclusion and stigma and their future possibilities as a social member. Elaine, for example, does everything to change her diagnosis and to be freed of the label «borderliner». According to Hall, a borderline personality disorder is a stigmatizing and marginalizing label that has drastic life and health care consequences, because therapists often consider the borderline patient persona non grata (Hall 2003, 297).
In contrast, in Kate’s case, her illness was not detected and is not recognized by many physicians.

“And I eh then 2 years ago I sensed that I’m ill now, that something isn’t right with me, that I eh have specific pain, .h eh in the muscles eh I was then first on an odyssey of a year from physician to physician, nobody knew really what to do with it, it was from multiple sclerosis to a lot of other diagnoses, all of them have unconfirmed. Until I landed at the only rheumatologist who is in Y-city and she told me it’s pri=fibromyalgia.” (Kate 15-23, (10))

Although, her family doctor still trivializes her symptoms and does not acknowledge his colleague’s assessment (Kate 147-149), Kate’s diagnosis and information about her symptoms help her to face her pains, to put them into the context of her life and to integrate them into her everyday life. In this manner, she overcomes the uni-disciplinary medical approach and joins it with other biographical, psychological and social knowledge. Thus, and as a result of the deficient character of the health system, the burden of creating connections and new knowledge lies on Kate’s shoulders alone. Hence, both the recognition of illness and the illness itself have a great influence on victims’ everyday lives, fostering their inclusion in or exclusion from society. As seen in the case of the hospital, one of its major functions is to reintegrate the women into their work life or if impossible, into retirement.

Consequently, the legal and health systems represent the major fields which determine the victims’ status.

1. Regarding the legal system: The victims are either lawful (true) or unlawful (false) victims, or they are not detected at all by the legal system, for example, by not reporting the incident to the police.

2. Regarding the health system: The victims are either unhealthy and therefore socially considered ill, or they are healthy. In the second

---

274 Rosen (2004) asks on the verso of his book, if PTSD is really an illness “that arises after horrific and life-threatening events” or if it should be considered a label which “medicalizes suffering, and brings with it more problems than it solves” (Rosen 2004, backcover). In this context, and according to Turner, disorders often represent cultural indications of a more generalized problem of control, such as seen in the chapter on the social and historical dimension of sexual violence, with, for example, hysteria. The disorders are often used by patriarchy to exert social control (Turner 1996, 178). In this context, it would be interesting to study the impact of the health system on the victim status, but this would divert the present research from its objectives.
case, this may be because the victims do not show any symptoms or because the health system does not detect or acknowledge their symptoms. As already seen in the case of the legal system, there may be also victims not detected by the health system, like the ones who simply do not go to a doctor.

3. Regarding the victims: Apart from these two social systems, there is a third and subjective dimension: that if the victims themselves who either perceive themselves as victims or not.275

Combining these different forms of acknowledging victim status, there are more than twenty possible combinations of the previously outlined victim-attributions. Ideal cases are those in which the decisions of the different levels and systems correspond. It becomes more difficult when the decisions are contradictory, due to different attributions of meaning around evidence and symptoms, for example. These possible inconsistencies between the health and legal systems and the victims’ self-perception is liable to generate conflicts and frustration, such as the label of the «faking» victim, who perceives herself as a victimized and traumatized person, but who might be said to be a liar, drama queen and hypochondriac. Another possible label is that of the «ideal» victim, who is recognized by all systems and by herself, although this recognition might also lead to her fixation on victim-status, from which she may, under continual social pressure, be unable to free herself:

“…they may also identify sources of continued social pressure that keep them confined in a victim role in the present. Just as they must overcome their own fears and inner conflicts, they must also overcome these external social pressures; otherwise, they will be continually subjected to symbolic repetitions of the trauma in everyday life.” (Herman 2001, 200)

One of the most common statuses is apparently that of the «hidden» victim, who is not only not recognized but not even seen by the health and legal system, and sometimes not even recognized as such by the victim herself.

---

275 In this context, Kiefl and Lamnek (1986) combined the subjective and objective damage, of victims, considering the subjective appreciation and penal law:

<table>
<thead>
<tr>
<th>Subjective damage</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective damage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>I conscient victim</td>
<td>II imagined victim</td>
</tr>
<tr>
<td>No</td>
<td>III unknowing victim</td>
<td>IV non-victim</td>
</tr>
</tbody>
</table>

(Kiefl and Lamnek 1986, 28)
As a result of the increasing importance of the health system regarding victim status, victims might often be considered to be «ill» or even represent their situation as an «illness». Comparable to the case of alcoholism or eating disorders, victimization might have effects regarding the victims’ health, but being a victim does not represent an illness in itself, although its symptoms are often identified as one. As medicine has developed a whole range of symptoms and diagnoses, it might be argued that the disclosure of sexual assault takes place mainly within the sphere of the body, because that is where it can be recognized and therefore becomes visible. Hence, there may also be other scenes of revelation which may be still misunderstood and, consequently, remain undetected.

The effect of this scheme regarding knowledge is the following: First, knowledge is the basis that enables the detecting, classifying and -if necessary- helping or curing victims. A lack of knowledge has the effect of failing in the detection of victims. In this context, the role of subjectivity and objectivity enters in, because the victim -who by subjective self-classification calls herself a victim- may not be recognized by the allegedly objective knowledge available in one or both systems. On the contrary, it may be that a person does not perceive herself as a victim on the subjective level, but that one or both of the systems detect specific symptoms or evidence and objectively transform her into a victim against her will. Evaluations of the two systems can only be considered to be objective from their own inside perspective and following their own rules and distinctions. From the outside, specific distinctions of lawful/unlawful and healthy/unhealthy can not be understood, because the grammar and rules of distinction are specific to each system. Therefore, they may seem arbitrary or even ambivalent from the outside, and therefore appear to be completely biased and subjective.

Second, since knowledge is generally produced by alleged experts -operating in the subjective objectivity of their respective discipline- and not by the victims themselves, it was and is only generated for the objectively recognized victims who were already detectable before. Consequently, all other victims are only recognized if they stick to previously existing victim stereotypes. This vicious circle for victims explains in part current
stereotypes linked to victimization, aside from their connection to other long standing stereotypes linked to femaleness. Therefore, it seems to be more requisite to follow the approach of an objective subjectivity, which assumes the subjectivity of each person, whether expert or victim, and include all subjective aspects and knowledge, combining them in an interdisciplinary or transdisciplinary approach, in order to reach greater objectivity. The lack of interdisciplinarity in this field, which is still characterized by the focus on few disciplines, seems to have produced a limitation of knowledge which harms both the victims’ integration into society and society’s understanding of the phenomenon. Hence, any social policy developed and applied within the field is likely to cover isolated and unconnected issues, remaining unable to offer a more holistic approach given still existing blank spots on the map of victimization.

In addition to the victims’ personal damage, a variety of social institutions simply perpetuates a non-sustainable situation and carries victimizing situations into modernity. Furthermore, ignoring this knowledge that is important for society implies that no understanding of the different kinds of violence is being implemented and most efforts towards the prevention of (sexual) violence can only be understood as a declaration of intentions, since their implementation is hindered by the lack of the appropriate knowledge. Social sciences have evidently failed to step in and describe the social symptoms of violence, in order to be able to detect it and to develop the adequate measures and policies, which are still mainly focused on health, therapy and recovery or punitive or restorative justice. In Galtung’s words, there exists an “unfortunate fragmentation of relevant knowledge in disciplines, disciplining the disciplines to guard the borders as jealously as inter-state borders” (Galtung 2008, 28).

Apart from the conflicts arising from this situation, the lack and fragmentation of knowledge has the effect of reducing victims’ and society’s choices and, therefore, their freedom. According to Reddemann (2004, 19), victims must first have to rediscover the amplitude of their possibilities, because they often ignore their potential. Consequently, since they are not aware of their freedom of action, they often feel driven by constraints. Hence, victims often do not perceive their everyday life as everyday life, but
as a permanent exception, and widespread social attitudes perceive the
victims as exceptions and outsiders and not as social members. Therefore,
only by means of the victims’ adaptation to and hiding from others what has
happened, are they able to opt for full social membership.

But contemporary societies are increasingly characterized by a
project of the self, which implies choice and decisions, as the principal
legacy of individualism. Due to an increased flexibility of working hours and
work relationships and the erosion of gender roles, the Conduct of
Everyday Life seems to become an increasingly individual task. But this
increased freedom of choice may be difficult, if not impossible, to manage
for some victims who seem to arrange their everyday lives mostly according
to either rigid structures -ruled by control, principles and perfectionism- or
by a complete retreat from the social sphere. An example might be Giddens
postulated *Transformation of Intimacy* (Giddens 1992), in which self-
understanding, individualism and self-realization are expressed through
interpersonal relationships based upon pure emotions, non-utilitarian trust
and interpersonal intimacy. Hence, personal and domestic relations are no
longer based on a property contract but on a series of expectations about
personal satisfaction through intimacy and sexual contact. In this context,
the body becomes crucial to these new patterns of expressivity and
intimacy; the body is the channel or carrier of these new emotional
intensities. But as illustrated before, sensitive, intimate and trustful contact
with other people seems to be a major difficulty for some victims. Thus,
they may be increasingly excluded from contemporary society, insofar as
they do not share the modern principles of hedonism, desire and
enjoyment. In contrast, former principles, like discipline and asceticism,
seem to have fit their victim condition better. Furthermore, it seems more
difficult for victims to adapt to and include themselves in modern society.
Thus, many victims are diagnosed with a deviant behavior pattern and
labeled ““borderline” personality disorder”, “antisocial” persons or simple
“psychiatric patients” (Herman 1992, 122-124), following the guidelines of
Turner’s (1996, 1) “somatic society”. In contrast, social attitudes become
more tolerant regarding disclosing behavioral patterns, which can be seen
in the fact that victims of sexual violence are no longer considered and
condemned as witches. Thus, victims may also have a greater scope of action than in the past, still excluded but at least less so and receiving some kind of help and support.276

6.2.2. The absent presence of sexual violence in everyday life

All previously described aspects seem to result in the absent presence of sexual violence. This ambiguity is not unknown in sociology, as pointed out by Shilling (1993, 9) who refers to classic sociology’s dual approach to the body, that is, body’s historic «absent presence» in sociology.

The silencing of sexual violence in everyday life

On the one hand, sexual violence faces an absence, both in the victims’ lives, their surroundings, society and sociology. This absence is partially the result of the phenomenon’s silence and silencing strategies. Over the course of a comparison, the silence of the organs has been largely interpreted as a guarantee of health. Nowadays, their silence is still necessary, but it is not a sufficient condition any more. Medicine has developed a large range of different machines and measures, in order to detect invisible and silent symptoms (Detrez 2002, 101). Correspondingly, the silence of sexual violence -both on an individual and social level- has been interpreted as its absence for a long time. Paradoxically, as argued in the chapter on the social and historical dimension of sexual violence, difficulties in its exact definition and the silencing of its victims -partly due to their femaleness and corresponding lack of social position- as well as the role of the subjective appreciation of its occurrence constructed it as a largely silenced and therefore absent social phenomenon.

But the silencing -corresponding diminishing- of sexual violence does not only happen on a social level, but also on a daily level in the victims’ everyday lives. As seen before, conducts of hyperactivity and retreat have both the aim to forget the traumatic memory and to cover the

276 As already stated in footnote nº 212, p. 167, there is an ongoing debate on the advantages and disadvantages of good practice and pro-active counseling for victims of domestic violence and sexual assault. Since this discussion goes beyond the scope of the present research, it is not possible to include it into the present dissertation.
«unspeakable» and therefore «silent reality», sometimes even by means of a mask. The scenarios in which victims’ everyday lives unfold, have also been seen as fragmented, such as work life, body and family. Hence, the settings often silence the expression of sexual violence in the victims’ everyday lives. Furthermore, this silencing influences the fragmentation of the knowledge on sexual violence, while this very fragmentation is another reason for the disappearance and absence of the phenomenon. Due to fragmented knowledge, meaning can only be partly, if at all established. The previously described lack of communication also influences it, referring both to the fragmentation and lack of communication between body and mind and the victims and their social surroundings. Behavioral patterns such as the tendency to always-say-yes also form part of the victims’ invisibility, because having an opinion -and perhaps a contrary opinion- means that you have to stand up for your rights and that sometimes you have to say no. Therefore, the tendency to always-say-yes means that victims do not take responsibility for their own decisions and actions and that they partly disappear as social members.

“I simply couldn’t defend myself any more; I SIMPLY couldn’t say no. And that was different before (-) before that happened to me. Yes? I was a true rebel;“ (Carla 285-287, (1))

The tendency to wear specific clothes that help the victims hide on a daily basis is another example of that which makes them disappear from the social surface, camouflaging themselves like chameleons.

„Yes for sure. Well mostly polo neck jumpers, at night anyway. During the day it might be also a v-neck but not too deep. And if possible many layers on top of each other. Well also in summer. Maybe also a teddy no. Always being really wrapped up. Yes safer. And tight not at all, anyway. And also muted colors. And for the scars, yes that that covers them also. Well always covering and by no means sexy. I always have the sensation of offering myself.“ (Julia 225-231, (2))

In Julia’s case, she has the sensation of being too exposed and attracting unwanted sexual attention, and therefore, she hides through the clothing
she wears. But hiding and covering moves in both directions. First, she covers her body, signs of her victimhood, such as scars, and, second, she hides behind her clothing in order to feel safer and pass unnoticed. Angela, for example, also wears dark colors in order to feel safe and to pass unnoticed.

“I wear a lot of sporty clothes. Well... sporty, not too pushy; it might get dangerous. Well I can also really dress up no? [...] I have a lot of light things. I also have a lot of dark things, I like wearing dark pullovers. Then at least I know, when I am wearing dark things, so dark jeans and so, then I mostly go out keeping a low profile. Then people ignore me. With light things people always see me; but with dark things that has such a he. There I really do have my choice.” (Angela 235-245, (3))

Therefore, hyperactivity, retreat, specific ways of dressing or truncated communication contribute to the disappearance of sexual violence. Consequently, reality withdraws and is replaced by a fictitious performance. Either the victims flee into their own imaginaries worlds, leaving only their bodies back in reality, or they maintain the illusion of an apparently normality by interpreting their role and masking their own perception and reality.

The revelation of sexual violence in everyday life
In contrast, sexual violence’s connection to topics like sex and violence generates an aura of fascination which contributes to its visibility.277 Furthermore, the everyday conduct of revelation aims at attracting attention through divulging and revealing memories of sexual violence or by testing society’s tolerance regarding «unconventional» behavior. In this context, we have seen that victims generally perceive their own bodies as incoherent and unsteady, losing self-confidence and basic trust. In order to overcome this often unbearable situation, they try to generate new knowledge and new connections between attributes and

---

277 Refering to the psychological dimension, the stress symptoms of traumatized people also have the tendency to call attention to the existence of an unspeakable secret and, at the same time, deflect attention from it. Hence, “traumatized people alternate between feeling numb and reliving the event” (Herman 1992, 1).
issues which seemed to be dispersed, fragmented and without interconnection. This apparently helps them to generate new meaning and to overcome a deeper sensation of alienation. In this sense, the «screaming» form of revelation aims at eliminating incoherencies, which testify to the persistence of sexual violence, both as it has been incorporated in their bodies and everyday lives. This tends to occur through confrontation and conflict with the victims’ social environment and with linked social systems such as medicine or justice. Consequently, revelation can also been seen as an invitation to the creation of new knowledge and integration. In this context, commitment seems to be the only conduct in which there is a balance between the absence and the presence of sexual violence, by means of the integration and communication of knowledge.

