



THE PSYCHOLOGICAL IMPACTS OF SEXUAL OFFENCES TOWARDS WOMEN IN SOUTH AFRICA

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Abstract.

South Africa has one of the highest rates of sexual offences globally, making it a critical site for understanding the psychological effects of sexual offences trauma. This scoping review aims to explore the psychological consequences of sexual offences on women in South Africa. Using the methodology framework by Arksey, H and O'Malley, L (2005), this qualitative scoping review found about 17 652 articles from science direct and google scholar database of which only 10 articles met the eligibility criteria and 112 online newspaper articles from google search of which only 10 articles met the eligibility criteria with an emphasis on the South African context. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) together with the inductive Thematic Content Analysis (TCA) were used to analyse the data. The study findings indicate that sexual offences expose women to various psychological effects both short-term and long-term consequences. This study revealed that victims of sexual offences experience intensive and varied psychological impacts such as Post-Traumatic Stress Disorder (PTSD), depression, suicidal thoughts, self-blame, shame, anger, sexual dysfunction, emotional suppression and sleep disturbances. It also highlights the ways in which societal stigmatisation and misconceptions of sexual offences intersect with the indicated psychological effects, often exacerbating the challenges faced by victims. The review emphasises the role of stigma and victim-blaming in prolonging the trauma experienced by victims. Further research is recommended to explore the long-term psychological effects of sexual offences and effectiveness of interventions programmes designed to help victims in their recovery journey.

Keywords: Gender-Based Violence, Mental health, Sexual offences, South Africa, Victims, Women

INTRODUCTION

As one of the sexual offences' forms, the term Gender-Based Violence (GBV) refers to acts of violence that mainly affect one gender, commonly women, but unlimited to women (Ades, 2020). There are high rates of GBV in South Africa and that violence extends to sexual offences, which does not only affect women and children, South African Police Service (SAPS) Annual Report (2017/2018). The Criminal Law (Sexual Offences and Related Matters) Act [SORMA] (No. 32 of 2007) outlines various forms of sexual offences, such as; sexual offences, sexual assault, compelled sexual offences, incest, bestiality and sexual grooming of children. Therefore, this study addresses sexual offences as an overarching concept and its psychological impacts on victims.

The current legal definition of sexual offences in South Africa is broad. According to Criminal Law (Sexual Offences and Related Matters) Amendment Act (No. 32 of 2007), sexual offences means any sexual act directed against another person, without the consent of that person, including instances when the person is unable to give consent (Department of Justice and Constitutional Development, 2020). Women are being sexually abused in South Africa almost every day in the hands of men and such acts result from normative gender role expectation and unequal power imbalance (Deane, 2018). Social constructionist approach views sexual offences as a form of dominance and control and a weapon used by men to enforce the submissive role. How the issue of sexual offences in constructed in a certain society affects how people label, understand, assess, justify and assimilate their own experiences and those of others (Donat & D'Emilio, 1992, Gavey, 2005 & Weiss, 2018). The analysis of sexual offences from the feminist theorists emphasise the power

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imbalance related to hierarchal gender relations to be a main factor that influence the high occurrence of sexual offences (Jewkes, 2002). The sexual offences are particularly one of the severe abuses that affect the victim physically and psychologically and may result in long-lasting effects on the victim's mental health as well as to some extent socially too (Dos Reis, Lopes & Osis, 2017). Regarding sexual offences, attention is mostly focused on punishment resulting from the Criminal Justice System (CJS), while neglecting the potential victims in terms of psychological impacts endure after experiencing the associated crimes.

According to the American Psychiatric Association [APA] (2013), sexual offences are intrusive and personal, they are generally classified under the Diagnostic Statistical Manual (DSM-5) description of traumatic event. Sexual offences are identified as the most common cause of lifetime PTSD in South Africa (National Strategic Plan, 2020). According to the SAPS first quarter of 2024-2025 financial year, the sexual offences cases that were reported in 2024 between the months of April and June were 11 566 (SAPS, 2024). Despite the known largely overwhelming sexual offences statistics of South Africa, the actual extent is unknown because of under-reporting (Burn, 2019). The under-reporting of sexual offences cases can be due to various factors such as the sexual offences myths, sexual offences stigma and victim blaming. It is important to note that people react differently when they various forms of this crime, sometimes depending on the nature and extend of occurrence (Coopoo, 2019).

The sexual offences survivors are more likely to experience avoidance symptoms such as not wanting to think or talk or express feelings of their trauma (Murphy, Sink, Ake, Carmody, Amaya-Jackson & Briggs, 2014). The sexual offences can also result in other psychological consequences including sexual dysphoria, eating disorders, sleeping disturbances, substance abuse, suicide, or suicidal ideation (Oshodi, Macharia, Lachman & Seedat, 2020). It is discovered that in the immediate aftermath of a sexual assault, the survivor may report a variety of psychological responses, including acute stress reactions, emotional detachment, and sleep disturbances including other adverse emotional and psychological consequences such as self-blame, difficulties in social and work adjustment and sexual functioning, fear, anxiety, depression, and PTSD (Campbell, Dworkin, Cabral, 2009; Chaudhury, Bakhla, Murthy & Jagtap, 2017). The mentioned consequences of sexual offences showcase the problematic nature of the labelled crimes and a dire need of future research, as psychological impacts do not only affect potential victims for a short period of time, it can affect them for their entire life.

METHODS AND MATERIALS

This qualitative study adopted a scoping review, as the research design to explore the psychological impacts of sexual offences towards women in South Africa. qualitative researchers employing exploratory research designs are typically at the early stages (first stage in a sequence of studies) of exploring their research topics, as they are rarely conducted, to gain insights into a specific situation, phenomenon, community or individual. The need of applying this research design often arise from a lack of information on a new area of interest or to get acquainted with a situation to formulate a problem or develop a hypothesis (Fouche, 2022; Maluleke, 2016; Neuman, 2014). This scoping review study involved the searching for relevant articles with the aim of answering the research questions. A scoping review is a methodological approach that can be especially useful when the research questions are broad and complex, and when the existing literature is diverse (Pham, Rajić, Greig, Sargeant, Papadopoulos & McEwen, 2014).

