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## PSYCHOSOCIAL COPING ON THE CHILD SEXUAL ABUSE. QUALITATIVE ASSESSMENT OF RELEVANT VICTIMOLOGICAL CASES

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**Abstract.** Child sexual abuse is one of the most despicable crimes perpetrated against the human person. This usually takes place in a context where sex is manipulated to exert power and humiliation on the most vulnerable: the children. However, from the perspective of the victims, sexual abuse involves a variety of responses aimed at combating their disastrous consequences. In this way, the present research tries to understand this phenomenon, questioning about the psychosocial coping strategies in a group of 10 girls with clinico-social symptoms in remission and without remission, intentionally selected and whose analysis is made from the qualitative methodology applied to the case study. The results highlight the importance of the mother in the victims' recovery, insofar as she believes in their testimonies, denounces the criminal act, accompanies them emotionally throughout the judicial process and accepts the assistance services. In this way, she may have to face the family system when it is placed on the side of the aggressor. On the other hand, the intervention of the Residential Care Centers as a protection resource and the appearance of unexpected positive events in the daily life of the victims are also valued. In conclusion, the confrontation of child sexual abuse is not always given by planned elaborations, but by intuitive reactions of the victims' environments, depending on the meaning they attribute to this grievance, which affects their choice to be on the victims' side.

**Keywords:** child sexual abuse, coping strategies, psychosocial resources, psychosocial remission.

## ESTRATEGIAS DE AFRONTAMIENTO PSICOSOCIAL EN EL ABUSO SEXUAL INFANTIL. VALORACIÓN CUALITATIVA DE CASOS DE RELEVANCIA VICTIMOLÓGICA

**Resumen.** El abuso sexual infantil es uno de los delitos más execrables que se perpetran contra la persona humana. Este generalmente tiene lugar en un contexto donde se instrumentaliza el sexo para ejercer poder y humillación sobre los más vulnerables: los niños. Sin embargo, desde la perspectiva de las víctimas, entraña la puesta en relieve de una variedad de respuestas orientadas a combatir sus nefastas

consecuencias. De este modo, la presente investigación busca comprender este fenómeno, interrogándose respecto de las estrategias psicosociales de afrontamiento observadas en un grupo de 10 niñas con sintomatología clínico-social en remisión y sin remisión, seleccionadas intencionalmente y cuyo análisis se realiza desde la metodología cualitativa aplicada al estudio de casos. Los resultados destacan la importancia de la madre en la recuperación de la víctima, en la medida que cree en su palabra, denuncia el hecho delictivo, la acompaña afectivamente a lo largo del tránsito judicial y es receptiva con los servicios asistenciales dispuestos en su favor. En esta tarea es posible que se enfrente al sistema familiar cuando éste se coloca de parte del agresor. De otro lado, la intervención de los Centros de Atención Residencial como recurso de protección y la aparición de sucesos positivos inesperados en la vida cotidiana de las víctimas son también valorados. En conclusión, el afrontamiento del abuso sexual infantil no siempre está dado por elaboraciones planificadas, sino por reacciones intuitivas de los entornos de la víctimas en función del significado que atribuyen a este agravio, lo que incide en que opten o no por estar de su lado.

**Palabras clave:** abuso sexual infantil, estrategias de afrontamiento, remisión psicosocial.

## **Introduction**

Children and adolescents see their lives disturbed by the cruelty of those who, using deception, threats and force, subdue them to sexual abuse of various kinds.

Indeed, sexual abuse is an execrable crime, even more when the victims are minors. For this reason, society is called upon to fight head-on against this crime and, in order to do so, it must not lose sight of the victims whose approach requires both knowledge of the personal and social impact that child sexual abuse has and the most suitable means that pay in its prevention or, in any case, in the psychosocial recovery of the victims.

Thus, this research seeks to know and understand coping strategies manifested in the social environments of a group of children offended by sexual abuse, emphasizing those resources expressed by their family environment. Consequently, it recovers such experiences and places their meanings at the disposal of those who suffer the consequences of this crime and of those who take care of its preventive or recuperative approach.

### ***Approach***

Professionals dealing with sexual abuse face various interdisciplinary situations aimed at seeking the psychosocial recovery of victims who, according to data from the United Nations (UN, 2006), 1 in 5 are women and 1 in 13 are men.

Sexual abuse not only causes alterations in the mental and physical health of the victims, but also disrupts their psychosocial stability and, therefore, propels a permanent process of reorganization and adaptation of their lives. (Pennaert, 2013)

According to data from the Peruvian Ministry of Women and Vulnerable Populations (MIMPV, 2011), approximately 2 out of 10 Peruvian women under the age of 15 have suffered some form of sexual abuse. Similarly, between 2000 and 2017, the Public Prosecutor's Office of Peru (2018) reported 263,584 cases of sexual abuse at the national level. Particularly, between 2013 and 2017, 76% of the reports corresponded to sexual abuse of minors.