The problem which arises out of the patterns of the victims’ Conduct of Everyday Life lies in the fact that the presence of a phenomenon always has to be acknowledged, both in its individual and its social dimension. Hence, its basic condition is respect, either towards oneself or towards others. The consequence of lack of respect and recognition is the individual sensation or the social attribution of stigma. For victims, non-acknowledgment of their victim-status seems to be among the most disrespectful of reactions they can imagine. In this context, it is not necessarily the detection of their victim status which they ask for, but the sensitive acknowledgment which provides them with a range of action and which empowers them and leaves them in control of the situation.

“Julia: I never go to a doctor.
Karolin: Mmh.
Julia: Well once I was really ill and then I went to one. He immediately asked me about it. It doesn’t work at all. No. Of course, I never went there again.
Karolin: So. (1)
Julia: Well here I have a family doctor; it’s called that, isn’t it?
Karolin: Mmh.
Julia: And I’ve been testing her for the last one one and a half years. And I think she suspects something, because she always asks me these questions? If I have stomachaches and so on. And last time, I said that I turn to her, because I didn’t feel well. And then she said, that she’d imagined that. (---)
Karolin: And that was fine with you?
Julia: Yes yes. That was ok.
Karolin: And how is it, when somebody addresses the issue directly. Rather pleasant or unpleasant?
Julia: Unpleasant.
Karolin: Mmh?
Julia: I feel caught.” (Julia 354-373, (4))

Hence, and as Herman argues, the patterns of violence only become apparent and visible through communication, the onus and responsibility for which lies largely on the victims.

“The more victims tell, the sooner a good and precise perspective of what violence consists of will become visible. Therefore, countermeasures, diagnoses of situations, evaluations, policies and all the other skills developed in society to cope with situations of crisis of any kind depend on the verbalization of the problem that is being worked on.” (Herman 1992, 51)

In a certain way, it might seem that there is no salvation for the victims. But, as in Kate’s words, victims are made of more than their experience of sexual violence; although it influences them a lot, there are also “many positive things” which should not be forgotten:

“I’m yes .h a person who isn’t only made up of this abuse, but there’re also many many other parts and .h that’s such a mini part which, which makes this up yes; but that has influenced me, that has changed me, and I think it has also, in spite of being something bad, brought many positive things. And that’s something which one should also not forget, and yes.” (Kate 1146-1151, (5))
7. Conclusion

The present dissertation began from the idea that the reality of sexual violence is more complex than the traumatic event itself, in both temporal and social dimensions. I take a more phenomenological approach to a phenomenon which has been primarily studied in its psychological, medical and clinical dimensions and is characterized by a double invisibility regarding both everyday life and sexual violence itself. The approach used here makes it possible to describe specific patterns in the victims’ Conducts of Everyday Life and acquire greater understanding of the mutual relationship between the victims, their social surroundings and society, according to the research perspective of a subject-orientated sociology.

Starting from the fact that the key moment of the traumatic process is the paradox between existentially-threatening situations and the inability to react adequately, it has been shown that the victims’ everyday lives are marked by multiple paradoxes, sometimes visible, sometimes invisible, sometimes detected, sometimes undetected, but always unsettling and alienating. Hence, the victims’ everyday lives seem to be partly unexpected, strange, apparently absurd, yet completely true experiences—countering any opinions to the contrary. Thus, the absent presence of sexual violence in everyday life represents the persistent structure of sexual violence in society, creating paradoxes and contradictory positions. This is mainly the result of a general failure in communication and lack of common knowledge which creates indissoluble conflicts, between the victims, their social surroundings and society in general.

The tactics summarized by the disclosing Conducts of Everyday Life, such as revelation itself, tend to call attention to the prevailing conflicts by revealing the incoherencies, clashes and paradoxes between the incorporated violence and other social scenarios, such as the medical or legal ones, work, family or society; whereas the strategies illustrated by the silencing Conducts of Everyday Life such as hyperactivity and retreat, seek consensus between the different scenarios by ignoring sexual violence and by trying to vainly conceal the existing paradoxes. The silencing Conducts of Everyday Life are performed through the adoption of an angelic role, always good and subservient, adapted to social expectations and rules.
Based on the existing data, it has not yet been possible to demonstrate the prevalence of one set of tactics over the other. Sometimes the silencing Conducts of Everyday Life prevail over the disclosing Conducts of Everyday Life or vice versa, sometimes they alternate, and sometimes they even coincide in time. It would have to be shown, through future investigations, which conditions favor one behavior or the other, describing their fluctuation with more attention to detail, something which would require another methodological approach.

Nevertheless, the consequence of the absent presence of embodied sexual violence is the creation of even more inconsistencies, like the ill but non-diagnosed body, the normalizing but exhausting Conducts of Everyday Life or the disclosing but misunderstood and therefore silenced Conducts of Everyday Life. Accordingly, the two sets of tactics seem to represent two faces of the same coin, producing complementary consequences. This could be described as a vicious circle in most cases, a cycle which regenerates the same structures and strategies over and over again. Consequently, victims seem to live in permanent ambiguity, reflecting the ambiguous social circumstances they are confronted with and the daily social arrangements and decisions they assume. In contrast, society tends to attribute the name of pathology or disorder to any behavior which does not fit its customs or values (Pons i Antón 2008, 49).

Referring to the regenerating of structures, this double contingency, as we have already seen, is often negated. First, victims do not primarily act and react as their environment expects them to; second, the victims feel disappointed and abandoned by their environment, which does not live up to their expectations, and, third, the scenarios involved, such as medicine, are not able to assume their mediating and concealing role by, for example, misdiagnosing symptoms. This produces the aforementioned flaw in communication between the parties involved, either between victims’ bodies and minds or between the different social scenarios. This communicative void reproduces and aggravates already existing inconsistencies and paradoxes. In this manner, the symbols and patterns of violence are reaffirmed and reproduced, insofar as they are not actively
replaced by new forms of communication, represented by confronting and communicative Conducts of Everyday Life.

Furthermore, everyday life actions and communication generally only work thanks to that which can be taken for granted which needs not be articulated, or perhaps sometimes cannot nor should not be articulated. Yet common knowledge of an insinuated common reality that is typically assumed by the partners of this type of interaction apparently does not exist for the victims of sexual violence. However, confidence in a common world of latent congruencies is necessary for the speed and certainty of actions and reactions that everyday life requires. The paradoxes that I have detected in victims’ lives hinder this speed and certainty and hamper sequences of interactions subjecting them to malfunctions. Consequently, victims experience this space of self-evident interactions of everyday life in an -at least partly- disturbed manner, that is, a reality, in which everybody knows what to expect. They perceive themselves as largely lacking the capacities that an everyday life actor must have. They feel -using Eisler’s words- bound by their lives and their surroundings, and have difficulties in creating the bonding relationships needed for an acceptable and unalienated social life.

In demonstrating the above, the objectives of the present dissertation have been fulfilled. Yet given the approach I have chosen, the results obtained are also limited in their scope. Patterns detected in the victims’ Conducts of Everyday Life partly correspond to some of the therapeutic steps, which primarily consist of establishing stabilization, safety and trust; remembrance, reexperiencing and integration of traumatic memories; and the reintegration of personality and reconnection (Herman 1992, 156). This seems to be a consequence of the theoretical approach of the Conduct of Everyday Life, which itself is defined as a coping strategy for everyday life, guided by the question: How to arrange one’s life and cope with its circumstances? Therefore, the conducts -grounded in the data- may have the character of coping strategies. However, this specific theoretical focus does not exhaust the findings, because it describes a kind of natural transition from a medically dominated field into social sciences, permitting new results from application of Grounded Theory methodology. On this
basis further research which takes up from where previous knowledge has left off is possible and necessary.

Furthermore, the present dissertation is also limited by the choice and focus of its sample, representing only victims’ perspectives on their everyday lives, without considering the opinions of their family members, including partners, children and parents, or friends and colleagues. But in the context of this first explorative and descriptive approach to the victims’ everyday lives and their unheard voices, delimiting access and perspectives has been considered necessary in order to focus the present research in a new research field. Hence, the present dissertation is limited to analysis of the victims’ Conducts of Everyday Life, in order to highlight this specific aspect and focus on their point of view.

Nonetheless, it has been possible to make the following contributions:

- It has been possible to enter a scarcely charted terrain characterized by a double invisibility, in relation to both everyday life and sexual violence. With the description of new aspects in the intersection of everyday life and sexual violence, a persistent and previously unresearched void has been filled.

- The present dissertation describes the victims’ everyday lives and the specific patterns of their Conduct of Everyday Life at the intersection of two research fields, offering new insights and a more sociological approach to victimization and its impact on society.

- The detection of paradoxical, conflictive, but also reconciling communicative patterns opens the possibility for development of new strategies on how to resolve the paradoxes, overcome victims’ alienation and promote their integration into society, through closing the mutual gap in knowledge and communication.

- In its larger context, the present dissertation can be considered a sociological contribution to victimology, in general.

Consequently, the following future research lines have emerged:

- It would be interesting to widen the present research to include a broader sample, also including male victims and the victims’ circles, in order to get a more general view of their everyday lives.
In order to overcome the paradoxes in the victims’ everyday lives that I have described, it may be useful to follow Galtung’s approach to transdisciplinarity, including different disciplines in the research.

Some of the aspects may be useful for a new round of quantitative research, planned over the next couple of years, promoting a more sociological view on (sexual) violence.

The present research may serve as a basis for the development of new strategies of how to approach victims, working with the paradoxes detected.

The mutual interaction of victims and society has been a thread guiding the present thesis, as victims live in society and society consists (partly) of victims. Hence, victims can not cope with sexual violence without the support of society and society can not overcome sexual violence and victimization without the support of the victims. They mutually depend on each other, as in Ortega y Gasset’s astute phrase: “Yo soy yo y mis circunstancias.”278

---

278 My translation: “I am me and my circumstances.”
8. Bibliography


Hagemann-White, Carol. 2006. *Combating violence against women: Stocktaking study on the measures and actions taken in the Council of*


Herman, Judith Lewis. 2001. *Trauma and Recovery. From Domestic Abuse to Political Terror.* London: Pandora.


Martínez, Manuela and Monika Schröttle. 2006. *State of European research on the prevalence of interpersonal violence and its impact on health*
and human rights. Osnabrück: Coordinated Action on Human Rights
Violations (CAHRV). http://www.cahrv.uni-osnabrueck.de (access on
September 14, 2006).

Konstruktivismus, ed. Siegfried J. Schmidt, 89-118. Frankfurt am Main:
Suhrkamp.

Kriege der Gegenwart und Niklas Luhmanns Systemtheorie.
Wiesbaden: VS research.

Ruhnmark: Donna Vita.

McGowan, Patrick O., Aya Sasaki, Ana C. D'Alessio, Sergiy Dymov, Benoit
Labonté, Moshe Szyf, Gustavo Turecki and Michael J. Meaney. 2009.
Epigenetic regulation of the glucocorticoid receptor in human brain
associates with childhood abuse. In Nature Neuroscience 12: 342-
348. Published online: February 22, 2009 (access on February 28,
2009).

Medical mondiale e.V. and Karin Griese (ed.). 2006. Sexualiserte
Kriegsgewalt und ihre Folgen. Handbuch zur Unterstützung
traumatisierter Frauen in verschiedenen Arbeitsfeldern. Frankfurt am
Main: Mabuse-Verlag.

Medica Mondiale e.V., Marlies W. Fröse and Ina Volpp-Teuscher. 1999.
Krieg, Geschlecht und Traumatisierung. Frankfurt am Main: IKO –
Verlag für Interkulturelle Kommunikation.

Meidinger, Andrea. 1999. Victimogene Bedingungen als Auslöserize bei


9. Glossary

Aggression
Aggression is a term used in psychology and social sciences to describe a response, a behavior triggered by some stimuli. It is mainly considered to be an instinct, and, therefore, a feature selected by nature, insofar as it increases the biological efficiency of its carrier. In general, aggression causes damages of little importance, infracts conventional modes, and is of spontaneous and hostile character and a consequence of an emotional excitation. Whether an instinctive reflex or a learned response, it is perceived as an inner cause/effect circuit.

Aggressor
The aggressor is considered an independent actor (like a «billiard ball») in a social universe that comprises other isolated billiard balls. Society lies outside, and is divorced from the individual.

Burn-out
It is a psychological term which refers to long-term stress and exhaustion, which might be accompanied by symptoms like depression, withdrawal from everyday and social life and extreme tiredness. People suffering from burn-out are often incapable of working and sometimes they even have to take early retirement.

Depression
Depression is a clinically defined mental disorder which is characterized by lethargy, low self-esteem, loss of interest or pleasure, difficulties and sometimes even complete retreat from one’s everyday life.

Dissociation
Dissociation refers to a partial or complete disruption or separation of the normal integration of a thought or idea from the mainstream of a person’s consciousness. It is a mental process which interrupts the connection
between one’s thoughts, memories, feelings, actions or sense of identity - similar to mental flight - which tends to occur when real and physical flight is impossible. It is been both seen as pathology and as a natural feature of human experiences.

**Conduct of Everyday Life**

The concept of Conduct of Everyday Life\(^\text{279}\) is defined as the relation of all activities and actions, which a person carries out on a more or less daily basis in their different life spheres. It is an arrangement of arrangements and an action system of practical coping with life on a daily basis.

**Everyday Life**

There are many ways of understanding the concept of everyday life and whether or not it is really a sociological term is a controversial point. If it is interpreted as a sphere of experience (or horizon of experience), it is close to the term lifeworld characterized by Husserl. It may be defined as the sum of the circumstances under which people’s actions and orientations unfold in their known and habitual environment. Alfred Schütz incorporated the term into comprehensive sociology in his search for the structures of meaning in the everyday lifeworld.

**Grounded Theory**

Grounded Theory is a methodological answer to the question of how the discovery of «new» phenomena can be used, through methodologically controlled processes, for the creation of new theories. It is a strategy to construct empirically based middle range theories from the data.

**Habitus**

Collectivity of individual and collective conducts which social agents tend to reproduce in an automatic and systematic form. It is emotionally, socially, culturally and historically constructed and constitutes a key element of

\(^{279}\) The Conduct of Everyday Life was developed by the Münchner Projektgruppe „Allgemeine LebensFührung“ in the frame of the Münchner SFB 333 „Entwicklungsperspektiven von Arbeit“, mainly from 1987 to 1996.
differentiation from other individuals. In sociology, the term has been introduced by Pierre Bourdieu.

