

Effects and coping strategies of childhood incest abuse victims



BS Thesis

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ID No: 13003141012

Session (2013-2017)

Supervisor: Ahmed Bilal

**DEPARTMENT OF PSYCHOLOGY, SCHOOL OF SOCIAL SCIENCES AND
HUMANITIES, UNIVERSITY OF MANAGEMENT AND TECHNOLOGY LAHORE**

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Declaration

I, Ms. Waliya Zaffar, Student No: 13003141012, student of BS in the subject of psychology, session of 2013 - 2017, hereby declare that the material printed in this thesis, titled **“Effects and Coping Strategies of Childhood Incest Abuse Victims”** is original work and has not been printed, published or submitted as research work or thesis in any university or research institution in Pakistan or abroad.

Dated: _____

Signature of Declarer

I would like to dedicate this thesis to my mentor, Miss Sidra Afzal and to all the victims of incest abuse who never got the chance to share their pain.

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Abstract

The present research investigates the coping mechanisms and effects of incest on female victims. Purposive sampling was used and six respondents aged 20-30 years old were interviewed. A semi structured interview was conducted following the interview guide, which included 16 questions, based upon direct and indirect probes. Interpretative phenomenological analysis (IPA) was used and then the analyzed data was transcribed, coded and main themes were extracted. Two major themes emerged from the data that was transcribed. The first one is coping strategies which included defense mechanisms, emotional coping, social support and family support. Denial and minimization were the major defense mechanisms used by the participants. The second theme is the effect of incest abuse, which further includes trust issues, psychological effect, emotional effect of incest abuse and fear of being labeled. However, need of disclosure and awareness were major takeaways from the study.

Keywords: incest abuse, coping, effects.

Introduction

Child sexual abuse is an ever increasing social issue which afflicts immense psychological, physical, emotional, and social pain to the victim. The prevalence of sexual abuse is ever increasing and therefore, merits attention and the need for it to be addressed is ever more. One out of five children is victims of child sexual abuse (WHO, 2006). According to the World Health Organization (2006) child sexual abuse is explained as the involvement of a child in sexual activity against their will for which the child is not yet developmentally ready for. These activities include exposure of sexual anatomy, hand-genital, hand-breast to mention a few (Finkelhor, Hotaling, Lewis, & Smith, 1990). The sole purpose of these activities is to obtain sexual gratification for an adult or the perpetrator (Johnson, 2004). Sexual abuse is further categorized into 2 categories, *contact abuse* and the *non-contact abuse* (McGarry & Buckley, 2013). Contact abuse includes all the physical interaction with victim for example touching a child's genital area, breast or oral sex. Conversely, as the name implies, non-contact abuse includes sexual activities that do not include any physical interaction but do carry sexual innuendo and connotation which include but are not limited to making sexual jokes, exposing the child to sexual content, and encouraging children to masturbate in front of the perpetrator etc. (Andrews, Corry, Slade, Issakidis, & Swanston, 2004; McGarry & Buckley, 2013; Jillian, Cotter & Perreault, 2013). The present research is concerned with contact abuse rather than the non-contact abuse. It focuses on highlighting all the coping strategies that the incest abuse victims use to deal with the sexual abuse.