The scoping review aims to answer a broader question and summarise existing evidence on a given topic (Pollock, Tricco, Peters, McInerney, Khalil, Godfrey, Alexander & Munn, 2021). In the case of the proposed research question related to the psychological impacts of sexual offences among women in South Africa, a scoping review can assist in identifying the extent and range of available literature on this topic, to identify research gaps, and to summarise and disseminate research findings (Arksey & O'Malley, 2005; Maluleke, 2020). This study followed the 'methodological framework of

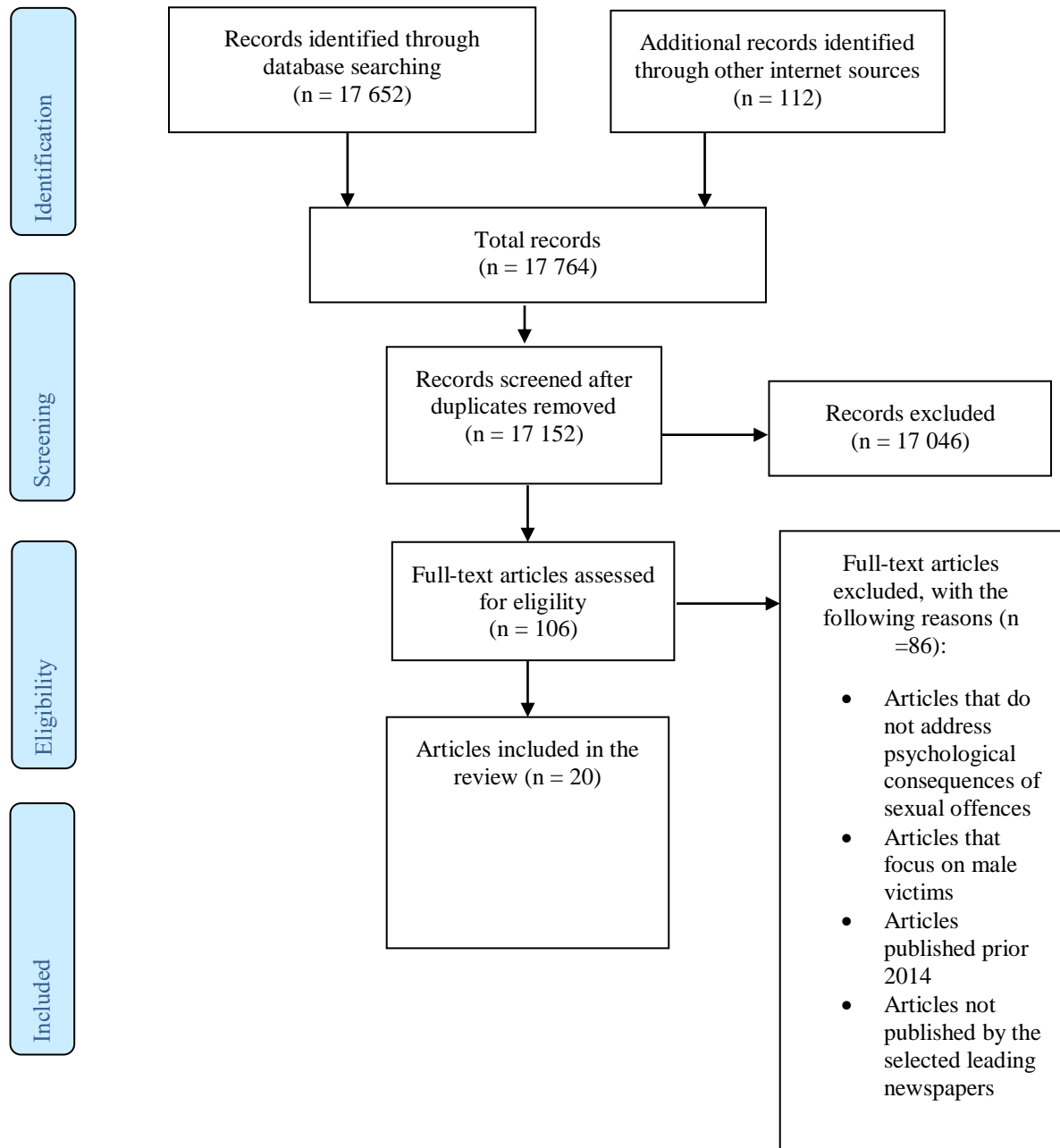


Arksey and O'Malley, 2005, whereby the following five stages were employed using the scoping approach to review existing literature studies on this subject (Arksey & O'Malley, 2005):

- Stage 1: Identifying the research question.
 - Stage 2: Identifying relevant studies.
 - Stage 3: Study selection.
 - Stage 4: Charting the data.
 - Stage 5: Collating, summarising and reporting the results.
- **Stage 1: Identifying the research question:** This scoping review aims to systematically explore the psychological impacts of sexual offences as a form of gender-based violence towards women in South Africa on the following research question: *What are the psychological impacts of sexual offences towards women in South Africa?*
 - **Stage 2: Identifying relevant studies:** The researcher relied on science direct, google scholar and google search to source relevant literature studies on this subject. The conducted searches were restricted from 2014-2024 [Not in sequence and importance], focusing on inclusion and exclusion criteria and the use of keywords to arrive to Ten (10) article journals and Ten (10) newspaper articles on this subject. The inclusion criteria were accredited articles, as well as newspaper articles published in the leading online newspapers in South Africa, namely: News24, TimesLive, mail & guardian, SowetanLive, the citizen and daily maverick (The Media Online, 2024). For the exclusion, all reviewed articles, which were not published by the leading online newspapers were omitted to ensure the trustworthiness of the reviewed data. Importantly, the keywords extracted from the research topic were used as guidelines to get relevant information on this subject.
 - **Stage 3: Study selections:** Apart from the indicated study inclusion and exclusion criteria, as illustrated in stage 2, the researcher had to ensure that relevant publications on this subject are selected, to form part of the adopted scoping review, while adopting the PRISMA (Refer figure 1). The irrelevant articles were ignored during this process. The inclusion and exclusion criteria were based on relevance, irrelevance, and alignment to the study objective and guiding research questions, as illustrated in stage 1.

The reviewed studies, which fell outside of the prescribed date range (2014 to 2024) were excluded. The studies in question were not about the victims of sexual offences, but they focus on psychological experiences to cater for exclusions and inclusions segments. The process of exclusion extremely decreased the number of the reviewed studies, as included in the final data collection.