**Incest**
This term is mainly used in an Anglo-Saxon context or psychoanalysis. Incest means the sexual relationship between relatives.

**Lifestyle**
Lifestyle embraces all conscious and unconscious behavior which a person practices on a regular basis. It is based on the individual and expressive organization of everyday life, developed through biographic processes and forms a synthesis of consciously and unconsciously practiced routines, attitudes and aims, contacts and interactions.

**Pedophilia**
It represents the strongly compulsive sexual affinity of adults -mostly men- to children and teens -mostly female. As a crime, pedophilia is subsumed under sexual abuse of children.

**Posttraumatic Stress Disorder (PTSD)**
Posttraumatic stress disorder (PTSD) is an anxiety disorder that may arise when a person had been exposed to a stressor that is generally outside the range of usual human experience, such as: someone's death, threats the person, serious physical injury or a threat to physical or psychological integrity produced by natural disasters, accidents, unwanted sexual acts, etc. Both direct experiences and witnessed events may act as traumatic stress factors.
Symptoms are: reexperience. such as flashbacks and nightmares, avoidance of stimuli associated with the trauma, increased arousal, such as difficulty falling or staying asleep, anger and hypervigilance. By definition, the symptoms last more than six months and cause significant impairment in social, occupational, or other important areas of functioning (e.g. problems with work and relationships).
Rape
Rape is any act of sexual intercourse that is forced upon a person. It is also a legal term, referring to the unlawful compelling of a woman (or man) to have sexual intercourse through physical force or duress.

Sexual abuse
Sexual abuse is primarily a legal term. The German Penal Code (§ 176) prosecutes sexual acts of adults with children (under age 14) defining them as sexual abuse (In German: Sexueller Missbrauch). In contrast, incest, sexual violence or sexual exploitation do not represent legal terms.

Sexual exploitation
Since violence might be mistaken, because it is generally associated with physical violence, neglecting its psychic and emotional character, the term sexual exploitation has been developed to focus on the existing relations of power between the abuser and the victim.

Sexual harassment
Sexual harassment is a form of sex discrimination, referring to persistent and unwanted sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature. It explicitly or implicitly affects an individual's employment, interferes unreasonably with an individual's work performance, or creates an intimidating, hostile, or offensive work environment.

Sexual violence
It represents a term developed primarily by the feminist movement to call attention to the (sexually) structural violence between men and women in a patriarchal society. It includes all specific types of sexual violence, such as sexual abuse (of children), sexual exploitation, incest, rape, attempted rape, sexual harassment, etc.
Sexualized violence
Mainly used in a Germanic context, sexualized violence has replaced the use of «sexual violence» in order to focus on the instrumentalization of sexuality in order to harm another person. The violent nature is underlined.

Stigma
It is a psychic, physical or social feature which negatively distinguishes one or several persons from the other members of a society or a group. Consequently, they are excluded and are not (completely) socially accepted.

Theoretical sampling
Theoretical sampling can be applied when the totality of a studied population is unknown or some of its characteristics are unknown. It includes repeated drawing of samples, according to different criteria. The sampling process finishes when the sample has reached its theoretical saturation.

Theoretical saturation
When by means of permanent comparison and theoretical sampling no new aspects emerge from the last batch of collected data, theoretical saturation has been achieved. Nevertheless, Grounded Theory considers all research as a never-ending process of generating theory.

Trauma, Traumatization
Of Greek origin, trauma basically describes a serious wound which existentially threatens the life. On an individual and psychological level, it represents an event which threatens personal integrity and breaks down personal defenses in such a way that the person can not efficiently react, representing a psychic wound. There is a great discrepancy between the threatening situational factors and the individual capacities of coping. Individual consequences are feelings of helplessness and may cause a permanent perturbation of one’s self-understanding and one’s view of the world. On a collective level, it represents the disintegration of the basic
social tissue, destroying basic social relations and trust which normally unite people. Trauma is not over when traumatic situations or events stop.

Victim
Originally, the word comes from the Latin word «victima», which was originally used to signify a living being offered in sacrifice to the gods. After many changes due to the fact that the attribution victim always represents a social construction, it is now used in a wide range of contexts.
It refers to a person, group or organization which is in danger, harmed or destroyed by the behavior of others. It also includes people who are not damaged by the intervention of a third person, for example victims of accidents or environmental catastrophes.
There are victims of disease, pollution, natural disasters, war, exploitation, oppression, repression, persecution, torture, discrimination, corporate wrongdoing, etc.

Victimization
It represents an adverse effect or an undesired and undesirable consequence caused by some external force or by some individual, group or organization. It implies some of the following forms of sufferings: injury, harm, loss, inconvenience, discomfort, pain and suffering. Victimization implies an imbalance of strength and a disequilibrium in positions of power: the strong, powerful victimizer and the weak, helpless victim.
There are numerous kinds, forms and types of victimization to which people may be subjected or from which they may suffer: criminal victimization is just one small category.
In society, the term victimization often has a negative connotation.

Violence
Violence is a cultural mode and the result of an interaction of natural aggressiveness and culture.
In general, violent acts are characterized by serious damages with important consequences; they infract legal norms and laws, have an instrumental character and often happen in a calculated and cold way.
Vulnerability

Vulnerability is the susceptibility to physical or emotional injury or attack. It also means to have one’s guard down, open to censure or criticism; assailable. Vulnerability refers to a person’s openness to attack.
10. Annexes

10.1. Social policy regarding sexual violence and victims in Germany

Nearly all interviewees show an increased contact (both in frequency and in quality) with the German public health care system and the social security regime. They mention social assistance from many different social policy fields, such as unemployment policy, pension policy, social security regime, health system, policies regarding disabled people, child care or immigration laws. For the given importance of this social background, I will give a brief overview on the German social policy system.

10.1.1. Introduction to social policy in Germany

Article 20, paragraph 1 of the German Basic Constitutional Law (Grundgesetz) says that “The Federal Republic of Germany is a democratic and social federal state.” Therefore, federalism and social responsibility form part of the pillars of the German social structure, including the principles of insurance, solidarity and maintenance (Frevel and Dietz 2008, 58-61). As a result of the rule of subsidiarity, all levels of governance are implicated in the German welfare state: Federal, regional and local authorities. Therefore, it is difficult to give a general picture of the German social policy -especially from a user perspective-, because its implementation may vary according to the specific regional or local background. A very specific and single role in the German welfare state is played by voluntary welfare organizations, which provide charitable support in health and social issues.

Generally speaking, social policies in Germany include the following fields: child benefit, maternity benefit, child-rearing leave, maternity protection, employment promotion, labor law, co-determination, health and safety at work, accident insurance, rehabilitation and participation of handicapped people, jobs without barriers, health insurance and electronic

---

280 Translation of the author. Original in German: „Die Bundesrepublik Deutschland ist ein demokratischer und sozialer Bundestaat“.
281 Compare annex nº 10.1.3., pp. 327-328.
Apart from the general health care system and the possibility of early retirement, which are mentioned in nearly all interviews, rehabilitation plays a central role; first, because some of the interviews were conducted in rehabilitation hospital, and, second, because rehabilitation often links the health care system with the pension framework. In general, rehabilitation includes the total of measures which are aimed at people who suffer chronic or hereditary illnesses or mental, psychic or physical handicaps. Beyond acute treatments, rehabilitation is supposed to allow these people to find and rediscover their everyday life and social position corresponding with the possibility of maintaining their individual esteem. Rehabilitation includes medical, educational, working and social dimensions. In Germany, a vast system of public support organizations, including the compulsory health insurance, statutory pension insurance, Federal Employment Agency, statutory accident insurance, social welfare, youth welfare service, etc. support rehabilitation according to specific needs.

For example, in case of a chronic or long-lasting illness -such as posttraumatic stress syndrome- which is accompanied by the person's incapacity to work, institutions specialized in rehabilitation have the responsibility to try to reintegrate the person into society and work life, as a first aim, and, if this is not possible, they can “recommend” this person for early retirement.

### 10.1.2. Policies on violence against women

In Germany, the first women’s shelters were founded in 1976 in Berlin and Cologne. The first helpline for women who had been raped was started in 1977. The first helpline for sexually abused girls was founded in 1987 in Berlin, including not only the gender but also the generational dimension. All these projects were promoted by independent feminist organizations, following principles of professionalism and partiality. In the 80s, the number of women’s shelters and help lines rose in Western Germany. The first women’s shelters were founded with local sponsorship
or with the support of traditional welfare organizations (Kavemann 2001). In Germany, there are currently about 400 shelters (the highest number in Europe), with about 45,000 places (also the highest number, followed by Spain with a little bit more than 4,000 places), which are accessible around the clock and free of charge (Hagemann-White 2006, 52).

In addition to this practical support for victims, a lot of feminist associations have also organized prevention campaigns, sensitizing society around sexual violence and violence against women, and have done lobbying, influencing legal projects and changes in legislation. Some of the latest legal advances are the following:
- In 1997, after a two-year period of parliamentarian discussions, rape in marriage became illegal and therefore punishable.
- In 2000, children were granted the right to an education and upbringing without violence.

In 1999, the Federal Government started the first Action Plan on Violence Against Women, followed by a second one in 2007. The second Action Plan mainly pursues the guidelines of the first Action Plan:
1. Prevention
2. Federal legislation
3. Assistance system for the support and counseling of women affected by violence
4. Networking of the assistance system on the federal level
5. Cooperation between the public and non-public institutions
6. Work with aggressors
7. Qualification and sensitization
8. Research
9. European and international cooperation
10. Support measures for women abroad

But based on the findings of the German prevalence study in 2004 and other scientific studies and experiences in the field, the Second Action Plan focused on new areas: more protection for female immigrants, more attention to handicapped women, more focus on children, earlier prevention, considering women in situations of separation, better mobilization of the health sector, more mobilization in the affected women’s
neighborhood and the justice system, more responsibility from the aggressors, etc.

On 2002, January 1st, the violence-protection-law (Gewaltenschutzgesetz) became effective, providing a clear legal basis for protection measures according to civil law, including restraining orders of different types and the acceleration of proceedings favoring the victims. As a result of the German federal structure and the specific regional competencies, most of the German regional governments changed their police-legislation to facilitate action. But as a result of the different regional legislation, the implementation of the violence-protection-law considerably varies between the Länder.

The most important innovation of the law is the principle: “The aggressor leaves, the victim stays”. Therefore, victims are not obliged to flee any more and seek protection in a women’s shelter; they now have the option to stay in their homes while receiving protection. The aim of the violence-protection-law is the legal protection of people affected by domestic violence.

These German policies are imbedded in a whole range of international measures. In Europe, for example, and since 1997 the Daphne282-initiative and programs have provided a platform for multinational efforts. Perhaps in response to the WHO report in 2002, the European Commission put health intervention as top priority for Daphne-funding in 2003. Currently, the Daphne III-program is operating for a period from 2007 to 2013. The Federal Government provides co-funding for the German projects.

In November 2006, the European Council started a campaign on violence against women which included domestic violence. One of the objectives of the campaign is the implementation of concrete and specific

---

282 The Daphne II-program supports actions to combat all types of violence against children, young people and women in Europe and all aspects of this phenomenon (violence in the family, violence in schools and other establishments, violence at work, commercial sexual exploitation, genital mutilation, health repercussions, trafficking in human beings, rehabilitation of perpetrators, etc.). It aims at supporting organisations that develop measures and actions to prevent or to combat these types of violence and to protect the victims and groups at-risk.
measures and Action Plans on violence against women in the different member countries.

The WHO has started different activities concerning violence against women. Apart from the publication of the *First World Report on Violence and Health* in 2002, there are many other publications on the implementation of the reports’ recommendations, a report on the social costs of violence, etc.

Consequently, the map of specific support for victims has changed in the last couple of years and most of its measures have been only recently developed and implemented. Therefore, most of the interviewees—as a result of their age and their abuses, which sometimes date back decades—have until now been unable to receive adequate support. Only very few interviewees received support shortly after the assault(s) occurred. Consequently, it is possible to conclude that there still seems to exist a gap between the good intentions, promoted by the Action Plans, and new laws and the help which finally reaches the victims.

10.1.3. Independent victim support organizations

A specific feature of the German welfare state is the important role of voluntary welfare organizations (and independent associations), which provide charitable support in health and social issues. Some of them, for example, sponsor women’s shelters or help lines. After early actions that filled a void, such as founding the first women’s shelters, their current task seems to be the closing of the aforementioned gap, through helping victims to receive the support they need. Therefore, the current Action Plan includes the promotion of the assistance-system-network at federal level and the cooperation between the public and non-public institutions, as one of its main goals.

Two examples of the numerous non-public organizations which specifically help victims of sexual violence are:

First, Wildwasser e.V. (section Berlin) is an association, founded in 1982, in Berlin. Its early work was based on a self-help-group for female

---

283 See pp. 324-325 on the beginning of womenshelters.
284 Its name means «whitewater» in English.
victims of sexual violence. Currently, they offer the following support for girls and women victims of sexual violence: two information centers for girls; an emergency service for girls; an information center for women with self-help groups and a women’s shop; a coffee-shop open several nights a week as a contact point for women in crisis; an intercultural living community for girls; and an escort-service for witnesses. In 2007, they had a budget of 1.5 Million Euros and 38 staff members. On the federal website of Wildwasser (www.wildwasser.de; accessed on 2009, January 22d), which is a kind of network for associations helping victims of sexual violence, there are about 150 contact addresses with different help lines all over Germany, including, from small self-help groups up to local organizations with a vast offer of different kinds of support.

Second, victim support Germany, called Weißer Ring e.V., helps victims of crimes and is the only German association operating at federal level. It was founded in 1976. Today, it has an annual budget of about 12 to 15 million Euros, and runs 420 field offices all over Germany. About 3,000 voluntary helpers support victims, with financial help, legal advice and specific help. They also organize prevention and raising-awareness-campaigns.

It has to be mentioned that the type of approach taken towards victims, objectives, financial resources, the kind of organization and its public perception vary considerably from one organization to the next. But all of them form part of a vast range of offers. Nevertheless, few victims seem to seek help; they do not seem to be aware what is available, nor does available help seem to reach them and satisfy their needs.

