2015

The contribution of negative social responses to self-blame among survivors of sexual violence : a psychodynamic and sociocultural perspective

Jessica J. Somers
Smith College

The Contribution of Negative Social Responses to Self-Blame Among Survivors of Sexual

Violence: A Psychodynamic and Sociocultural Perspective

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

Jessica Somers

Smith College School for Social Work
Northampton, Massachusetts 01063

2015

Jessica Somers
The Contribution of Negative Social Responses to Self-Blame Among Survivors of Sexual Violence: A Psychodynamic and Sociocultural Perspective

ABSTRACT

Survivors of sexual violence often blame themselves for harms committed against them, echoing the negative responses they receive from others upon disclosure. While it appears that the hostile social climate surrounding sexual violence disclosure contributes to self-blame, the mechanism by which negative responses exert this pernicious influence has not been sufficiently articulated in prior research. Responding to this deficit, this theoretical investigation addresses three questions: 1) What is the psychic mechanism by which negative social responses engender self-blame among survivors of sexual violence? 2) What social factors explain why this mechanism is activated around sexual violence disclosure? 3) What are the implications for social work practice? To address these questions, this study synthesizes key concepts from Kleinian developmental theory and post-structural feminist theory to examine the contribution of negative social responses to self-blame among survivors of sexual violence, with specific attention to the psychic and social factors underlying negative social responses and self-blame. Implications for clinical work with individual survivors of sexual violence and broader prevention efforts are explored.

ACKNOWLEDGEMENTS

THE CONTRIBUTION OF NEGATIVE SOCIAL RESPONSES TO SELF-BLAME

TABLE OF CONTENTS

Chapter I

Introduction

The public censure of women as if we are rabid because we speak without apology about the world in which we live is a strategy of threat that usually works. Men often react to women's words−speaking and writing−as if they were acts of violence; sometimes men react to women's words with violence. So we lower our voices. Women whisper. Women apologize. Women trivialize what we know. Women shut up.

−Andrea Dworkin, *Intercourse*, 1987, p. xxx-xxxi

A sweeping national survey by the Center for Disease Control (2010) revealed that one in five women living in the United States experience rape in their lifetime, most often at the hands of acquaintances, friends, and loved ones. Yet research demonstrates that half of women who have survived rape do not identify it as such (Brown, 2013; MacKenzie-Mohr & Lafrance, 2011; Pitts & Schwartz, 1997). Instead, survivors of many forms of sexual violence tend to minimize the severity of their experiences (Moor, Ben-Meir, Golan-Shapira, & Farchi, 2013; Brown, 2013). They doubt the accuracy of their recollections, question the validity of their claim to harm, and wonder if they were really violated at all (Brown, 2013; Herman, 1997). When survivors do identify a traumatic event as violence, they often attribute the perpetrator's actions to their own pre-assault behavior, dress, or even to deficits in their character (Frazier, 1990). Survivors of sexual violence try themselves for the crimes committed against them, and find themselves guilty. Survivors blame themselves.

Self-blame is one of many ubiquitous repercussions of sexual violence, yet it carries uniquely harmful implications for recovery. Self-blame following sexual trauma is associated

with poorer psychosocial functioning, including increased depression, social withdrawal, maladaptive coping, and depleted self-esteem (Meyer & Taylor, 1986; Frazier, 1990; Hassija & Gray, 2012, Sigurvinsdottir & Ullman, 2014). Although some clinicians and researchers have proposed that self-blame could serve an adaptive function, the few empirical studies that exist overwhelmingly demonstrate its harmful impact on the wellbeing of survivors[1]. If self-blame is detrimental to recovery, how then can its pervasive presence be understood?

Many have drawn an intuitive link between self-blame and the social climate surrounding sexual violence disclosure. Cultural beliefs surrounding gender and sexuality reflect a narrow definition of what constitutes true sexual violence and who may claim victimhood. In this social context, many forms of sexual coercion between men and women are not recognized as violence at all (Gavey, 2005). Even when an incident is acknowledged as rape or assault, survivors are often regarded as precipitating the attack, while perpetrators rarely face repercussions of any kind (Brown, 2013; Campbell, 2008; Jordan, 2004; Krakhauer, 2015). In this cultural climate, sexual violence disclosure is often met with indifference or skepticism (Jordan, 2014). Survivors who speak to friends, family, medical providers, police, and others about their abuse often receive feedback that blames them for the incident, minimizes the harm of the assault, or questions the veracity of the survivor's account (Campbell, 2008; Clark, 2014; Jordan, 2004; Koepke, Eyssel, & Bohner, 2013). These harmful messages are known in the literature as negative social responses.

Substantiating the intuitive link between negative social responses and self-blame, a small but compelling body of research demonstrates that the two are indeed interrelated. Self-blame and negative social responses are consistently correlated across studies, and some research suggests that negative social responses may generate or intensify self-blame in the wake of

---

[1] See Chapter III for a review.

sexual trauma (Sigurvinsdottir & Ullman, 2014). However, studies attempting to explicate the

precise relationship between self-blame and negative social responses have produced mixed and

inconclusive findings. The ambiguous nature of empirical research reflects the complexity of the

phenomenon, suggesting the need for further investigation.

Considering the interrelationship between negative responses and self-blame, it is not

sufficient to view self-blame as the private inner experience of sexual violence survivors.

Although attribution of blame is a personal navigation specific to each survivor, the responses of

friends, family, service providers, and medico-legal institutions affect the extent to which

survivors experience shame and culpability for the violence committed against them. Thus, the

phenomenon of self-blame cannot be understood outside of the broader social context

surrounding sexual violence disclosure. A thorough analysis of self-blame must therefore

consider the contribution of negative social responses to survivors' self-perceptions, with

attention to the cultural forces that normalize and condone the sexual exploitation of women and

discourage survivors from speaking out.

This thesis is an attempt to deepen the current understandings of self-blame by examining

the contribution of negative social responses, as both arise within the broader social climate

surrounding sexual violence. This project has specific relevance for to the field of social work.

Social workers have a professional commitment to prevent and eliminate the "domination of,

exploitation of, and discrimination against" groups who are oppressed on the basis of identity,

including gender (National Association of Social Workers [NASW], 2014). Consistent with this

aim, my analysis addresses sexual violence as an important domain of women's oppression,

situating self-blame and negative social responses within this sociocultural context. Further,

many clinicians work directly with women who have experienced sexual violence. It is important

that we bring a nuanced understanding to this work, addressing the complexity of self-blame in a way that both honors the survivor's lived experience and resists reinforcing the injurious messages survivors encounter in the social world.

In the analysis that follows, I explore the contribution of negative responses to self-blame, utilizing concepts from Kleinian developmental theory and post-structural feminist theory. My hope is that these two theoretical perspectives will produce an understanding of self-blame that considers both the emotional and structural dimensions of the phenomenon. Kleinain developmental theory is a branch of psychoanalytic thought that lends itself to examining the interplay between inner experience and the social world, and thus is well suited to describe the affective processes underlying self-blame and negative social responses. Post-structural feminist theory is concerned with the ways in which systems of power are produced and reproduced at the level of the individual, through macro and micro social relations. This will provide a sociocultural context for examining self-blame and negative social responses as both relate to women's oppression. I believe that the synthesis of these two conceptual lenses will address important aspects of the phenomenon that have not been explored elsewhere.

The following chapter will outline my conceptualization and methodology for examining the contribution of negative social responses to self-blame among survivors of sexual violence. In this chapter, I provide a theoretical framework for the analysis that follows, define key terms, discuss the strengths and limitations of my approach, and disclose possible sources of bias.

Chapter II

Conceptualization and Methodology

Empirical efforts to the illuminate the precise contribution of negative social responses to self-blame have produced mixed and inconclusive findings. While it appears that the hostile climate surrounding disclosure of sexual violence exacerbates self-blame, the mechanism by which negative responses exert this pernicious influence has not been sufficiently articulated. Further investigation is necessary in order to enrich our understanding of the complex etiology of self-blame. Responding to this need, my thesis offers a theoretical framework for examining the interplay between negative social responses and self-blame, within the sociocultural context of women's oppression. My analysis attempts to address three central questions related to this phenomenon: 1) What is the psychic mechanism by which negative social responses engender self-blame among survivors of sexual violence? 2) What social factors explain why this mechanism is activated around sexual violence disclosure? 3) What are the implications for social work practice? To address these questions, I have selected two theories, Kleinian developmental theory and post-structural feminist theory, which I will use to discuss the contribution of negative social responses to self-blame among survivors of sexual violence. In this chapter, I provide a theoretical framework for the remaining chapters. I begin by briefly introducing the theories I will use to consider the phenomenon. I then outline my method of analysis and identify possible sources of methodological bias. Finally, discuss the strengths and limitations of using this theoretical approach to examine the chosen phenomenon.

Theoretical Framework

I have selected two theoretical perspectives from which to consider the contribution of negative social responses to self-blame, including Kleinian developmental theory and post-structural feminist theory. Both theories view individual experience as arising within and responding to the social environment. As such, each offers possibilities for considering how an inner experience of self-blame could be impacted by negative responses from the external world. Kleinian theory focuses on the interaction between interpersonal and intrapsychic processes, with particular attention to how affective experience may be unconsciously transmitted from one person to another. Post-structural feminist theory is concerned with the relationship between individual experience and broad systems of social power, as both influence each other. Together, these two theories provide complementary perspectives from which both the social and psychic aspects of the phenomenon may be considered. My hope is that the synthesis of these two conceptual lenses will yield a novel understanding of the contribution of negative social responses to self-blame.

As stated above, Kleinian developmental theory offers a conceptual framework that bridges the divide between inner experiences and events in the social environment. As a psychoanalytic theory, Kleinian theory is primarily focused on unconscious internal processes as they occur in the context of interpersonal relationships. This theory is best equipped to describe inner affective experiences as they influence and are influenced by others in the social world. Because Kleinian theory lends itself to such analysis, Kleinian concepts have been applied in many discourses to illuminate the psychic underpinnings of various oppressive social relations (racial microaggressions, for example). I aim to use Kleinian theory similarly, to illuminate the

psychic mechanism by which negative social responses engender self-blame among survivors of sexual violence, thereby enforcing a patriarchal social system.

Kleinian theory alone lacks the analysis of culture and power necessary to address the phenomenon as it exists within the broader context women's oppression. Kleinian concepts are not explicitly concerned with gender hierarchy, and thus do not offer an understanding of why certain psychic processes would fall along gendered lines, or be activated around issues sexual violence disclosure. To address this aspect of the phenomenon, I explore a feminist post-structural understanding of the role of sexual violence in producing and enforcing patriarchal systems of power. This theory examines the ways in which women's oppression is produced and reproduced at the level of the individual, and manifest in both micro and macro social relations. Post-structural feminism is specifically concerned with the ways in which culturally-produced systems of power shape individual identities, beliefs, and choices, which in turn re-produce systems of power. I have selected a post-structural lens because of this unique focus on the mutually-constitutive relationship between individual experience and patriarchal power relations. This provides a sociocultural context for my application of Kleinian concepts to address the phenomenon.

Plan for Analysis

In my discussion in Chapter 6, I use Kleinian developmental theory and feminist post-structural theory to analyze the contribution of negative social responses to self-blame among survivors of sexual violence. I synthesize key concepts from both theories to describe the psychic and social factors underlying negative social responses and self-blame[2]. First, I argue that patriarchal cultural norms surrounding sexuality create a paranoid/schizoid relationship to women. I propose that women's disclosure of sexual violence implicitly challenges patriarchal

---

[2] See Chapter IV and V for a thorough review of the terms referenced here.

norms, activating persecutory anxiety within society. Second, I argue that negative social responses generate self-blame among survivors by means of projective identification, a key defense against anxiety in the paranoid/schizoid position. I assert that through negative social responses, society locates unwanted and disavowed affects in the survivor, simultaneously alleviating anxiety provoked by sexual violence disclosure and reestablishing a patriarchal social order in which women are held responsible for crimes committed against them. Finally, I propose that the depressive position offers an alternative to paranoid/schizoid way of relating to survivors of sexual assault, which allows for fuller consideration of women's complex subjectivities. I conclude by exploring the implications of my analysis for both clinical work with individual survivors of sexual violence, and for broader prevention efforts.

Definition of Key Terms

       Women. For the purpose of this thesis, the term, *women,* refers specifically to cisgender people who identify as female (i.e. those women whose gender identity is consistent with their birth-assigned sex)[3]. It is important to note that this definition excludes transwomen, whose experiences of sexual violence warrant further study.

       Sexual violence. As defined by the CDC (2010), *sexual violence* is "any sexual act that is perpetrated against someone's will. Sexual violence encompasses a range of offenses, including a completed nonconsensual sex act (i.e., rape), an attempted nonconsensual sex act, abusive sexual contact (i.e., unwanted touching), and non-contact sexual abuse (e.g., threatened sexual violence, exhibitionism, verbal sexual harassment)" (Definitions section).

---

[3] See "Strengths and Limitations" section of this chapter for the rationale and limitations of using this narrow definition of women.

Survivor. An alternative to the term, *victim*, that describes any person who has experienced sexual violence of any kind. Because my analysis is focused on women's experiences, *survivor* as it is used in this paper refers specifically to cisgender women.

Sexual violence disclosure. Refers to the act of speaking to others about one's own experience of sexual violence.

Self-blame. Refers to a survivor's sense of guilt, shame, or culpability following sexual violence, including judgments about her behavior or character, leading to a sense that she is at-fault for the violence.

Negative social responses. A range of harmful responses to sexual violence disclosure, including blaming, failure to believe the survivor, minimizing the severity of the assault, treating survivors differently following disclosure, distancing from the survivor, attempting to control the situation, and "egocentric" reactions that move focus away from the survivor's emotions and needs.