This disastrous reality calls for continuous development of research work of a different order and level of scope that will make it possible to know and understand the victims, especially children. One way to do this is to highlight the coping strategies

developed around them, so that they become alternatives that will guide those who are harmed and the professional teams in the best approach to the consequences of this crime.

With these premises in mind, we ask ourselves the following research questions:

What relevant coping strategies can be distinguished around child victims of sexual abuse?

### ***Objectives***

The overall objective of this study is to understand the psychosocial coping strategies of victims of child sexual abuse.

Specifically, it aims to identify and understand the strategies undertaken by the environments of child victims with and without psychosocial remission.

In this task the presence of clinical symptoms has not been emphasized, considering that sexual abuse can produce symptomatology of diverse nature, but it has been specially repaired in the psychosocial circumstances that are woven in favor or against the minors, which directly concerns the disposition or not of social and institutional family support.

## **Literature Analysis**

### ***Early childhood, second childhood and adolescence***

Childhood is that stage of life that extends from birth to the age of 8 years old, where children are most influenced by their environment and where important and critical evolutionary changes take place. (UNESCO, n.d.; UNICEF, 2013).

With the passing of the years the child acquires greater independence and skills that enable him to better interact with the environment, which means his entry into the second childhood that takes place between the ages of 6 and 11 years old approximately. At the end of this stage, adolescence emerges, which will give rise to a series of biological transformations such as the development of the circulatory, respiratory and reproductive systems, as well as the appearance of psychological characteristics such as self-exploration and the search for identity. Both early and late childhood and adolescence belong to a formative stage that at the end allows the passage to adult life itself. (Mansilla, 2000).

### ***Sexual abuse***

Sexual abuse involves a variety of physical and other non-physical contacts that range from conduct to sexual penetration, including touching, oral sex, erotic storytelling, exhibitionism or exposure to pornography among others. All these acts violate respect for privacy and freedom and are intended to subdue and harm the victim. (Calvente, 2009)

Save The Children (2001) highlights some categories of sexual abuse of interest in this research. On the one hand, sexual abuse itself, defined by any form of physical contact with or without carnal access that may include vaginal, oral and anal penetration, digital penetration, caresses or explicit sexual propositions that take place without consent and do not necessarily involve explicit violence or intimidation. When sexual abuse involves violence and intimidation, it becomes sexual assault.

### *Child sexual abuse in Peruvian legislation*

Under Peruvian law, minors lack consent, as their stage of development does not allow them to properly discern responsibility for their actions or the other multidimensional implications of sexual intercourse with another person. However, legal doctrine accepts the possibility of consent in minors between 13 and 18 years old.

The sexual conduct sanctioned by the Peruvian Penal Code is expressed in article 173, which provides for the punishment of anyone who has carnal access by vaginal, anal or oral means or performs other acts similar to these.

Further on, with regard to acts against modesty, article 176 of the same legal system establishes that a person who, without the purpose of having carnal access, performs on minors under fourteen years of age or obliges them to perform on themselves or a third party, improper touching of their intimate parts or libidinous acts contrary to modesty is subject to a custodial penalty.

Therefore, sexual abuse is severely punished by the Peruvian State, which stipulates custodial penalties ranging from 5 to 10 years in the case of acts against the modesty of a minor, and from 25 to life imprisonment in the case of rape of a minor, depending on aggravating factors such as the position, charge, family bonds of the aggressor, as well as the age and psychological and physical damage caused to the harmed minor.

#### *Addressing the reporting of child sexual abuse*

Once the report of sexual abuse has been made, the Public Prosecutor's Office, as the body that prosecutes the crime, initiates a retinue of investigation actions established by Peru's New Procedural Code.

In this way, the harmed child is evaluated by the forensic doctor and then relates the harmed child in a single interview conducted at the Gesell Dome, which is a facility designed to provide as much privacy as possible and, at the same time, ensure the legal procedural usefulness of the victim's statement. As Ruiz (2011) points out, the purpose of the single interview is to avoid the revictimization of the child, since facing the judicial process entails a source of secondary victimization that accentuates the psychological damage.

At the end of the interview, the minor will leave the dome and will be evaluated in the psychological office of the Institute of Legal Medicine, being especially interesting to know the state of their mental functions, personal history and emotional problems, among other elements of examination.

#### *Consequences of sexual abuse*

Children must be within the protection of their homes, preparing for adult life through play and interactions in the family and school, but when sexual abuse occurs the following effects can be noticed, as Calvente (2009) points out:

- a) at the psychological level: emotional instability, depression, self-harm, difficulty in integrating their development and embodiment, confusion, shame, guilt.
- b) at the sexual level: inhibition, integration problems in sexuality.
- c) at the social level: withdrawal, lack of communication, isolation, distrust.