285 Its name means «white ribbon» in English.
### 10.2. Interview guideline

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Welche Pläne haben Sie für die Zukunft?</td>
<td>Vorstellung / Verwirklichung Zukunft Wünsche / Träume</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wir haben bisher über den Lebensalltag gesprochen, wie würden Sie Ihren Lebensstil beschreiben?</td>
<td>Wohnung Kleidung Essen Fernsehen Farbe Musik Konsumverhalten Selbstwahrnehmung</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abschlussfragen</td>
<td>Haben wir etwas vergessen, was Sie gerne noch ansprechen würden?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Guideline (invitation to tell) | Check – Was that mentioned? | Precise questions – please ask in convenient moment | Questions for maintaining and guiding the conversation
---|---|---|---
As you know, I am carrying out a study on the everyday life and routines (of victims of sexual violence).
Could you tell me anything about your everyday life (before you entered the hospital / before your retirement / after your retirement / before your illness / …)?
(In case of insecurities / difficulties at the start of the narration, possible support with more specific questions. Paying attention to the specific situation and interviewee and responding accordingly.)

| life situation mobility daily routine time-management / organization leisure time / holiday morning ritual falling asleep ritual dreams / memories sleeping disorders (nightly activities) relaxation priorities consumer behavior sexuality friends trust / support / consolation / counseling pets children (education, control, liberty, security) mother-role father-role |
| Who is the first person, to whom you wish “Good morning”? |
| Nonverbal maintenance |
| Reverting Could you explain a little bit more about …? Could you describe this further? Please tell me a little bit more about … Could you mention an example for…? |
| Acceleration of narration And then? How did it go on? How was it with…? |
| External aspects Does … play a role? |

What are your plans for the future?

| idea/ realization future wishes / dreams |

Until now, we have been talking about everyday life, how would you describe your lifestyle?

| flat clothing alimentation TV colors music consumer behavior self perception |

Final question

| Is there maybe a point, which we have not mentioned yet, which you would like to talk about? |
10.3. Adverts

10.3.1. Advert published in newspaper

Sind Sie betroffen von sexueller Gewalt/Missbrauch?
Junge Frau sucht für Doktorarbeit Interviewpartnerinnen für Einzelgespräche, Anonymität bleibt gewahrt. Unterstützen Sie Präventionsmaßnahmen und soziales Verständnis für Opfer. Melden unter: kkapplerphd@web.de

English translation:

Are you affected by sexual violence/abuse?
Young woman looks for female interviewees for one-on-one interviews for her doctoral thesis, anonymity is safeguarded. Support measures of prevention and social understanding for victims.
Contact: kkapplerphd@web.de
10.3.2. Notice posted on campuses and in help lines

In Zusammenarbeit mit der Universität Osnabrück und der Universitat de Barcelona:

Karolin Kappler
Telefon: 0034-934021802
E-Mail: kkapplerphd@web.de


Interviewpartnerinnen gesucht

zum Thema

„Folgen sexueller Gewalt für den Alltag betroffener Frauen“

Für meine Doktorarbeit suche ich Frauen, die einmal oder mehrmals Übergriffe oder sexuellen Missbrauch erlebt haben, um mit ihnen über ihren Alltag zu sprechen.

Ziel der Arbeit ist es, die Folgen einer erlebten Gewalttat zu verstehen und darzustellen, um die Unterstützung gewaltbetroffener Frauen zu verbessern und Präventionsmaßnahmen zu entwickeln.

Für das 1- bis 2-stündige Einzelinterview werden keine speziellen Anforderungen gestellt. Alle erhobenen Daten werden selbstverständlich anonymisiert. Das Interview kann an einem von der Interviewpartnerin gewünschten Ort oder aber in einem neutralen Raum in Pforzheim oder Umgebung stattfinden.

Wenn Sie Interesse oder Fragen haben, melden Sie sich bitte bei Karolin Kappler per Mail kkapplerphd@web.de oder während der Bürozeiten (Montag und Mittwochs von 12:00 bis 14:00 und Freitags von 10:00 bis 12:00) unter 0034-934021802.
In search of interviewees on the topic “consequences of sexual violence for the everyday life of affected women”

For my Ph.D.-thesis, I am looking for women who have experienced one or more sexual assaults to talk about their everyday life.

The objective of the research is the description and understanding of the consequences of violent assault, in order to improve the support for affected women and to develop preventive measures.

For the one-on-one interview, lasting between 1 and 2 hours, there are no special requests. All information and data are naturally kept anonymous. The interview can be held at a place, the interviewee wishes, or at a neutral spot in XY or surroundings.

If you are interested or if you have any questions, please contact Karolin Kappler by mail kkapplerphd@web.de or during office hours (Mondays and Wednesdays from 12:00 to 14:00 and Fridays from 10:00 to 12:00) under 0034-934021802.
10.4. Rules of transcription
(following the Gesprächsanalytische Transkriptionssystem GAT, Selting et al. 1998)

<table>
<thead>
<tr>
<th>Signs</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ]</td>
<td>Overlapping and talking simultaneously</td>
</tr>
<tr>
<td>(...)</td>
<td>Incomprehensible passages</td>
</tr>
<tr>
<td>(such)</td>
<td>Alleged wording</td>
</tr>
<tr>
<td>(such/what)</td>
<td>Alternative supposition</td>
</tr>
<tr>
<td>(coughing),</td>
<td>Non-verbal features / actions / events / descriptions</td>
</tr>
<tr>
<td>&lt;&lt;coughing&gt;&gt;</td>
<td>Actions / events / interpreting remarks accompanying the linguistic expressions. Beginning and end is marked by &lt;&lt; ... &gt;</td>
</tr>
<tr>
<td>&lt;&lt;laughing&gt;&gt;</td>
<td>Laughing</td>
</tr>
<tr>
<td>&lt;&lt;nasty&gt;&gt;</td>
<td>Fast and sudden connection, slurring.</td>
</tr>
<tr>
<td>ha-ha, he-he, etc.</td>
<td>Lengthening according to duration</td>
</tr>
<tr>
<td>=</td>
<td>Glottal stop</td>
</tr>
<tr>
<td>(Ex.: „an=er“ for „and er“)</td>
<td>Short, middle, long pause until approx. 1 second.</td>
</tr>
<tr>
<td>(3,5) (5)</td>
<td>Pauses longer than 1 second with indication of its length.</td>
</tr>
</tbody>
</table>

**Stress**

<table>
<thead>
<tr>
<th>AcCENT</th>
<th>Capital letters mark stress; Here: Primary and main emphasis: stressing second half of word</th>
</tr>
</thead>
<tbody>
<tr>
<td>AccEnt</td>
<td>Capital letters mark stress: Here: Secondary and side emphasis: light stressing of last syllable.</td>
</tr>
<tr>
<td>ACCENT!</td>
<td>Capital letters mark stress; Here: Strong emphasis: stressing all syllables.</td>
</tr>
</tbody>
</table>

**Intonation**

| ?             | Rising highly                               |
| ,             | Rising                                      |
| -             | Remaining constant                           |
| ;             | Falling                                      |
| .             | Falling deeply                               |

**Inhale and exhale**

| .h .hh .hhh | Inhalation according to length |
| h hh hhh    | Exhalation according to length           |
5. Looking at how victims conduct everyday life
5.1. Narrative moments
5.1.1. The narrative absence of everyday life

(1) „denk ich ich kann den Menschen auch was geben mit meinen Gedichten; eh ich möchte schon irgendwie auch Mut machen dass man über diese Tiefen über des Schlimme wieder zu sich finden kann; dass man da wieder zu sich finden kann. Ich möchte da irgendwie gern Mut machen. Ich möchte den Menschen etwas geben; und dass sie sich vielleicht selbst wiederfinden auch in dieser Sehnsucht wiederfinden oder in der .h dieser Wut wiederfinden die dann kommt dass dieses Wi=wiederfinden dass vielleicht dadurch auch selbst en Weg finden wieder zu sich zu finden. Ja."

(Jane 826-831)

(2) „Ist das irgendwie verständlich?"

(Julia 130)

(3) „Ich hab ja ganz früher immer jahrelang gedacht des steht hier auf meiner Stirn und jeder siehst. Des war au so dann wieder die Versuche von niemand in die Auge gucke weil ich sofort des Gefühl gehabt hab der sieht des. Der sieht des mir an."

(Kate 1151-1154)

(4) „Karolin: Wenn Sie morgens aufstehen, gibt es ein Ritual?
Elaine: Ne, gar nicht.
Karolin: Gar nicht...

(Elaine 33-48)

[…]

Karolin: Und was machen Sie dann so am Wochenende?

(Julia 59-61; 76-82)

5.1.2. The narrative absence of normality

(1) „[…] dann wieder Sache wo wo i einfach net einordne konnt einfach grad so wie mer des vielleicht als Normaler kann oder au nur belächle oder oder einfach klar e Meinung gleich zu habe. .hh Des des ging dann net. Des ging also absolut net.”

(Pia 852-855)

(2) „[…] das sind so Sachen, die einen normalen Menschen nicht mehr belasten, oder?“

(Elaine 333-334)

(3) „Und des sind halt irgendwie Dinge wo ich sag Kleinkeiten für andere und für mich isch des dann so en Berg.“

(Kate 510-511)

(4) „Oder ob des normal isch ob des bei andere Mensche au so isch keine Ahnung?“

(Kate 987-988)

(5) “oh schwierig”

(Angela 15)

(6) „ich krieg mein tägliches Leben einfach gar nicht mehr geregelt“

(Elaine 15)

(7) „recht unbeschwert“

(Blythe 17)

(8) „ich hab es einfach nicht gemerkt dass das nicht normal ist.“

(Blythe 811-812)
(9) „ich bin nicht krank aber schon merkwürdig“
(Ann 127)

(10) „so hat sie dann die Freundschaft abgebrochen also sie hat dann nicht mal weil ich
hab mich dann mal aufgeregt darüber weil sie bezeichnet hat mein Verhalten als nicht
norma:l oder so“
(Jane 357-360)

(11) „man da durch eine Vergewaltigung krank geworden ist“
(Jane 285-286)

(12) „und immer die Starke gespielt. Immer schön freundlich. (-) Mich können sie ja nicht
angreifen, hab ja so einen dicken Panzer an."
(Angela 55-57)

(13) „Jeder macht das ja ganz anders, denk ich ne? Jeder geht damit anders um. (4) Ich
würde wirklich gern mal einer Frau begegnen, die dasselbe hat wie ich. Ich würd mich da
gerne mal mit ihr austauschen.“
(Angela 248-249)

(14) „I sag ja i mein ohne die Therapie wär des wahrscheinlich au net so .h aber do heb i
einfach a glernt dass des nix so exotisches isch dass i trotzdem normal bin oder wie au
immer. Ja.“
(Pia 922-924)

(15) „Und ich denk das isch mein wesentliches Problem; weil ich des NIE anderschd
erfahren hat hatte ja?“
(Carla 317-318)

5.2. Some case reconstructions

5.2.1. “Until December I still had a work; then nearly everything was OK.“

(1) „Ja bis Dezember war ich eben äh war ich noch im Arbeitsleben; da war so so ziemlich
alles in Ordnung“
(Thelma 15-16)

(2) „Es ist wie 10 Stunden arbeiten für mich.“
(Thelma 83-84)
5.2.2. “I have worked as much as I could. I have simply (-) like BEAMING oneself away.”

(1) „Also unwahrscheinlich viel gemacht. Mich einfach nur (-) WIE WEGBEAMEN ne?“ (Angela 19-20)

(2) „einen dicken Panzer“ (Angela 57)

(3) „mich wegbeamen“ (Angela 20, 22 and 231)

5.2.3. “I think right now our everyday life is quite carefree.“

(1) „Also ich denke jetzt im Moment verläuft unser Alltag recht unbeschwert“ (Blythe 16-17)

5.2.4. “Because if you, in the end, have had no freedom for 48 years, except for 5 or 6 years in-between.”

(1) „Weil wenn man 48 Jahre im Endeffekt keine Freiheit hatte bis auf 5 oder 6 Jahre dazwischen mal“ (Elaine 318-320)

(2) „Kopfkino:s“ (Elaine 16)

(3) ‚Elaine: Hm; eigentlich hat ist alles über meinem Kopf zusammengebrochen. Ich bin also (-) seitdem ich 48: bin in der glücklichen Lage, (-) nach außen hin (-) ein sorgenfreies Leben zu führen, (-) einen guten Mann zu haben, (-) wir haben jetzt auch geheiratet (-) dieses Mal kein Psychopath. Karolin: Hm... Elaine: […] Nur (-) ich kann mich stellenweise nicht dran erfreu:n, ich geh so in den (-) ich krieg mein tägliches Leben einfach gar nicht mehr geregelt“ (Elaine 6-15)
5.2.5 “It was lucky, with all that I went through, that I was in Germany.“

(1) „Ein Glück dass ich bei all dem (-) Erlebten in Deutschland war.“
(Ayla 343)

5.3. Specific patterns of the interviewees' Conduct of Everyday Life

5.3.1. Hyperactivity: between running away and binding constrains

(1) „und davor mhh hatte ich schon immer noch ein heftiges Programm. Ich hab 2 Jahre eine Heilpraktikerausbildung gemacht. .h ä Hab dann Spanischkurse belegt. Bin 2 Jahre auch ganz aktiv tanzen gegangen also Turniertanzen, .h Fitnessstudio; (2) ja; ich glaube das war=s. Also ich ich sag mal so, wenn ich jetzt so zurückdenke ähhm ist das wie als wär ich so nicht nur im Dauerlauf als wär ich wirklich so durch das Leben gerannt die letzten 15 oder 16 Jahre, ohne zur Ruhe zu kommen, und was ich gemacht hab, also mein mein innerer Anspruch ist sehr hoch; also es musste schon alles perfekt sein. Ich wollte die perfekte Mutter sein und Hausfrau und .h und im Büro, das wollte ich auch alles super gut machen. Und genau so gut mh was weiß ich, wenn ich nen Sport gemacht hab, dass ich wirklich so=s Letzte aus mir rausgeholt habe. So ja jetzt jetzt sag ich weit über meine Grenzen eigentlich auch schon geschossen ne?“
(Cathrin 90-102)

(2) „Äh wegrenn, (1) aber man rennt nur vor sich selber weg. Das ist nur ein Weglaufen und es holt einen immer wieder ein.”
(Angela 475-477)

(3) „ich hab nur die Flucht in dem Beruf gefunden“
(Nicole 111-112)
(4) „ein Arbeitstier“
(Ayla 103)

(5) „ich hab .h äh von Zeit zu Zeit sogar zwei Volltimejobs gehabt. 8 Stunden Büro 8 Stunden Kellnern. Dann hab ich zwar aufs Wochenende Kellnern beschränkt; dann hab ich noch Putzstellen gehabt und .hh ich war wie so ein Arbeitstier, aber es war halt auch eine Zeitfrage."
(Ayla 103-107)

(6) „Ich hab ja immer Arbeit so Arbeit gesucht dass es lange dauert; ich habe mir nie ne Arbeit gesucht die nur 10 Minuten oder eine Viertelstunde geht; das gab's gar nicht. Selbst beim Einkaufen hat das StUnden gedauert. <<flüstert> Das war ein richtiger Wahn.>“
(Anglea 69-72)

(7) „Nicole: [...] ehm hat man dann einfach noch so .hh Strukturen in sich wo ich sag eh ich möchte jetzt des sauber haben also des Sauberkeitsgefühl is hat sich eigentlich zieht sich auch weiterhin durch; ne? In dem ganzen Leben. (--) Karolin: Und wie drückt sich das dann aus?
Nicole: Ja ob=s jetzt eh (parat) is oder eh grad was mit Hygiene zu tun hat, ne, des is also des hat sich so eingeprägt. <<Papagei trillert> des is en Muster und des bleibt einfach. Des kann ich auch irgendwie net ablegen ne?>“
(Nicole 287-293)

