

# Women's journey of recovery from sexual assault trauma : a grounded theory

## Part 1

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### **Abstract: Curationis 30(4): 4-11**

Thousands of women and children experience sexual assault trauma annually in South Africa. The challenge posed by recovery from sexual assault trauma is a reality that confronts the survivors of sexual assault, their families and the larger community of service providers. Yet, little research has been conducted on recovery from sexual assault as a phenomenon.

The purpose of the study was to explore and analyse the journey of recovery which is undertaken by women who have been sexually assaulted, with the aim of discovering and developing the grounded theory of recovery from sexual assault trauma within the first six months following the event of rape. The main research question was: What constitutes the journey of recovery undertaken by women within the first six months following sexual assault?

A longitudinal qualitative study was conducted using the principles of grounded theory methodology as proposed by Strauss and Corbin (1990, 1998). A series of in-depth one-to-one interviews were conducted with a sample of ten women. The participants were selected through open, purposive and theoretical sampling procedures. The study was conducted over a period of six months following the event of sexual assault.

The substantive theory was discovered and constructed through the inductive and deductive analysis of data, grounded on the ten women's descriptions of their journey of recovery from sexual assault. The theory of women's journey of recovery that was discovered and developed consisted of eight theoretical concepts or categories. These included the following concepts:

1. Sexual assault trauma
2. Awakening
3. Pragmatic acceptance
4. Turning point
5. Reclaiming what was lost
6. Defining own landmarks of healing
7. Readiness for closure
8. Returning to self

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The grounded theory of the journey of recovery from sexual assault is a contribution to the knowledge about women's journey of recovery from sexual assault. It provides

a process and language for understanding women's experiences within the larger social context of recovery from assault.

The findings suggested that women's journey of recovery from sexual assault trauma is an individual experience that is influenced by many and varied causal and intervening conditions. These included personal biographies, relationships, supportive and non-supportive environments at individual, family, community and societal levels. Recommendations for future research and clinical management of sexual assault are made based on the researcher's interpretation of the findings.

## Introduction and Background

The prospect of recovery from the trauma of sexual assault is a reality that confronts the survivors of sexual assault trauma, their families and the larger community of service providers. Yet, there is little research that has been conducted on recovery from sexual assault as a phenomenon.

Literature review revealed studies which focused on the predictors of recovery following sexual assault and coping strategies during the event of sexual assault (Frazier, Tashiro, Bergman, Steger & Long, 2004:72; Gilbert & Cunningham, 1986:65; Burgess and Holmstrom, 1976:133). Other studies reported on factors that influence recovery, whether positively or negatively (Campbell, Ahrens, Sefl, Wasco & Barnes, 2001: 287; Ullman & Filipas, 2001:767; Ullman, 1996:143). These studies did not focus on the actual phenomenon or process of recovery, or how recovery happens in relation to the coping strategies used by the woman during or after the event of rape.

Other studies which investigated recovery of women from sexual assault trauma limited their focus to certain aspects of the women's life, such as social functioning or the absence of certain symptoms or return of certain functions as recovery. For instance, Burgess and Holmstrom (1978) considered survivors who were able to withstand the effects of sexual assault or returned to social integration within the first three to six months following the traumatic rape experience, and those who

reported being symptom-free after a year following the rape, to have recovered. Astbury (2001:1) considered women who had regained their sense of meaning, purpose and pleasure in their lives within a specified period following rape as having recovered.

## Problem statement

The prospect of recovery from the trauma of sexual assault is a reality that confronts the survivors, their families and the larger community of service providers. Yet knowledge about recovery from sexual assault trauma as a phenomenon is currently limited to the identified coping strategies and factors that influence recovery as well as the health consequences. The phenomenon of women's recovery and the meaning that women attach to their experiences during recovery has not been researched adequately. As a result, there is absence of a theory of recovery from sexual assault trauma or scientific basis to guide service provision for the sexually assaulted women.

Given the magnitude of the occurrence of rape in this country and all over the world, a new understanding of the phenomenon of recovery and the meaning of the experiences during the journey of recovery from sexual assault trauma should be obtained from the victims' and survivors' perspectives. That understanding and knowledge will improve both women's self-care after sexual assault and clinical management interventions for women who have been sexually assaulted. The nursing profession and all other health professionals cannot afford to be guided by their own instincts in the management of sexual assault survivors. A scientific foundation, informed by the survivors' voices is needed in the development of sexual assault management protocols and follow-up care.