Figure 1: The PRISMA - Flow chart of study selection



Source: Adapted from Maluleke, Musekiwa, Kgarosi, Gregor, Dlangalala, Nkambule and Mashamba-Thompson (2021)

- Stage 4: Charting the data:** The researchers relied on data charting to extract the selected data from the PRISMA (Refer to Table 1). Data charting looked at the responsible authors, years of publication, title of publications topic, type of publications and findings. The collected data were summarised using the PRISMA and the researcher closely looked at the relevant findings to



develop themes of this study in order to ensure trustworthiness of findings of this review. The data was then analysed using thematic analysis method.

Table 1: Data charting and summaries

Author (s)	Year	Title of publications	Type of publications	Findings
Setena, T	2022	GBV survivors break the silence	Online newspaper: News24	The sexual offences victim experienced traumatic experience of falling pregnant through sexual offences and marrying her rapist due to shame she felt about having a child out of wedlock and later regretted her decision as she was subjected to ongoing abuse by the man
Mkase, O	2021	GBV survivor shares her horrific story	Online newspaper: The Citizen	A sexual offences victim who was gang sexual offences shared how she still recalls the whole incident as if it was yesterday, even though it happened years ago She reflected the feeling of blaming herself every day and being furious at herself and the rapist The victim struggles with so much rage and pain as a result of the incident and feels like she will never find healing
Molosankwe, B	2024	Sexual offences victim gets justice 27 years later	Online newspaper: SowetanLive	A victim discusses suppressing her emotions for years from 1997 until 2004 when she opened up. For a longtime she was suffering in silence, she was feeling broken and used to fantasise about killing her rapist The victim expressed that the sexual offences she suffered has affected her intimate relationships as she used to freeze during intimacy. The victim highlighted that seeing a man wearing a cowboy hat that looked like the one her rapist used to wear triggered the memory of her being raped 24 years earlier
Kawa, A	2024	Open letter by	Online newspaper:	The victim shared how she

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		Andy Kawa 13 years after I was gang sexual raped, I am still waiting for justice	News24	struggled with trauma and depression while fighting legal battles for survival and justice for GBV victims in South Africa. Her suffering led to demise, depression, continual traumatising, loss of livelihood and death of her former self.
Solomons, L	2022	'I survived suicide to share my story': Gang sexual offences victim on a mission to empower others	Online newspaper: News24	<p>The victim shared how her healing process is far from over. She suffered in silence for a long period because topic of sexual offences is not generally discussed in public and that resulted in her feeling ashamed due to the fear of being crucified by society.</p> <p>The victim shared how she neglected her psychological wounds by avoiding her trauma which later resurfaced.</p> <p>The victim mentioned how the sexual offences incident affected her mental state, self-image and her ability to trust others</p> <p>The victim shared feelings of deep depression and suicidal attempts and being treated for bipolar disorder, anxiety disorder, insomnia, PTSD and Obsessive-Compulsive Disorder (OCD)</p> <p>The victim expressed that she blamed herself because of the clothes she was wearing, however years later she realised that it was not her fault.</p>
Njilo, N	2022	Krugersdorp victim's ordeal: 'I closed my eyes, crying. Moments later, I was sexual raped, by three men'	Online newspaper: Daily Maverick	The victim felt humiliated, numb and feels that her pain will never stop. She expressed that she can still smell the perpetrators even after a long time since the sexual offences' incident occurred.



				Another victim expressed that she will never forget the memories of the sexual offences' incident.
Jones, M	2021	'I will never report my sexual offences' - 3 women tell us why they won't go to the police	Online newspaper: News24	<p>The victim shared that she blames herself and feels like she asked for it as she used to kiss and play around with her boyfriend then one day she protested when he wanted sex, however he forced himself onto her. Because of shame she did not tell anyone for many years.</p> <p>Another victim shared that after being sexual offences by a co-worker she felt so alone and so ashamed at the time because of the lack of support.</p>
Tjiya, E	2020	Lerato Moloi opens sexual offences case against comic	Online newspaper: SowetanLive	<p>The victim experienced ongoing struggle with trauma, guilt and shame for six years which left her with immeasurable emotional scars.</p> <p>The victim also expressed that she have been shamed for putting herself in that position.</p>
Sobuwa, Y	2018	Why did Khensani Madeko end it all	Online newspaper: Sowetanlive	A victim shared a post on social media declaring that 'no one deserves to be sexual raped' before she commits suicide following sexual offences.
Marupeng, P	2020	Sexual offences victim can finally move on from trauma	Online newspaper: SowetanLive	For six years the victim experienced sleepless nights because of lack of closure. The sexual offences incident caused her scar and since the attack she was no longer the same person
Willan, S , Mngadi, S , Shai, N, Majola, T , Gounden, T, Jewkes, R, Mabhida, M & Machisa, M	2024	South African sexual offences survivors' expressions of shame, self-blame and internalized-stigma	Elsevier journal	The findings indicated that women expressed feelings of shame, self-blame, and internalised-stigma. These feelings were a reaction to views expressed by family, community members and service providers, their relationship to the perpetrator, the extent of gossip about the incident and gender norms and sexual offences myths.

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Wyatt, G. E., Davhana-Maselesele, M., Zhang, M., Wong, L. H., Nicholson, F. & Sarkissian, A. D.	2017	A Longitudinal Study of the Aftermath of Sexual offences Among Rural South African Women	Psychological Trauma: Theory, Research, Practice, and Policy	The findings revealed that all women immediately after the sexual offences experienced the symptoms of depression and dysfunctional sexual behaviours, changes in symptoms over time were associated with changes in perceived social undermining and adherence to beliefs related to myths about sexual offences
Abrahams, N & Gevers, A	2017	A rapid appraisal of the status of mental health support in post-sexual offences care services in the Western Cape	South African Journal of Psychiatry	The findings found that all survivors experienced emotional difficulties, stigmatisation, anxiety, blame, frustrations and anger including disruptions in daily functioning such as insomnia, flashbacks, not trusting people, not leaving home or suicidal ideation. The victims presented various levels of coping and distress, those who were coping well had good social support from either family members or close friends, whereas those without active support system were struggling with hypervigilance, emotional dysregulation or flat affect, high degrees of self-blame and stigmatisation
Machisa, M.T, Chirwa, E, Mahlangu, P, Nunze, N, Sikweyiya, Y, Dartnall, E, Pillay, M & Jewkes, R.	2022	Suicidal Thoughts, Depression, Post-Traumatic Stress, and Harmful Alcohol Use Associated with Intimate Partner Violence and Sexual offences Exposures among Female Students in South Africa.	International Journal of Environmental Research and Public Health	The findings found that 50% of the surveyed students binge drank, 43% reported depressive symptoms, 9% reported PTSD symptoms, and 21% had suicidal thoughts.
de Klerk, E., Spies, R., van den Berg, F. & de Klerk, W.	2024	Sexual offences in South Africa: A Narrative Synthesis on the	Journal of Psychology	South African literature identified that anxiety, depressive symptoms, external stigmatisation, posttraumatic