(8) „Julia: Es gibt schon so Situationen. Und so manche Männer oder so da krieg ich äh richtig Angst und so. Da kann ich dann fast nicht mehr. Ich fühl mich dann ganz klein und machtlos und denk ich hab den irgendwie so angezogen, also also <<sehr schnell und abgehackt; schwer verständlich> ich muss da wirklich, (Was ist heute für ein Tag? Und wie viel Uhr ist es?)> Und der kann mir hier nichts. (1) Karolin: Was machen Sie da?
Julia: Ja ruf mir eben so, mach mir halt bewusst, dass der mir hier jetzt nix kann. Was eben so für ein Tag ist so und so. Oder aber ich geh halt einfach weg. Aber das ist schon so extrem." (Julia 402-411)

(9) „Ja ich bin morgens schon also wenn dann mit (abends / schlafen) dann war nichts aufgestanden und hab dann zuerst einmal angefangen .h schnell was Frühstücken kannte ich überhaupt nicht mein Freund dann hat etwas .hh zack zack zack zack und dann angefangen hab von oben nach unten von hinten nach oben; ich hab sonst .hh mh wirklich das Klo mit der Zahnbürste rundherum gebürstet damit JA VIEL Zeit vergeht; oder auf der Arbeit marschiert acht Stunden .h Pflegeheim zwei Stunden noch geputzt, zwischendurch
zu Hause (-) auch noch daheim; ich hatte wirklich permanent zu tun. Das war eine ganz schöne Strecke nachher; ne? Das merkt man halt nur nicht. (---) Schon schwierig dann so.
(Angela 34-43)

(10) „Ja, man verdrängt es einfach; man will es nicht wahrhaben; man sagt sich, das ist nicht wahr und das ist eine blöde Erfahrung, das hast du nur geträumt jetzt; aber jeden Morgen ist dasselbe dann wieder da (-) oder abends je nachdem wenn du mal zur Ruhe kommst."
(Angela 268-271)

(11) „Waren eigentlich nur mit den Aktivitäten verbunden. .h Ich hab ä festgestellt dass ich ähm zum Beispiel Tanzsport mh war so ne Szenerie, wo ähm also ich hab ich hab eigentlich mehr Kontakte gehabt, die auf Distanz gingen. Da war ne gewisse Oberflächlichkeit drin und .h ähm ich wollte auch nicht mehr, ich wollte nicht mehr einsteigen in Beziehungen die verletzen .h die auseinander gehen. Also ich hab hab eigentlich dann (--) (...) mich auch ganz oft sehr einsam gefühlt und das hab ich dann wiederum versucht wahrscheinlich nicht zu spüren indem ich dann .h viel irgendwo immer wieder reingepowert hab."
(Cathrin 125-133)

(Anglea 85-91)

(13) „Ja, natürlich; also erst mal durch diesen Perfektionismus und diese Planung dass ja nichts anders kommt <<in Stakkato> als ich das jetzt mir vorgestellt habe>. Ich hatte mir wirklich so Strukturen für den Alltag geschaffen ganz starre; deshalb sag ich immer ich hab damals in Zwängen in absoluten Zwängen gelebt; ohne dass mir das bewusst geworden ist. Und (-) ja; und ich bin eigentlich froh dass das jetzt nicht mehr der Fall ist aber damals ich hab es einfach nicht gemerkt dass das nicht normal ist. Mit allen Zwängen egal ob ich meinen Tag organisierte ob ich hab für Prüfungen meinetwegen; irre gelernt weil ich auch der Meinung war ich ich bin eigentlich dumm;“
(Blythe 806-815)

(14) „Immer schön freundlich"
(Anglea 56)
(15) „Zu Hause die eine Hölle haha aber da äh die Maske so die andere Ayla die wollte ich ja immer in der Schule äh gut sein oder funktionieren und äh was erreichen."
(Ayla 333-335)

(16) „Karolin: Und wenn Sie so früh anfangen (Erklärung: Julia fängt gegen 5 Uhr jede Morgen an zu arbeiten), dann kann das ja auch schon mal komisch wirken. Wie erklären Sie das zum Beispiel Ihren Kolleginnen?
Julia: Ich bin halt Frühaufsteherin und was soll ich dann äh noch zu Hause rumsitzen wenn ich doch auch schon anfangen kann zu arbeiten.
Karolin: Mmh.
Julia: Und wenn ich keine Lust hab dann sag ich einfach, IST HALT SO."
(Julia 66-71)

5.3.2. Retreat: between avoidance of the world and creation of an ideal one

(Angela 17-23)

(2) „[...] dass ich mich zu hause verkrochen habe, was dann öfter der Fall war und ähmmm dass ich irgendwie gar nichts gemacht hab - also der Tag zog irgendwie nur noch an mir vorbei und ich hatte auch keine Lust irgendwie was zu machen - .h also selbst so Kleinigkeiten wie Kochen waren schon zu viel für mich. Also ich irgendwann hab ich mich lieber ins Auto gesetzt und bin zu meinen Eltern gefahren (-) als dass ich irgendwie .hh mir hätte Gedanken machen müssen was ich mir jetzt mache. Also das war schon (---) das war eine Aufgabe - die hab ich einfach nicht mehr gepackt zu hause."
(Susan 27-34)

(3) „Ich bin (-) den ganzen Tag im Bett gewesen; den ganzen Tag im A im Schlafanzug. Ich hab nicht meine Haare gewaschen, ich hab mich nicht zurecht gemacht, (-) jahhh ich bin nicht einkaufen gegangen ich hab nicht gegessen; (--) es war alles in Ordnung wenn jemand gekommen ist, dann war ich wieder strahlend .h und ähm hab mich drauf gefreut;
aber ansonsten hab ich bis 17 Uhr im Bett gelegen, kurz mal 2 Stunden Fernsehen geschaut und dann bin ich wieder ins Bett.>

(Thelma 50-56)

(4) „Karolin: Und sonst, haben Sie Freunde Bekannte?

Nicole: (---) Ne Freunde ja hier in der Strasse sind so einer; aber ansonsten hat sich hier seit ich hierher gezogen bin alles also auch dann früher das hat sich alles dann hh jahh meine früheren Arbeitskollegen hab ich alle überhaupt keinen Kontakt obwohl ich da x Jahre war? Freunde ich sag (---) ne eigentlich hh hier in B-Stadt ganz wenig. Der Freundeskreis ee hat sich Zusehens verkleinert, (---) die Gründe, kann ich gar net sagen. Vielleicht weil ich selber so zurückgezogen bin, lieber in meine 4 Wände (-) ja, (3)

Karolin: Und so in der Freizeit, was machen Sie da?

Nicole: In der Freizeit, ja also erst mal der riesen Garten da hinten der mr ist schon dann ja; gehn wir schon mal auf n Livekonzert oder (--) ja was machn wir denn noch? (1) nicht viel. Hobbys; ja Lesen. Und ich kann stundenlang sitzen und lesen."

(Nicole 225-237)

(5) „ja also jetzt ähh die ganze Zeit wo ich jetzt krank zu hause war“

(Susan 22-23)

(6) „Und das war vor (-) bevor des passiert isch anderschd. Ja? Ich war en richtiger Rebell; ich hab mei Zwillingsschwester verteidigt; (ich hab des immer gschaft / ich hab Jungs gjagt); also ich konnt mich IMMERT zur Wehr setzten ja? .h und ab dem Ereignis hat sich wirklich mein ganzes Leben völlig verändert; ich war NIE ängstlich ja? Bis zu dem Tag;“

(Carla 286-291)

(7) „hh jo danach eh habe ich natürlich jetzt auch nen Mitbewohner den Hund, um den muss ich mich dann auch kümmern das ist auch gewollt so, das ist auch ganz gut, .h ehm der zwingt mich dann auch zumindest sporadisch wirklich raus was heißt sporadisch ich muss regelmäßig mit dem raus,“

(Ann 40-43)

gegangen wenn noch jemand mit ist, dann kann ich mich da rein <flüstern> Ansonsten ahh mein Inneres graust sich.> Ich habe Panik.
Karolin: Mmh.
Thelma: Absolute Panik. Ich hab Herzrasen, schwitze und sage dann; ich muss an die frische Luft. (-)
(Thelma 279-292)

(9) „weil ich gesagt habe „ich will zurück in meine heile Welt“ und eh da fühle ich mich auch wohl (-) oder auch (---) noch mal so eine eigene Welt, weil das hat dann wieder ein Bekannter aus X-Stadt, also ((Räuspern)) der hat mich angerufen, der mich über wahrscheinlich über 20 Jahre kannte auch, der hat zu mir gesagt, bei allem was war, hätte ich mir immer also meine eigene Welt erschaffen und in meiner eigenen hEllen Welt gelebt. Irgendwo hätte mir man das angesehen, dass ich (1,5) mir eigene Verhaltensmuster geschaffen, eigene Wertmaßstäbe und nicht eben depri geworden bin. Vielleicht ist dass das jetzt, dass ich mich auch so in meine heile Welt reinziehen will und meine Welt“
(Elaine 258-267)

(10) „also so (-) unangenehme oder so Musssachen mache ich gerne in der ersten Tageshälfte, und danach wird=s eigentlich langsamer oder gemütlicher oder dann dann träume ich dann auch irgendwie vor mich hin oder ja mh wie auch immer.“
(Ann 81-84)

Karolin: Hm.
(Angela 331-338)

5.3.3. Time-out: between overwhelming memories and therapeutic confrontation

(1) „Sy: Ja man nimmt also du hast die Welt gar nicht mehr wahrgenommen. Also mich noch so ein bisschen; aber auch nicht viel; nicht, immer nur wenn es dir gerade mal schlecht geht und du Hilfe brauchtest aber .h ansonsten die Kinder auch nur noch so ja,
Sy: Und die die Umwelt eigentlich überhaupt nicht mehr. Nicht? Und das war das war ein langer Prozess dich dahin zurückzuführen. Nicht?
Blythe: Ja, und da hab ich jetzt die Erfahrung gemacht dass ganz schlimm ist es bei den Leuten die kleine Kinder zu Hause haben, denn die kleinen Kinder brauchen ja die Mutter. Und meine Kinder waren Gott sei Dank nicht mehr in dem Alter. Und das ist das ist ganz schlimm dann. Also eh ich weiß wohl hin und wieder wurde mir das so ein bisschen bewusst und ich dachte ich bin ja jetzt zu einer absoluten Egoistin geworden. Ich denk ja nur noch an mich. Und dann meinte ich ich muss also mal was für ihn und für die Familie tun und so; aber das war nicht so natürlich irgendwie. Das ging dann nicht.”
(Blythe 786-800)

(2) „Ich geh so in den (-) ich krieg mein tägliches Leben einfach gar nicht mehr geregelt. Ich geh in meine Kopfkino:s, (-) das heißt, ich hole mir irgendwelche aktuelle oder früheren (-) Situationen (-) wieder hOch und unterhalte mich dann mit denen. Und äh im Moment ist das größte Problem .hh dass ich immer mir eine Person herausnehmen muss und das ist der Weltkönig, um da ein Feindbild draus zu machen. Das kann der Nachbar von gegenüber sein, das kann der Mann von der Müllabfuhr sein, .h und geht eben auch sehr viel Aggression und Wut und ja das geht eben bis zum Hass, bis zur kalten Wut, bis zum Hass und das nimmt mich dann so ein, dass ich dann noch nicht mal nicht mehr täglich aufschreibe, was ich zu machen hab, um den Haushalt fertig zu kriegen. Das ich dann (-) das nicht schaffe, weil ich komme dann gar nicht auf die aus so verschieden unterschiedlichen Situationen raus und dann auf einmal ist es spät”
(Elaine 14-26)

(3) „Jah. Auf alle Fälle kommt alles an mich ran; ich arbeite an mir; ähm. Alles ist denk ich da; also ich denk dann noch dran was heute passiert ist .h und ähm es ist sehr aufregend; und anstrengend. Es ist wie 10 Stunden arbeiten für mich. Ich möchte wieder (-) glÜCKlich sein und deshalb bin ich auch intensiv dabei und äh möchte alles alles machen was äh was möglich ist um einfach wieder vorwärts zu kommen um wieder glücklich zu sein zu lachen .h vielleicht eine neue Partnerschaft eingehen zu können. (--)”
(Thelma 81-87)

5.3.4. Revelation: between visibility and exclusion

(1) „h Und ich denk eben au des des ehh eh des Alkoholtrinken, dieses Todmachen, dieses Gefühl net haben wollen ja? Au die Geschichte aus Y-Stadt damals; durch den Alkohol hat sich des dann immer (-) mehr verstärkt ja, da kamen die ganzen Bilder dann extrem wieder“
(Carla 120-124)
(2) „h und äh ja dann hab ich irgendwann mal gmerkt dass des mit Alkohol ja gAnz toll funktioniert. [...] Weil ich wieder lErnen mUss, (-(-) Nähe zuzulasse, Sexualität zu erleben genießen .h ja ein Mann an mich ranlassen kann ja, s’ging ja vorher nur mit Alkohohl. Jetzt natürlich net zudröhnt ohne Ende; aber einfach immer .hh um diese Hemmschwelle ähh ja (-) um die ging’s mir.”
(Carla 291-301)

(3) „und das Ding ist dass ich von Mahl zu Mahl so wo ich nicht SATT werde so und dieses oder wo ich nach einer Stunde so jetzt denke ich glaub ich kipp gleich um und dann denk ich ne du hast doch erst gegessen; so aber so ein Zittern innerlich, und so und ja. Wo ich halt dann das wohl übers Essen kompensiere. LEIDER.“
(Ayla 251-255)

(4) „Karolin: Und Freunde?
Ayla: <<laut> .h hhhh> <<leise> keine> wenige und sporadisch dann ja weil die meisten ähm haben halt Familie, und so und es ist auch ähm schwierig geworden weil die das auch nicht immer so nachvollziehen können; dass halt trotz jahrelanger Therapie jetzt, dass das nicht weg ist so. .h Und ich fühle mich dann unverstanden (-) <<ausatmen> ja> und .hh hhh das ist halt auch mühselig irgendwie so und .hh ähm ja das ist halt auch so so dieses äußerliche, ich war das erste mal hier Ende 97 und von da bis jetzt habe ich mich halt ich habe 50 Kilo zugenommen in der Zeit. Gut für mich ich weiß dass das wie ein Nebenprodukt oder Nebenwirkungen .h und das so pö und pö=Außenstehenden die nicht so mit der Thematik vertraut sind oder die das nicht so nachempfinden .h sieht das halt einfach so aus dass da irgendetwas nicht richtig läuft oder so so dieses dass ich mich augenscheinlich verschlechtert habe so ungefähr. .hh Und ah das ist h (-(-) mühselig äh äh und auch schwierig das .h zu erklären, zumal ich selber am Anfang mh die Hoffnung hatte; so ich mach jetzt ein paar Jahre Therapie und dann ist alles gut. (-) <<leise> so (-) mh (1)>
(Ayla 69-85)