Kleinian developmental theory. A branch of psychoanalytic theory first developed by Melanie Klein and expanded upon by subsequent theorists.

Post-structural feminist theory. A branch of feminist theory that regards gender and sexuality as socially constructed.

Discourse. Shared, culturally-defined understandings which provide templates for thinking about, talking about, and acting in relation to something (gender, for example).

Dominant sexual discourse- Cultural understandings and behavioral norms that define men as sexually aggressive and women as passive, while maintaining that women's sexuality provokes male violence. Dominant sexual discourse provides behavioral templates that excuse

male violence, minimize the severity of sexual violence, and hold women responsible for preventing it.

Women's Subjectivity- How a woman views her identity, sexuality, desires, and the actions available to her, assumed to be influenced by dominant messages in the social environment.

Disclosure of Methodological Biases

My investigation into this topic will reflect my perspective as a psychodynamically-oriented feminist social worker. My consideration of the phenomenon, including my selection of evaluative theories and subsequent analysis, is informed by this worldview. Specifically, my research will rest on the feminist assumption that sexual violence expresses and reinforces the patriarchal oppression of women. My consideration of this topic is further shaped by the conviction that negative responses to sexual assault disclosure serve to bolster male dominance by condoning the exploitation of women's bodies and silencing survivors' voices. I view patriarchy, sexual violence, and the social norms that uphold them as corrosive to society and antithetical to a vision of social justice. Additionally, the research will reflect my belief in the relative weight of unconscious processes in determining human behavior, both at an individual and collective level, consistent with my perspective as a psychodynamic clinician. Finally, my writing will inevitably bear the mark of my own position within social systems as a middle-class, white, cisgender woman living in the United States, an identity that offers both insights and deficits in understanding the lived experience of sexual violence and sexual violence disclosure. While I aim to generate a broadly-applicable understanding of the phenomenon, it is important to note that my perspective is not universal, and does not reflect the diversity of women's understandings of sexual violence in the United States and across the globe.

Strengths and Limitations

The ideas developed in this thesis do not aim to objectively explain the phenomenon. Rather, my hope is to add to current understandings of self-blame by offering an additional theoretical perspective from which the self-blame may be considered in a broader social context. I believe that this theoretical method of analysis will allow for nuances and connections to emerge in ways that they would not in an empirical project. The findings I present can be integrated with other perspectives, adding complexity to current understandings of self-blame. This theoretical approach allows for a creative fusion of ideas, which can later be explored further in empirical investigations. Further, my decision to consider survivors' personal experiences within the social climate surrounding sexual violence is congruent with social work's person-in-environment perspective, and upholds my professional commitment to understanding and working to dismantle systems of oppression as a social worker. Additionally, the psychodynamic focus makes my findings particularly applicable to psychotherapeutic practice with survivors of sexual violence.

However, such an approach has limitations. Although I have carefully considered multiple empirical and theoretical perspectives on the topics of self-blame and negative social responses, the assertions put forward in my discussion are not substantiated by a scientific method of analysis. Future research will be necessary to test the validity of my conclusions, ideally by examining the direct accounts of survivors. Further, as a purely theoretical project, this thesis does not directly incorporate the voices of the populations being discussed. My analysis will thus be constrained by the limitations of available literature. Most strikingly, there is an overall paucity of literature examining the direct accounts of survivors. Although the prevalence

of self-blame and it's deleterious impact on recovery has been demonstrated repeatedly across empirical studies, there is very little literature exploring the ways in which survivors themselves experience and make sense of self-blame in the wake of trauma. Further, much of the knowledge of the psychology of negative social responses emerges from experimental studies in which observers respond to fictional vignettes of rape scenarios. Though this experimental design allows for the manipulation of specific variables, it likely does not capture the complexity of actual sexual violence, and can at best approximate observer responses in the real world. In general, research findings regarding both self-blame and negative social responses may not be generalizable to the national or global population, as the majority of research participants are undergraduate and graduate students from the United States. The information revealed in these studies fails to sufficiently reflect the perspectives of populations typically underrepresented in college settings, and in the research field more generally. This limitation is especially troubling as populations less likely to be represented in the literature are also the most frequent targets of victim-blame and other negative responses to disclosure, including people of color, from low SES background, immigrant populations, and others. To the extent possible, I attempted to mitigate this effect by seeking out and incorporating literature that represents perspectives beyond the typical sample.

The narrow scope of this theoretical investigation also fails to address many populations impacted by sexual violence. Because the social climate surrounding sexual violence is so profoundly linked to gender norms, it is beyond the scope of this thesis to address the nuances of blame attribution across the gender spectrum. My research will focus specifically on the impact of negative social responses on self-blame among cisgender female survivors of sexual violence, and will not directly address similar phenomenon among transgender and male survivors of

sexual violence. The social attitudes underlying negative responses to transgender and male survivors overlap with yet are distinct from, those influencing social responses to women who disclose their experiences of violence. My focus on negative responses targeting female survivors reflects my interest in the role that these responses play in sustaining patriarchal oppression of women. However, further study of the particularities of social responses and their effect on self-blame experienced by men and transgender survivors is warranted, especially in light of research that suggesting that male and transgender survivors encounter higher levels of victim-blame than do cisgender women.

The following chapter will introduce the readers to the phenomenon of self-blame as it is embedded within and impacted by the social climate surrounding sexual violence disclosure. This chapter will review the existing literature regarding both self-blame and negative social responses, including the scope and prevalence of self-blame, implications of self-blame for recovery from trauma, and the relationship of self-blame to negative social responses.

Chapter III

The Contribution of Negative Social Responses to Self-Blame Among Survivors of Sexual

Violence

Sexual Violence and Self-Blame

Sexual violence is a widespread and corrosive social problem that affects individuals across lines of race, ethnicity, gender, social class, age, and sexual orientation (Koepke, Eyssel, Bohner, 2013). Though sexual violence affects people of all genders, women are disproportionally targeted. Only 1 in 71 men living in the US experience rape in their lifetime, compared to 1 in 5 (Center for Disease Control [CDC], 2010). For women who hold one or more marginalized identities, such as women of color and women with low socioeconomic status, this risk is increased (CDC, 2010). Due to the gendered dimension of sexual violence, feminist scholars have long argued that rape and sexual assault function as forms of gender oppression by reinforcing women's powerlessness and disregarding their right to bodily autonomy (Ahrens, 2006; Moor & Farchi, 2011). The fact that sexual violence disproportionately targets women with marginalized identities suggests that this form of gender oppression serves to bolster other systems of social hierarchy. For example, the continuous and widespread rape of Native American women by White men is understood to be part of the current and historical oppression of Native Americans in US society (Amnesty International, 2007).

Rape and sexual assault are traumatic events associated with a wide range of psychosocial repercussions. Most commonly, these include fear, anxiety, depression, substance abuse, and post-traumatic stress disorder (PTSD) (McDonald & Koss, 2010). Additionally, survivors consistently describe feeling profoundly dehumanized, noting persistent feelings of humiliation and shame that linger in the wake of the event (Moor, Ben-Meir, Golan-Shapira,

14

Farchi, 2013). Though many distressing experiences can result in post-traumatic symptoms, rape is unique in the extent and severity of its sequelae (Moor & Farchi, 2011). The majority of rape survivors meet criteria for PTSD in the immediate aftermath of their assault, with between 30-50% continuing to have symptoms months later (McDonald & Koss, 2010; Moor & Farchi, 2011).

Sexual violence disrupts the survivor's fundamental assumptions regarding the safety and predictability of the world around her, and challenges core beliefs about self and others. The survivor's effort to understand a traumatic experience thus becomes an important component of recovery. It has been suggested that one way that survivors making meaning of their experience is through attribution of blame for the traumatic event (Hassija & Gray, 2012; Littleton, Magee, & Axosm, 2007). The judgments survivors make as they grapple with questions of how and why the violence occurred have powerful implications for their recovery (Moor & Farchi, 2011; Ullman, 2010; Ullman 1999; Ullman 1996). Among survivors of sexual violence, there is a unique tendency to hold themselves responsible for causing or failing to prevent the traumatic event (Frazier, 1990; Hassija & Gray, 2012; Libow & Doty, 1979; Meyer & Taylor, 1986; Moor & Farchi, 2011; Pitts & Schwartz, 1997). This type of self-targeting attribution is known as self-blame. Though similar judgments are noted among survivors of various traumatic events, self-blame is most prevalent and severe among survivors of sexual violence compared with other traumas and has a more significant influence on several measures of adaptation and recovery (Moor & Farchi, 2011). Given the unique prevalence and intensity of self-blame among survivors of sexual violence, a small but substantial body of research has attempted to determine the etiology and psychological impact of this puzzling phenomenon.

Nature, Etiology, and Impact of Self-Blame

Historically, self-blame among survivors of sexual assault was considered a maladaptive response indicative of psychopathology (Rose, 1986). This view of self-blame as evidence of mental deficit coincided with classical psychoanalytic representations of women as inherently masochistic (Rose, 1986). In opposition to the pathologizing nature of these earlier formulations, feminist researchers in the 1970's began to investigate possible adaptive functions of self-blame. In her innovative 1979 study, Janoff-Bulman argued that prior understandings of self-blame obscured essential distinctions between adaptive and maladaptive forms. She proposed that self-blame can be either behavioral or characterological in nature, with each subtype carrying different implications for recovery. While characterological self-blame clearly impedes recovery, Janoff-Bulman argued that behavioral self-blame serves an adaptive function. In behavioral self-blame, the survivor holds that some aspect of her behavior caused or failed to prevent the assault. Janoff-Bulman asserted that behavioral self-blame allows the survivor to feel that she can prevent future violence by taking different actions, allowing her to restore a sense of control and safety in the wake of trauma. In contrast, characterological self-blame refers to the survivor's belief that the assault was caused by an inner defect. Because character is perceived to be immutable, this form of blame frames past and future assaults as deserved and inevitable, and undermines rather than restores the survivor's sense of agency (Janoff-Bulman, 1979; Moor, Ben-Meir, Golan-Shapira, & Farchi, 2013). Janoff-Bulman went on to note that although the majority of survivors display some degree of behavioral self-blame, relatively few demonstrate the maladaptive beliefs distinctive to characterological self-blame. Later research found that characterological blame is indeed less common, though still substantially present among survivors of sexual violence (Ullman, 1996).

Some subsequent research has supported the distinction between these subtypes of blame, and they remain salient categories today. However, further investigations have failed to demonstrate that either behavioral or characterological blame serve an adaptive function. In a study investigating the relationship between both forms of blame and post-rape adjustment, Meyer and Taylor (1986) found that all types of blame are associated with poorer post-rape adjustments. Similarly, Katz and Burt (1988) found that self-blame immediately following assault was associated with increased measures of fear and depression, as well as depleted self-esteem. Fraizer's (1990) investigation of the prevalence and impact of both types of self-blame further undermined the hypothesis that behavioral blame could serve an adaptive function. She found that while believing that future rapes can be prevented is indeed associated with better adjustment, behavioral self-blame does not contribute to this belief (Frazier, 1990). Consistent with other research, Frazier's study also found both forms of blame to be significantly associated with increased depression.

Despite the possibility that self-blame could represent a psychological effort towards adaptation, it is currently well recognized that self-blame in all forms is detrimental to recovery for survivors of sexual violence (Beck, Reich, Woodward, Olsen, Jones, Patterson, 2013; Frazier, 1990; Hassija & Gray, 2012; Libow & Doty,1979; Meyer & Taylor, 1986; Moor & Farchi, 2011; Pitts & Schwartz, 1997; Sigurvinsdottir & Ullman, 2014; Ullman, 1996; Ullman, 2014). The consistent evidence is that the attributions made by rape victims are an important predictor of adjustment both in the immediate aftermath of the assault and long into the future, and that self-blaming attributions are associated with poorer self-rated recovery and increased psychological symptoms (Beck et. al, 2013; Frazier, 1990; Hassija & Gray; Meyer & Taylor, 1986; Moor & Farchi, 2011; Sigurvinsdottir & Ullman, 2014; Ullman, 1999).

If self-blame does not effectively aid adaptation, how then can its persistent presence be understood? In answer to this question, researchers and clinicians alike have noted the ways in which survivors' self-blame closely mirrors the social climate that habitually holds them accountable for their assault (Moor & Farchi, 2011; Pitts & Schwartz, 1997). This social environment is assumed to shape the conclusions that survivors draw as they seek to make meaning of their experience. The following section explores this social context, in order to better understand its contribution to survivors' self-blame attributions.

The Social Context of Sexual Violence Disclosure

Survivors of sexual violence are particularly stigmatized (Moor & Farchi, 2011; Pitts & Schwartz, 1997). Those who chose to disclose their experience do so in a singularly hostile social environment, one that habitually minimizes the severity of the event or fails to recognize it as violence at all. Even when a rape or assault is acknowledged as a legitimate offense, survivors are frequently held accountable for the violence that occurred, and are viewed as culpable for provoking or failing to prevent the incident. Though some degree of similar attitudes have been noted in response to survivors of various forms of trauma, Ullman (1999), a leading researcher in this field of study, reports that victims of sexual violence are most likely to face negative social reactions. Moor and Farchi (2011) observe that, "only rape survivors face a unified accusatory social ideology, collective blaming, and a rather sweeping lack of support."