It is also possible to find other impacts such as nightmares, eating disorders, loss of sphincter control; flights, low performance, hyperactivity, low academic

performance; fear, anxiety, aggressiveness, rejection of one's own body, post-traumatic stress disorder; sexual knowledge inappropriate for age, compulsive masturbation, exhibitionism; deficits in social skills, behavior problems (UNICEF, 2001).

In any case, according to UNICEF, the impact of sexual abuse should lead to the assessment of each victim in particular, which will depend on a number of variables such as:

- The identity of the aggressor, being more complicated when there is an affective relationship between the aggressor and the victim.
- The age of the aggressor seems to have a greater impact from the perspective of the use of power.
- The existence of previous abuses and maltreatment histories, as well as the duration of the abuse, being all the more serious when the abuse has been prolonged.
- The plurality of aggressors.
- The personality of the child victim as well as his assertiveness, his social and cognitive abilities that can contribute to the modulation of the experience of abuse.
- The use or not of physical violence or threat.
- The reaction of the child's immediate environment when the abuse has been discovered, lessening its harmful effects if the victim has credibility and family support; and, in that sense, when quick and effective measures are adopted for the provision of social support.

### ***Prevention factors and coping strategies for sexually abused minors***

Sexual abuse is not a chance or haphazard reality, as it directly or indirectly involves various factors that damage the integrity and alter the victim's life's normal course.

In this sense, prevention will have to do with the risk factors' neutralization in a primary, secondary and tertiary prevention context, as proposed below by Save the Children (2001):

#### *Primary prevention:*

It occurs when the abuse has not happened and is related to a set of strategies from society (community, family, school and other institutions) to prevent it and, in any case, detect it early. "Any primary prevention program should address child's rights, affective-sexual education and good treatment promotion." (p. 96)

#### *Secondary prevention:*

It is the intervention point for those at risk of sexual abuse, e.g. institutionalized children, children with disabilities, children living in poverty, children of young women, children living in dysfunctional families or who have previously experienced abuse.

#### *Tertiary prevention*

It is the set of actions carried out with the abuse victims, providing them with self-defense, treatment and rehabilitation guidelines, empowering them so sexual abuse does not happen again.

It should also be considered that in tertiary prevention, the child's negative identification can have two construction and expression forms: the first is that the child grows up elaborating its identity according to the abuse, which increases its revictimization and makes it vulnerable to recidivism; the second is that the child grows up identifying with the aggressor, which can lead to recidivism and transgenerational repetition of sexual abuse. Another tertiary prevention's objective, according to Save the Children (2001), is to avoid the victim and the aggressor's social stigmatization which leads to social rejection and isolation.

### ***Revictimization***

The crime's impact on the victims is not only presented as their rights transgression and the consequent alteration of their lives; in effect, the harm's repercussions caused by sexual abuse, as noted above, encompass the whole spectrum of the child's physical, psychological and social development. This first impact is known as primary victimization or first victimization.

Consequently, the medical-forensic evaluations and interviews that the minor victim must undergo in order to constitute useful evidence for the prosecution and eventual criminal accusation of the aggressor, imply discomfort and victimizing impacts on the aggrieved in their contact with the police, prosecutorial and judicial systems. These repercussions fall within the revictimization's framework or secondary victimization and are related to the treatment received by justice officials and the usually lengthy period of fiscal investigation and prosecution.

On another level, it should be considered that if society and the family directly or indirectly stigmatize the victim. It is likely that they will have difficulties in their social integration and limitations in the recovery of the normality of their daily life, in this case facing the phenomenon of tertiary victimization. (González, 2011)

Thus, as part of the tertiary revictimization, Paredes (2015) highlights the negative attitudes of the victim's family and social environment when they lose hope, beyond the gravity of sexual abuse, in the human capacity for recovery of the aggrieved.

In order to avoid or reduce revictimization, offices such as the Victim and Witness Assistance Unit (UDAVIT) and Assistance Centres such as the Women's Emergency Centres (CEM) and the Tutelary Investigation Division of the Ministry of Women and Vulnerable Populations (DIT) have been created to provide victims and their families with psychological, social and legal services.

The DIT, now called the Special Protection Unit, provides protection to abandoned minors. Thus, through multidisciplinary teams, the family, psychological and social situation of children and adolescents is investigated, and protective measures such as: care in the home, foster care by a family, participation in a special foster care service or program, and comprehensive care in a Residential Care Centre are available. If required, pending the conclusion of the guardianship investigation. At the end, minors are reintegrated into their family through their professional services support or, otherwise, the DIT promotes the guardianship process and procedural follow-up in the courts. (MIMPV, n.d.)

In addition to this, educational institutions play a transcendental role in the child's recovery who would have to continue studying and developing school's dynamics and richness that could be interrupted by the abuse's effect.

As a result, the Ministry of Justice free legal services are particularly noteworthy, which, by the victim's request, are eligible for legal sponsorship throughout the initiated fiscal or judicial proceedings. Its aim is not to leave children and their families alone in the transit of a normally lengthy and complex legal process.