		Psychological Impact of Sexual offences on South African Women.		stress disorder, feelings of worthlessness, shame, guilt, persistent anger, self-stigmatisation, blame, social isolation, social victimization, suicidal thoughts and traumatic dissociation are prevalent among sexual offences victims.
Mamabolo, S.K & Maluleke, W.	2022	Exploring perceptions of community members on effects of sexual offences in the selected areas of Mankweng, South Africa	International Journal of Research in Business & Social Science	This study presented that some victims of sexual offences experiences symptoms such as; feelings of worthlessness, social isolation, resorting to substance abuse and persistent sadness and crying
Abrahams, N, Mhlongo, S, Seedat, S, Nothling, J, Chirwa, E, Lombard, C, Peer, N, Myers, B, Jewkes, R	2021	Research Brief: Evidence on the Long-Term Health Impact Following Sexual offences.	South African Medical Research Council (SAMRC)	This research shows that women who have been sexual raped have a much higher risk of developing HIV, depression, suicidality and Post-Traumatic Stress Symptoms (PTSS) over two years after the sexual offences when compared to women who have not been sexual raped
Mgoqi-Mbalo, N., Zhang, M., & Ntuli, S	2017	Risk factors for PTSD and depression in female survivors of sexual offences.	Journal of Psychological Trauma: Theory, Research, Practice, and Policy	The study found that 87% of victims of sexual offences reported high levels of PTSD and 51% moderate to severe depression post sexual offences.
Makhaye, M.S, Mkhize, S. M & Sibanyoni, E.K	2023	Female students as victims of sexual abuse at institutions of higher learning: insights from Kwazulu-natal, South Africa	SN Social Sciences Journal	The study also found that students who had experienced sexual victimisation in the universities under study experienced long-term effects, such as post-traumatic stress disorder, depression, acute fear and anxiety, suicidality shock, and social withdrawal.
Sepeng, N. V & Makhado, L.	2018	Correlates of PTSD diagnosis among sexual offences survivors: Results and implications of a South African	Journal of Psychology in Africa	The results showed that PTSD is a reality for the majority of sexual offences survivors, and that those with a strong religious belief system are at elevated risk for PTSD

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- **Stage 5: Collating, summarising, and reporting the results:** The final stage of the process is the analysis of the results. The main research question is concerned with exploring the psychological impact of sexual offences. The intension of this analysis was to achieve the research aim and answer the research questions. A total number of Twenty (20) articles addressing the psychological impact of sexual offences towards women were included in this study.

DATA PRESENTATIONS, ANALYSIS AND DISCUSSIONS

While following the inductive TCA, four (04) main study themes with sub-themes emerged as follows:

- **Theme 1: Mental health problems:** Various studies revealed that the prevalence of mental health problems is high within victims of sexual offences (Abrahams, & Gevers, 2017; Abrahams, Mhlongo, Seedat, Nothling, Chirwa, Lombard, Peer, Myers, Jewkes, 2021; Machisa, Chirwa, Mahlangu, Nunze, Sikweyiya, Dartnall, Pillay & Jewkes, 2022; Mgoqi-Mbalo, Zhang & Ntuli, 2017; Sepeng & Makhado, 2018). The research findings revealed that most victims of sexual offences experience various mental health problems with immediate and long-term effects. Within this study theme, three (03) sub-themes emerged:

- Sub-theme 1.1: The PTSD

PTSD is one of the most severe mental health consequences of sexual offences. Studies indicate that symptoms such as insomnia, flashbacks, sexual dysfunction behaviour and emotional impairment are common among victims and often last long after the incident (Abrahams & Gevers, 2017; de Klerk, Spies, van den Berg & de Klerk, 2024; Makhaye, Mkhize, & Sibanyoni, 2023; Wyatt, Davhana-Maselesele, Zhang, Wong, Nicholson & Sarkissian, 2017). Additionally, the presence of PTSD symptoms was more severe among those with strong religious beliefs (Sepeng & Makhado, 2018), suggesting that sexual offences may challenge the worldview of those with strong religious beliefs leading to internal conflict. Many religions emphasise ideals of purity and morality. Victims might struggle to reconcile their faith with the reality of their assault, leading to increased psychological distress. Five victims from the analysed newspaper articles mentioned to have experienced PTSD after the sexual offences incidence.

“I can still smell them. It was like they never bathed.”

The sensory triggers that evoke memories of the assault were reported by the sexual offences victims. Sensory triggers are a hallmark symptom of the PTSD. A victim’s statement demonstrates how sensory experiences can resurface the trauma, leading to more intense distress and flashbacks. These triggers often cause victims to relive the incident, reinforcing their psychological pain.

“Even though it happened years ago, I recall the whole incident as if it was yesterday.”

“It was bad ... I do not think that picture [of the sexual offencess] will ever leave my mind.”

The victims’ statements represent the nature of the PTSD, where flashbacks and intrusive images of the assault continually cause suffering to the victims. The inability to erase these mental images highlights the persistence of trauma and its intrusion into everyday life. Such memories can be involuntary and pervasive, making it hard for the individual to move on from the traumatic experience. This aligns with PTSD, where traumatic memories are relived through flashbacks, leading to ongoing suffering

“I had sleepless nights in the past six years because I had no closure.”

Sleepless nights are one of the hallmark signs of PTSD. The PTSD often manifests in sleep disturbances and nightmares, the victim has suffered this for *six years*, emphasising long-term psychological consequences. The victim’s ongoing struggle with sleeplessness presents how the



trauma has deeply affected their mental health and well-being over an extended period. This reinforces the chronic nature of PTSD, where symptoms can persist and even worsen without proper intervention or therapy. The victim mentioned the absence of ‘closure’ as a critical factor contributing to the ongoing sleepless nights. Lack of closure in the aftermath of a traumatic event, particularly one as severe as sexual offences, can delay the healing process. Without closure, the trauma remains an open wound, preventing emotional recovery and reinforcing the symptoms of PTSD.