This unified ideology has been linked to a specific set of counterfactual beliefs surrounding what constitutes "real rape," and who qualifies as a "real victim"(Ullman, 2010). These beliefs are known in the research literature as rape myths, and are endorsed by up to 50% of the population (Ullman, 2010). *Rape myths* are largely understood to reflect underlying sexist attitudes generally held in society. A conviction that women precipitate, provoke, or desire to be

raped is at the heart of these beliefs (Bieneck, & Krahé 2011; Van der Bruggen & Grubb, 2014). Thus, rape myths function to attribute blame and responsibility primarily to survivors, and contribute to a culture of permissiveness surrounding sexual violence (Ullman, 2010).

The feedback that survivors receive in this uniquely accusatory context is known in the literature as negative social responses. In a review of the research examining social support and recovery from sexual assault, Ullman (2010) reports that a substantial proportion of sexual assault victims face negative responses when they disclose their abuse. These may be intentionally or unintentionally harmful, and include blaming, failure to believe the survivor, minimizing the severity of the assault, treating survivors differently following disclosure, distancing from the survivor, attempting to control the situation, or "egocentric" reactions that move focus away from the survivor's emotions and needs. Such responses often come from informal support providers, including romantic partners, family and friends (Sigurvindottir & Ullman, 2014; Campbell, 2008). Service providers such as physicians, police, and court officials often echo these responses as survivors seek medical and mental health care or attempt to take legal action following an offense (Campbell, 2008; Koepke, Eyssel, & Bohner, 2014; Pedersen & Stomwall, 2013). In addition to these individual negative responses, formal and informal policies and procedures in legal agencies often reflect a mistrustful or blaming stance. For example, survivors who file reports in the wake of assault are routinely confronted with extra-legal questioning regarding their dress at the time of the incident, prior sexual history, and whether they derived sexual enjoyment from the assault (Campbell, 2008; Jordan, 2004; Koepke, et al, 2014).

Though such responses are pervasive, not all survivors are equally likely to be subjected to negative reactions (Ullman, 1999). Survivors of violence that falls outside of the narrow "real

rape" stereotype are at greatest risk of receiving negative social responses. These include scenarios in which the survivor was drinking prior to their assault, had a prior relationship to the perpetrator, or did not physically resist the assault, among others (Ullman,1999; Ullman, 2010; Van der Bruggen & Grubb, 2014). Research also indicates that women who hold marginalized identities, including women of lower socioeconomic status, women of color, women who belong to sexual minority groups, women with disabilities, and women with mental illness are most likely to receive negative or unhelpful responses upon disclosure (Campbell, 2008; Ullman, 2010; Ullman, 1999; Van der Bruggen & Grubb, 2014). Yet, despite the hostile social climate surrounding disclosure, the vast majority of survivors speak of their experience to at least one person (Ullman & Peter-Hagene, 2014; Sigurvinsdottir & Ullman, 2014).

The harmful impact of negative social responses at both institutional and interpersonal levels is so well recognized that it is often termed the "second victimization" or "second rape." Negative social reactions of all kinds have been shown to have a robust harmful impact on recovery. Multiple studies demonstrate that negative social reactions are strongly associated with increased psychological symptoms, including those associated with depression and PTSD, as well as maladaptive coping, social withdrawal, and increased risk of revictimization (Campbell, 2008; Davis, Brickman, & Baker, 1991; Hassija & Gray, 2012; Ullman, 2010; Ullman, 1999; Ullman, 1996, Ullman & Peter-Hagene, 2014; Sigurvinsdottir & Ullman, 2014). Both qualitative and quantitative research has attempted to account for the specific ways in which negative social responses exert this negative impact on recovery. Ullman and Peter-Hagene have sought to understand the repercussions of negative social responses on survivor's use of coping strategies, as these impact their self-rated recoveries as well as measures of symptom severity. In one study, they found that negative social reactions to assault disclosure relate to greater PTSD symptoms

by encouraging survivors to engage in withdrawal coping, discouraging social engagement, and by lowering the survivor's perceived control over their recovery (Ullman and Peter-Hagene, 2014). A similar way in which negative social reactions is believed to harm adjustment is by discouraging survivors from speaking of their assault, an effect commonly referred to as *silencing*. In a qualitative analysis of survivor interviews, Ahrens (2006) found women who had initially disclosed their abuse and then ceased to discuss it attributed their silence to negative social reactions, and believed that this inability to speak of their experiences harmed their recovery. Additionally, self-blame is widely theorized to be another mechanism by which negative social reactions impact recovery. The following section will explore the specific relationship between negative social responses and self-blame, as both relate to the survivor's ability to adapt and recover from sexual violence.

Negative Social Responses and Self-Blame

As described above, numerous studies demonstrate an association between negative social responses and impairment across various measures of recovery. A similar association between poor recovery and self-blame is also well established, as noted earlier in this chapter. It appears that both social responses and self-blame represent vulnerability factors for developing psychological difficulties in the wake of sexual violence. Further, self-blame and negative social responses are consistently correlated in numerous studies. Yet despite the clear evidence of strong relationships between self-blame, negative social responses, and poor recovery outcomes, the nature and directionality of these relationships remain unclear.

Many scholars and researchers surmise that negative social responses generate or exacerbate self-blame among survivors. Moor and Farchi (2011) contend that negative social responses contribute directly to self-blame, writing, "The internalized collective charges of

victim precipitation[4] regularly turn in to self-condemnation" (p. 449). To support this charge, they reference prior research indicating that self-blame occurs in proportion to the level to which survivors perceive non-consensual sex to be condoned in the social milieu. Similarly, Victoria Pitts' (1997) qualitative analysis of the accounts of "hidden" rape survivors, who do not identify their experience as rape, revealed that blaming responses commonly increased self-blame and consequently obstructed survivors' ability to recognize their experience as rape. She writes, "Rape survivors clearly are internalizing what others are telling them about who is at fault for unwanted, nonconsensual intercourse, whether it is a generalized, societal other or the specific peers with whom they discuss their experience" (p. 7). Ahrens's (2006) study, noted in the above section, found that self-blame and embarrassment were generated by negative responses to disclosure, and lay at the heart of survivors' decisions to remain silent.

Despite the intuitive appeal of such formulations, none of the above studies attempted to empirically demonstrate the causal relationship between self-blame and negative social responses. However, a small number of quantitative studies have sought to explicate the precise relationship between self-blame and negative social responses as they relate to various measures of recovery. Some researchers have noted that a lack of longitudinal studies prevents conclusive causal inferences (Ullman, 1999). Nevertheless, several cross-sectional investigations have conducted path analyses to determine the direction of influence between self-blame, negative social responses, and various measures of recovery. Their findings are variable, suggesting that the relationship between self-blame, negative social responses and recovery is extremely complex.

---

[4] *Victim precipitation* refers to the idea that victims provoke or "precipitate" sexual violence, usually through sexually provocative behavior or attire.

Ullman and various co-researchers have conducted multiple studies to illuminate these relationships, with mixed results. One such investigation examined both self-blame and coping strategies as possible mechanisms through which social reactions affect adjustment (Ullman, 1996). The investigation poses the question: Do negative social reactions induce self-blame and maladaptive coping strategies, thereby exerting an indirect harmful influence on adjustment? Seeking further specificity, the study sought to examine the individual effects of distinct types of social reactions on both characterological and behavioral blame. The findings supported prior research showing that all negative social reactions have a strong and direct effect on adjustment, both in the immediate aftermath of the assault and years in the future (Ullman, 1996). Further, characterological blame was highly correlated with negative social responses, though interestingly this was not the case for behavioral blame. However, neither characterological nor behavioral self-blame mediated the association of negative social reactions to self-rated recovery, though the authors note that this result should be viewed with caution due to the limited reliability of the method of analysis. Thus, the precise ways in which self-blame attributions and negative social responses influence each other remained unclear.

A similar study conducted by Ullman and Sigurvinsdottir in 2014 produced different results. This study continued the inquiry into whether characterological and behavioral blame related differently to social reactions, as well as problem drinking, which was viewed as a measure of recovery. This study explored the question, Does either type of self-blame mediate between social reactions and problem drinking? Similar to the early study, this investigation also considered the specific impacts of various kinds of negative social responses as they related to each form of self-blame. A correlation analysis indicated that characterological and behavioral blame frequently co-occurred, and both were strongly associated with all forms of negative

reactions, as well as problem drinking. Using path analyses, Ullman & Sigurvinsdottir (2014) further attempted to explicate the direction of influence between these highly correlated variables. The results revealed that negative social reactions appeared to induce characterological self-blame, which mediated the relationship between social reactions and problem drinking. Among the various forms of negative social responses, victim blaming, taking control, and distancing from the survivor seemed to increase both forms of blame, but were particularly predictive of characterological blame. Summarizing their conclusions, Ullman & Sigurvinsdottir write, "The study shows that self-blame of one's character may be due to negative social reactions from others, and that problem drinking may also be adversely effected" (p. 8).

Revisiting Ullman's 1996 finding that self-blame does not mediate the relationship between negative social reactions and maladaptive coping, Hassija and Gray (2012) hypothesized an inverse relationship in which survivor's self-blame elicited negative social responses, which in turn exacerbated PTSD symptoms by encouraging social withdrawal and greater reliance on avoidance coping skills. While self-blame is typically thought to mirror blaming responses from others, the authors speculated that survivors who represent themselves as blameworthy negatively bias the perceptions of others. Their findings confirmed prior research demonstrating associations between self-blame, negative social reactions, and poorer psychological outcomes. Interestingly, they found a small, but significant indirect effect of negative social responses to increased PTSD, through the mediator of self-blame. These findings complicate the picture of causal pathways between negative social responses and self-blame by suggesting that self-blame may in fact exacerbate negative social responses from others.

Conclusion

The mixed nature of empirical results reflects the complexity of the phenomena of self-blame among survivors of sexual violence, as self-blame shapes and is shaped by the social environment. The inconclusive findings of empirical research, coupled with qualitative evidence that social responses influence blame, suggests the need for further investigation. The literature clearly demonstrates a relationship between negative social responses and self-blame, both of which frequently co-occur, and are associated with harmful effects. Further, it is assumed that the pernicious and unique phenomenon of self-blame, which so closely resembles the cultural context surrounding sexual violence, is shaped by an environment of negative responses. Research has not yet yielded a thorough understanding of the interrelationship between self-blame and negative social responses. Though many scholars assume that negative social responses produce or exacerbate the phenomena of self-blame, few studies have attempted to explain the precise ways in which the social context of disclosure is transformed and internalized as self-blame. Given the impact of self-blame and negative social responses on recovery, it is clear that such an understanding is necessary to develop effective and clinically appropriate treatment in the wake of trauma.

Further investigation is necessary in order to enrich our understanding of the complex etiology of self-blame. Responding to this need, my thesis will examine the interplay between negative social responses and self-blame. I will attempt to describe the psychic mechanism by which negative social responses engender self-blame, and will explore social factors that shed light on why this mechanism is activated around sexual violence disclosure. To address these questions, I will apply Kleinian developmental theory and post-structural feminist theory to the phenomenon.

Kleinian developmental theory offers a conceptual framework that bridges the divide between inner experiences and events in the social environment (Ogden, 1992; Alford, 1989). As such, Klein's ideas have been used to illuminate broad social phenomena as they relate to and impact individual experiences. In the discussion chapter of this thesis, I will synthesize and apply Kleinian and feminist theories to explicate the interplay between negative social reactions and self-blame among survivors of sexual violence. In order to provide context for this discussion, the following chapter will familiarize the reader with key concepts from Kleinian developmental theory. First, I will briefly contextualize Klein's work within the history of psychoanalysis as it has evolved from Freudian theory. I will then explore the specific concepts from within Kleinian theory that are relevant to this thesis in greater depth.

Chapter IV

Kleinian Developmental Theory

Melanie Klein's Theories in Context

Melanie Klein (1882-1960) is widely considered one of the most influential and controversial theorists since the origination of psychoanalysis by Freud (Berzoff, 2011; Mitchell & Black, 1995; Mitchell, 1981; Segal, 1992). A troubled intellectual who endured bouts of severe depression, Klein encountered Freud's writings in 1914 and was captivated by them (Mitchell & Black, 1995; Segal, 1992). Soon after, she began her clinical work with children, initially her own sons and daughters, Klein presented her first psychoanalytic paper in 1919 (Segal, 1992). She remained an active contributor to the field until her death in 1960, working primarily with children and adults with severe psychosis, both populations that were previously thought to be unanalyzable (Berzoff, 2011; Mitchell & Black, 1995; Mitchell, 1981; Segal, 1992). Although a self-proclaimed follower of Freud, Klein's work extended his ideas considerably, and in some areas departed entirely. In part for this reason, Klein remains one of the most polarizing figures in the field, with both supporters and avid critics (Berzoff, 2011; Mitchell & Black, 1995). Many have questioned her assumptions about the inner workings of the infant mind, criticizing her imaginative descriptions of complex psychic processes unlikely to occur in the first months of life (Funk, 2012). Others have found fault with her arguably speculative attribution of intense urges and emotions, such as hatred, to pre-verbal infants (Berzoff, 2011). However, as scholar Fred Alford (1989) writes, "To take Klein seriously is not necessarily to take her literally…Taking Klein seriously means developing the implications of her thought as consistently and thoroughly as possible, even when these implications are troubling" (p.1).