In any case, it should be noted that there is consensus among specialists that the victim's mental health preservation is closely related to the support resources' rapid intervention (Suárez, 2000). This encourages believing in the aggrieved person's word and to recognize the victim's condition (Pennevaert, 2013): breaking the secret is challenging them, meaning to face the shame and the threats coming from the aggressor, among many other things. (Laing y Kansler, 2002)

Paredes and Vásquez (2015) consider that psychological and social intervention in sexual abuse is, regardless of its recent or remote externalization, an emergency that requires the participation and linking of all possible resources in favor of the victims, highlighting the family's position, especially the mother, whose attitude must be supportive, protective and always in favor of the minor and not the committed. By the way, Lippert, Cross, Jones and Walsh (quoted by Pereda, 2011) find that maternal support not only protects the child psychologically but also judicially helps to prevent retractions.

In the latter case Sas et al. (cited by Pereda, 2011) highlight the fact that in addition to the child's maternal support importance of maternal, there is a positive impact of a guilty verdict on the victim's emotional stability.

### ***Resilience and coping in child sexual abuse***

#### *Resilience*

According to Cyrulnik (quoted in Itad Sistémica, 2015a [video]) he understands resilience as the recovery conditions within development after a traumatic agony. This implies a series of internal and external resources of the child. In the first, temperament, attachment style, language as well as elements prior to language acquisition stand out; in the second, the family's role, community and culture stand out.

Studies by Echeburua, Lopez, Kendall-Tackett, Williams, Finkelhor, and Stevenson show that approximately one in three victims do not necessarily have psychopathological symptoms, which may indicate an apparent overcoming of the abuse experience. Echeburúa and Guerricaechevarría propose understanding the victim's resilience variables mediating between sexual abuse and psychosocial problems: variables in relation to the victim, to the aggressor, to the family and the social environment. (Pereda, 2011)

No one can live without interacting with others. A child alone cannot be resilient, because resilience is built in relation to the other person: through someone who gives security and expresses confidence and support. This relationship can reside in the home that fulfills its support role, where the child stops being mistreated, to be in an affective environment.

According to Cyrulnik, anti-resilience factors are affective impoverishment in relation to the child, humiliation and the fact that the child does not find meaning in what happened to him/her (experience of nonsense). Therefore, the child's recovery intervention will try to help him or her make sense of what he or she has experienced. (Itad Sistémica, 2015b [video]; Cyrulnik, 2001)

This task can be carried out by a resilience tutor who helps the child, as Pereda (2011) indicates, to make sense of the abuse experience, supporting it in its recovery and social integration. Normally the resilience tutor is the child's mother or a relative, but in the absence of one or another, it is the professional dealing with the case who could perform such a role.

When biological and social parentalities cannot fulfill their functions, it is time for community parentality to appear, according to Barudy (in Itad Sistémica, 2015b [video]), i.e., when others take care of what the parents are not competent in, thus allowing new opportunities for the development and well-being of victimized children.

Coping. Unlike resilience, coping refers to the most common strategies' repertoire with which, according to Folkman and Lazarus (cited by Botero, 2013), a person faces daily life situations, which does not necessarily imply the problem's solution, but the reference to how the person faces it in the emotion planes, the problem management and the avoidance of the stress causing problem.

When referring to the strategies the person uses when overcoming the problem, it is preferable to categorize it as positive coping or resilient coping, although for Cyrulnik (quoted in Itad Sistémica, 2011a [video]) coping is linked to strategies and skills for coping with problems; whereas resilience implies a narrative change.

In Lazarus and Folkman's model, —those who consider that it is not the situations themselves that provoke an emotional reaction, but rather the individual's interpretation of them—, coping is defined as "the continuously changing cognitive-behavioral efforts made by the subject to handle internal and/or external demands, which require the individual adjustment or adaptation" (quoted by Lizarazo, 2014, p. 23). Based on this transactional model, plus the contribution of other authors, Lizarazo concludes that coping takes into account the conscious and intentional affective, cognitive and psychosocial efforts that a person uses to control stressful situations in order to reduce or eliminate them.

## **Method**

### ***Procedure***

It is a qualitative study which develops the analysis of 10 victimology-relevance cases corresponding to girls and teenagers victims of sexual abuse, assessing them from the researcher's experience for 9 years as staff psychologist of a support public institution to victims of different crimes in the city of Arequipa, Peru.

Arequipa has around one million inhabitants, its important touristic flux, mine production and agricultural activity give it a demographic and economic dynamic which have set it up as the second most important large city in the country; however, this city has some of the main problems of its social fabric: domestic and sexual violence.

In effect, the regions of Lima, Arequipa (included the city of Arequipa), Lambayeque and Junín represent more than 50% of the reported cases for sexual violence in the whole nation. (Public Ministry, 2018).