○ Sub-theme 1.2: Trauma

“The trauma, guilt, and shame of the assault has left me with immeasurable emotional scars for the past six years.”

This victim’s statement highlights the long-term emotional impact of sexual offences, where victims are left with deep psychological scars that persist for years, if not a lifetime. This finding reveals the intertwined nature of trauma, guilt, and shame, each reinforcing the “immeasurable” emotional scars and how these emotional scars shape their lives long after the sexual offences incidence. The findings highlight the importance of addressing not only trauma but also the feelings of guilt and shame that can delay recovery.

“Reflected on her traumatic experience of falling pregnant through sexual offences and marrying her rapist.”

One survivor expressed the complexity of her trauma by reflecting on how she became pregnant as a result of the sexual offences and eventually married her rapist. This reflects how sexual offences can lead to ongoing and complex trauma, where the assault can result in long-lasting effects on a victim’s life. In this case, the marriage became a continuation of the abuse, deepening the emotional and psychological wounds.

“The sexual offences and negligence that I suffered in the hands of the SAPS led to my demise, depression, continual traumatising by the judiciary, loss of livelihood, and death of my former self.”

This statement highlights how failures by law enforcement and the judiciary, compound the trauma of sexual offences victims. The initial trauma of the sexual offences is exacerbated by ongoing institutional neglect, contributing to depression, loss of self-identity, and disempowerment. The phrase ‘death of my former self’ expresses the deep identity crisis often experienced by victims of severe trauma. Sexual offences can cause individuals to disconnect from their pre-trauma identity. This sense of disintegration contributes to feelings of being lost or disconnected from one’s self, leading to emotional numbness or complete loss of happiness and connection to life. Machisa *et al.*, (2022); Mamabolo and Maluleke (2022), found a significant prevalence of substance abuse, especially drinking alcohol, among sexual offences victims. This behaviour can be interpreted as an attempt to self-medicate or escape from the overwhelming psychological pain associated with the trauma. Substance abuse is often a maladaptive coping mechanism that further complicates recovery, increasing the risk of developing additional psychological issues.

○ Sub-theme 1.3: Depression

Sexual offence is an intensive traumatic experience that often leads to psychological distress, including depression which may result in suicidal thoughts. Machisa *et al.*, (2022) found that 43% of rape victims reported depressive symptoms while 21% of sexual offences victims had suicidal thoughts. This reflects the severe depression of the trauma and feelings of hopelessness that overwhelm the victim. The finding that all women reported symptoms of depression immediately after the sexual offences (Wyatt *et al.*, 2017), highlights the pervasiveness and severity of this trauma. Many survivors of sexual offences in South Africa exhibit symptoms of suicidal thoughts (de Klerk *et al.*, 2024; Machisa *et al.*, 2022; Makhaye, Mkhize, & Sibanyoni, 2023).

“The student committed suicide following sexual offences”

“I tried to take my own life by overdosing on depression medication.”

The victim’s mention of medication shows that depression was already being medically addressed, but also suggests that the intervention may not have been fully effective in reducing the intense emotional pain hence the victim resort to attempt suicide. This extreme response reflects the

depth of hopelessness and emotional pain felt by victim who struggles to find a way to cope with their trauma. The attempt to take one's life reflects how depression can increase the person's feelings of despair, pushing them to seek an escape from their suffering by trying to end their lives.

○ Sub-theme 1.4: Multiple mental health disorders

The complexity of the psychological effect of sexual offences is evident in the development of multiple mental health disorders. Victims of sexual offences face an increased risk of comorbid conditions such as depression, and PTSD, with these risks persisting for years after the incident (Abrahams *et al.*, 2021).

A victim said she is being treated for bipolar disorder, anxiety disorder, insomnia, PTSD, and OCD.

This victim's experience shows how one traumatic event can lead to a variety of mental health issues, ranging from anxiety and PTSD to OCD and insomnia, demonstrating the long-lasting and pervasive effects of sexual offences on mental health.

● **Theme 2: Social stigma**

This study theme is supported by the two (02) sub-themes:

○ Subtheme 2.1: Self-blame

Sometimes women hold themselves responsible for being sexual raped due to acceptance of sexual offences myths (Wyatt *et al.*, 2017). Within the analysed articles, it was discovered that the perception of self-blame was more common than the perception of blaming the perpetrator. Three victims within the analysed newspaper articles indicated to be blaming themselves for being sexual raped.

"I felt for a very long time that I had asked for it. We kissed and fooled around and the next day when he wanted to have sex and I protested, he forced himself onto me saying I was a tease."

"Every day, I look in the mirror and wonder what I did wrong because I do not deserve this and no one will ever understand why I am furious. I am angry at myself, my body, my perpetrators, and the South African justice system."

"It took years for me to forgive myself, as if I deserved what happened to me because of what I was wearing. Once you've been through such a traumatic experience, you blame yourself, and as the years went by and I started to re-find myself again, I realised what happened to me was not my fault".

Self-blame is a recurring theme in victims' experiences, with many internalising responsibilities for the assault. Victims adopt various coping mechanisms to manage their trauma. Some victims bury their emotions and struggle with feelings of self-blame, while others attempt to suppress their trauma, leading to severe psychological consequences later in life. In many cases, the victim's feelings of guilt and self-blame stem from societal pressures around sexual offences (Abrahams & Gevers, 2017), where victims may believe they "invited" the assault due to prior interactions with the perpetrator. This highlights how sexual offences culture distorts the understanding of consent and accountability.

○ Sub-theme 2.2: Shame

The feeling of shame appeared to be common in the aftermath of sexual offences and it appears that among all the victims that experienced shame it was caused by the ongoing social stigmatisation of sexual offences in South Africa. Four victims within the analysed newspaper articles indicated to be ashamed of their sexual offences experience.

"I married my rapist because I felt ashamed about having a child out of wedlock. My decision was regrettable; I was subjected to ongoing abuse by the man."

Shame often forces victims into difficult decisions, as seen in this statement where the victim felt compelled to marry her rapist to avoid societal judgment. The pressure to conform to societal norms, such as marriage, led to continued abuse and further psychological harm.