In order to contextualize Klein's ideas and more fully appreciate her innovations, it is necessary to consider the Freudian concepts from which her work sprung. Freud was a prolific writer and thinker whose ideas shifted greatly over time. Thus, any brief account of his theories is necessarily reductive and incomplete. Nevertheless, I will attempt to capture those aspects that best illuminate Kleinian theory. Like most subsequent psychoanalytic thinkers, Freud believed that early developmental experiences form the foundation of the adult mind. Freud's model of infant development highlights the fundamental role of instinctual drives in shaping the psyche (Berzoff, 2011). Freud proposed that from infancy onward, each of us are driven by innate aggressive and libidinal urges, which Freud terms the "life and death instincts." This is known as Freud's "dual-instinct" theory. In this view, instincts are initially directed towards the self, although they become associated with external objects as the infant gains experience. In psychodynamic theory, term "object" refers to the person or thing towards which impulses are directed, the "object" of aggression, hunger, longing, etc. The prototypical example of this in both Freud's and Klein's writing is the infant's libidinal and aggressive relationship to its mother's breast (Berzoff, 2011; Mitchell & Black, 1995). In a series of developmental stages, culminating with the formation of the superego in the Oedipal phase, expression and gratification of these drives via external objects become gradually restricted in accordance with the demands of society. The ongoing tension between gratification and suppression of the drives becomes the source of all psychic conflict, and shapes the organization of the mind itself. As Mitchell and Black (1995) write, "the mind becomes structured so as to contain, control, and if possible, discharge" these internal impulses.

Klein was one of few theorists who fully embraced Freud's dual-instinct theory (Mitchell and Black, 1995, add more). Though most rejected the highly unsettling notion of an innate death

instinct, Klein made this the centerpiece of her work (Mitchell and Black; 1995). The existence

of innate destructive urges aimed against the self and others is central in Klein's view of both

normal and pathological development and mental functioning. Despite her adherence to Freudian

theory, Klein's theories, including her interpretations of the death instinct, depart from Freudian

thought in striking ways. In contrast to Freud's view that the instinctual drives become a source

of anxiety and conflict in the oedipal moment (as the child experiences castration anxiety and

later internalizes this as guilt), Klein believed that the death instinct produced powerful anxiety

and conflict from the first moments of life (Joffe, 1969; Mitchell and Black, 1995; Segal, 1992).

In her view, the infant experienced the death instinct as threatening to destroy the self, or "ego,"

from within, a phenomena she termed "annihilation anxiety." This inborn fear, and the defenses

the infant deploys to manage it, paint a picture of "a continually shifting, kaleidoscopic stream

of primitive, phatasmagoric images, fantasis, and terrors," an image of the psyche which

contrasts the highly structured, relatively stable internal world described by Freud (Mitchell and

Black, 1995).

      Klein ushered in another important conceptual shift by focusing on the infant's

relationship to external others, and the ways in which these relationships are represented in the

infant's inner world and fantasies. While Freud viewed interactions with external objects as

somewhat incidental to the life and death instincts, for Klein the drives are always wedded to

objects in the external world and their internal counterparts (Mitchell, 1981; Rasmussen &

Salhani, 2010). In Kleinian thinking, the experience of aggressive and libidinal urges necessarily

implies an object towards which hateful or loving feelings are directed. Quoting Alford (1989),

Rassmussen and Salhani (2010) write, "The idea of the object in Kleinian thinking includes both

the gratification of the drive as well as the seeking of the object…Accordingly, the central

conflict for Klein is that between love and hate, or caring and destruction of others." This elevation of the role of real and fantasied relationships to others in infant development sparked shift in thinking that would become it's own branch of psychoanalytic theory: the British Object Relations School (Berzoff, 2011; Mitchell and Black). Though many of the most prominent object relations theorists would go on to modify and reject many Klienian ideas, her groundbreaking work ushered in a new appreciation for the critical role of human relationships in the development of the psyche, which remains a feature of psychoanalytic theory today.

Introduction to the Developmental Positions

One of Klein's most significant departures from classical psychoanalytic thought is her rejection of Freud's model of developmental stages (Berzoff, 2011; Funk, 2012). Klein instead proposed the concept of developmental "positions" - the paranoid/schizoid and depressive positions. These positions described specific internal ways of relating to self and others, rather than a sequence of steps to be progressively moved through, as in Freud's model of psychosexual stages (Berzoff, 2011; Hinschelwood, 2005). The paranoid/schizoid and depressive positions allow the developing infant to organize otherwise chaotic inner and outer experiences (Hinshelwood, 2005). Each position describes a specific way that the infant situates itself in relation to complex, conflicting affects and experiences, such as love and hate, hunger and satisfaction, closeness and abandonment. Mitchell (1981) writes that the term position "implies a particular constellation of object relationships, external and internal objects, phantasies, anxieties, and defenses to which the individual is likely to return throughout life." Indeed, although Klein viewed the depressive position as a developmental achievement following the paranoid/schizoid position, she stressed that both positions as normative even in

adult life, with periodic fluctuations between them as inner resources are tested in times of stress or loss (Berzoff, 2011; Mitchell and Black, 1995).

The Paranoid/Schizoid Position

Klein believed that all infants begin life in the "paranoid/schizoid" position. She used this term to refer to the particular way in which infants organize their mental representations of self and others in the earliest months of life (Berzoff, 2011; Mitchell and Black, 1995, Mitchell, 1981). In the paranoid/schizoid position, the infant consolidates early experiences of self and others into polarized categories of "good" and "bad." Mental representations of external objects are bifurcated into "part" objects, which the infant experiences as either benevolent and loving or hateful and threatening. For Klein and for most subsequent psychodynamic thinkers, young children are not born with the capacity to integrate positive and negative experiences, which is a developmental achievement occurring later in childhood. Thus, separation of good and bad is a normative mental state for young infants, while in adulthood this represents a regression in functioning, as will be explored later in the paper.

In the paranoid/schizoid position, the infant experiences itself as either loving or hateful, destructive or life-giving (Rusmussen and Salhani, 2010). This systematic separation of good and bad, love and hate, is a defense known as "splitting." The term "schizoid" references the psychic divides generated by splitting, which is the primary defensive mechanism in the paranoid/schizoid position (Berzoff, 2011; Hinshelwood, 2005; Mitchell & Black, 1995; Segal, 1992). Fueling this defensive splitting is the overwhelming power of the death instinct, which Klein viewed as constitutional and innate, like Freud before her. Klein posits that from birth, the infant experiences its own aggressive drive as threatening to annihilate the self from within,

31

destroying both internal representations of self and important objects which "populate" the infant's inner world (Mitchell and Black, 1995). The terror of disintegration and inner desolation provoked by the death instinct is known as "annihilation anxiety." Klein believed that infants manage this primitive anxiety through unconscious fantasy (spelled "phantasy" in her writings). Unable to tolerate the threat of self-destruction, the infant projects it's aggressive urges on to external objects in fantasy. As Mitchell and Black (1998) note, "it is safer to be threatened from the outside than from within." These activities are produced as a defensive response to protect against the annihilation anxiety. Thus, the infant mitigates annihilation anxiety by ridding itself of bad, aggressive urges; projecting them on to external objects. The paradigmatic example of this in Kleinian theory is the infant's projection of aggression onto the mother's breast (Mitchell and Black, 1995). For instance, feeling the pangs of hunger, the infant may initially experience itself as filled with an inner badness: its overwhelming aggression towards the breast. In fantasy, the infant experiences its aggression as coming from the breast, which now appears as a persecuting figure intent on causing pain. The infant now perceives it's aggressive impulse as coming from the external world. Rather than experiencing itself as an attacker, the infant feels persecuted by a bad, attacking object. This is known as "persecutory anxiety." As Mitchell (1981) writes, "The child's fear of his early objects is proportional to the degree of his own aggressive impulses, and the specific nature of these objects in his phantasies is particular to his own instinctual makeup." The degree to which the infant feels persecuted by bad objects closely mirrors the constitutional intensity of its death instinct. This pervasive feeling of persecution, generated by the infant's own aggression, is the paranoia which gives the paranoid/schizoid position it's name. This paranoia is the projected annihilation anxiety, now experienced as an attacking external force.

The process of projection does fully rid the infant of the death instinct. Some of the original aggressive impulse remains, but is now directed against the persecuting "all bad" object in fantasy (Hinshelwood, 2005). Because in infancy boundaries between self and others are not yet defined, the infant believes that these fantasies have real-world effects on the objects they target. As there is little distinction between actual objects in the infant's environment and their internal counterparts, retaliatory fantasies are felt to destroy both inner object representations and the external object itself. This is why Klein viewed splitting as an essential defense in the paranoid/schizoid position. If good and bad objects were not kept separate, aggressive fantasies aimed at hateful, persecuting objects would threaten to destroy the good objects, robbing the infant of its only sources of love, protection, and nourishment. By splitting good from bad, and love from hate, the infant's destructive attacks are safely contained within the relationship to the hated object, while the experience of loving and being loved by a good object are protected (Mitchell & Black, 1995). The infant thus necessarily vascillates between loving and feeling loved by a "good breast" which satisfies, comforts, and protects, and hating and feeling persecuted by a "bad breast" which abandons and witholds satisfaction. (Berzoff, 2011; Hinshelwood, 2005; Mitchell & Black, 1995; Segal, 1992).

The Depressive Position

The depressive position represents a developmental achievement in which the infant gains the capacity to integrate good and bad experiences, developing more whole internal representations of self and others (Hinshelwood, 2005). In this position, the infant develops an awareness that hated and loved objects are one and the same. The mother who comforts and provides for the infant is the same who abandons and frustrates (Berzoff, 2011; Mitchell and

Black, 1995). In experiencing the mother as a whole object with a complex mind of her own, omnipotence wanes, and the infant begins to differentiate itself, and to integrate disparate parts of it's own ego. The self who loves and restores and the self who hates and destroys in fantasy are recognized as parts of a whole, unified self (Berzoff, 2011). As Hishelwood (2005) writes, "The coming together of good and bad objects, and of the impulses of love and hate, mark the onset of a new respect for the reality of external people" This ability to tolerate a more integrated sense of self and others is the cornerstone of the depressive position, and is the foundation of the ability to recognize and relate to others as nuanced people with subjectivities of their own, requiring neither defensive idealization nor devaluation (Berzoff, 2011; Mitchell and Black, 1995).

The realizations of the depressive position do not extinguish the inherent death instinct. The child's destructive fantasies continue, however, they are now aimed against a whole object. In contrast to the aggressive fantasies in the paranoid/schizoid position, destructive attacks in the depressive position destroy not only the bad breast, but also the good, as the two are no longer differentiated into separate parts. As Mitchell and Black (1995) write, "In destroying the whole object, the infant eliminates her protector and refuge, depopulating her world and annihilating her own insides." The fear of destroying the needed, loved whole object is known as "depressive anxiety," and is the main conflict of the depressive position (Hinshelwood, 2005). Rather than fearing and raging against an attack from without, the child now fears the power of it's own aggression to destroy both the loved object, which is at one with the frustrating object, and it's internal counterpart. The perpetual dread of destroying a needed object gives rise to persistent feelings of guilt. The intermingling of aggression and love, the loss of the idealized relationship to an idealized object, and the pervasive feeling of guilt gives the depressive position it's name

(Berzoff, 2011). Yet as Berzoff (2011) notes, love in the depressive position is less brittle, more rich and authentic, than the idealized love in the paranoid/schizoid position.

The anxiety generated by aggressive attacks on the whole object within the depressive position is tempered by fantasies of repairing and healing the whole object which has been damaged in fantasy (Berzoff, 2011; Mitchell & Black, 1995, Segal, 1992). Object relationships in the depressive position are characterized by fantasied cycles of love, frustration, hateful destruction, and reparation (Mitchell & Black, 1995). Berzoff (2011) notes the need for the child to believe that its love and capacity for repair is stronger than its destructiveness. When destructiveness threatens to overwhelm the reparative capacities, there is a retreat into the paranoid-schizoid position (Berzoff, 2011; Mitchell & Black, 1995). Despite the terror characteristic of the paranoid-schizoid position, there is security in the infant's ability to confine destructiveness in the relationship with a purely hated object, without risking damage to delicate good objects and loving feelings (Mitchell & Black, 1995). Thus, although the capacity to enter the depressive position is seen as a developmental achievement, it cannot be permanently sustained. As Mitchell and Black write, the depressive position is "continually lost and regained" as inner resources are tested throughout the life span.

Projective Identification

Klein introduced the concept of projective identification relatively late in her work and life, as a brief footnote in her now classic 1946 paper, "Notes on Some Schizoid Mechanisms," (Segal, 1992). She described projective identification as one of a constellation of defenses associated with the paranoid/schizoid position. While contemporary understandings of the paranoid/schizoid and depressive positions have stayed relatively true to Klein's original formulations, the concept of projective identification has evolved considerably over time. The

precise meaning of projective identification continues to be debated among psychoanalytic thinkers, and current definitions of the term vary widely (Aguayo, 2013; Buckingham, 2012; Gabbard, 1995). In this section, I will provide an overview of projective identification as Klein originally described it, and will also explore some of the relevant ways in which the concept has been developed by subsequent theorists.

Projective identification is Klein's elaboration on the concept of projection, though it has come to be recognized as a distinct phenomenon in its own right (Gabbard, 1995; Hinshelwood, 2005; Mitchell and Black, 1995) Although Klein's use of the terms projection and projective identification overlap in sometimes confusing ways, there are several key features of projective identification which make it distinct (Buckingham, 2012; Gabbard, 1995). Expanding on the defensive role of projection in the paranoid/schizoid position, Klein described *projective identification* as a fantasied attempt to both expel and maintain connection to unwanted, threatening, or vulnerable parts of the self. The content of the projected material in the process of projective identification is unique. In projective identification, it is not merely destructive *impulses* which are projected, but parts of the *self* that are split off from the ego in fantasy and deposited in the object (Mitchell & Black, 1995). What the projecting subject expels in projective identification are essential (if intolerable) aspects of the self. Because of this, the unconscious intention is not to simply void the projected material, but to maintain connection to and control over it (Berzoff, 2011; Buckingham, 2012; Gabbard, 1995; Hinshelwood, 2005; Mitchell & Black, 1995; Ogden, 1992). This is achieved by controlling the object, which according to Mitchell (1981) has been "revised in fantasy to include the disavowed part of the self." Fantasies of possessing and controlling the projected-onto object allow the infant to gain mastery over the disavowed part of the self, with which the infant remains identified. Like other

fantasies in the paranoid/schizoid position, projective identification can evoke persecutory anxiety in the projecting subject. Fantasies of invading and inhabiting another are often inverted, and experienced as fears of intrusion and perceptions of others as menacing and controlling (Buckingham, 2012).