About the reflection of this reality, professional notes and references have been considered, emphasizing the corresponding ones to the coping resources perceived in the victims and their families during the psychological care approach made by the



researcher as psychologist specialized in victimology matters, whose impressions about them were not necessarily expert, because in this research, the starting point is that, once the medical and psychological-forensic assessments have been carried out, the victim children are found facing to familiar and social events which are pretended to be revealed in the prosecutor's investigations and in the criminal proceeding.

In a second part, a professional formed in legal and juridical affairs (lawyer) has been interviewed as prosecutor with experience in the processing of crimes related to child sexual abuse.

This person was requested to relate some cases she has directly addressed or known indirectly through her law firm but that she estimates in general significant, whatever for the improvement level and important risk seen in the victims and their families (improvement/risk criterion), the complexity its procedural approaching and the possibility of participation in the criminal investigation (criterion of procedural complexity).

In other words, it was requested to this professional to consider, first, the cases in which she has perceived favorable recovery conditions (remission symptoms)<sup>\*\*</sup>; and secondly, the cases without remission, that is to say, those cases in which the conditions of the injured parties and their environments have difficulties which place them in psycho-social risk.

The same qualitative criteria were considered by the psychologist who, along with the prosecutor-lawyer, give their impressions as underlying ideas in each case they tell, the ones that are involved in the understanding of the familiar and personal experience of the minor victims, after the outsourcing and denounce of the sexual abuse.

With the aim of specifying if the cases chronicled really corresponded with the ones in which improvement was experienced, those in which there was suspicion of the presence of a temporary asymptomatic period which usually happens between the commitment of the offense and the subsequent apparition of the symptoms (inter-cyclic period) were filtered. For this, the researcher has considered those relates which suggest a minimum time of legal or psychological approach superior to 6 months or, alternatively, those which have ended with the judgment and sentence of the corresponding cause (temporary pertinence criterion).

In this research, the clinical analysis subject to a detailed psychological assessment through the opinion of experts who get diagnosis conclusions prior a qualitative and psychometric research have been omitted. On the contrary, it was preferred to take general impressions of a justice operator (attorney), because the criminal investigation depends on him and, in that interim, he requires all evidence involving the ones coming from the victim to make the tried known them and, in this way, require the penalty of the criminal conduct before the trial.

For these reasons, this research does not raise the term of recovery, nor analyzes the cases chronicled depending on the permanent absence of clinically significant symptoms and signals, but of a global improvement state which allows or not the child

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<sup>\*\*</sup> Knowing that the remission refers to the attenuation or disappearance of the symptoms or the signals of a disorder manifested in case of an improvement of the psychic conditions. (Dictionary of Psychology by Umberto Galimberti, 2002) In this research, the remission has to do with the improvement and not the remission as a state of psychosocial risk; that is to say, the vulnerability of the child victim because of scarcity or insufficient provision of support family and social resources.

to live with his social support systems and, in this way, to participate properly in the proceedings the legal treatment of his causes needs, in which there are support and limiting elements that this research tries to determine.

Thus, 5 stories of favorable cases and 5 stories of psychosocial risk were obtained, addressed by the Peruvian justice system, the ones which are presented from the elaboration of the underlying ideas and the psychosocial situation implicit in them.

**Processing**

Once the 10 chronicles are obtained, we have proceeded to present a summary of each one, mentioning the most relevant elements characterizing them depending on the research objectives (see Table 1).

The personal data of the injured parties mentioned in the chronicles have been held in reserve, preferring, due to confidentiality reasons, to use any identification name.

Then, a summary of the considered cases has been made and, with these elements, interpretative elaborations presented in a narrative way have been proposed (see Table 2). Such elaborations try to evidence the coping strategies and the underlying ideas associated to them in order to know the sense of the favorable and unfavorable decisions and actions of the environments where the victim children are developed.

Afterwards, the interpretative content of the narrative summaries is widened to finally discuss them along with the global findings of this research in the section Discussion and conclusions.

**Results**

The corresponding tables to the data processing are presented below (Table 1 and Table 2).

Table 1  
*Summary of the characteristics of the proposed cases*

Case	Circumstances	Professional	Underlying idea
Regina (8)	<i>In circumstances in which her mother decides to go out with a friend of work, the girl is sexually abused by him.</i>	Psychologist	The mother provided everything she could to her daughter, but she seemed very incredulous about the danger she exposed her daughter.
Luz (4)	<i>Under the pretext of playing, she is improperly touched many times by her grandfather. Finally, he infects her with a</i>	Lawyer	The mother had been abuse victim by the same attacker when she was a child, but she did not still suspect what was happening with her