“This was also a topic not generally discussed in public. I did not open any case for any type of sexual assault against them, purely based on the shame I felt, the fear of being crucified by society”

The silence surrounding sexual offences in public discourse contributes to the shame experienced by victims, who fear judgment and societal condemnation (Willan *et al.*, 2024; Wyatt *et al.*, 2017). This statement shows how societal expectations lead to feelings of shame which force victims into silence, preventing them from seeking justice or support further exacerbating their psychological suffering.

“But for me, nothing will take away the pain and humiliation.”

The feelings of humiliation that accompany sexual offences are deep-rooted and difficult to overcome. The pain persists, even after justice may be served, demonstrating the lasting emotional scars that sexual offences leaves behind.

“She felt so alone and so ashamed at the time, she decided not to report it.”

Shame isolates victims, making them feel as if they are alone in their experience. The decision not to report, driven by feelings of shame, reflects the broader cultural stigma surrounding sexual offences and the impact it has on victim's ability to seek help. The findings highlight those feelings of shame and self-blame are common reactions among victims. These emotions are often influenced by the responses of family members, community attitudes, and service providers, as well as the relationship with the perpetrator. In some cases, victims experience stigmatisation or gossip, further exacerbating feelings of shame and guilt (Abrahams, & Gevers, 2017; Willan *et al.*, 2024). These emotions can become deeply entrenched and affect survivors' self-perception, leading to long-term psychological distress. The internalisation of blame is often reinforced by societal sexual offences myths that attribute the responsibility to the victim rather than the perpetrator (Wyatt *et al.*, 2017). This theme indicates the harmful effects of cultural beliefs and societal attitudes on the mental health of victims. The reluctance to openly discuss sexual offences in South African contributes to unprocessed trauma. Victims feel isolated, unable to speak about their experience, which increase the psychological burden (Mamabolo & Maluleke, 2022). This societal silence exacerbates feelings of shame, trapping victims in internalised pain and unspoken distress. The internalisation of shame can delay healing and lead to long-term psychological damage.

• **Theme 3: Emotional distress**

This study theme, was aided by the 03 sub-themes:

○ Sub-theme 3.1: Anger

It is established that sexual offences victims experience emotional difficulties such as persistent anger, frustrations, persistent sadness and crying (Abrahams & Gevers, 2017; de Klerk *et al.*, 2024; Mamabolo & Maluleke, 2022). Anger serves as both an emotional reaction to the trauma and a coping mechanism for dealing with the overwhelming feelings of powerlessness and violation. Anger, as expressed in these victims' statements, reveals the complexity of emotions that sexual offences victims go through.

“The sexual offences had left her broken. ‘I used to fantasise about getting a gun and shooting him or hiring people to beat him up.’”

“I am dealing with so much rage and pain as a result of the incident and nothing can possibly change this feeling”

This form of emotional expression allows the victim to mentally confront their perpetrator through fantasies of revenge. The second quote also highlights that the victim's rage and pain made her feel hopeless. Persistent anger, if not solved can become psychologically harmful and prevent the victim from recovering from the traumatic experience. It traps victims in a cycle of suffering, as the emotional intensity of their anger overpowers potential pathways to healing.

○ Sub-theme 3.2: Emotional suppression or inhibition

Emotional suppression in this study appeared to be common among sexual offences victims. Three victims mentioned to being silent and suppressing their emotions after sexual offences due to fear and shame and only came out after many years of emotionally suffering in silence.

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“Now, 30 years later, told News24 she has come to terms with the gang sexual offences which occurred in 1992, but her healing process is far from over.”

The long journey toward healing is evident in many victims' experiences. Even decades later, survivors may struggle to completely process and face their trauma, highlighting that healing from sexual offences is an ongoing process.

“I was unable and unwilling to tend to my psychological wounds, I buried my trauma and suffered devastating consequences when my pain resurfaced later in life.”

The act of burying trauma rather than confronting it can lead to severe long-term consequences. Repressed emotional pain often resurfaces later in life, sometimes triggered by related events, resulting in further emotional and psychological suffering.

“A woman who was sexual raped in 1997 never told anyone about it until 2004.”

This delay in disclosure reflects the complex emotional processes victims undergo before they can speak about their assault. The ability to cope with the aftermath of sexual offences varies largely among victims. Abrahams and Gevers, (2017) highlight that the victims of sexual offences with strong social support from family or friends adopt positive coping mechanism and demonstrate better psychological resilience, whereas survivors without active support system often struggle with emotional dysregulation, or flat affect. Effective coping is closely linked to the quality of social support, which can either reduce or worsen the psychological impact of the trauma.

• **Theme 4: Sexual dysfunctional**

Wyatt *et al.*, (2017) reveal that all women immediately after the sexual offences experienced the symptoms of dysfunctional sexual behaviours. Sexual activity may trigger flashbacks, leading to avoidance or discomfort in sexual relationships. Victims may develop phobias surrounding sex, intimacy, or even close physical contact due to the traumatic experience. This highlights the persisting presence of trauma in everyday interactions which affects the victim's sexual life.

A victim mentioned that: *“I used to freeze during intimacy and decided it was time to come clean to my boyfriend because he loved me enough for me to open up to him.”*

The long-term effects of sexual offences can manifest in relationships, particularly in intimate settings. The freezing response during intimacy is a clear sign of unresolved trauma that manifests physically, emotionally, and psychologically. Victims may struggle with physical and emotional reactions long after the assault, particularly in intimate situations that trigger memories of the event as the body and mind react to perceived threats, even in safe and consensual contexts.

CONCLUSIONS AND RECOMMENDATIONS

This study aimed to present the psychological impacts experienced by female sexual offences victims in South Africa. The findings of this study revealed the intensive and varied psychological impacts of sexual offences on victims in South Africa. The psychological impact of sexual offences in South Africa reveals a complex picture of trauma, the PTSD, depression, suicidal thoughts, self-blame, shame, anger, emotional suppression, sleep disturbances and sexual dysfunction highlighting the complex emotional and mental health struggles that victims' experiences. The psychological aftermath of sexual offences often persists for years, with survivors carrying emotional scars, dealing with multiple mental health conditions, and going through societal pressures that exacerbate their pain. These mental health struggles are worsened by societal stigmatisation, most victims suffered in silence because of the fear of stigmatisation. The societal stigma and internalised self-blame prolong the suffering and prevent victims from finding closure and justice. Healing from the consequences of sexual offences is often delayed by silence, shame, and lack of support, with many victims living with the consequences of their trauma for years.