Klein conceptualized projective identification as a primarily intrapsychic phenomenon, occurring in unconscious fantasy alone (Aguayo, 2013; Buckingham, 2011). Her writings on the topic are mainly concerned with the psychic experience of the projecting subject. Klein never explicitly addressed how the receiving object may experience or participate in the process of projective identification (Gabbard, 1995). However, later theorists became increasingly interested in the impact of projective identification on the mind of the projected-onto other. Projective identification has gradually been re-imagined as a "deep interactional, intersubjective, and interpersonal process," as opposed to a purely intrapsychic one (Rasmussen & Salhani, 2010, p. 497). Projective identification is now generally viewed as both an intrapsychic process occurring in fantasy and an interpersonal phenomena occurring in actual interactions between people (Gabbard, 1995).

Theorists in the British Objects Relations School were the first to identify and articulate interpersonal aspects of process of projective identification (Gabbard, 1995). In particular, Wilfred Bion, an analysand and student of Klein, radically expanded her definition of projective identification, extending it into the interpersonal realm (Buckingham, 2012; Mitchell & Black, 1995). His re-definition has lasting influence on contemporary understandings of projective identification. Bion describes projective identification as a kind of interpersonal communication between mother and infant (Gabbard, 1995). In a state of affective attunement, the mother receives and experiences within herself the mental state of the infant. For example, a crying baby

induces a feeling of helpless distress in the mother. The mother thus becomes the "container" for the infant's intolerable experience. Using psychic resources not available to an infant, she is able to "detoxify" and "metabolize" the disavowed content of the projection, allowing the infant to safely reintegrate the disavowed part of the self. This new conceptualization is significant in that it redefines projective identification as an interpersonal process occurring both in fantasy as well as in actual interactions, and establishes a communicative function in addition to the defensive one proposed by Klein. Most relevant to this thesis, Bion's theory of projective identification highlighted its ability to transmit affect from one person to another, through a psychic and interpersonal transaction.

Ogden (1992) further extends Bion's formulation in his book entitled *Projective Identification and Psychotherapeutic Technique*. In the chapter "The Concept of Projective Identification," Ogden clarifies the process of projective identification by separating it into three distinct phases. The first phase is consistent with Klein's original definition, in which the projector wishes to expel part of the self which is felt to be threatening or in danger of destruction by other aspects of the self. The second phase is informed by Bion's understanding of the transactional nature of projective identification. In this phase, the projector "exerts pressure on the recipient to experience himself and behave in ways that are congruent with the unconscious projective fantasy" (Ogden, 1992, p. 14). Ogden stresses that this pressure is real, though unconsciously applied, and is manifest in many verbal and non-verbal interactions with the recipient of the projection. In his thinking, this "induction" phase provides the necessary evidence that the disavowed aspects of the self have been "both extruded and preserved" (Ogden, 1992). If the recipient behaves in a way that is congruent with the fantasy, the projector is assured that essential (though "noxious") parts of the self are both present in the other, and

remain safely within the projector's control. In the third phase, the recipient of the projective identification experiences his or herself in a way that is consistent with the projector's fantasy. Here, Ogden again expands on Bion's notion of the projective identification being "metabolized." He writes that the recipient may be able to respond differently to the disavowed content, as they are experiencing it from within their own unique psychic perspective. If this occurs, an opportunity is created for the projector to reintegrate the newly "digested" aspects of the self which have been projected. In this way, "projective identification is a psychological process that is at once a type of defense, a mode of communication, a primitive form of object relations, and a pathway for psychological change" (Ogden, 1992, p. 21).

Not all theorists have welcomed these revisions of the definition of projective identification, as Gabbard (1995) notes in his review of the concept. Many have resisted, to varying degrees, the expansion of the definition to include the receiving object's emotional response to the projected content, as well as the process of reintegration introduced by Bion, Odgen, and others. Numerous articles have also levied critiques positing that Klein's original concept has become overly broad and distorted (Gabbard, 1992). For example, some analytic thinkers have pointed out that Klein herself was opposed to such widening of her concepts, concerned that this could lead to the patients being blamed for their analyst's affective responses in the therapy room (Gabbard, 1992). Yet despite this ongoing debate, there remains current wide acceptance that the process of projective identification is transactional, occurring on multiple levels between two subjects as opposed to solely in the unconscious fantasies of a single projecting subject.

Conclusion

Kleinian developmental theory is uniquely suited to describe the interplay between the intrapsychic and interpersonal events. Because of this, Kleinian concepts have been applied in many discourses to illuminate the ways in which individuals are impacted by their social environment. For example, Rasmussen and Salhani (2010) and others have used Kleinian theory to describe the intrapsychic and interpersonal processes underlying and reinforcing systemic racism, which relies on polarized categories of self and other, good and bad, and instills in those identified as "other" experiences of badness, inadequacy, sexual aggression, and other qualities often disavowed by members of the dominant culture. I aim to use Kleinian theory similarly, to illuminate the process by which negative social responses engender self-blame among survivors of sexual violence.

This chapter reviewed several key concepts from Kleinian developmental theory. Although Kleinian theory provides a bridge between the psyche and social environment, it lacks the analysis of culture and power necessary to address sexual violence. Because sexual violence is intimately related to broader issues of women's oppression, any meaningful exploration must situate sexual violence in its sociocultural context. To this end, I will explore a feminist post-structural understanding of the role of sexual violence in producing and enforcing patriarchal systems of power. Post-structural feminism is primarily concerned with the ways in which culturally-produced systems of power shape individual identities, beliefs, and choices, which in turn re-produce systems of power. Like Kleinian theory, a post-structural feminist perspective attends to the interrelationship of the individual and the social world. As such, post-structural feminist theory can be used to conceptualize how the social climate surrounding disclosure of

sexual violence relates to self-blame among survivors, within the broader context of patriarchal

power.

Chapter IV

Post-structural Feminist Theory

Feminist Theory

Feminism is a broad term referring to theories and social movements that seek to promote the political, economic, legal, and social rights of women (MacShane, 2014). A vast number of overlapping and contradictory ideologies are encompassed within the field feminist theory. These diverse perspectives are unified by a common belief that women as a group are collectively oppressed (Allan, 2013). Feminists view the subordination of women as a defining characteristic of *patriarchy*, a social system in which "men disproportionately occupy positions of power and authority, central norms and values are associated with manhood and masculinity…and men are the primary focus of attention in most cultural spaces" (Whisnant, 2013, Common themes in the liberal to radical continuum section, para 5). Thus elevated to a position of social dominance, men as a group benefit from patriarchy while women are collectively harmed. Although feminist theory includes many divergent understandings of the origins of patriarchy, as well as numerous approaches to challenging gender hierarchy, most feminist thought aims to illuminate, critique, and imagine alternatives to this oppressive social system (Haslanger, 2002). It is also important to note that contemporary feminism views patriarchy as one of many intersecting systems of domination, including white supremacy, colonialism, capitalism, and others (Haslanger, 2002; Whisnant, 2013). This increasingly nuanced understanding of women's oppression has developed through the incorporation of the perspectives of women of color and women in the global south, who have long challenged white, western feminism's claim to universality (MacShane, 2014).

Virtually all feminists view sexual violence as both reflective and constitutive of

patriarchal power (Whisnant, 2013). Decades of feminist writing and activism have resulted in the widespread recognition of rape as a social problem and a crime against women (Gavey, 2005; Whisnant, 2013; Williams & Holmes, 1981)[5]. Much feminist theory also conceptualizes sexual violence as an important mechanism by which women are collectively rendered subordinate to men, through systematic sexual exploitation, objectification, and acts of terror (Whisnant, 2013). However, feminists differ greatly in the nuances of how they understand the causes and harms of sexual violence. In this chapter, I will explore a post-structural feminist understanding of the role of sexual violence in producing and enforcing patriarchal power relations. Weedon (1987) writes that post-structural feminist theory uses "theories of language, subjectivity, social processes, and institutions to understand existing power relations and identify areas and strategies for change" (p. 21). I have selected a post-structural lens because of its unique focus on the mutually-constitutive relationship between individual experience and power relations in the broader social environment.

In the following sections, I first introduce the post-structural feminist notion that gender difference is culturally-produced through dominant discourses. I then examine the discursive construction of sexuality as a primary site where gendered difference and power relations between men and women are established. Finally, I discuss the ways in which sexual violence impacts women's subjectivity and enforces patriarchal power at the level of the body.

The Discursive Construction of Gender Difference

Post-structural feminists believe that gender difference is not natural or innate, but rather culturally produced through discourses of gender and sexuality (Weedon, 1987). *Discourses* can be loosely defined as shared cultural "knowledge," or ways of thinking about, talking about, and

---

[5] A summary of the rich history of feminist efforts to define, expose, and combat the sexual exploitation of women is beyond the scope of this thesis. For thorough reviews, see Gavey, Whisnant, and Williams & Holmes.

understanding social reality, which emerge from specific social and historical contexts (Gavey, 2005). Although many competing forms of discursive knowledge exist at one time, dominant discourses gain authority by becoming so ubiquitous and pervasive as to appear "natural" and commonsense, rather than products of culture (Gavey, 2005). Influenced by the groundbreaking writing of Michel Foucault, post-structural feminists believe that discourses provide templates for social relations and shape individual subjectivities (i.e. personal identity, desires, perceived possibilities for action, and so on). People are positioned as "subjects" of various discourses, with different levels of social power made available to different subject positions (Gavey, 2005). An individual's subjectivity is shaped by their position within dominant discourses, such that their attitudes, perceptions, and actions can be viewed as a product of their place within the field of discursive knowledge.

Widely held assumptions about gender difference, such as the idea that women are naturally passive, or that men are innately aggressive, are often viewed as immutable biological truths. However, post-structural feminists argue that these notions arise within (and are enforced by) dominant discourses. Though few deny that some inborn physical differences between women and men exist, the complex, shifting social meanings assigned to these differences are thought to be discursively determined. From this perspective, the qualities and behaviors associated with masculinity and femininity are products of sociocultural beliefs and values regarding gender, which becomes shared "knowledge" of how men and women *are*[6]. Post-structural feminists assert that individuals are not born men and women as such, but come to embody gendered subjectivities through their differing positions within dominant discourse.

---

[6] Due to the limited scope of this thesis, this chapter does not address the experiences of transgender individuals within discourses of gender and sexuality. Future research is needed in this area, as individuals who identify as trans* or gender non-conforming are more likely to experience sexual violence as well as an overtly hostile social climate surrounding disclosure.

Linda Martin Alcott, for example, defines gender as primarily a product of *positionality*, whereby the experience of being a man or a woman is entirely constituted by the one's gendered social position (Whisnant, 2013; Alcott, 2006). Although women and men take up these gendered positions to varying degrees, all are to some extent influenced by their location within dominant discourses.

From a feminist post-structural perspective, gender categories and the meanings and expectations attached to them are in a continual process of social construction (Weedon, 1987). Under patriarchy, the creation of gender difference is also a construction of gendered divisions of power. When normative social relations between men and women are thought to stem from biological difference, the existing system of male dominance and female subordination appears to reflect a natural order. To the extent that gendered beliefs and practices become established as natural and commonsense, the operation of patriarchal power is rendered invisible and beyond critique or imagined alternatives. As MacKinnon (1987) writes, "If we look neutrally on the reality of gender so produced, the harm that has been done will not be perceptible as harm. It becomes just the way things are" (p. 59). When women's oppression is obscured in this way, the possibility of social change is foreclosed. In opposition to this, post-structural feminism aims to expose the discursive origins of gender and sexual norms, thus calling into question the legitimacy of the power relations inherent within them.

Gender Difference in Sexual Discourse: The Cultural Foundation of Sexual Violence

Sexuality[7] is one domain in which patriarchal social norms are established, and simultaneously concealed through their representation as "natural." In "gender difference and the production of subjectivity," Wendy Holloway (1984) identifies male sexual drive discourse as a

---

[7] I use sexuality here to refer to specifically heterosexual relations. Although gendered cultural norms are also a component of all forms of sexual relations, I am specifically interested here in the ways in which men and women are positioned in relation to each other in ways that enforce patriarchal power.

dominant force producing social understandings of sexuality and gender difference. She argues the normative assumptions surrounding the male sex drive are so universal as to be firmly established as biological fact, beyond examination or critique. The defining assumption of male sexual drive discourse is the belief that "men's sexuality is directly produced by a biological drive, the function of which is to ensure the reproduction of the species" (Hollway, 1987, p. 229). Historically, these notions have been disseminated and legitimized by perceived experts such as sexologists, psychologists, and evolutionary biologists (Gavey, 2005; Hollway, 1987). Hollway (1987) includes this illustrative example, from psychologist Anthony Storr, "Male sexuality, because of the primitive necessity of pursuit and penetration, does contain an important element of aggressiveness, an element which is both recognized and responded to by the female who yields and submits" (p. 229). This assertion, conveying a core tenet of male sexual drive discourse, not only constructs male sexual aggression as an evolutionary truth, it also legitimates women's subordination by rendering it "biologically determined and unchangeable," and thus implicitly exempt from moral scrutiny (Hollway, 1987).