(5) „Die können damit ewig und drei Tage leben. Ich kann’s nicht. Ich konnte ja nicht laufen; in A-Stadt. Ich hab ja im Rollstuhl gesessen; dann haben sie mir die Ärzte gesagt wenn du nichts machst dann sitzt du im Rollstuhl. Wo kein Mensch erst mal wusste, warum ich nicht mehr laufen konnte.“
(Angela 159-163)

(6) „dadurch hab ich überhaupt die Therapie angefangen; dass ich immer furchtbare Kopfschmerzattacken hatte. Natürlich hieß es immer Migräne. Das ist ja so das erste wo
etwas kaum erkennen. Ich hab alle möglichen Dinge gemacht gegen diese angebliche Migräne.”
(Blythe 446-449)

(7) „Weil wenn man x Jahre im Endeffekt keine Freiheit hatte bis auf 5 oder 6 Jahre dazwischen mal, .h dann (-) dann muss man erst mal lernen mit der Freiheit zu leben“
(Elaine 318-320)

(8) „verlorene Jahre“
(Jane 268)

(9) „Nicole: Mädchenhaft T-Shirt und .hh a Kleid oder en Rock findese bei mir net. (1) Im Schrank. (2) Komisch da hab ich mir schon immer Gedanken gemacht oder sagen wir mal auch was den Haarschnitt anbelange ne des is ja recht mutig und so. So möchte ich aber sein und wenn=s en anderer net sehn will der soll dann eben net herschaun. Ja des is schon gewagt in dem Alter aber .hh entweder mag mich einer so oder mag mich (-) der andere net so; ne? (---) Ja sportlich eigentlich net so von der Figur her aber ja so eigentlich ganz anders wie Frauen sich so um die 50 .hh eh wenn ich so so anschau zum Beispiel meine Gschwister sind ja älter 2 Schwestern hab ich noch und den einen Bruder, die kleiden sich bieder und ja Dirndl vielleicht und so .h Haarschnitt dann so ganz die 60er Jahre vielleicht? Hehehe .hh ja zum Beispiel auch son die Piercings des hat dann eigentlich gehießen des is Körperverstümmelung und (-) ich find=s Schmuck; des haben schon die Indianer immer ghabt und die Massais und ja. Des is für mich leb ich eigentlich jetzt in der Jugendzeit. Ja,
Karolin: Mh.
Nicole: Des is jetzt meine Jugend sagen=s mal so. Ehm spitzbübisch und ja so gar net so .h ne doch einfach erfahrene Frau. Mach auch jeden Blödsinn mit wenn=s sein muss also (--) ja ich bin net so so die ernste Person. [...] Wenn mich <<leises syllabisches Lachen> da einer gekannt hätte> der hätt gsagt also die Alte die is ja verrückt ne, aber ich bin eben so. Ich möchte so sein und .h ich=ich durft s nie sein? Und jetzt darf ich=s sein. (--)“
(Nicole 333-357)

(Elaine 372-380)
5.3.5. Commitment: between integration and denunciation

(1) „Ja bis Dezember war ich eben äh war ich noch im Arbeitsleben; da war so so ziemlich alles in Ordnung. Ich hatte meinen Rhythmus äh .hh bin sehr zeitig wach ge::worden [...]."
(Thelma 15-16)

(2) „Klar na ja nur damit man damit man es vielleicht auch versteht; also .h ehm von dem Missbrauch denk ich (-) weiß ich eigentlich so oder ee für mich ist das so richtig offenbar geworden dass das Teil meines Lebens ist erst sehr spät, und zwar ich denk erst so ja 2004 und zwar in der Zeit wo ich dann ehm e nach der Trennung dann zu meiner Familie gegangen bin; wo ich mit meiner Mutter auch sehr direkte ((Räuspern)) Auseinandersetzungen hatte, .h ehm da hat sich eigentlich ganz diese ganzen Mosaiksteinchen die ich im Laufe der Zeit so gesammelt hatte in meinem Leben haben sich da dann zusammengesetzt. Ehm jetzt rückblickend ist es so gewesen [...]."
(Ann 827-835)

(3) „Des machsch weil vielleicht geht s viele Fraue wie dir. Dass se sich so viel net eingestehe. Oder einfach verheimliche welle und gar net merke; wie se sich damit schade. Des war so des wo i denkt heb ja vielleicht .hh vielleicht geht s wirklich viele so oder hen sich viele no gar net des isch des net so offesichtlich. Kei Ahnung. Und einfach au für mich; irgendwas no mol auf de Punkt zu bringe. Weil beim also so heb ich s halt immer empfunde bei mir sind so viele unterschiedliche Sache, und i heb do no mole irgendwie en Punkt zu finde wo (--) kei Ahnung wo des für mich au vom Kopf her einfach mol wieder zusamme geht weil i immer s Gefühl ket heb des isch so vie'l, .hh und jetzt irgendwie des zu komprimiere auf auf auf ja irgendwas; kei Ahnung. Also des war des des dieses Präventions wo i denkt heb ja i denk do kann es net falsch sei irgendwas zu höre. Und weil mir halt dann durch die Therapie so viel klar worde isch wo i einfach immer wieder denkt heb warum hasch s net vorherde scho irgendwann gmacht. .hh Ware immer so Kleinigkeite wo i dann denkt heb ha sollst vielleicht aber einfach ne ach warum. Und dann hasch s wieder vergesse dann war wieder des und sell und jenes und wo dann denk
(4) „Vor allen Dingen am Anfang da hab ich unwahrscheinlich viel gelernt. Aus diesen Diskussionen und Dinge die auch mich betreffen.“
(Blythe 344-346)

(5) „Also jetzt ich hab a ganz liebe Freundin zwischenzeitlich, mit der ich über des Thema oft rede, durch den DRK, hab ich ja wir ware damals en en Team wo ausgebildet worde isch und da gab s ganz ganz super tolle Mensche die so was hat ich vorher nie kennengelernt mir .hh hhh haben uns also sie hat die Leut hab mich berührt und ich hab die Leut berührt und des war ja des hat schon irgendwas spirituelles an sich ghabt und da hab ich so eine ganz ganz ganz ganz liebe Freundin und ehm die des die des au weiß also des wisse die meiste von dem Team damals eh mir sind da so emotional zusammengewachse durch die Ausbildung .h und eh was ich da schon erlebt hab an Umarmunge, an Drücke, an Erzähl mal, und ehm wirkliches Interesse, wo da war und und eh wo mich ghalte hen und wo ich einfach gweint hab des hab ich vorher nie nie erlebt.“
(Kate 777-788)

(6) „denk ich ich kann den Menschen auch was geben mit meinen Gedichten; eh ich möchte schon irgendwie auch Mut machen dass man über diese Tiefen über des Schlimme wieder zu sich finden kann; dass man da wieder zu sich finden kann. Ich möchte da irgendwie gern Mut machen. Ich möchte den Menschen etwas geben; und dass sie sich vielleicht selbst wiederfinden auch in dieser Sehnsucht wiederfinden oder in der .h dieser Wut wiederfinden die dann kommt dass dieses Wiederfinden dass vielleicht dadurch auch selbst en Weg finden wieder zu sich zu finden. Ja.“
(Jane 826-831)

(7) „Ich würde natürlich gerne; also mein Wunsch ist es (--) dass ich es vielleicht irgendwann schaffe dass ich stabiler bin und und vielleicht selber in Beratungszentren arbeite, so dass das Ganze etwas positiver irgendwo wird äh und gerade in Betracht auf Landsmänninnen die nicht so gut Deutsch sprechen; .h und da äh das was ich auch immer gebraucht und gesucht hab, so dieses ein Beispiel; die=s Mal geschafft hat. Wo <<nuscheln> das halt> arg schwer ist so.“
(Ayla 124-130)

(8) „Blythe: (1) Aber vielleicht noch was mir bei anderen aufgefallen ist, wenn die Kontakt zu mir aufnehmen; dass ehm dass immer wieder oder störe ich sie. Oder, gehe ich ihnen auf die Nerven?“
Sy: Ja.
Blythe: Also das kommt ganz oft und ich weiß auch von mir dass es damals so war; und deshalb mach ich das so dass ich ihnen das immer wieder bestätige; nein sie gehen mir nicht auf die Nerven, wenn ich nicht antworten will dann mach ich das nicht, oder wenn ich keine Zeit hab; und versuche sie dadurch wirklich immer wieder in Sicherheit zu bringen. Das kommt ganz oft vor.”
(Blythe 999-1009)

6. Specific moments of the interviewees’ Conduct of Everyday Life
6.1. Scenarios from the victims' everyday lives
6.1.1. Work life: from pleasant to constraining forms of normalcy

(1) „Derzeit bin ich also gerade berufstätig.“
(Julia 11)

(2) „ähm Ich arbeite im Büro, bin voll berufstätig, habe drei Kinder, .h und ähm bin relativ frisch äh also vor einem Jahr in=ne neue Partnerschaft und äh habe in einem einer hochgradigen Stresssituation gelebt.“
(Cathrin 27-30)

(3) „Also ich bin ja nicht mehr berufstätig? Und ich hab 20 Jahr bei der Poscht gschafft, und hab dann vor 3 Jahre gekündigt, weil ich weil ich to@AL UNglücklich war.“
(Kate 13-15)

(4) „Letzten Wochen Monate. .h Jahhh letzten Wochen Monate. Also es ist so, dass ich dass ich krank geworden bin habe jetzt Probleme mit dem ArbeitgebER?“
(Jane 26-28)

(5) „Mh ja ich bin ehm selbständig tätig, ehm“
(Ann 11)

(6) „Ja bis Dezember war ich eben äh war ich noch im Arbeitsleben; da war so so ziemlich alles in Ordnung. Ich hatte meinen Rhythmus äh .hh“
(Thelma 15-16)

(7) „Ja: (-) also erscht mal bin ich arbeitslos im Moment,“
(Carla 12)
(8) „Ach es gibt immer so viel Arbeit. Selbst wenn man da 24 Stunden arbeiten würde würd man nicht merken, dass irgendwas geschafft worden ist. Das ist schon ok.”
(Julia 63-65)

(9) „Karolin: Und Ihre Kolleginnen?
Julia: Die lasse ich ja nicht an mich ran.; wir sind 15 junge Frauen. Alle Anfang 20. Das hilft auch nicht gerade zum ähm Betriebsklima. Zickenkrieg sag ich nur. Ich versuch aber gerade was anderes zu suchen. (1)
Karolin: Und dann auch wieder im gleichen Bereich?
Julia: Denk schon, auch wieder so im Bereich Beratung.
Karolin: Und Sie haben dann auch keine privaten Gespräche mit Ihren Kolleginnen?
Julia: NEIN.”
(Julia 34-42)

(10) „hhh hmm ja es war natürlich einfacher den Tag rumzukriegen; da war man ja beschäftigt also morgens früh raus ähm halb 5 ist dann die Nacht vorbei; ja und dann gearbeitet .hh bis um: ja 4 rum arbeite ich, bis ich dann zu hause bin ist es kurz nach 5;“
(Susan 36-39)

(11) „<<leise> Ja Verwaltungsfachangestellte oder (Verwaltungsfachangestellte)> oder Schulsekretärin in dem Bereich hab ich gearbeitet; und war glücklich. Und das ist eine Sicherheit; das strahlt eine Sicherheit aus. <<sehr leise> (Wie gesagt ...).>”
(Thelma 189-192)

(12) „Mh ja ich bin ehm selbständig tätig, ehm das erfordert das habe ich aber mit der Zeit erst gemerkt das erfordert ein großes Maß an Disziplin was Zeit anbelangt dass man dann auch wirklich ehm ja hh eh Disziplin in= in in der Form nicht dass ich mich zwingen muss zu arbeiten sondern ich muss eher mich zwingen aufzuhören zu arbeiten mir mehr Freiräume zu nehmen dass ich einfach kein Ende, eh dann finde, und eh merke dass das auch nicht gut für mich ist und (---) also da habe ich kein kein gutes eh Gespür dafür da muss ich mich wirklich noch mal disziplinieren”
(Ann 11-18)

(13) „Also die Arbeitszeiten waren, (-) die konnt ich mir mehr oder weniger, wir hatten eine Kernarbeitszeit, die war von 11 bis 4 und ähm (-) die restlichen Stunden die konnt ich mir mehr oder weniger frei legen, .h als ich eben auch äh die Einrichtung geleitet hab, den Dienstplan selber geschrieben hab und auch sehr viel Überstunden brauchte, weil ich eben viel Zeit für Elterngespräche eben benötigt hab (...) ((leise und genuschelt)). Auch keine geregelten Anfangszeiten, .hh auch keine geregelten Endzeiten, weil ich mir Arbeit
mit nach Hause genommen hab und da weiter gearbeitet hab, also gar keine keine Grenze gezogen hab zwischen Arbeit und zu Hause. (---)"
(Betty 30-38)

(14) „Also putzen. Ja viel putzen, auch duschen, (-) und zur Zeit versuch ich mir so einen Plan zu machen. Jede Stunde einteilen und den dann auch einhalten. Also so ne Struktur zu schaffen, äh für alles. Ja das versuch ich seit Neuestem. Damit halt nichts so hochkommen kann.“
(Julia 77-80)

(15) „Derzeit bin ich also gerade berufstätig. Ich arbeite in einer Kanzlei. (---) Ich versuche derzeit nur noch 10 bis 12 Stunden am Tag zu arbeiten. Ich versuch=s, früher hab ich auch 18 Stunden gearbeitet. Ja, 18; hätt auch 20 gearbeitet. Damit einfach nichts hochkommen kann. Aber das ist ja nicht so gut. Ich versuch mh versuch das halt gerade so äh in den Griff zu bekommen. Ich hab zum Glück Gleitzeit. Das erleichtert die Sache (-) erheblich. Zwing mich aber erst um 5 anzuf angen. Würd aber auch schon um 3 oder 4 anfangen.“
(Julia 11-18)

(16) „Auch so Sachen wie, und wenn der Chef heute sagt so morgen um 10 da machen wir Besprechung. (-) Äh also das ist für mich dann schon so übergriffig also ich fühl mich da gleich so machtlos. Das ist ganz doof und ich kann das wirklich nicht. Also ich kann nur so freier also so für mich arbeiten."
(Julia 411-415)

