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J Hum Ecol, 36(1): 13-21 2011
PRINT: ISSN 0970-9274 ONLINE: ISSN 2456-6608 DOI: 10.31901/24566608.2011/36.01.03

Support Program to Mothers of Sexually Abused Children in North West Province in South Africa: A Literature Review

Gaboipolelwe Margaret Masilo

School of Environmental and Health Sciences, North West University, Mafikeng Campus, South Africa
E-mail: Margaret.masilo@nwu.ac.za

KEYWORDS Mothers/Parents/Caregivers. Child Sexual Abuse. Support Program. Rape And Non-Abusive Mothers

ABSTRACT The purpose of the study was to conduct a comprehensive literature review on existing formal and informal support system for the mothers whose children were survivors of sexual abuse. Articles published from 1990-2010 in peer review journals and books were examined from PUBMED, CINAHL, hand search of bibliographies, and reports published by World Health Organization (WHO).The search focused on: program for mothers whose children were sexually assaulted, need for the support program, experiences of the mother regarding the child's sexual trauma, mother support to the child after disclosure, existing health care policies. Original articles only were included and these articles contained key words: Mothers/parents/caregivers, child sexual abuse, support program**,** rape and non-abusive mother**s**. The articles were to (1) describe program for the mothers, (2) acknowledge a need for the support system of a mother of a sexually abused child (SAC) (3) Experiences of the mother regarding the child's sexual trauma. (4)Mother supports to the child after disclosure and (5) any existing health care policies focusing on support for mothers of sexually abused children. Articles were labeled and categorized according to inclusion criteria. Data gathered was coded according to the themes from each article that qualified for inclusion. Notes on ideas were read and documented as a means of reference. Four (25%) articles reported that mothers: experienced distress of different types and that culture contributes to mothers' inadequate support to the child when the perpetrator is a family member. Five(31%) articles reported that mothers need support systems five (31%) articles also reported that support program was needed for mother post child sexual trauma and two 13% supported the idea that sexually abused children should be supported by their mothers. Out of the same articles two (13%) articles reported an existence of support program to mothers.

INTRODUCTION

The purpose of the study was to conduct a comprehensive literature review on existing formal and informal support system and program for the mother's of child survivors of sexual abuse. South Africa has the highest rates of sexual assault in the world and 20,000 cases of sexual assault and attempted rape reported yearly are children younger than 18 years. Research Update National Health Systems Research, Research Co-ordination and Epidemiology (Vol.6: No.1 June 2004). These results indicate how serious the problem is throughout South Africa especially in the North West Province. To Prevent and Combat Sexual Offences (2008), reports of sexual assault were high in the North West Province. The report further indicates that NWP reports an average of about 5,039 incidences of rape annually.

Children that are abused sexually have support program and policies to assist them in coping but their mothers who support them do not have any support program.Reseach conducted by Newberger et al. (1993: 101) acknowledges that existing literature focuses only on assessing whether mothers support their abused children after discloser and yet little is known about the challenges these mothers are experiencing. The process of reviewing literature provided the researcher with a comprehensive review of research –to-date regarding support programs to mothers of sexually traumatized children. PUBMED, CINAHL and review relevant journals which highlighted areas of support programs to mothers of sexually traumatized children were consulted.

The results of this review should assist in exploring the experiences of mothers of sexually abused children so that a support program can be developed that will help health professionals to improve services for the mothers of sexually abused children (Kim et al. 2007: 338). It should investigate the strategies that can be put in place to support mothers whose children are sexually traumatized, empower the professionals and policy makers to create formal and informal systems that will support mothers of sexually traumatized children.