The need for the research of the phenomenon of recovery from the women's perspective was identified a decade ago by Wilson and Raphael (1993: 508). Such knowledge is not only important for the researchers and service providers, but also for the general public and sexual assault victims who need to cope with the trauma of sexual assault.

## Purpose of the study

The primary purpose of the study was to

explore and analyse the journey of recovery which is undertaken by women who have been sexually assaulted within the first six months after the event of trauma. The secondary purpose was to discover and develop a theory of recovery grounded on data from the women who have been sexually assaulted.

## The research question

The main research question was: What constitutes the journey of recovery undertaken by women within the first six months following after sexual assault?

## Study design

This was a longitudinal qualitative research study, using Strauss and Corbin (1990, 1998)'s grounded theory methodology. The grounded theory methodology was employed to answer the research question, to discover and develop a grounded theory of recovery from sexual assault, that is grounded on the women's descriptions of their experiences of recovery from sexual assault trauma.

Grounded theory is an approach that is used to generate inductively derived substantive and middle-range theories through systematic data collection and analysis methods (Maijala, Paavilainen & Astedt-Kurki, 2003: 40). Its purpose is to build a theory that is faithful and illuminates the area under study and is useful for application to related disciplines (Strauss & Corbin 1990: 24).

## The research process

The research process consisted of multiple phases which included the pilot phase, the data collection phases and data analysis phase, and theory development phase.

## The pilot phase

The pilot study was conducted between October 2004 and March 2005. The main purpose of the pilot study was to identify and prevent any risks or research activities that could be detrimental to the participants during the main study. The participants recruited during the pilot phase were included in the sample of the main study. Their data were also analysed together with the data of the main study. This is allowed in qualitative research where there is no danger of data contamination (van Teijlingen & Hundley

V 2001). The potential risks that were identified during the pilot phase were reviewed with relevant stakeholders and then prevented in the main study. These risks included potential coercion of the participants to participate and the secondary victimisation of the survivors while waiting for the researcher to come to the recruitment site. The three women who were recruited during the pilot phase between October 2004 and March 2005 formed part of the population for the study.

### Population of the study

The population for the study was all women who presented within the first week following sexual assault, between April and May 2005, at one of the sexual assault management centres in the Western Cape Province of South Africa. These included women who either presented to the centre for the first time or those who were returning to get their HIV and STIs blood results and post-exposure prophylaxis (PEP) medications.

A combination of three sampling methods was used in order to recruit the participants for the study. These were purposive sampling, open sampling and theoretical sampling. Purposive sampling is a method where a predetermined criterion for recruitment of participants into the study is decided on before the recruitment of participants. The researcher makes some preliminary sampling-related decisions. These include predetermined inclusion criteria such as age, gender, and experience of the same phenomena by all potential participants, e.g. women who had been raped within a specified period, as was the case in the current study (McCann & Clark, 2003: 7; Polit & Hungler, 1991: 260). The preliminary decisions regarding the inclusion and exclusion criteria and selection of best recruitment site that were made were based on the preliminary study or pilot study experiences. Preliminary decisions around inclusion and exclusion included age and recent experience of sexual assault, i.e. the participants had to be above the age of 18 years, having been sexually assaulted within the week of presenting to the recruitment site for sexual assault management.

Open sampling is the selection of participants 'on site'. In open sampling, the researcher recruits participants who

meet the inclusion criteria, but is not influenced by evidence of any research-related concepts (Strauss & Corbin, 1998: 215). Open sampling is similar to convenience sampling, in which the researcher selects and recruits participants who are readily available (Poit & Hungler, 1991: 642). Open sampling was used to select the three pilot study participants 'on site'. It was based on principles of convenience and availability of participants during the recruitment of pilot phase. The women who met the inclusion criteria and voluntarily agreed to participate in the study were recruited.

Theoretical sampling is the process of selecting cases and data collection for generating a theory whereby data which was collected from the first few cases are analysed and used to decide on which data to collect next, and where such data can be found (Pandit, 1996: 4). The main principle of theoretical sampling is that each case selected for data collection should serve a specific purpose within the overall scope of the research. These specific purposes are incorporated in the principles of literal replication, extending the emerging theory using polar cases, and extending the emerging theory by filling theoretical categories (Yin, 1989: 53-54). This means that each case is carefully recruited or selected so that it produces similar results or contrary results for predictability reasons.