	<i>sexually transmitted infection.</i>		daughter.
Karen (11)	<i>After the death of her mother, the girl is under her father's responsibility, who did not wait long to sexually abuse her.</i>	Lawyer	After the death of her mother, the girl is at the mercy of the violence of her father.
Andrea (13)	<i>Her uncle touched her improperly until her mother found it out.</i>	Psychologist	The mother always supported her daughter in all the proceeding: judicial, familiar, school.
Marisol (12)	<i>With the aim of bringing home income, Marisol helped a subject in a walking business; after a while, she fell pregnant by him.</i>	Psychologist	While her state of pregnancy was increasing, the minor was feeling more tired, wishing only to go back with her mother, her brother and her stepfather.
Greta (15)	<i>Since she was a very small girl, she was sexually assaulted by her father, and, over time, she pretends to change the version of these events.</i>	Lawyer	The minor was confused because her father was her attacker and she was also being pressured by her family in order to not incriminate him.
Inés (11)	<i>His uncle takes advantage of Inés and abuses her when she was left in his care.</i>	Psychologist	The mother believed that moving her away from her attacker, without receiving professional support and forgetting the criminal proceedings was enough. She wanted to protect the aggressor.
Lilian (12)	<i>In circumstances her big brother visited her, Lilian was improperly touched by him.</i>	Psychologist	The mother did not believe her daughter's version, she blamed her daughter from what it could happen. The father felt guilty and he commiserated.

Donna (11)	After passing the medical assessment, it was found that the girl was pregnant.	Psychologist	Despite the minor has indicated other man as guilty, the mother seemed to hide something else.
Solange (8)	She told her mother that her father has improperly touched her for some time.	Psychologist	The girl's father victimizes before her so that she did not tell what happened.

Note: Source: Own creation

Table 2  
Confrontation Strategies by Resulting Condition

Case	Strategies	Narrative	State
1. Regina	.denunciation .credibility in the minor .medical support .psychological support .maternal accompaniment. .continuity of the process .parents reconcile with each other and support their daughter. .birth of a brother .recovery of her daily life.	<i>This is not going to stay that way, we will collaborate with the justice system and my daughter will succeed, but in this I will need professional and family support so that my daughter recovers her normal life as soon as possible.</i>	.referral Although the physical and psychological injuries of Regina's abuse were severe, she resumes her schooling, showing an eagerness to go to school, to reunite with her classmates. The girl also expressed excitement about the newest member of the family - her newborn brother - talking about him and playing with him since her mother was pregnant.
2. Luz	.denunciation .hosting .assistance support .away from the aggressor and the weak family environment	<i>The girl will be better away from the abuser and his precarious and unsafe family environment.</i>	.referral The girl receives support from the shelter, where educational, psychological and care services are made available to her. Luz had a quick integration and although she missed her mother, grandmother and little sister, she was able to adapt to her new environment, full of novelties: children to play with, recreational tasks, regular feeding hours and, above all, good treatment.
3. Karen	.denunciation .assistance support	<i>The girl will recover away from the abuser and her weak family environment. She will</i>	.referral The girl expresses joy at the presence of the tax authority, appreciates the

	<p>.hosting .away from the aggressor and the weak family environment .communication in mother tongue (Quechua) .relationship of support and friendship with justice operator.</p>	<p><i>improve by receiving assistance services and creating new bonds of empathy in a human relationship that may well include justice workers. She will feel better understood is she also expressed herself in the idiosyncratic possibilities that her mother tongue provides.</i></p>	<p>support available to her. She usually talks a lot and is happy when her new friends (prosecutor, care staff) visit her now. She talks a lot about what she wants to do in the future.</p>
4. Andrea	<p>.denunciation .welfare support and the search for legal support .permanent accompaniment of the mother .impulse of the legal process .credibility and not guilt. .mother defends the girl and her cause before her own family .parental reorganization of tasks and activities for more time with your children.</p>	<p><i>We will offer all our support to our daughter. We will even fight against the family that does not believe in her or minimizes what has happened to her. This cannot stay that way, we will support the work of justice. Our daughter has to make her normal life, developing and being happy. We will be with our children, giving them more time and care.</i></p>	<p>.referral The younger one was more attached to her mother, the two became stronger and more friends. Thus, Andrea used to tell Mom everything that happened to her and the mother listened to her patiently. She also checked her homework and was more aware of how her daughter was doing at school.</p>
5. Marisol	<p>.parents seek the recovery of their daughter's daily life (continuity of studies and positive family activities)</p>	<p><i>The girl needs support, she needs her mother and the baby needs both. In this task the impulse of his stepfather can help a lot, who assumes a true protective and director role, strengthening the mother and fulfilling the parental functions with the aggrieved one. He is now husband, father and grandfather...</i></p>	<p>.referral Marisol has found support in her mother and stepfather, reconfiguring her life in the maternal role and at the same time in her role as daughter and sister. She feels good next to her baby, whom she cares for with care. In the same way, she is looking forward to returning to school and continuing her studies.</p>
6. Greta	<p>.denunciation .assistance support .temporary hosting .economic and affective support of the stepfather towards the minor's mother, the mother and her daughter. .awareness and improvement of the mother's attitude .participation and involvement with the fiscal and judicial</p>	<p><i>It is necessary to avoid that your father goes to prison, in addition you are already well...</i></p>	<p>.without referral Greta, along with his family, rejected the continuity of psychological and social assistance until his aggressor was captured and, with this, the need for his participation in the investigation process that had been pending for years. Greta was now trying to exonerate his father, drastically changing his version of what had happened.</p>

process

7. Inés

.confused position of mother and other relatives over time  
.direct and indirect pressure from the mother, the accused and the family for a change of version  
.dismissal of the sustained assistance service  
.conflict of loyalties