As it is produced through the male sexual drive discourse, male sexuality is characterized by aggression and represents a powerful, evolutionary need (Gavey, 2005; Hollway, 1987; MacKinnon, 1981). Once aroused, male sexual drive is difficult (if not impossible) for men to subdue. Male sexuality thus constructed creates an assumption of male "sexual incontinence" in which men are expected, if not encouraged, to be sexually out of control (Hollway, 1987). These assumptions about male sexuality are evident in many of beliefs now recognized as "rape myths," such as the idea that rape is a crime of passion or that once a man is sexually aroused he cannot stop himself and must have sex (Rape Crisis, 2004). Rape myths and other forms of sexual discourse provide templates for men and women's sexual practices. For men, the

constructed ideal involves persistently pursuing and dominating the women who invoke their desire, the underlying assumptions being that that, "real men are able to get sexual access to women when, where, and how they want it; that sexual intercourse is an act of male conquest; that women are men's sexual objects of possessions; and that men "need and are entitled to sex" (Whisnant, 2013, harms to women as a group section, para. 2). In this way, the subject position offered to men is one of power, agency, and sexual prerogative.

Women are positioned within the male sexual drive discourse as objects that instigate men's overwhelming sexual response (Hollway, 1987). Representations of women within the male sexual drive discourse are rigidly split "between wife and mistress, virgin and whore," (Hollway, 1987, p. 230). This portrayal produces a paradoxical understanding of women's sexuality. On one hand, women are portrayed as lacking sexual subjectivity; they are childlike, passive, and biologically programmed to "yield and submit." In contrast, Hollway (1987) identifies an underlying belief that women's sexuality is "rabid and dangerous and must be controlled." In this way, women are constructed as objects both lacking sexual agency and desire, while simultaneously provoking male sexual response, the biological force against which men are helpless to defend.

In, *Just Sex? The Cultural Scaffolding of Rape,* Nicola Gavey (2005) argues that dominant sexual discourses provide justification and support for male sexual violence against women. Discursive constructions of women's sexuality as dangerous, tied with beliefs about the naturalness and inevitability of male sexual aggression, create a cultural lens through which women may be viewed as responsible for their own sexual victimization. She writes,

> While women were portrayed as sexually passive in relation to men, they were also
>
> imbued with a dangerous lurking sexuality that could be invoked in all sorts of ways to

explain and justify rape… This underlying magnetically beckoning sexuality ties in with the notion of female sexual provocation that has been crucially invoked to diminish male agency in rape and to minimize the harm that rape might do to women. (Gavey, 2005, p. 19).

Given the dominance and ubiquity of these ideas, there is little perspective from which men can be viewed as culpable for sexual violence. Rape, when it is considered rape at all, is framed within the discourse of male sexual drive as a crime of passion, in which a man is overwhelmed by lust in response to women's provocative sexuality. These views provide the cultural grounds for denying, minimizing, and even justifying all forms of sexual violence. If women are perpetually inviting rape through their actions, appearance, or by their very natures, no woman can be truly forced. Similarly, when female submission, passivity, or even "token resistance" is sexualized, there are few circumstances in which women's verbal or non-verbal expression of non-consent can be legible. Thus, sexual violence can be understood as an extension of normative sexual practice. As Papadaki (2014) writes, "In patriarchal cultures, rape is not anomalous but paradigmatic, it enacts and reinforces, rather than contradicting, widely shared cultural views about gender and sexuality" (Harms to women as a group section, para 1).

Threat of Sexual Violence as it Shapes Women's Subjectivity

This chapter has focused on the ways in which dominant discourse positions men and women in relation to each other, offering different power to each, via normative assumptions about male and female sexuality. The previous section argues that male sexual drive discourse provides a cultural lens through which sexual violence can minimized or condoned. This final section will describe the ways in which discursive sexuality, working in concert with the threat of sexual violence, constitutes women's subjectivity. Weedon (1987) writes that, "Discourses are

more than ways of thinking and producing meaning. They constitute the nature of the body, unconscious and conscious mind and emotional life, and the subjects which they seek to govern." (pg 108). In seeking to understand the complexity of how sexual violence operates within and uphold patriarchal power, it is important to address how women's discursive positioning shapes these more intimate internal processes.

Women understand themselves, at least in part, through the lens of dominant cultural discourses. How a woman views her identity, sexuality, desires, and the actions available to her are partially the product of her positioning within these systems of knowledge. Embedded in a cultural context that portrays female sexuality as dangerous and ever at-risk of provoking male aggression, women become self-monitoring subjects. The fear of sexual violence impels women to conform to patriarchal norms of feminine behavior, which paradoxically render them more physically and psychically vulnerable to the exercise of male sexual entitlement to their bodies (Papadaki, 2013). In this way, women are conscripted as participants in the maintenance of patriarchal systems of oppression. Cahill (2001) argues that the embodied threat of sexual violence is the essence of socially-constructed femininity. As Padapaki (2014) summarizes:

> The female body well-trained in femininity is that of 'pre-victim'. The feminine body is
> marked by hesitancy, relative weakness, delicacy and restraint- qualities that in fact
> render women more vulnerable to violence- and yet the woman or girl is taught to view
> her sexual body as dangerously provocative, inherently rapeable…hence her duty to
> control, conceal, and monitor her body and it's movements, so as not to bring disaster
> upon herself (Papadaki, 2014, harms to women section, para. 4).

In this way, the pervasive threat of sexual violence is a risk felt to come from without *and within*. The threat of sexual violence shapes women's subjectivity such that she is likely to locate blame within herself, through perceived failures to uphold the standards of feminine behavior. Cahill (2001) goes on to describe the inculcation of self-blame via the social production of the feminine body. She writes:

> The socially-produced feminine body is the body of the guilty pre-victim….she was somewhere she should not have been, moving her body in ways that she should not have, carrying on in a manner so free and easy as to convey an utter abandonment of her responsibilities of self-protection and self-surveillance (Cahill, 2001, pg 160).

Sexual violence, as an assertion of male entitlement to women's bodies, also conveys messages to women about their diminished personhood. Already constructed as naturally passive and submissive, sexual violence further undermines women's agency and bodily autonomy. Acts of sexual violence, ubiquitous and largely unchallenged by society, establish women as objects to be dominated, controlled, and accessed at will. The physical control of women's bodies through the imposition of non-consensual sexual acts, construct her as a non-being, devoid of volition, choice, or rights. Writing about the psychic impact of rape, Frye and Shafer (1977) state that to exercise such power over the body of a woman functions to deny that she is a person at all. Rape and other forms of sexual violence conveys to the survivor that she is a not worthy of respect, and implicitly is not fully human (Frye & Shafer, 1997). Cahill (2001) echoes these sentiments, writing that "rape, in its total denial of the victim's agency, will, and personhood, can be understood as a denial of intersubjectivity itself…the self is at once denied and stilled, silenced, overcome" (p. 114). Sexual violence thus becomes a practice through which women are systematically denied personhood, through the physical inscription of powerlessness on the

body. It is important to acknowledge that the perspective presented here is specific to Anglo-American culture, and does not necessarily reflect the experiences of women in a global context who hold diverse understandings of what constitutes violation and non-consent.

Conclusion

Discursive sexuality offers no position from which sexual violence may be legible as the full responsibility of the perpetrator. Male and female sexuality are constructed such that men's sexual exploitation of women's bodies rarely registers as violence at all, as male domination of passively submitting (or chastely resisting) women falls within the boundaries of normal sex and is represented as natural and desirable sexual practice. Even when an act of sexual coercion registers as violence, hegemonic sexual discourses offer little possibility to locate blame anywhere but with the survivor. As women have been taught to regard themselves as responsible for warding off the pervasive threat of sexual violence, a threat which is linked to perceptions of female sexuality as rampant and provocative, the female survivor has little opportunity to regard her victimization as anything other than a product of her own making. Further, constructions of women as passive objects of desire lacking agency of their own, enables sexual violence by undermining women's ability to assert their own desire and non-consent. Acts of sexual violence further affirm women's diminished social status, enforcing powerlessness at the level of the body. In the following chapter, I synthesize the post-structural feminist concepts explored here with key ideas from Kleinian developmental theory to examine the contribution of negative social responses to self-blame among survivors of sexual violence.

Chapter VI

Discussion

This chapter offers a theoretical analysis of the contribution of negative social responses to self-blame among survivors of sexual violence. In the discussion that follows, I explore three central questions: 1) What is the psychic mechanism by which negative social responses engender self-blame among survivors of sexual violence? 2) What social factors account for why this mechanism is activated around sexual violence disclosure? 3) What are the implications for social work practice? To address these questions, I synthesize key concepts from Kleinian developmental theory and post-structural feminist theory to examine the psychic and social aspects of this complex phenomenon. Post-structural feminist theory provides a framework for understanding the social context surrounding sexual violence disclosure. Kleinian theory offers a lens through which the unconscious affective dimensions of self-blame and negative social responses may be considered.

As described in Chapter III, many survivors experience self-blame in the wake of sexual violence. Despite efforts to identify adaptive functions of self-blame, empirical evidence overwhelmingly demonstrates its harmful impact on psychosocial recovery from sexual trauma. The troubling pervasiveness of self-blame has been linked intuitively and empirically to the hostile social climate surrounding sexual violence disclosure. Survivors who share their traumatic experiences often encounter a range of negative responses from friends, family members, and service providers. At the institutional level, they grapple with policies and practices that convey an attitude of scrutiny, minimization and disbelief reflecting a broader culture of victim blaming. Such negative social responses have been shown to intensify self-blame, compounding its deleterious effects on recovery. Because it is so intimately tied to the

responses survivors receive upon disclosure, self-blame must be understood within a social context that normalizes and condones the sexual exploitation of women and discourages survivors from speaking out.

In the following sections, I propose that disclosure of sexual violence implicitly challenges patriarchal social norms, activating deep-seated persecutory anxiety within society. I further argue that negative social responses engender self-blame among survivors of sexual violence by means of projective identification, a key defense against anxiety in the paranoid/schizoid position. Finally, I explore the depressive position as an alternative model for relating to survivors, which honors the full complexity of survivor's experiences and subjectivities.

Sexual Violence Disclosure Challenges Patriarchal Power

As described in Chapter V, post-structural feminists believe that gender difference is not innate, but rather is culturally produced through discourses of gender and sexuality. Patriarchal systems of power are upheld by the continual discursive construction of gender norms and practices. Post-structural feminism asserts that discursive 'knowledge' is powerful to the extent that it is accepted as natural (Brown, 2013; Gavey, 2005). When gender norms become established as mere commonsense, the operation of patriarchal power is rendered invisible and impervious to critique or imagined alternatives. Dominant sexual discourses, which claim to reflect immutable biological truths, obscure the cultural roots of oppressive power relations, which are embedded in the ways that heterosexual sex is practiced within society. In particular, the male sexual drive discourse naturalizes male sexual aggression while enforcing female passivity and self-surveillance. This discursive construction of gender difference provides a template for sexual relations between men and women in which coercive sex, including many

forms of rape and assault, fall within the boundaries of normal sex. The reproduction of these dominant sexual discourses reinforces the patriarchal system of power that sexual violence upholds.

Survivors who speak about their lived experience of rape and assault unsettle 'commonsense' understandings of violence and sex. Acts of sexual violence rarely resemble rape as it is narrowly defined within dominant discourse; a forceful physical and sexual attack by a stranger on a young woman, who emphatically resists (Anderson, 2005). Instead, the vast majority of sexual violence is perpetrated by acquaintances, relatives, and intimate partners without the use of overt physical force (Anderson, 2005). Survivors' accounts make the coercive reality of these sexual encounters perceptible, implicitly challenging the boundaries of acceptable, desirable sexual practice in patriarchal society. Thus, disclosure problematizes many sexual relations that would otherwise pass as 'just sex' within dominant sexual discourse (Anderson, 2005; Gavey, 2005). As Catrina Brown (2013) writes, speaking about violence from lived experience, however tentatively, has the power to "illuminate the prevalence and nature of violence against women in patriarchal society and emphasize men's responsibility for this violence" (p. 2). In this way, survivors' accounts destabilize patriarchal power by rendering its operations visible and vulnerable to opposition. Sexual violence disclosure thus represents the creation a new cultural discourse, which confronts and denaturalizes patriarchal sexual relations. If ongoing sexual violence against women serves as an important pillar of patriarchy, the subversive discourse generated by disclosure can be viewed as deeply threatening to the existing social order.

Sexual violence disclosure can also be understood as a rejection of women's social positioning within dominant discourse. Chapter V introduced the post-structural idea that

individuals are positioned as subjects of various discourses, with different levels of social power made available to different subject positions. I further discussed the feminist assertion that women's subjectivities are shaped by their position within dominant discourses, such that their attitudes, perceptions, and even the actions that seem possible to them reflect their place within discursive gender and sexuality. Specifically, women's subjectivities are constrained by their paradoxical construction within the male sexual drive discourse. In dominant culture, women are positioned as objects of male sexual desire, lacking agency and desire of their own while simultaneously felt to exude dangerously sexuality. In this context women become self-monitoring subjects, regarding themselves as responsible for warding off pervasive threats of sexual violence. The fear of rape and assault compels women to conform to patriarchal norms of feminine behavior, which further undermine their ability to assert non-consent. This social positioning renders women more vulnerable to sexual exploitation, while offering little perspective from which survivors may regard their victimization as the responsibility of the perpetrator. Sexual violence further dehumanizes women, through the denial of their will and bodily sovereignty.