The analysed data on the three pilot study participants influenced progress from open sampling to theoretical sampling for the current study. Each new participant for the current study was carefully selected based on Yin's three theoretical sampling principles for selecting participants. This complemented the grounded theory's principles of open and theoretical sampling. Employing **the principle of literal replication**, three participants who seemed to have family support (as they were accompanied by a family member or friend) were approached in the TCC waiting area to replicate the first participant of the pilot study. Another woman who gave the history of having been raped in her own house was recruited to replicate the third participant of the pilot study on the same principle of literal replication. Employing **the principle of using polar cases**, the category 'no family support' was constructed as the opposite to the

category of family support. It was used to recruit one participant who was not accompanied and stated that she had no immediate family support.

All three pilot participants were raped by strangers. So, employing **the principle of using polar cases**, two women with a history of rape by an intimate partner were also recruited.

A total of ten women participated in the study. This included the seven women who were recruited for the study using theoretical sampling and the three women from the pilot study who were recruited using the open sampling method.

### Inclusion criteria

To be eligible to participate in the study, the woman had to be above 18 years old. The sexual assault should have taken place within a week of being recruited to the study. She should have presented to the recruitment site and have received the comprehensive management of sexual assault according to the management protocol of the recruitment site. She had to voluntarily consent to be admitted to the study.

### Exclusion criteria

In order to ensure a homogenous sample, minors and men were excluded from this study. While it is acknowledged that men do also get raped, their exclusion was based on the researcher's philosophical perspectives of the post-colonial black feminist approach that guided the research.

Another reason for the exclusion of men and minors lies in the purpose of the study, which was to develop a substantive theory and not a formal theory on women's journey of recovery from sexual assault. The substantive theory is the common type among theories that are developed from the grounded theory approach. It focuses on specific social processes and is developed from empirical studies such as the current study. The formal theory deals with a conceptual area of enquiry (McCann & Clark, 2003: 7).

### Data collection process

Four predetermined sessions of data collection sessions were held with each participant i.e. the initial interview session within first week; the second interview at the end of the fourth week; the third session at the end of the 12<sup>th</sup>

week and the last session at the end of the 24<sup>th</sup> week. Each lasted between 1 and 2 hours.

The main data collection method that was used in this study was the intensive, audio-taped, oral in-depth interviews also known as conversational partnerships or conversation with a purpose. These terms are a reflection of the unique interactive nature of qualitative interviewing, where research participants are encouraged to take an active role in determining the flow of the discussion. By talking freely about their lives, the participants generate empirical data for further analysis (Ulin *et al.* 2002: 83). The main interviewing technique was to allow the woman to speak freely about her experiences following rape, how she was feeling and how she was managing to deal with different experiences. Follow-up and probing questions were used as and when necessary. Field notes were also made throughout the interview sessions.

Another approach to interviewing was staggering of the depth of interviews. In-depth interview questions, follow-up questions and probing were employed more during the subsequent sessions rather than during the initial interview sessions. For instance, in the initial data collection sessions each participant was allowed to talk freely with limited follow-up questions. This was to allow the generation of rich data and as many categories as possible for the generation of '*in vivo*' codes for further data analysis. '*In vivo*' statements are the catchy words or phrases used by the participants themselves in describing their experiences (Strauss & Corbin, 1990: 69).

The main language that was used to conduct the interviews was isiXhosa, but some participants used both isiXhosa and English language interchangeably. This was found to be common among those participants who had reached a tertiary level of education. This was accepted as it made women feel comfortable.

Interviews were audio-taped and field notes were written during the interview or immediately after the interviews. While some qualitative researchers in grounded theory for example Glaser (1967) would prefer making post-interview notes rather than audio-taping the interviews, audio-taping the interviews was selected in

order to capture and retain the voices of the participants and their responses for further analysis. The participants' 'voices' are the best data when compared to the post-interview notes. The audio-taped interviews were transcribed within the first 24 hours of the interviews. Field notes on the observations about the participant and her behaviour during the interview session were added to the transcript for further analysis.

Data collection and data analysis is a parallel process in grounded theory methodology. In the current study only preliminary data analysis of each participant was done at each phase. Preliminary data analysis was mostly to inform the development of questions for subsequent interviews and comparison of data from the same participant during different phases, rather than for constant comparative analysis among different participants' data for the purpose of development of the theory. Further data analysis and theory development are discussed separately.