For recommendations, there is a need to develop support systems that address not only the psychological damage caused by sexual offences but also the societal perception and misconception of sexual offences that exacerbate the psychological consequences of sexual offences and delay the



recovery. If proper interventions are not provided, victims of sexual offences may not recover from the traumatic incident and end up experiencing long term psychological disorders. It is also important for the sexual offences victims to talk about their experiences and path to recovery. By doing so, victims empower themselves with the knowledge that they are not alone while also healing others. This gives sexual offences victims the power, comfort, and support they need as they learn to let go of their traumatic experiences.

LIMITATIONS

The research was conducted with a small sample of secondary data which is appropriate for a qualitative study, however a small sample present challenges when it comes to generalising the study findings, therefore this study cannot be generalised. As the nature of qualitative research is subjective, it was important for me to be conscious of my own biases and personal beliefs when interpreting the stories of the sexual offences' victims. It was also limited by the small sample size relative to the total number of newspaper articles and scholarly articles that may have reported on psychological impacts of sexual offences. However, despite these limitations the study does contribute to the far-reaching knowledge on the topic which has not been largely recorded in the academic discourse especially in South Africa.

REFERENCES

- Abrahams, N. & Gevers, A. 2017. A rapid appraisal of the status of mental health support in post-rape care services in the Western Cape. *South African Journal of Psychiatry*, 23, 1-8.
- Abrahams, N., Mhlongo, S., Seedat, S., Nothling, J., Chirwa, E., Lombard, C., Peer, N., Myers, B. & Jewkes, R. 2021. Research Brief: Evidence on the Long-Term Health Impact Following Rape. SAMRC.
- Ade, V (Ed.). 2020. *Sexual and Gender Based Violence*. Springer: United Kingdom.
- American Psychiatric Association. 2013. *Diagnostic and statistical manual of mental disorders: DSM-5*. Washington D.C: American Psychiatric Association.
- Arksey, H. & O'Malley, L. 2005. "Scoping studies: Towards a methodological framework." *International Journal of Social Research Methodology* 8(1): 19–32.
- Burn, J.A. 2019. Advancing the girl child movement: A potential mechanism to curtail sexual gender-based violence against women in South Africa. Master of Laws: Public law. University of Cape Town.
- Chaudhury, S., Bakhla, A.K., Murthy, P.S. and Jagtap, B., 2017. *Psychological aspects of rape and its consequences*. *Psychological Behavioural Science International Journal*, 2, 555-86.
- Campbell, R., Dworkin, E. & Cabral, G. 2009. An Ecological Model of the Impact of Sexual Assault on Women's Mental Health. *Trauma, Violence, & Abuse*, 10(3):225-246.
- Coopoo, P. 2019. *Constructions of perpetrators of rape in psychology journals articles: A discursive analysis*. Mater of Arts: Psychology. University of Pretoria.
- Deane, T. 2018. Sexual violence and the limits of laws' powers to alter behaviour: The case of South Africa. *Journal of International Women's Studies*, 19(2), 84-103.
- de Klerk, E., Spies, R., van den Berg, F. & de Klerk, W. 2024. Rape in South Africa: A Narrative Synthesis on the Psychological Impact of Rape on South African Women. *Psychology*, 15, 1262-1278.
- Department of Justice and Constitutional Development. 2020. *The Criminal Law (Sexual Offences and Related Matters) Act 32 of 2007*. Available from: <https://www.justice.gov.za/legislation/notices/2020/20200207-gg43000rg11038gon108-SXOregulations.pdf> [Accessed: 20/09/2024].
- Donat, P. & D'Emilio, J. 1992. A feminist redefinition of rape and sexual assault: Historical foundations and change. *Journal of Social Issues*, 48(1), 9-12.

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- Dos Reis, M.J., Lopes, M.H.B.D.M. & Osis, M.J.D. 2017. 'It's much worse than dying': the experiences of female victims of sexual violence. *Journal of Clinical Nursing*, 26(15-16), pp.2353-2361.
- Fouché, C.B. 2022. Framing the proposed study, In: *Research at grass roots: For the social sciences and human service professions*. 4th Edition. Edited by Fouché, C.B, Strydom, H & Roostenburg, W.J.H. Van Schaik Publishers: Hartfield, Pretoria.
- Gavey, N. 2005. *Just sex? The cultural scaffolding of rape*. New York: Psychology press.
- Kaminer, D., du Plessis, B., Hardy, A. & Benjamin, A. 2013. Exposure to violence across multiple sites among young South African adolescents. *Peace and Conflict: Journal of Peace Psychology*, 19, 112-124.
- Jones, M. 2021, 'I will never report my rape' - 3 women tell us why they won't go to the police. February 16, News24. Available from: <https://www.news24.com/life/wellness/mind/i-will-never-report-my-rape-3-women-tell-uswhy-they-wont-go-to-the-police-20210216> [Accessed: 20/09/2024].
- Kawa, A. 2024. Open letter by Andy Kawa | 13 years after I was gang raped, I am still waiting for justice. March 7, News24. Available from: <https://www.news24.com/citypress/voices/open-letter-by-andy-kawa-13-years-after-i-was-gang-raped-i-am-still-waiting-for-justice-20240307> [Accessed: 25/09/2025].
- Machisa, M.T., Chirwa, E., Mahlangu, P., Nunze, N., Sikweyiya, Y., Dartnall, E., Pillay, M. & Jewkes, R. 2022. Suicidal Thoughts, Depression, Post-Traumatic Stress, and Harmful Alcohol Use Associated with Intimate Partner Violence and Rape Exposures among Female Students in South Africa. *International Journal of Environmental Research and Public Health*, 19, 7913.
- Makhaye, M.S., Mkhize, S.M. & Sibanyoni, E.K. Female students as victims of sexual abuse at institutions of higher learning: insights from Kwazulu-natal, South Africa. *SN Soc Sci*, 3 (40), 2-22.
- Maluleke K, Musekiwa A, Kgarosi K, Gregor EM, Dlangalala T, Nkambule S., and Mashamba-Thompson T. 2021. A Scoping Review of Supply Chain Management Systems for Point of Care Diagnostic Services: Optimising COVID-19 Testing Capacity in Resource-Limited Settings. *Diagnostics (Basel)*, 8(12), 2299.
- Mamabolo, S.K & Maluleke, W. 2022. Exploring perceptions of community members on effects of rape in the selected areas of Mankweng, South Africa. *International Journal of Research in Business & Social Science*, 11(2), 280-288.
- Marupeng, P. 2020. Rape victim can finally move on from trauma. October 22, Sowetanlive. Available from: <https://www.sowetanlive.co.za/news/south-africa/2020-10-22-rape-victim-can-finally-move-on-from-trauma/> [Accessed: 20/09/2024].
- Mgoqi-Mbalo, N., Zhang, M. & Ntuli, S. 2017. Risk factors for PTSD and depression in female survivors of rape. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(3), 301–308.
- Mkase, O. 2021. Gender-based violence survivor shares her horrific story. September 1, The citizen. Available from: <https://www.citizen.co.za/kempton-express/news-headlines/2021/09/01/gender-based-violence-survivor-shares-her-horrific-story/> [Accessed: 10/08/2024].
- Molosankwe, B. 2024. Rape victim gets justice 27 years later. July 23, Sowetanlive. Available from: <https://www.sowetanlive.co.za/news/south-africa/2024-07-23-rape-victim-gets-justice-27-years-later/> [Accessed: 25/09/2024].
- Murphy, R.A., Sink, H.E., Ake, G.S., Carmody, K.A., Amaya-Jackson, L.M. & Briggs, E.C. 2014. Predictors of treatment completion in a sample of youth who have experienced physical or sexual trauma. *Journal of Interpersonal Violence*, 29, 3-19.
- Njilo, N. 2019. Victims of gender-based violence 'have only a slim chance of recovery'. December 4, Timeslive. Available from: <https://www.timeslive.co.za/news/south-africa/2019-12-04->