Through sexual violence disclosure, survivors claim a subject position beyond the constraints of their location within dominant discourse. By asserting that their will and bodily sovereignty were violated, female survivors implicitly oppose women's discursive positioning as passive non-agents, programmed by nature to 'yield and submit.' In so doing, they challenge not only unconditional male access to women's bodies, but also affirm their status as a person with volition, who are both able and entitled to make sexual choices. Further, disclosure resists the cultural demand that women alone hold responsibility for preventing sexual violence, which rests on the assumption that male sexual aggression is precipitated by female provocation. Survivors

who insist that their consent was violated challenge the requirements of self-surveillance. They decouple their consent from their behavior, dress, and other situational factors widely thought to invite (and implicitly excuse) violent sexual behavior. Thus, disclosure represents a step beyond the constraints of discursive female subjectivity, which renders women both vulnerable to exploitation and tasked with preventing it. In asserting her own perspective about traumatic experiences, the survivor claims a new subject position from which she may regard her trauma, and defines the boundaries of her own desire and non-desire. In so doing, the survivor positions herself outside of dominant gender and sexual discourses, a creative act that represents a threat to gendered systems of power.

Survivor as Annihilating Other: Disclosure in a Paranoid/Schizoid Society

The previous section used post-structural feminist concepts to demonstrate the ways in which sexual violence disclosure unsettles dominant sexual discourse and challenges the constraints of women's discursive positioning. I contend that in so doing, survivors who disclose sexual violence pose a profound threat to patriarchal systems of power. In this section, I employ Kleinian developmental theory to discuss how this challenge to the patriarchal social order initiates deep-seated anxiety within society, instigating a collective shift into the paranoid-schizoid position.

In Kleinian theory, the paranoid/schizoid position represents a psychically primitive way of relating to self and others. According to Klein, infants struggle to tolerate their own fear, hatred, and aggression, which seem so powerful that they threaten to destroy both the self and others in the infant's world. The paranoid/schizoid position serves to manage this 'annihilation anxiety' through a number of characteristic psychic defenses. The hallmark of the paranoid/schizoid position is defensive splitting, in which inner representations of self and others

are consolidated into polarized categories of "good" and "bad." This mitigates annihilation anxiety by allowing the infant to project its destructive urges onto "bad" external objects in unconscious fantasy. Rather than experiencing itself as a dangerous aggressor, the infant feels persecuted by bad, attacking objects. This psychic splitting and pervasive sense of persecution gives the paranoid/schizoid position its name. Although relinquishing these defenses in favor of a depressive stance is a developmental achievement, Klein emphasized that all people retreat into the paranoid/schizoid position throughout the lifespan in times of psychic stress or vulnerability.

Although Klein was writing about individual psychic development, her theories have been applied to examine emotional and affective processes occurring at the societal level. In *Splitting Difference: Psychoanalysis, Hatred, and Exclusion*, Simon Clarke (1999) asserts that threats to the dominant social order elicit broad-based primitive fears. He writes, "As the structure of society changes, it evokes anxiety, feelings of the loss of a 'way of life'" (p. 31). As survivors continue to break the silence surrounding sexual violence, the 'way of life' that rests upon entrenched systems of patriarchal power is eroded. These structural changes inspire fear among those who benefit from (or are invested in) dominant constructions of gender difference and hierarchy (Funk, 2012). This includes not only members of the dominant group, but men and women alike whose identities are deeply rooted in discursive notions of gender difference. Threats to the social system that give order to society and serve as a source of personal meaning provoke unconscious fears of disintegration and destruction. Further, Kleinian social theorists assert that individuals hold unconscious but profoundly troubling awareness of the harms done to marginalized groups in preservation of the status quo (Alford, 1989; Clark, 1999). Sexual violence disclosure exposes the harms of sexual violence, foregrounding the human cost of maintaining the patriarchal status quo. As Judith Herman (1992) writes, "victims ask the

THE CONTRIBUTION OF NEGATIVE SOCIAL RESPONSES TO SELF-BLAME

bystander to share the burden of pain. The victim demands action, engagement, and remembering." (p. 37). In making these implicit demands, sexual violence disclosure generates guilt, shame, and culpability associated with recognizing one's own complicity in systems of violence.

These psychic threats posed by sexual violence disclosure initiate a collective retreat into the paranoid/schizoid position, in which the survivor becomes the focus of persecutory anxiety. While in reality sexual violence and the patriarchal system that surrounds it constitute grievous threats to women, it is society that feels threatened by the female survivor. In this context, the survivor becomes a persecuting figure, threatening to annihilate the "good" social order that gives stability and meaning within a patriarchal society. As Clark (1999) writes, individuals who threaten the dominant social systems often become the focus of persecutory anxiety, such that "we can see a psychosocial character who undermines order, sitting on the boundary, causing confusion and anxiety, becoming the target of hatred" (p. 22). The hatred, aggression, and terror inspired by and directed towards the survivor, is projected outward and felt to come from the destructive "bad" figure of the survivor. These persecutory perceptions are evident in common negative characterizations of survivors, for example, that they are lying in order to gain attention, money, or revenge, and that by speaking out they are ruining the lives of innocent men (Krakauer, 2015). In characterizing the survivor as "all bad," a broad interrogation of patriarchy is foreclosed, preserving a sense of society and even perpetrators as "good." These defensive responses reflect a broad-based paranoid/schizoid relationship to survivors.

Negative Social Responses Engender Self-Blame Through Projective Identification

Thus far, I have argued that sexual violence disclosure represents a profound challenge to the patriarchal social order by disrupting dominant discourses surrounding sexuality. I further

assert that this threat to entrenched systems of gender hierarchy initiates a collective shift into the paranoid/schizoid position, generating broad-based persecutory anxiety in relation to survivors. In this section, I assert that the shared anxiety arising in response to sexual violence disclosure is managed through projective identification, in the form of negative social responses. I contend that through negative social responses, society locates unwanted and disavowed affects in the survivor, simultaneously alleviating the anxiety provoked by sexual violence disclosure and reestablishing a patriarchal social order in which women blame themselves for the violence committed against them and cease to speak out against it. In this way, projective identification serves as the mechanism by which negative social responses engender self-blame among survivors of sexual violence.

As described in Chapter IV, projective identification is a key defense against anxiety in the paranoid/schizoid position. An unconscious psychic process, projective identification functions to both expel and maintain connection to unwanted, threatening, or vulnerable parts of the self. These disavowed affects are deposited into a receiving object, where they can be both kept at a distance and safely controlled by the projector in unconscious fantasy. Contemporary Kleinians have re-imagined projective identification as an interpersonal process occurring relationally as well as in fantasy. Projective identification transmits affective experiences from one person to another through real, though unconscious, interactions. This "interpersonal pressure" is the means by which the disavowed experience of the projector becomes part of the lived experience of the recipient (Ogden, 1992). Through subtle or overt messages from the projector, the recipient of projective identification comes to feel or behave in ways that mirror the content of the projection. In this way, not only does the projector's fantasy distort his

perception of the recipient, the recipient experiences herself in a way that is consistent with the projector's fantasy.

Intolerable affective experiences arising in response to sexual violence disclosure are managed through projective identification. As described above, these include annihilatory fears that the patriarchal social order will collapse, destroying familiar ways of life and sources of personal identity (Funk, 2012). Additionally, disclosure may trigger unconscious aggressive impulses aimed the survivor, in retaliation for her perceived attacks on the status quo and those who are invested in its continuation. Finally, guilt, culpability, and shame felt in response to sexual violence disclosure threaten schizoid perceptions of self and society as "all good." In the context of a paranoid/schizoid relationship to survivors, these experiences must be disavowed and managed through projective identification. Through this psychic process, the survivor becomes a container for experiences that cannot be tolerated by the larger society, detoxifying those experiences and restoring psychic and social stability (Clark, 1999). Negative social responses can be understood as the "interpersonal pressure" by which the survivor is induced to experience herself in a way that reflects what cannot be psychically held in society. Negative responses from friends, family, service providers, and institutions convey numerous harmful messages to the survivor. For example, questions such as "What were you wearing?" or "How much were you drinking?" communicate scrutiny and blame, while statements such as "It doesn't sound that bad," minimize the severity of the event (Brown, 2013; Jordan, 2004; Campbell, 2008). Such responses often come from informal support providers, including romantic partners, family and friends (Sigurvindottir & Ullman, 2014; Campbell, 2008). Receiving these messages, the survivor comes to embody shame, self-loathing, feelings of culpability, and an exaggerated view of her own aggression. Through this projective process, the

survivor learns to blame herself for the violence done against her, releasing the broader culture from the burden of confronting these feelings or engaging in critical self-examination.

In addition to ridding the self of intolerable affects, an unconscious effort to possess and control the receiving object is a defining characteristic of projective identification. This is a particularly salient aspect of projective identification occurring as a collective response to sexual violence disclosure. In this context, instilling self-blame among survivors functions as a potent form of social control. By engendering self-blame, negative social responses have the power to silence further disclosure and arrest critical examination of the social system. As stated in Chapter III, women who initially disclosed their abuse often ceased to discuss it after encountering negative social reactions, and questioned the validity of their experiences (Ahrens, 2006; Brown, 2013). Noting this silencing effect, Brown (2013) asserts that culturally-induced self-blame functions as a system of self-regulation in which survivors conform their understanding of their trauma to fit with dominant narratives. She writes, "Women's accounts are influenced by the dominant discourse, which not only makes it difficult for women to speak about trauma, but shape the talk itself. The discourse of personal failure or blame pivotal to identity construction in women's narratives ensures ongoing monitoring of the self," (p.5). In this way, the inculcation of self-blame conscripts women into the reproduction of hegemonic sexual discourse, neutralizing the subversive potential of sexual violence disclosure. Thus, negative social responses serve not only to quell unconscious anxieties in society, but also to exercise social control over survivors who might otherwise continue to expose and challenge the patriarchal social order that sexual violence reflects and upholds.

Clinical Implications: Occupying a Depressive Stance, Disrupting the Discourse of Blame

Sexual violence disclosure involves not only a speaker, but also a listener (Clark, 2013). As clinicians, how we receive and respond to survivors' accounts of sexual violence impacts the meaning they make of traumatic events, with powerful implications for recovery. The messages we convey in the clinical setting have the potential to reinforce or challenge dominant discourses that locate blame with the survivor. As social workers committed to pursuing social justice, we should aim to promote new, emancipatory understandings of sexual violence among our clients, and to combat the culture of silence and blame that makes the continued violent oppression of women possible.

How can we approach such a task? The concept of the depressive stance offers an alternative to paranoid/schizoid ways of relating to survivors who disclose their experiences of sexual violence. As defined in Chapter IV, the depressive position represents the capacity to integrate good and bad experiences, towards more whole, nuanced understandings of self and others. A depressive stance in relation to survivors asks that we step out of rigid conceptualizations of good and bad, guilt and innocence, resistance or complicity in the context of sexual violence. It asks that we see survivors as whole persons, with complex subjectivities of their own. Physical resistance, sobriety, chastity, and feminine comportment need not define the boundaries of violence nor the survivor's claim to violation. From a depressive position, we can recognize that survivors need not conform to the discursive requirements of femininity (the 'real' victim) to experience profoundly real, unjustified, and unwanted sexual harm.

Holding a more nuanced, complex view of survivors is key to helping them create a similar relationship to themselves. It is important that we as clinicians welcome exploration of self-blame, attending to this important aspect of survivor's post-trauma experience while taking

care not to reinforce self-blaming attitudes. While it is standard psychotherapeutic practice to categorically reject self-blame (For example, through the assertion that violence is never the victim's fault), the strength of this message must be tempered by a willingness to explore the complex origins of self-blame in the therapy room. The survivor may need to understand herself as both an agent and a victim, necessitating a both/and stance on the part of the therapist that recognizes the contribution of external factors to self-blame, while also honoring self-blame as part of the survivor's deeply personal effort to make meaning of her trauma in a patriarchal social context.

A commitment to the depressive stance requires another difficult shift in perspective. Depressive morality asks us to see perpetrators of sexual violence not as deviant monsters or social outliers, but as all-too-common representatives of an unjust system in which the exploitation of women is seen as the birthright of all men. This, of course, does not diminish perpetrators' culpability. Perpetrators bear responsibility for the violence they commit, morally and ethically, if not in the eyes of the law. Rather, the depressive stance asks us to reflect honestly on our own positions within systems of gender oppression, and to consider the ways in which we are implicated the creation and recreation of injurious and hegemonic discourse that allows sexual violence to occur.

As Berzoff (2011) asserts, the depressive position offers the possibility of deep, authentic love. A depressive relationship to survivors asks us to relinquish idealized or devalued notions of the survivor (or perpetrator), and to surrender idealized visions of ourselves. Depressive morality asks us to hold our own complexities, so that we may see and accept them in the survivor, perpetrator, and society itself. We must tolerate our own anxieties, insecurities, and ambiguities if we are to be in a commitment to a more full, truthful understanding of the survivor and

ourselves. On an individual and collective level, we must bear what feels intolerable within ourselves in order to help survivors bear the intolerable experience of sexual violence, and ultimately to heal.

Conclusion

This study addressed an aspect of self-blame that has been underexplored in empirical literature. By critically examining the contribution of negative social responses to self-blame, my analysis identified an important environmental component of self-blame that has not been thoroughly articulated in existing research. To my knowledge, this thesis is the first to link unconscious affective processes occurring in the broader context of women's oppression to self-blame among survivors of sexual violence. In this way, my thesis contributed a perspective on self-blame that is uniquely rooted in social work's person-in-environment approach, with applicability to psychodynamic clinical practice as well as wider social justice efforts. In bringing to light an important cultural component of self-blame, this thesis has offered a new way to clinically understand and work to unpack survivors' self-blame attributions towards fuller psychosocial recovery. Further, it illuminates the need for intervention at the cultural level that could aim to prevent negative social responses and promote more supportive and nuanced attitudes towards survivors. Another strength of this analysis is that it does not preclude other existing understandings of the phenomenon, but simply contributes an additional theoretical perspective from which both self-blame and negative social responses may be considered.