(17) „obwohl=s auf der anderen Seite ehm en hohes Maß an Flexibilität, ermöglicht, das eh finde ich auch sehr wichtig weil ich hab ziemlich viel auch mit ehm gesundheitlichen Problemen zu kämpfen und ehm für mich ehm wär=s ich kann=s mir im Moment jetzt nicht mehr vorstellen wirklich ehm 8 9 Stunden eh wirklich am Stück in=ner Firma und ja die die Zeit zu verbringen weil es einfach weil es einfach so wackelig ist auch (so von der Gesundheit); wenn ich dann mal wirklich nen ganz schlechten Tag hab dann kann ich mal die Sachen jetzt stehen und liegen lassen und hol das zu einem Zeitpunkt nach. Das ist schon toll, aber die Gefahr ist, wie gesagt, dass ich ehm mir relativ wenig ehm <<geht mit Stimme hoch> ja Auszeiten für mich nehme> wo ich dann MIR was Gutes tue; also ich geh mit mir nicht besonders sorgfältig um. Ja. (1)“
(Ann 20-31)

(18) „Jo pf:: dass ich mich mit älteren Männern verstanden hab oder so hat die eine da blöd gelästert oder .hh ehm hat da oder so da bin ich einmal vorgekommen <<sehr schnell> und da sagt sie> ACH da kommt sie ja so abfällig so irgendwie und haben sie
mich als arrogant bezeichnet, [...] und aber trotzdem es war irgendwie so immer wieder
irgendwie was (-) wo ich mitgekriegt habe dann oder über meine Kleidung haben se
gelästert .h und also ja zieht sich an wie ne Dame und so und so abfällig aber irgendwie
dann wieder und also lauter so blödes Zeug”
(Jane 328-345)

(19) „Jane: Berufsmäßig war=s halt so war ich halt jah erst mal hat ich ja ein Studium
angefangen Lehramt Grund und Hauptschule das hab ich dann aus gesundheitlichen
Gründen abgebrochen gehabt, weil sich dann also das Seelische plötzlich gemeldet hat.
Das war 1 Jahr nach der Vergewaltigung? Da hatte sich das dann gemer gemeldet so als
ich dann plötzlich vor der Klasse stand und so und so Probeunterricht da halten mussten;
da bin ich plötzlich nervlich eh zusammengebrochen dann. Dann war ich auch das erste
Mal bei ner Psychologin dann in dem Jahr das war 96 und ja hh da da ging=s dann los so
langsam so:: schleichtend so dass es mir dann schlechter ging. Das war dann Putzwut
dann irgendwie da, und dann war plötzlich Schwere da, und .hh hhh irgendwie (-) Unruhe
und Sehnsucht und (-) ich hab mich sehr alleine gefühlt so ich hab mich immer einsam ich
hab mich ganz furchtbar einsam dann oft gefühlt;
Karolin: Hm.
Jane: Ja und dann kam es dann dazu dass ich ne Umschulung gemacht habe als
technische Zeichnerin“
(Jane 129-144)

(20) „Karolin: Und haben Sie damals werden wollen? Also was war Ihr Traumberuf?
Kate: Kindergärtnerin.
Karolin: Kindergärtnerin. Und wie sind Sie dann bei der Post gelandet?
Kate: Ich hab eh a verdammt schlechtes Zeugnis ghabt, und (-) damals war die war die
Berufe schon sehr gewollt also man hat kein Chance gehabt. Hauptschul und dann noch
ganz schlecht; eh dann hab ich die Handelswirtschaftsschul gemacht, des war aber wirklich
weil ich nirgends untergekommen bin als Lehrling, .h und eh des mit dem Kind also
Erzieherin des war mit dem Zeugnis niCHt machbar also und ehm ja. Dann hat mein Vater
dann als gsagt, guckst dass beim Staat unterkommst da eh da war was in der Zeitung, und
bewirbst dich dort und ehm ja. Da hasch en sichere Job.”
(Kate 677-687)
6.1.2. Family: origin, continuity and disruption

(1) „Und sagen kann, so hier halt; es ist mir passiert, ich lebe noch, (-) mein Alter ist tot, er kann mir nichts mehr. Aber das gEht noch nicht; ich kann's jetzt wohl sagen, aber (-) ich kann's noch nicht umsetzen. Das ist das Problem.”
(Angela 282-285)

(2) „da kam dann irgendwo kamen wir dann an diesen Punkt, wo sie mir dann praktisch auch mitgeteilt hatte, dass ehm da wo ich in der Pflege war, ehm dass ich grad im sag ich mal Unterleibsbe... (Angela 282-285)

(3) „Und es war au nie en Thema bei uns daheim darüber (-) .hh ja: zu rEden; ich kam mir voll übel scheiße vor; wo man .h wo man mich dann heimgfahren hat und (...) ja? meine Mutter die hatte da an dem Sonntag kocht des weiß ich noch; und hat da ein .hh die hat das bestimmt net bö... (Carla 340-350)

(4) „Meine Mutter ist also die hat dann immer mehr den Vatter in Schutz genommen. Das macht sie glaub ich heute noch. Also ich hab jetzt keinen Kontakt mehr seit ein paar Jahren und ist alles eingeschlafen ((Räuspern)) aber des ist des was mir so im Alltag eigentlich weh tut ne? <<trillern des Papageis>> Das sich alle so so so so abwenden, und und sagen <<trillern des Papageis> eh sie wollen damit nix zu tun haben grad jetzt so in der Zeit wo=s jetzt also auch gravierend schwer für mich wird> ne?”
(Nicole 67-74)

(5) „und mein Vater hat mir eh nicht zugehört. Das ist ja schon so lange her. Warum kümm... (Nicole 67-74)
dann hab ich das auch gelassen. Naja. Und ich hab mich damit abgefunden; dass die das nicht so und jetzt seitdem ich auch weiter weg wohne, da ist das auch nicht mehr so. Also da ist mehr Abstand und solang ich das nicht anspreche da ist das auch ok."

(Julia 311-317)

(6) "wie gsagt also mir ware ja a große Familie in einer 3-Zimmer-Wohnung und letztendlich 10 Persone, und dass ich aber trotzdem halt immer mich total einsam in der Familie gfühlt hab. Also ich hab a zeil lang gedacht ich bin adoptiert weil ich einfach e ... gedacht hab bei mir isch irgendwie alles anders als bei meine Geschwister und ich fühl mich anders, und es stimmt irgendwas nicht, und e und ich kann so heut im nachhinein sagen, ich war des einsa'einsamste Kind der Welt in dieser Familie; weil au e von meine Gesch'Geschwister aus eh so was von ignoriere von von meiner Person aber des war au untereinder so"

(Kate 835-843)

(7) "Und des isch aber jetzt seit Jahren wirklich s erschte Mal seit September bis jetzt. ... Wo ich sage kann s erschte Mol Ruh. Ja. (--) Und des isch halt irgendwie ja (---) ja einfach au schwierig weil guck mei Mutter kann viel net versteh die weiß weder weder von von de Kindheit noch von meim Mann', tät i au niemals erzähl;"

(Pia 140-144)

(8) "Die Familie war sehr schwierig. Also meine Mutter erst mal damit zurechtzukommen für die war=s problematisch und für meine Schwester ... ich war ja immer ein bisschen unverständlich ich hab ja dieses Depressive so schon lange gehabt, (-) und also ich war es war schwierig so zwischen uns dann. ... aber umso mehr ICH dann irgendwie mich entwickelt hab umso mehr ging sie dann auch; sie sind dann auch auf mich eingegangen meine Mutter hat sich unwahrscheinlich Mühe gegeben und hat immer wieder mir geholfen und die hat mir unwahrscheinlich Kraft gegeben weil sie immer wieder sie hat sich gekümmert immer wieder gekümmert und hat mir Mut gemacht und hat auch an mich geglaubt dass es wieder besser wird; ... also sie war unwahrscheinlich sie war sehr für mich da also ohne sie hät ich das wahrscheinlich auch nicht durchgestanden und auch meine Schwester und meine Neffen, ... hh die dann immer wieder da waren ohne des hät ich=s nicht durchgestanden; weil des hat mir dann immer wieder Mut also wenn ich dann selbst so depressiv war dass ich gedacht hab ich will nicht mehr dann hab ich an meine Familie gedacht hab gedacht ja die brauchen mich die brauchen mich des kann ich denen nicht antun so des kann ich denen nicht antun dass ich Jetzt gehe. Des kann ich denen nicht antun. Also des hat mir dann irgendwo so en Lebenswillen gegeben."

(Jane 381-399)
(9) „wir sind wir waren dann es war keine schöne Zeit wir waren 2 Jahre es waren wirklich wie Katz und Maus, er hat mich verletzt total, ich hab dann es war wie in einer offenen Wunde rumbohren; ich hab ich konnte gar nicht so schnell gucken wie er irgendwelche anderen Geschichten hatte, das war einfach nur verletzend und da bin ich dann ja wirklich dass dass dass dass ich dann geflüchtet bin;“

(Ann 916-920)


(Mary 382-394)

(11) „Und mein Mann akzeptiert das einfach.“

(Elaine 405)

(12) „und das Problem ist, dass mein Mann mir also auch keinen Druck macht? wenn der nach Hause kommt und es ist keine Wäsche gewAschen und nicht Aufgeräumt und nicht gekOcht, .h dann sagt er einfach „Jetzt setz dich da hin. Koch Dir nen Kaffee. Ich mach was zu Essen. Und gut ist und wenns Dir zu viel ist, dann mache ich das am Wochenende.“ (2) Manchmal vermisse ich einfach diesen Druck den ich so (-) mein Leben lang hatte. (2,5) Ja und...“

(Elaine 27-32)

(13) „Das ist wirklich so. .hhh Ich weiß nicht wie ich das gemacht habe ich kann ihnen das auch nicht weiter erklären, aber irgendwie hab ich das irgendwie mit meinen Kindern so gemacht, dass die nichts davon mitkriegen. Ich hatte eigentlich ich hab meine Kinder irgendwie wie ein rohes Ei behandelt; also Angst gehabt ne? Ich hatte wirklich Angst eh. .hh Ich hab die auch nie irgendwie jetzt so großartig alleine weggelassen. Also die durften bei der Freundin schlafen oder so, .h aber .h ich musste immer wissen wo sie sind. Wenn ich jetzt mal merkte die haben nicht einen Zettel geschrieben wo sie sind oder wann sie wiederkommen dann bin ich völlig oh; .h da hatte ich wirklich Angst um meine Kinder. Ich hatte Angst um meine Kinder. Und jetzt sind sie selbständig jetzt haben sie und trotzdem muss ich immer wieder fragen (---) können.“

(Angela 124-135)
(14) „Also .hh ja und ich war eigentlich eigentlich immer dann a ängstliche Mama, viele sagen zu mir gluckenhaft hhh .hhh“
(Kate 201-203)

(15) „Also ich ich sag mal so, wenn ich jetzt so zurückdenke ähhm ist das wie als wär ich so nicht nur im Dauerlauf als wär ich wirklich so durch das Leben gerannt die letzten 15 oder 16 Jahre, ohne zur Ruhe zu kommen, und was ich gemacht hab, also mein mein innerer Anspruch ist sehr hoch; also es musste schon alles perfekt sein. Ich wollte die perfekte Mutter sein und Hausfrau und .h und im Büro, das wollte ich auch alles super gut machen."
(Cathrin 93-99)

(Angela 433-435)

(17) „Ja, also am liebsten wäre ich immer für den da gewesen. Und ähm (2) Ja, dass der immer ordentliches gesundes Essen hatte, das war mir sehr wichtig. Auch dass er sauber und ordentlich gekleidet war, also ähh so wie er das wollte, das war ihm dann nicht sehr wichtig. Und dass (---) er ein ruhiges und geordnetes Leben hat. Das hab ich nicht immer so auf die Reihe gekriegt."
(Betty 144-148)

(18) „Das ist schwer. Du willst es ja jedem recht machen, gut machen und sich selber. (1) Mama was ist denn mit dir los? Seitdem wir hier wohnen bist du ganz ganz komisch? Da sag ich hallo mein Kind. Was soll ich denn dem sagen? Ich sag dann halt ich fühl mich hier nicht wohl und (6)“
(Angela 383-387)

(19) „Und mein Sohn ist vor 2 Jahren ausgezogen. Was für mich unheimlich schwierig war; weil er doch (--) ein großer also mh er war ein großer Strukturfaktor in meinem Leben. Auch wenn er hinterher schon so halb erwachsen war,“
(Betty 91-94)

(20) „hh jetzt meine Tochter die frühstückt au morgens alleine weil ich brauch meine Zeit für mich dann. Also ich wart bis alle draußen sind, und dann geh ich mit Kaffee und Brot hehe. (-) Also ich brauch die Ruhe dann für mich einfach."
(Kate 84-87)
(21) „Ja, und da hab ich jetzt die Erfahrung gemacht dass ganz schlimm ist es bei den
Leuten die kleine Kinder zu Hause haben, denn die kleinen Kinder brauchen ja die Mutter.
Und meine Kinder waren Gott sei Dank nicht mehr in dem Alter. Und das ist das ist ganz
schlimm dann. Also eh ich weiß wohl hin und wieder wurde mir das so ein bisschen
bewusst und ich dachte ich bin ja jetzt zu einer absoluten Egoistin geworden. Ich denk ja
nur noch an mich. Und dann meinte ich ich muss also mal was für ihn und für die Familie
tun und so; aber das war nicht so natürlich irgendwie. Das ging dann nicht.”
(Betty 793-800)

(22) „<starkes Ausatmen> hhhh> ja ich kann mir überhaupt keine Partnerschaft
vorstellen. (2) ähm (3) ich kann=s mir überhaupt nicht vorstellen. (--) Total schwer.“
(Ayla 140-142)

6.1.3. Body: between silence and screaming

(1) „Also der hat mich also des war en Bekannter also ein guter Freund von meinem
Cousin, ich war in denjenigen auch verliebt, und ich war dann bei dem zu Hause, und der
hat mich dann sexuell genötigt also er hat mich genötigt ihn mit dem Mund zu befriedigen;
und des war was also was ich mit 17 überhaupt ich hab da noch nicht mal drüber
nachgedacht gehabt. Also des war für mich er hat mich total überrumpelt hat dann auch
meinen Kopf eh runtergedrückt und .hhh er hat mich gar nicht gefragt ob ich des will oder
ob ich des nich will und ich wollt überlegen ich wollt=s eigentlich nicht machen, und .hh er
hat mir überhaupt keine Chance gegeben da drüber überhaupt drüber nach zudenken und
des war nee er hat mich da richtig er hat mich richtig gedrängt er hat gemeint ja ich hätte
jetzt meinen Orgasmus gehabt jetzt würd er seinen noch haben weil er hatte mich vorher
mit dem Mund befriedigt und eh er wollt jetzt seinen Orgasmus unbedingt; des seltsame
war also ich wär bereit gewesen mit ihm zu schlafen des wollt ich; aber ihn mit dem Mund
tzu befriedigen dazu war ich nicht bereit; des war was für mich Fremdes des eh hat mich zu
dem Zeitpunkt eigentlich noch angeekelt und dann ist auch noch sein Samen in meinen
Mund gespritzt und .hh eh des war dann irgendwie ja ich konnt damit überhaupt nicht
umgehen“
(Jane 1076-1093)

(2) „Ob dies und jenes und .h hab mich total abgelenkt; total ignoriert meinen eigenen
Körper igno=ignoriert, meine Krankheiten ignoriert, alles was weh getan hat; jo des vergeht
wieder;“
(Nicole 117-119)
Karolin: Hm.