### **Ethical considerations**

Permission and approval to conduct the study was obtained from the University of Cape Town Ethics Committee, and the management team of the sexual assault management centre. The basic ethical principles of respect for persons, beneficence, distributive justice, and participants' autonomy were adhered to in the current study. The information about the study was explained to the participants and a copy of the information sheet was given to each participant to keep for her records. Informed consent to participate in the study, in which the participant's rights during the study were explained, was obtained from the participant through a signed consent form. A duplicate copy of the signed informed consent form was given to the participant. Protection of confidentiality and anonymity was observed by ensuring that the study participants did not see or identify each other before and after interview sessions. Each participant was approached privately and the interviews were scheduled far apart from each other. This ensured that each participant did not know about others who were in the study. In anticipation of potential stressful situations which could result from talking about rape and the exacerbation of post-traumatic stress, special arrangements for referrals of those women who showed or

reported problems with coping or medical conditions were made. Women were informed of the availability of such resources should they need them.

### **Data Analysis**

The general guidelines that were used as a framework for conducting data analysis were those of Strauss and Corbin (1990,1998) which are open coding, axial coding, selective coding, coding for process and the integrative or adjunctive mechanisms. Further complimentary procedures were used to enhance data analysis process, improve the trustworthiness of the data analysis process and improve the credibility of the findings. These included the following:

- Combining the within-case and across-case approach to qualitative data analysis whereby the researcher initially analysed data from the individual cases, and then proceeded to analyse data for commonalities across cases. Data units of similar meanings (from all cases) were then grouped together in categories. Theoretical relationships and links or connections were explored among the categories (Ayres, Kavanaugh and Knafl, 2003: 827).
- Verification procedure which is the process of checking and correcting errors which could nullify the findings - and therefore the emerging theory (Morse, Barrett, Olson & Spiers, 2002: 1). Miles and Huberman (1994: 64), inter-coder agreement or 'inter-coder reliability' was used and a score of 80% was obtained between the researcher and the co-rater's coding of data.
- Validation of the theoretical scheme which is the process of validating whether the emerging theory abstractions as presented in the theoretical scheme fit with the raw data or not. This can be achieved through member checking. Member checking is conducted by qualitative researchers to ensure the trustworthiness of their research by getting the feedback of the participants, their reactions to the data and findings and their response to

the researcher's interpretation of data (Holloway & Wheeler, 2002: 257). For validation of the theoretical scheme and member checking, five of the participants who were still telephonically accessible to the researcher were contacted and invited for a session to validate the theoretical scheme and the storyline. Each was given the theoretical scheme and the storyline during an individual meeting with the researcher, to read and identify each concept of the emerging theory with the content of the storyline. The researcher explained each concept on the theoretical scheme in isiXhosa and explained that this was a result of information from all participants and not just one person. Each participant was given an opportunity to ask questions where necessary. They had to identify whether the theoretical scheme and explanation given by the researcher represented or seemed to fit with their experiences during the six months of the study period. Their responses confirmed the researcher's interpretation of their experiences, and thus the emerging theory was also confirmed.

The computer-aided qualitative data analysis package that was used in the current study was Nvivo QSR. Nvivo QSR enhanced and facilitated data analysis, but the deductive and inductive thinking and critical analytical processes had to be carried out by the researcher independently. The researcher 'fed' the Nvivo QSR with data such as the conceptual labels as nodes and grouping of these into tree nodes or parent nodes. This only happened after the manual data analysis was done by the researcher through reading and rereading of text and manually labelling text accordingly.

### Trustworthiness

Trustworthiness in qualitative research is a concept that was coined by Lincoln and Guba in 1989, as an alternative to the

criteria of reliability and validity which is used in quantitative studies. It refers to the truth value as well as the methodological soundness and adequacy of the research, which is judged through the criteria of credibility, confirmability, dependability and transferability (Holloway & Wheeler, 2002: 250; Ulin *et al.*, 2002: 31).

**Credibility** is often referred to as the truth value. Its focus is on the confidence in the truth of the findings. It relates to how the participants can recognise the meaning they gave to the situation. That includes how the researcher's interpretation of data is compatible with the perceptions of the study participants (Holloway & Wheeler, 2002: 256; Ulin *et al.*, 2002: 31). The credibility of the findings of the current study was verified and confirmed through the member checking and validation of the theoretical scheme and storyline discussed above.