- victims-of-gender-based-violence-have-only-a-slim-chance-of-recovery/ ... [Accessed: 15/08/2024].
- Njilo, N. 2022. Krugersdorp victim's ordeal: 'I closed my eyes, crying. Moments later, I was raped, by three men'. August 5, Dailymaverick. Available from: <https://www.dailymaverick.co.za/article/2022-08-05-krugersdorp-victims-ordeal-i-closed-my-eyes-crying-moments-later-i-was-also-raped-by-three-men/> [Accessed: 20/09/2024].
- Nkosi, N. 2020. *An exploration of students' gender constructions and rape culture in a South African University*. University of Pretoria: Pretoria.
- Maluleke, W. 2020. The African scare of fall Armwormy: Are South African farmers immune? *International Journal of Social Sciences and Humanity Studies*. 12(1), 207- 221.
- Maluleke, W. 2016. *The use of Deoxyribonucleic Acid in combating stock theft in South Africa*. Soshanguve South Campus: Pretoria.
- Neuman, W.L. 2024. *Social research methods: Qualitative and quantitative approaches*. Pearson: Midrand.
- Oshodi, Y., Macharia, M., Lachman, A. & Seedat, S. 2020. Immediate and long-term mental health outcomes in adolescent female rape survivors. *Journal of interpersonal violence*, 35(1-2), 252-267.
- Pham, M.T., Rajić, A., Greig, J.D., Sargeant, J.M., Papadopoulos, A., & McEwen, S.A. 2014. A scoping review of scoping reviews: Advancing the approach and enhancing the consistency. *Res 99 Koch, Pool, Heymans - The nature of decolonisation in health sciences curricula: A scoping review Synth Methods* 5(4): 371–385.
- Pollock, D., Tricco, A.C., Peters, M.D., McInerney, P.A., Khalil, H., Godfrey, C.M., Alexander, L.A & Munn, Z. 2021. "Methodological quality, guidance, and tools in scoping reviews: A scoping review protocol." *JBI Evidence Synthesis* 20(4): 1098–1105.
- Sepeng, N. V. & Makhado, L. 2018. Correlates of Post-Traumatic Stress Disorder Diagnosis among Rape Survivors: Results and Implications of a South African Study. *Journal of Psychology in Africa*, 28, 468-471.
- Setena, T. 2022. GBV survivors break the silence. Available from: <https://www.news24.com/news24/community-newspaper/express-news/gbv-survivors-break-the-silence-20220510> [Accessed: 25/09/2024].
- Sobuwa, Y. 2018. Why did Khensani Maseko end it all. August 07, Sowetanlive. Available from: <https://www.sowetanlive.co.za/news/south-africa/2018-08-07-why-did-khensani-maseko-end-it-all/> [Accessed 20/09/2024].
- South African Police Service. 2024. Crime statistics integrity. Available from: https://www.saps.gov.za/resource_centre/rc_index.php [Accessed: 01/10/2024].
- Solomons, L. 2022. 'I survived suicide to share my story': Gang rape victim on a mission to empower others. Available from: <https://www.news24.com/news24/southafrica/news/i-survived-suicide-to-share-my-story-gang-rape-victim-on-a-mission-to-empower-others-20220817> [Accessed: 07/08/2024].
- The Media Online. 2024. South Africa's top 10 online publications. Available from: <https://themediainline.co.za/2024/01/south-africas-top-10-online-publications/> [Accessed: 1/10/2024].
- Tjiya, E. 2020. Lerato Moloji opens rape case against comic. August 6, Sowetanlive. Available from: <https://www.sowetanlive.co.za/entertainment/2020-08-06-lerato-moloji-opens-rape-case-against-comic/> [Accessed: 20/09/2024].
- Weiss, K.G. 2009. "Boys will be boys" and another gendered accounts: An exploration of victims' excuses and justification for unwanted sexual coercion. *Violence Against Women*, 15(7), 810-834.
- Willan, S, Mngadi, S, Shai, N, Majola, T, Gounden, T, Jewkes, R, Mabhida, M & Machisa, M. 2024. South African rape survivors' expressions of shame, self-blame and internalized-stigma. *Elsevier Journals*, 5, 1-9.

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Wyatt, G.E., Davhana-Maselesele, M., Zhang, M., Wong, L.H., Nicholson, F., Sarkissian, A.D., Makhado, L. & Myers, H.F. 2017. A Longitudinal Study of the Aftermath of Rape Among Rural South African Women. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(3), 309-31.