*We are leaving, there is nothing more to say to the authorities, that they evaluate, but we will not do anything else that contributes to the imprisonment of your uncle..., poor of his family.*

.without referral  
The mother delayed in deciding for her daughter or brother (aggressor) did not favor the overall recovery of her daughter, who was overwhelmed by what happened and confused about her future.

8. Lilian

.the mother was ambivalent about the continuity of the criminal proceedings.  
.fleeing to protect the accused.  
.the rest of the family wanted to protect the accused.

*He must be lying, what he says is not possible, I am not mistaken and nobody is going to make me change my opinion [elaboration of the mother]" ... "I failed as a father [elaboration of the father]*

.without referral  
Lilian is sheltered, recovering with psychological and social assistance. Her father is stronger in his role, while her mother still defends her son (aggressor) and does not believe what the little girl said.

9. Donna

.ambivalence of the maternal role.  
.little awareness of the significance of the facts.  
.repeated transfers of city and fleeing,  
.extended family according to maternal attitude.  
.dismissal of welfare support.

*We are leaving..., we'll have a new life away from here, without anyone bothering us, the most important thing is that you're fine.*

.without referral  
Donna's mother naively believed that by moving away with her daughter from the place where the complaint was made, she could get rid of the tax investigation, while social and welfare services tried to find them and offer them support.

10. Solange

.direct and indirect pressure from the accused.  
.new sentimental relationship of the mother.

*This can't stay that way, we will collaborate with justice and I will take you away as far as possible from the one who hurt you... In this new relationship I am sure that I will find the support I need to be better and to get my daughters through [elaboration of the mother].*

.without referral  
The minor reacts with tears and marked discomfort at the mere mention of the fact denounced. In the same way, she showed opposition and discomfort with her mother, showing regressive and aggressive symptoms with her and her sister, although these diminished when the mother prevents

the father from having access to the girl and decides at the same time to end the sentimental relationship that had begun a few months after having made the complaint.

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*Note:* Source: Own creation

## **Discussion and conclusions**

The post-facto panorama of sexual abuse is favorable for aggrieved minors to the extent that the actions of their environment specifically promote their recovery. In this sense, the presence of resilient and non-taxable tributary elements in their improvement has been noticed.

Consequently, it has been found that the mother plays a transcendental recuperative role, and that is that the mother is usually the closest being to the aggrieved minor. Thus, multidimensional help and support for her daughter is expected, which starts by believing her and initiating at least a triple task with her: firstly, the full recovery of the minor, seeking to restore normalcy to her daily life in the family, school and activities related to these and other instances; secondly, the courageous participation of the victim and her family in the fiscal investigation and eventual trial of her case, which involves, at the same time, struggling in an extensive process, full of diligence and other legal procedures over months and even years.

This situation is even more complex when the aggressor is a family member who, despite having broken the law and violated the dignity of the victim, can claim credibility and family support for himself.

In short, the mother fights for her daughter to have a better family and to have sustained access to assistance services, which in turn entails re-evaluating the relationship with the child in order to correct any problem prior to the abuse. As mentioned in previous lines, this fight takes place within the judicial context, the rationality of which is usually very complex for a person who does not understand legal matters. In addition, time must be added as a relevant factor in the sustainability of the testimony, especially when the personal and family condition of the victim does not account for a real psychosocial remission or improvement.

Finally, the third great task has, at the same time, two flanks of struggle: on the one hand, the confrontation against one's own relatives, who may be incredulous or reject the word of the aggrieved minor, and, on the other hand, fight in the difficult judicial process in the course of which the victim is susceptible to change versions.

In the same perspective, it is possible that the aggressor, in the spirit of avoiding prison, may resort to countless tricks, pressures, blackmails and threats that attempt to retract the victim or, at the very least, weaken the persistence of the victim in collaboration with justice. On the other hand, the mother often finds herself in the dilemma of opting for her aggrieved daughter or for the accused, on which the further genuine recovery of her child will probably depend.

In fact, access to psychological, legal and social assistance services contribute to the improvement of those who have suffered sexual abuse, but these are insufficient

if the mother does not internalize the idea of taking her daughter's side, protecting her and defending her.