(4) „oder ja, (---) zurückgezogen lebe ich eigentlich schon jetzt; also ich hab mich eh ziemlich zurückgezogen seitdem (-) eh seit 2000 alleine und geh auch nimmer so oft in die Stadt; des Menschengewimmel des macht mich irgendwie unruhig. Ich bin dann lieber in meinen 4 Wänden, und ja, (3)"

(5) „oder ja, (---) zurückgezogen lebe ich eigentlich schon jetzt; also ich hab mich eh ziemlich zurückgezogen seitdem (-) eh seit 2000 alleine und geh auch nimmer so oft in die Stadt; des Menschengewimmel des macht mich irgendwie unruhig. Ich bin dann lieber in meinen 4 Wänden, und ja, (3)"

(6) „oder ja, (---) zurückgezogen lebe ich eigentlich schon jetzt; also ich hab mich eh ziemlich zurückgezogen seitdem (-) eh seit 2000 alleine und geh auch nimmer so oft in die Stadt; des Menschengewimmel des macht mich irgendwie unruhig. Ich bin dann lieber in meinen 4 Wänden, und ja, (3)"

(7) „Also bei mir war s schwer weil .h es kam dann halt au a Zeit wo dann natürlich bei mir ehm die Brüste gewachse sind wo mer .h Schambehaarung bekommt und ich fand des so ekelig und ich wollte ich wollte kein keine Frau werden. Auf keinen Fall. Und ich fand des so ekelig und widerlich wo ehm wo ich e Behaarung bekomme hab unter de Achseln und"
solche Dinge. und also die Auseinandersetzung mit meinem sich verändernden Körper war furchtbar; und ich konnte mich nie selbst anschauen nackt zum Beispiel”  
(Kate 876-882)

(Julia 461-467)

(9) „hab ich ja wir ware damals en en Team wo ausgebildet worde isch und da gab s ganz ganz super tolle Mensche die so was hat ich vorher nie kennengelernt mir .hh hhh haben uns also sie hat die Leut hab mich berührt und ich hab die Leut berührt und des war ja des hat schon irgendwas spirituelles an sich ghabt und da hab ich so eine ganz ganz ganz liebe Freundin und ehm die des die des au weiß also des wisse die meiste von dem Team damals eh mir sind da so emotional zusammengewachse durch die Ausbildung .h und eh was ich da schon erlebt hab an Umarmunge, an Drücke, an Erzähl mal, und ehm wirkliches Interesse, wo da war und und eh wo mich ghalte hen und wo ich einfach gweint hab des hab ich vorher nie nie erlebt.”  
(Kate 778-788)

(10) „Die können damit ewig und drei Tage leben. Ich kann’s nicht. Ich konnte ja nicht laufen; in x-Stadt. Ich hab ja im Rollstuhl gesessen; dann haben sie mir die Ärzte gesagt wenn du nichts machst dann sitzt du im Rollstuhl. Wo kein Mensch erst mal wusste, warum ich nicht mehr laufen konnte.“  
(Angela 159-163)

(11) „also ich glaub ich bin wie so ein Seismograph, also ich kann eh Sachen wahrnehmen die die andere Leute gar nicht so beobachten, is aber auch ehm ne Last mitunter. Also (--) weil man halt so dünnhäutig ist und alles mögliche aufnimmt und natürlich auch Sachen die nicht so vorteilhaft sind. Die einem dann auch wehtun und so.”  
(Ann 402-407)
6.2. The semantics of the victims’ everyday lives
6.2.1. The meaning of knowledge about sexual violence

(1) „Manches weiß ich nur zum Teil und ich wüsste gerne diesen vergessenen Teil und ich
denke mal, wenn ich das noch mal damit noch mal konfrontiert werde, aber mit so einer
Sicherheit im Rücken und einfach noch mal die Angst rauslassen und nicht
runterschlucken, sonder diese ganzen Ängste, die man hatte, die ja hinging bis (--) wo
man sagt, das ist eine Todesangst, die dann aber aufhört, dann will man einfach nur noch
sterben und hofft, dass es jetzt endlich vorbeigeht und dann ist gar keine so Adrenalin
nicht mehr da, ne? Ich weiß nicht, ich habe lange Jahre dann auch keinen
Adrenalinausschub mehr gehabt, selbst bei und jetzt jetzt bin ich nur noch schreckhaft.
Und dann dass da jemand dabei ist, dem ich dann in dem Moment das zeigen kann und
dass dann vielleicht jemand da ist, der ein tröstendes Wort hat oder irgendwie so was. (---)
Das war schon als ziemlich ziemlich durcheinander.”
(Elaine 196-208)

(2) „Was kann ich Ihnen noch erzählen?(-) Also die Schuld das ist schon so auch ein
großes Thema für mich. Also heute morgen zum Beispiel. Äh da ist mir ein Glas in der
Küche runtergefallen. Einfach so aus der Hand. Und da fühl ich mich dann auch gleich
schuldig. Also das ist dann so ich kann ja nicht mal ein Glas halten. Wozu bin ich dann
überhaupt zu brauchen. Ich bin jetzt daran schuld. Taug eh für nix anders als das. Kann
eh nur die Beine breit machen. Was anderes kann ich nicht. Man sieht es mir eh sofort an.
Warum mach ich dann nicht nur das, wozu ich nur taug? (2) Verstehn Sie das? (-) Ist das
nachvollziehbar?”
(Julia 375-383)

(3) „hh hh (--) Es ist so viel in meinem Kopf; (-) das ich alles gar nicht sortieren kann. Mh.
Wie soll ich das erklären? Ich denke, jeder sollte versuchen das Beste daraus zu machen.
Soll jeder froh sein, wenn er überhaupt noch leben dürfte. Und das jeden Tag.”
(Angela, 467-470)

(4) „ich weiß noch ich bin mit dem Putzlappen in der Hand durch mein Flur und hab noch
en Lied auf de Lippe ghabt und plötzlich musst musst ich steh bleiben wie ein Film dieser
Tag in mein Kopf abglaufe isch. Des war wirklich wie Kino. Und so was hat ich vorher nie
und nachher nie mehr erlebt. Des war; und ich wirklich ich hab sogar eh des war so en
ganz heißer Sommer 30 Grad draußen .h und als der mich auf dem Schoss hatte und ich
mein Gesicht also er hat mein Gesicht so ran gedrückt ehm schien die Sonne ganz knall
heiß auf die Backe des isch regelrecht verbrannt des die Hälfte vom Gesicht. (-) Selbst
Diese Empfing hab ich in dem Moment ghabt. Die heiße Sonne auf meiner Backe”
(Kate 434-443)
(5) „die ganzen verschiedenen Anteile”
(Jane 57)

(6) „wo sie mir dann praktisch auch mitgeteilt hatte, dass ehm da wo ich in der Pflege war, ehm dass ich grad im sag ich mal Unterleibsbereich also massive ja blaue Flecken Verletzungen ehm wie auch immer gehabt hab (...) eh dann hat das ganze so en so en Sinn ergeben."
(Ann 924-928)

(7) „<<laut> .h hhhh> <<leise>keine> wenige und sporadisch dann ja weil die meisten ähm haben halt Familie, und so und es ist auch ähm schwierig geworden weil die das auch nicht immer so nachvollziehen können; dass halt trotz jahrelanger Therapie jetzt, dass das nicht weg ist so .h Und ich fühle mich dann unverstanden (-) <<ausatmen> ja> und .hh hhh das ist halt auch mühselig irgendwie so und .hh ähm ja das ist halt auch so so dieses äußerliche, ich war das erste mal hier Ende 95 und von da bis jetzt habe ich mich halt ich habe 50 Kilo zugenommen in der Zeit. Gut für mich ich weiß dass das wie so ein Nebenprodukt oder Nebenwirkungen .h und das so pö und pö=Außenstehenden die nicht so mit der Thematik vertraut sind oder die da s nicht so nachempfinden sind .h sieht das halt einfach so aus dass da irgendetwas nicht richtig läuft oder so so dieses dass ich mich augenscheinlich verschlechtert habe so ungefähr.”
(Ayla 70-82)

(8) „Ne ich hab drüber gesprochen ich hab halt so ges also ich hab mal mit ner Psychotherapeutin gesprochen hab gesagt dass ich mich hab vergewaltigen lassen, und dann hat die gesagt ja des wär ja gar keine richtige Vergewaltigung gewesen. Reizend von ner Psychotherapeutin. .h eh ganz einfühlsam <<syllabischen Lachen> sehr einfühlsam> .hh des war dann wirklich ganz toll, ich hab eh die Therapie dann abgebrochen und hab dann lange Zeit nicht mehr da darüber gesprochen. Gar nicht mehr. Ehm ja."
(Jane 1121-1127)

(9) „Elaine: Ich hab (---) Ich hab das hat ja sehr lange gedauert, das ist ja erst in den letzten Jahren herausgekommen, dass ich überhaupt NUR TrAUma geschädigt bin. Die haben also solange wie ich in psychiatrischer jetzt Behandlung bin seit 2001 haben alle immer angenommen, dass ich ein Borderliner bin.
Karolin: Hm...
Elaine: So und das ist natürlich sehr ein Borderliner ist also eigentlich ein ganz diffuses Bild, aber da gibt es natürlich sehr viele Ansichten darüber, was mit solch einem Menschen los ist. Und eigentlich für mich war das immer, ich lauf immer über ein Schwert und muss immer zugucken, dass ich nicht ins krankhafte kippe. (-) Und dann ist das aber
auch ausgetestet worden in den letzten Jahren hat man dann in B-Land hat also so ein Spezialist für Borderliner mich getestet und hat also gesagt, ich bin einfach nur traumatisiert. (--) Da habe ich vorher nicht dran gedacht, dass ich (-) ich hab einfach nur gesagt, „Naja gut, ich habe nicht so ein ganz leichtes Leben gehabt, und irgendwo auch schieß Erfahrungen gemacht, aber das kann ja nicht viel sein.“
(Elaine 157-173)

(10) „Und ich eh hab dann vor 2 Jahren bemerkt dass ich jetzte krank bin, dass irgendwas mit mir nicht stimmt, dass ich eh bestimmte Schmerze hab, .h ehm im Muskelbereich ehm i war dann erst auf ner Odyssee von von ein Jahr lang von Arzt zu Arzt, niemand hat so richtig gwusst was er damit anfange soll, war von Multipler Sklerose bis allen möglichen Diagnosen, das hat sich dann alles nicht bestätigt. Bis ich dann bei der einzigen Rheumatologin gelandet bin die in y-Stadt isch und die mir gsagt hat es isch a Pri=Fibromyalgie,
(Kate 15-23)

6.2.2. The absent presence of sexual violence in everyday life

(1) „Ich konnt mich nicht mehr wehren; ich konnte EINFACH NICHT nein sagen. Und das war vor (-) bevor des passiert isch anderschd. Ja? Ich war en richtiger Rebell;“
(Carla 285-287)

(Julia 225-231)

(Angela 235-245)
(4) „Julia: Ich geh ja auch nie zum Arzt.
Karolin: Mmh.
Karolin: So. (1)
Julia: Also hier hab ich ne Hausärztin; sagt man so?
Karolin: Mmh.
Julia: Und die test ich seit ein ein halb Jahren. Und ich glaub die ahnt schon so was, weil die stellt auch immer so Fragen? Ob ich Bauchschmerzen habe und so. Und das letzte Mal hab ich so gesagt, dass ich komme weil es mir nicht so gut ginge. Und ja da hat sie gemeint, das sie sich das schon gedacht hätte. (---)
Karolin: Und das war ok für sie?
Julia: Ja ja. Das war gut.
Karolin: Und ist das für Sie eher unangenehm oder angenehm, wenn Sie jemand darauf anspricht?
Julia: Unangenehm.
Karolin: Mmh?
Julia: Ich fühl mich dann ertappt.“
(Julia 354-373)

(5) „ich bin ja .h en Mensch der net nur aus diesem Missbrauch besteht sondern es gibt ja auch noch ganz viele viele andere Anteile und .h des isch so en mini Teil der der s ausmacht ja; aber des hat mich natürlich geprägt, es hat mich verändert, und ich denk es hat au trotz dass was Schlimmes isch viele positive Dinge hervorgebracht. Und des isch des was man au net vergesse darf und ja.“
(Kate 1146-1151)
### 10.6. List of figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1</td>
<td>Four Poles</td>
<td>18</td>
</tr>
<tr>
<td>Figure 2</td>
<td>Dominator vs. Partnership Model</td>
<td>26</td>
</tr>
<tr>
<td>Figure 3</td>
<td>A Typology of Violence</td>
<td>30</td>
</tr>
<tr>
<td>Figure 4</td>
<td>The Magnitude of the Problem of Sexual Violence</td>
<td>52</td>
</tr>
<tr>
<td>Figure 5</td>
<td>Overview on European Prevalence Data</td>
<td>54</td>
</tr>
<tr>
<td>Figure 6</td>
<td>Overlapping of Different Forms of Violence</td>
<td>57</td>
</tr>
<tr>
<td>Figure 7</td>
<td>Changes in European Legislation 1980 – 2006</td>
<td>69</td>
</tr>
<tr>
<td>Figure 8</td>
<td>Classification of Causes</td>
<td>75</td>
</tr>
<tr>
<td>Figure 9</td>
<td>Victim Classification by Different Sources</td>
<td>87</td>
</tr>
<tr>
<td>Figure 10</td>
<td>Bourdieu’s Synoptic Scheme of Pertinent Oppositions</td>
<td>91</td>
</tr>
<tr>
<td>Figure 11</td>
<td>Pattern of Interview Guideline</td>
<td>103</td>
</tr>
<tr>
<td>Figure 12</td>
<td>Phases of Research</td>
<td>113</td>
</tr>
<tr>
<td>Figure 13</td>
<td>Researcher’s Role seen by Interviewees</td>
<td>118</td>
</tr>
</tbody>
</table>
### 10.7. Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BGSS</td>
<td>Berlin Graduate School of Social Sciences</td>
</tr>
<tr>
<td>BMFSFJ</td>
<td>Bundesministerium für Familie, Senioren, Frauen und Jugend (Federal Ministry of Family Affairs, Senior Citizens, Women and Youth)</td>
</tr>
<tr>
<td>CAHRV</td>
<td>Coordination Action on Human Rights Violations</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>IFF</td>
<td>Interdisziplinäre Zentrum für Frauen- und Geschlechterforschung (Interdisciplinary Center for Research on Women and Gender)</td>
</tr>
<tr>
<td>PTSD</td>
<td>Posttraumatic Stress Disorder</td>
</tr>
<tr>
<td>StGB</td>
<td>Strafgesetzbuch (German Penal Code)</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
With support of the Commissioner of Universities and Research of the Ministry of Innovation, Universities and Enterprise of the Government of Catalonia and the European Social Fund.