There are several acknowledged limitations to this study. First, as a purely theoretical project, my analysis does not include the direct accounts of survivors, whose voices are strikingly absent from much of the research surrounding self-blame. Future research should highlight women's own narratives surrounding their trauma. Further, as discussed in the

methodology chapter of this thesis, the relatively narrow scope of this study excludes many populations also targeted by sexual violence and negative social responses, including trans and gender non-conforming people, male survivors of male sexual violence, and survivors of violence perpetrated by women, as well as the understanding of sexual violence across differing racial and ethnic groups. These deficits limit the applicability of my analysis to clinical work with these populations, a gap that future research should aim to address. Finally, while the theoretical nature of this paper allowed for the emergence of a new conceptual lens for understanding self-blame, the findings presented here are not empirically validated. Moving forward, efforts to further the understanding of self-blame should aim to empirically explore the interplay between psychic and social dimensions of the phenomenon.

This study aimed to provide a more thorough understanding of self-blame among survivors of sexual violence, which considers the contribution of negative social responses in the broader context of women's oppression. In bringing together psychodynamic and sociocultural theories, my hope is that this thesis will provide clinical social workers with an additional perspective from which to understand and approach self-blame and negative social responses in the clinical setting, with attention to the social roots of inner affective experiences. I further encourage social workers to find ways to challenge the oppressive social systems that produce sexual violence and engender self-blame among survivors, towards a more just society.

References

Aguayo, J. (2013). Review of projective identification: The fate of a concept. *Psychoanalytic Psychology, 30*(3), 516-522.

Ahrens, C. (2006). Being silenced: The impact of negative social reactions on the disclosure of rape. *American Journal of Community Psychology, 38*(3), 263-274.

Alcott, L. (2006) *Visible identities*: R*ace, gender, and the self*. New York, NY: Oxford University Press**.**

Alford, C. F. (1989). *Melanie Klein and critical social theory: An account of politics, art, and reason based on her psychoanalytic theory.* New Haven, CT: Yale University Press.

Allen, A. (2013). Feminist perspectives on power. In *The Stanford encyclopedia of philosophy* Zalta, E.N. (Ed.) Retrieved from http://plato.stanford.edu/archives/sum2014/entries/feminist-power/

Amnesty International. (2007). *Maze of Injustice*. Retrieved from http://www.amnestyusa.org/our-work/issues/women-s-rights/violence-against-women/maze-of-injustice

Anderson, M. (2005). All American rape. *St. John's Law Review, 79*(3), 625-664.

Beauvoir, S. d., (2010). *The second sex.* (C. Borde & S. Malovany-Chevallier, Trans.). New York, NY: Alfred A. Knopf. (Original work published in 1949)

Beck, J. G., Reich, C. M., Woodward, M. J., Olsen, S. A., Jones, J. M., & Patton, S. C. (2013).

How do negative emotions relate to dysfunctional post-trauma cognitions? An

examination of interpersonal trauma survivors. *Psychological Trauma: Theory, Research,*

Practice, and Policy 7(1), 3-10.

Berzoff, J., Flanagan, L. M., & Hertz, P. (2011). *Inside out and outside in: Psychodynamic*

clinical theory and psychopathology in contemporary multicultural contexts. Lanham:

Rowman & Littlefield Publishers, Inc.

Bieneck, S., & Krahé, B. (2011). Blaming the victim and exonerating the perpetrator in cases of

rape and robbery: Is there a double standard? *Journal of Interpersonal Violence, 26*(9),

1785-1797.

Brown, C. (2013). Women's narrative of trauma: (Re)storying uncertainty, minimization, and

self-blame. *Narrative Works: Issues, Investigations & Interventions, 3*(1), 1-30.

Buckingham, L. (2012). A thread in the labyrinth: Returning to Melanie Klein's concept of

projective identification. *British Journal of Psychotherapy, 28*(1), 3-20.

Burgess-Jackson, K. (1996). *Rape: a philosophical investigation*. Brookfield, VT: Dartmouth

Publishing Company.

Cahill, A. (2001). *Rethinking rape*. Ithaca, NY: Cornell University Press.

Campbell, R. (2008). The psychological impact of rape victims' experiences with the legal,

medical, and mental health systems. *American Psychologist, 63*(8), 702-717.

Centers for Disease Control and Protection. (2014). Retrieved from

    http://www.cdc.gov/violenceprevention/sexualviolence/

Clarke, S. (1999). Splitting difference: Psychoanalysis, hatred, and exclusion. *Journal for the*

    Theory of Social Behavior, 29(1), 21-35.

Davis, R. C., Brickman, E., & Baker, T. (1991). Supportive and unsupportive responses of others

    to rape victims: Effects on concurrent victim adjustment. *American Journal of*

    Community Psychology, 19(3), 443-451.

Dworkin, A. (1987). *Intercourse*. New York, NY: Basic Books.

Frazier, P. (1990). Victim attributions and post-rape trauma. *Journal of Personality and Social*

    Psychology, 59(2), 298-304.

Frye, M., Shafer, C. (1977). Rape and respect. In M. Vetterling-Braggin, F. Elliston and J.

    English (Rds.), *Feminism and philosophy* (pp. 333-346). Savage, MD: Rowman and

    Littlefield.

Funk, S. A. (2012). *The war on women and the war in the self: A Foucaultian and Kleinian*

    analysis of anti-choice ideology (Unpublished master's thesis). Smith College School for

    Social Work, Northampton, MA.

Gabbard, G. O. (1995). Countertransference: The emerging common ground. *The International*

    Journal of Psychoanalysis, 76(3), 475-485.

Gavey, N. (2005). *Just sex? The cultural scaffolding of rape*. New York: Routledge.

Haslanger, S. (2002). Gender and race: (what) are they? (what) do we want them to be? *Nous, 34*(3), 31-55.

Hassija, C., Gray, M. (2012). Negative social reactions to assault disclosure as a mediator between self-blame and post-traumatic stress symptoms among survivors of interpersonal assault. *Journal of Interpersonal Violence, 27*(17). 3425-3441.

Herman, J. (1992). *Trauma and recovery: The aftermath of violence from domestic abuse to political terror.* New York: Basic Books.

Hollway, W. (1984). Gender difference and the production of subjectivity. In Henriques, J., Hollway, W., Venn, C., & Walkerdine, V. (Eds.) *Changing the subject: Psychology, social regulation and subjectivity* (pp. 227-63). London: Methuen.

Hinshelwood, R. D. (2005). Depressive position. *International dictionary of psychoanalysis* (pp. 395-396). Detroit: Macmillan Reference USA.

Hinshelwood, R. D. (2005). Envy. *International dictionary of psychoanalysis* (pp. 508-509). Detroit: Macmillan Reference USA.

Hinshelwood, R. D. (2005). Paranoid-schizoid position. *International dictionary of psychoanalysis* (pp. 1233-1234). Detroit: Macmillan Reference USA.

Hinshelwood, R. D. (2005). Projective identification. *International dictionary of psychoanalysis* (pp. 1338-1340). Detroit: Macmillan Reference USA.

Joffe, W. G. (1969). A critical review of the status of the envy concept. *The International Journal of Psychoanalysis, 50*(4), 533-545.

Jordan, J. (2004). Beyond belief? Police, rape and women's credibility. *Criminal Justice: International Journal Of Policy And Practice*, *4*(1), 29-59.

Katz, B, & Burt, M. (1988). Self-blame: Help or hindrance in recovery from rape? In A. Burgess (Ed.), *Rape and sexual assault II (*pp. 151- 168). New York: Garland.

Klein, M. (1946). Notes on some schizoid mechanisms. *International Journal of Psycho-Analysis*, *27*, 99-110.

Koepke, S., Eyssel, F., & Bohner, G. (2013). "She deserved it": Effects of sexism norms, type of violence, and victim's pre-assault behavior on blame attributions toward female victims and approval of the aggressor's behavior. *Violence against Women*, *20*(4), 446-464.

Krakauher, J. (2015). *Missoula: Rape and the justice system in a college town*. New York, NY: Doubleday.

Libow, J., Doty, D., (1979). An exploratory approach to self-blame and self-derogation by rape victims. *American Journal of Orthopsychiatry, 49*(4), 670-679.

Littleton, M., Magee, K., Axosm, D., (2007). A meta-analysis of self-attributions following three types of trauma: Sexual victimization, illness, and injury. *Journal of Applied Social Psychology, 37*(3), 515-538.

MacKenzie-Mohr, S., & Lafrance, M. (2011). Telling stories without the words: "Tightrope talk" in women's accounts of coming to live well after rape or depression. *Feminism & Psychology*, *21*(1), 49-73.

MacKinnon, C. (1987). *Feminism unmodified*. Cambridge, MA: Harvard University Press.

MacShane, K. H. (2014). *Do you even lift, bro? A feminist analysis of the mental health benefits of weight lifting for women* (Unpublished master's thesis). Smith College School for Social Work, Northampton, MA.

McDonald, K. L., & Koss, M. P. (2010). Rape. In *The corsini encyclopedia of psychology*. John Wiley & Sons, Inc. doi:10.1002/9780470479216.corpsy0772

Meyer, C.B., Taylor, S. (1986). Adjustment to rape. *Journal of Personality and Social Psychology*, *50*, 1226-1234.

Meyers, D. (2010). Feminist perspectives on the self. In *The Stanford Encyclopedia of Philosophy*. Zalta, E. N. (Ed.) Retrieved from http://plato.stanford.edu/archives/spr2010/entries/feminism-self/

Mikkola, M. (2012). Feminist perspectives on sex and gender. In *The Stanford Encyclopedia of Philosophy.* Zalta, E. N. (Ed.), Retrieved from http://plato.stanford.edu/archives/fall2012/entries/feminism-gender/

Mitchell, S. A. (1981). The origin and nature of the object in the theories of Klein and Fairbarn. *Journal of Contemporary Psychoanalysis, 17*: 374-398.

Mitchell, S. A., & Black, M. J. (1995). *Freud and beyond: A history of modern psychoanalytic thought.* New York, NY: Basic Books.

Moor, A., Ben-Meir, E., Golan-Shapira, D., & Farchi, M. (2013). Rape: A trauma of paralyzing dehumanization. *Journal of Aggression, Maltreatment & Trauma, 22*(10), 1051-1069.

Moor, A., Farchi, M. (2011). Is rape-related self-blame distinct from other post-traumatic attributions of blame? A comparison of severity and implications for treatment. *Women & Therapy, 34*(4), 447-460.

National Association of Social Workers. (2008). Retrieved from http://www.socialworkers.org/pubs/code/default.asp.

Ogden, T. H. (1992). *Projective identification and psychotherapeutic technique.* London: Karnac Books, 1992.

Papadaki, E. L., (2014). Feminist perspectives on objectification. In *The Stanford encyclopedia of philosophy.* Zalta, E. N. (Ed.) Retreived from http://plato.stanford.edu/archives/sum2014/entries/feminism-objectification/

Pedersen, S. H., & Stromwall, L. A. (2013). Victim blame, sexism and just-world beliefs: A cross-cultural comparison. *Psychiatry, Psychology and Law*, *20*(6), 932-941.

Pitts, V., Schwartz, M., (1997). Self-blame in hidden rape cases. In M. Schwartz (Ed.), *Researching sexual violence against women: Methodological and personal perspectives.* (pp 65-71). Thousand Oaks, CA: Sage Publications, Inc.

Rape Crisis England & Wales (2014). Myths and facts about rape and sexual violence. Retrieved from http://www.rapecrisis.org.uk/commonmyths2.php

Rose, D. S., (1986). Worse than death: Psychodynamics of rape victims and the need for psychotherapy. *American Journal of Psychiatry, 143*(7), 817-824.

Rusmussen, B., & Salhani, D. (2010). A contemporary Kleinian contribution to understanding racism. *Social Service Review, 84*(3), 491-513.

Segal, J. (1992). *Melanie Klein.* Newbury Park, CA: Sage Publications.

Sigurvinsdottir, R., Ullman, S. (2014). Social reactions, self-blame, and problem drinking in adult sexual assault survivors. *Psychology of Violence, 5*(2), 192-198.

Ullman, S. (1996). Social reactions, coping strategies, and self-blame attributions in adjustment to sexual assault. *Psychology of Women Quarterly, 20*(4), 505.

Ullman, S. (1999). Social support and recovery from sexual assault: A review. *Aggression and Violent Behavior, 4*(3), 343-358.

Ullman, S. (2010). *Talking about sexual assault: Society's response to survivors*. Washington, DC: American Psychological Association.

Ullman, S. E., & Peter-Hagene, L. (2014). Social reactions to sexual assault disclosure, coping, perceived control and PTSD symptoms in sexual assault victims. *Journal of Community Psychology, 42*(4), 495-508.

Van der Bruggen, V. & Grubb, A. (2014). A review of the literature relating to rape victim blaming: An analysis of the impact of observer and victim characteristics on attribution of blame in rape cases. *Aggression and Violent Behavior, 19*(5), 523-531.

Weedon, C. (1987). *Feminist practice and poststructuralist theory*. Oxford: Basil Blackwell.

Whisnant, R. (2013). *Feminist perspectives on rape*. In *The Stanford encyclopedia of philosophy*

    Zalta, E. N. (Ed.) Retrieved from

    http://plato.stanford.edu/archives/fall2013/entries/feminism-rape/

Williams, J., Holmes, K. (1981). From personal trouble to social ill. In *The second assault: Rape*

    and public attitudes (pp. 3-23). Westport, CT: Greenwood Press.