In the meantime, when the father is not the aggressor, the mother should also be the pillar for the reconstruction of her home. If this is not the case, and faced with a weak father, as was observed in Lilian, where the harm caused to the adolescent is also dismissed, because they do not believe her, blame her and do not contribute to her receiving assistance, there are sufficient reasons to remove the minor from this inappropriate and dangerous familiar environment, opting immediately for her shelter.

In this cases, the recovery of the victims is promoted from a Residential Care Center (shelter) as an alternative that does not intend to replace their parents but rather gives them the opportunity to access a resilience tutor, if we take the Pereda concept (2011), nor does it intend to replace their home but to grant them another home. That is, to give them the opportunity of a community parentality, if we take the Barudy concept, (in Itad Sistémica, September 2015b), where girls can be protected, heal and improve.

In any case, the design of Residential Care Centers is aimed at avoiding tertiary victimization, while it is found, recovers or, on the other hand, strengthens the victims' parental and family system. Whenever the latter is possible, children return to their homes to develop alongside their own; otherwise, shelters are the best alternative to ensure them a more promising future.

However, in the course of this investigation, the importance of the relationship of the aggrieved minor not only with the assistance services, but also with all those persons who, due to their profession, might have contact with the victim during the fiscal investigation or judicial approach, has been highlighted; For example, the justice workers who, in the exercise of their functions, interact with the aggrieved minor or her family and, consequently, have the possibility of promoting an empathic, but above all human, approach based on respect and warmth with the victim, as was evident in the case of little Karen.

Along this reflection, the relevance of the mother tongue is rescued as a vehicle for affections and communicative contents of the relationship between the formal judicial system and the human person who has something to tell society and justice.

On the other hand, it is true that during recuperative work there are events that moderate the tension that happens at home. These events can defocus attention on a gloomy panorama that presents itself on the family and especially on the victim, as happened with Regina and her parents, who find with the birth of a new member of the family, a means of channeling their affections and hope for the whole family.

As for the cases without remission, that is to say, those that do not foresee solid and appropriate attitudes of facing the criminal act, the mother continues to be the axis for the permanence of discomfort and above all confusion, when her option is not for the aggrieved minor but for the aggressor. In the same way, the erroneous belief that sexual abuse has already been overcome and, therefore, that it makes no sense to continue with criminal prosecution, as was observed in the cases of Inés and Donna, seems to be maternal accommodation and subordination and, in any case, familiar to the interests of the aggressor, who struggles to evade responsibility, pressuring the aggrieved directly or indirectly to alter his version of the facts and thus contribute to the assumption of a protective role that does not correspond to him. The impact of such actions on the victim does not favor his welfare or the resilient elaboration of the grievance occurred.



Also, an attempt to avoid the repercussions of criminal proceedings and protect the aggressor, there are those who force the deterritorialization of the minor victim, who, is exposed to long escapes with the intention of not declaring or appearing before the authorities, which does not allow him to undergo a proper recovery process that must be based on the stability of his family and social ties.

Through this research work, some coping strategies have been observed that have positively impacted on the general condition of the victims. Although these strategies are particular to each family, minor victim and the psychosocial and legal situation of their causes, the role played by the mother is highlighted once the criminal act has been externalized and reported.

As a result, maternal attitudes require giving absolute credibility to the girl's word and mobilizing resources so that she receives sustained comprehensive professional care, as well as positively modifying family dynamics and accompanying her solidly in the entourage of fiscal investigation and judgment.

When the aggressor is a member of the family, the mother and other members of the family group often find themselves choosing between the victim or the aggressor. When the aggressor is chosen, they can appeal to narratives or subjective mechanisms of dismissal of the criminal act, guilt of the victim, flight, escape, inducement to vary version and little or no collaboration with fiscal and judicial actions.

On the other hand, if the victim is chosen, the mother and the family wage a struggle to obtain justice, participating in and encouraging the participation of aggrieved minors in this process, while at the same confronting the aggressor and even his own family when he seeks to protect or favor the aggressor.

From all of this, a state without psychosocial remission can be inferred, when the victims directly or indirectly feel obliged to assume a protective role over the aggressor. This role can be expressed in the intention of changing versions or no longer participating in the judicial process.

By the way, the methods of dealing with sexual abuse are not always planned or programmed elaborations, but intuitive reactions based on the way of perceiving the world in general and sexual abuse in particular, especially on behalf of parents and relatives of the victims who, on a preceding axiological basis, may decide to support the aggressor. At this point, assistance and educational services must contribute to this axiological order so that the decision of the environment is always in favor of those who were offended by the crime.

It should be also considered that when faced with the axiological, volitional and subjective precariousness of parents, shelters constitute important alternatives for the protection and psychosocial recovery of victims, at least while, with professional help, their family environments improve and strengthen sufficiently.

Finally, with the participation of support systems and multidimensional approaches to sexual abuse, new relationships are established that prosocially replace the old and pernicious victim-aggressor relationships with others based on humanism and victimological correspondence: victim-assistance personnel, victim-fiscal or judicial personnel.

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