**Confirmability** is a way in which the findings and conclusions of the study achieve the aim of the study and are not the result of the researcher's prior assumptions and preconceptions. This refers to knowing that the researcher maintained a clear distinction between his or her personal values and those of the participants through the use of reflexivity (Holloway & Wheeler, 2002: 256; Ulin *et al.*, 2002: 31). Reflexivity is the researcher's acknowledgement of his or her role and influence on the research project (Carolan, 2003: 7). The researcher's philosophical assumptions were declared openly as well as the values they may have played in influencing the research findings.

**Dependability** refers to systematic consistency and accuracy in the implementation of the canons of qualitative methodology. It also refers to the clear and logical connections between the research purpose and the research design in order to allow the report readers to evaluate the adequacy of analysis by following the researcher's decision-making processes and his or her detailed description of the research context (Holloway & Wheeler, 2002: 254; Ulin *et al.*, 2002: 31).

The researcher selected and maintained Strauss and Corbin's (1990, 1998) grounded theory approach. Where necessary, other complementary data analysis procedures were adopted, with

full motivation. That was done to demonstrate the accuracy in the implementation of the canons of the grounded theory methodology.

**Transferability** refers to the ability to transfer the study findings in one context to similar situations or participants. According to Ulin *et al.* (2002: 32), transferability also refers to the application of lessons learned from one qualitative study to other contexts, if the sample has been selected carefully to represent the experiences which reflect the key issues in the research problem. Sampling and data collection details are discussed to assist other researchers who may wish to repeat the study.

### Findings

The substantive theory was discovered and constructed through the inductive and deductive analysis of data which was grounded on ten women's descriptions of their journey of recovery from sexual assault. The theory is a representation of the researcher's interpretations of the descriptions of the social world of these women during the period of six months following sexual assault trauma. Because this substantive theory is a representation of the women's social world, it has relevance for all service providers who are involved in the management of women who have been sexually violated.

The grounded theory of the journey of recovery from sexual assault is a contribution to the knowledge about women's journey of recovery from sexual assault. It provides a process and language for understanding women's experiences within the larger social context of recovery from assault. The women's journey of recovery from sexual assault trauma consisted of the following concepts or categories and related subcategories of the theory:

1. Sexual assault trauma
2. Awakening
3. Pragmatic acceptance
4. Turning point
5. Reclaiming what was lost
6. Defining landmarks of healing
7. Readiness for closure
8. Returning to self.

The context and the intervening conditions that influence the journey of recovery from sexual assault trauma throughout the different steps were interpreted and grouped as follows:

1. Personal biographies, such as the participants' cultural and religious beliefs, values, experiences and fears – such as the fear of HIV infection from being sexually assaulted – aspirations and personalities.
2. Supportive and non-supportive behaviours of significant others and service providers.
3. Supportive and non-supportive environment, including family, community and society, as well as the health, legal and social system.

The presence or absence of one or more of these intervening conditions influences the journey of recovery from sexual assault for each individual differently. The discussion of the findings, together with illustrations of women's comments is found in part 2, published under the title "Women's journey of recovery from sexual assault trauma: a grounded theory (part 2).

## Discussions

The findings revealed that the ultimate goal of the women's journey of recovery was returning to self. As a result, the women embarked on a series of conscious and subconscious actions to return to the self. The series of conscious and unconscious actions are depicted in the concepts of the theory of the women's journey of recovery from sexual assault trauma which include awakening, pragmatic acceptance, turning point, reclaiming what was lost, defining own landmarks for healing, and readiness for closure.

Although returning to self is an ultimate goal, the women also had a clear understanding that the journey of recovery will not lead to the same person that one was before the event of rape, but to a new self. Awareness and understanding of this is evidenced by the women's acknowledgement of what they had lost during the event of sexual assault, the grieving process that they underwent for the aspects they had lost, as well as the lessons they had learnt from the incident of sexual assault. Different authors attest to the loss of certain aspects of self from the event of sexual assault, including one's inner sense of gender identity and control of their lives and thoughts (Bletzer & Koss, 2006; Brison, 2002). Lunt (2002: 33) supports the findings on

the presence of the ultimate goal of recovery. He states that for recovery to occur, one needs to have a goal, a direction, an inspiration, faith or hope. The findings indicate that those participants who identified their ultimate goal of recovery early in their journey were able to take control and move forward, irrespective of the intervening conditions.

The findings also revealed that women identify their own landmarks of healing or recovery. Interpretation of the landmarks of recovery identified, together with the ultimate goal of returning to self, was the women's meaning of recovery from sexual assault.

Recovery is a personal journey. Hence, each participant had to identify her own ultimate goal and define her own landmarks of healing or recovering. These findings are supported by the Recovery Movement within the mental health fraternity's definition of recovery. The Recovery Movement conducted research to reach consensus on the definition of recovery, finding that recovery is "*a deep personal, unique process of changing one's attitudes, values, feelings, goals, skills and or roles.*" Recovery was also reported to involve the development of new meaning and purpose in one's life (Jacobson, 2003: 378). The same definition of recovery is described by Davidson *et al*: *not paged*).

The major breakthrough in and the significance of the findings of this study was the women's identification of their own landmarks of recovering. For the first time, black women's voices regarding what they consider important in their health and recovery from sexual assault trauma, and their views regarding their bodies and their needs in intimate relationships, were analysed and interpreted in research. These voices have been used to construct new and legitimate knowledge about what black women consider to be important in their lives, their wellness, their bodies and their health and recovering from sexual assault trauma - as opposed to what the Western world has defined as the 'ideal' for all women.

One particularly interesting finding in the category "defining own landmarks of healing" was that relating to weight gain following the sexual assault event. The participants' view on regaining one's

appetite and of weight gain following sexual assault trauma was identified as a sign of a positive journey of recovery. It was even described by one participant as "the healing of the heart". This is in contrast to the Western view, which regards weight gain following sexual assault as an eating disorder (Liburd, Anderson, Edgar & Jack, 1999: 382). In the current study, the good appetite and weight gain were viewed positively and associated with healing or recovering.

The difference in black and white women's views regarding weight gain and eating disorders are well founded in literature. In their study, Liburd *et. al* (1999: 382), found that the black women participants indicated that a middle-to-large body was healthier. Other studies have shown differences between young black and white women in attitudes to eating, body aesthetics and body dissatisfaction. These reported that white women had an affinity for thinness and more frequently engaged in dieting and eating disorders than black women (Aruguete, DeBord, Yates & Edman, 2005: 328; Franko & Striegel-Moore, 2002: 975).

The black women's perception of weight gain as a landmark of healing or recovering warrants recognition as a contribution to development of new and legitimate knowledge about what seems to be important to black women's definition of healing or recovering from sexual assault. Service providers should take this into cognisance when planning, implementing or evaluating secondary interventions for survivors of sexual assault.

## Recommendations

The current study opens research opportunities for both qualitative and quantitative researchers alike. The substantive theory developed from the findings of the current study needs to be tested, extended and replicated in different contexts nationally, within the African continent, and internationally. Service providers need to take cognisance of the different needs of women during the journey of recovery from sexual assault when developing intervention strategies that are appropriate and enhance rather than delay recovery from sexual assault. The current study indicated that the professional service providers dedicated to sexual assault management are important in the women's journey of

recovery from sexual assault. Also highlighted was the need for development of interventions for the partners of sexually assaulted women, their families and significant others as secondary victims who have potential for enhancing or delaying the women's journey of recovery. Managers should acknowledge and value the service providers who work with sexual assault victims.

The findings also highlights that theories of recovery from sexual violation and other gender-based violence should be taught at different levels and programmed for the education of the health professionals and other service providers. That will provide health professionals with the theoretical background needed for understanding women's responses to gender-based violence before they enter their individual professions, and will indirectly influence their decision-making regarding working with victims and survivors of sexual violence in particular and gender-based violence in general.

## Conclusion

The developed theory highlights the process and the interconnectedness of different concepts of what the women experience in their journey of recovery from sexual assault trauma. These findings should be considered as theoretical foundations for the development of secondary and rehabilitation interventions for sexual assault management programmes. They should also be considered as theoretical foundations for educational programmes for all sexual assault management service providers. This will have a positive influence on the sexual assault survivors' journey of recovery from sexual assault trauma. The article "Women's journey of recovery from sexual assault trauma: a grounded theory part 2" provides a full discussion of the findings and the participants' responses.

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