METHODOLOGY

Articles published from 1990-2010 in peer review journals and books were examined from PUBMED, CINAHL, hand search of bibliographies, and reports published by World Health Organization (WHO).The search focused on: program for mothers whose children were sexually assaulted, need for the support program, experiences of the mother regarding the child's sexual trauma, mother support to the child after disclosure, existing health care policies. Original articles only were included and these articles contained key words: Mothers/parents/ caregivers, child sexual abuse, support program**,** rape and non-abusive mother**s**

Inclusion Criteria*:* The articles were to (1) describe program for the mothers, (2) acknowledge a need for the support system of a mother of a sexually abused child (SAC) (3) Experiences of the mother regarding the child's sexual trauma. (4) mother supports to the child after disclosure and (5) any existing health care policies focusing on support for mothers of sexually abused children

Analysis

Articles were labeled and categorized according to inclusion criteria. Each article was read several times to analyze the content. Data gathered was coded according to the themes from each article that qualified for inclusion. Notes on ideas were read and documented as a means of reference

RESULTS

Martine et al. (2007: 805) conducted a study in Quebec: Factors linked to the distress outcome in mothers of children disclosing sexual abuse. The aim was to address variability in clinical level of psychological distress experienced by mothers of sexually abused children. A self report measurement was completed by 149 mothers of sexually abused children. The following aspects were explored: abuse related variables (length, severity, and identity of perpetrator); a history of childhood sexual abuse and partner violence experience in the past year, mother coping and feeling of empowerment. The findings revealed that: more than half of the mothers reported clinical level of psychological distress (Martine et al. 2007: 145).They further acknowledge that mothers play a central role in facilitating recovery of their children, but their needs receive little focus and recommended that support is crucial for mothers of sexually abused children. Newberger et al. (1993: 92) conducted a quantitative longitudinal study on mothers of sexually abused children in Boston (USA) with results underscoring the importance of addressing the psychological needs of a mother whose child was sexually traumatized as an integral component of treatment of her child's sexual abuse. The authors concluded that maternal distress is an important factor and that both the child and mother should be treated because maternal distress impedes the child's discovery. Any mother traumatized by the abuse of her child should receive psychotherapy or family therapy .Their findings further indicated that the distress of victimized child should be considered from both maternal and child perspective (Newberger et al. 1993: 100).

Newberger et al. (1993: 101) specifically researched on mothers, whose children were sexually abused, with a focus on support program after the child's sexual abuse disclosure and to identify gaps for future research; however, they found that although there is numerous support programs developed for mothers, none have been developed to specifically target the mothers of sexually traumatized children. Sharps et al. (2008: 480) and Newberger et al. (1993:101) searched specifically for research on mothers whose children were sexually abused, with a focus on support program after the child's sexual abuse disclosure and to identify gaps for future research; however, they found that although there are numerous support programs developed for mothers, none have been developed to specifically target the mothers of sexually traumatized children. Hill (2001:3850) also conducted a qualitative study on (n=11) women whose children were sexually abused. The aim of the study was to explore the experiences of women attending a busy peer support group and the role that the social workers play in these groups. The results were that the women failed to share to social workers their doubts about own abilities as mothers, this was due to the fact that social workers were making judgments about their ability to protect children.

The group of these mothers developed the support group that provided a safe and non-judg-

mental forum in which they expressed and dealt with their emotions. The outcome of the study was that mothers of sexually abused children are affected by abuse of their children and yet professionals focus on assessing their ability to protect and not to meet their needs for support. The author concluded that social workers should support and encourage the formation and use of peer support groups for mothers. The author also emphasized the fact that the social workers should develop the humility and the skill to facilitate and to back the women's own action.

Kelly (1990: 27) conducted a mailed, quantitative, comparative study on parents of 134 children, of which 67 of the children had been sexually abused matched with 67 non-abused children. One hundred and eleven parents (65 mothers and 46 fathers) of the sexually abused children completed several tools including the Symptom Checklist-90-Revised (SCL), a reliable and valid measure of psychological distress, comparing three groups: (a) parents of sexually abused children with ritual abuse; (b) parents of children sexually abused without ritual abuse; and (c) parents of non-abused children. The SCL-90-R measures nine primary behavioral symptoms (somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism). In addition the SCL-90-R measures three global indices of distress: (a) Positive Symptom Total, (b) Positive Symptom Distress Index, and (c) a General Severity Index (GSI). The GSI is considered to be the best single indicator of distress and combines information on the numbers of symptoms and the intensity of distress (Kelly 1990: 27-28).

Parents of sexually traumatized children also the Impact of Event Scale (IES) which is a 15-item instrument that explores the quality of experiences related to a stressful event that is written on a form. In the Kelley (1990: 27) study, the stressful event written on the form was the sexual abuse of the child.

Parents of the 67 non-abused children completed the SCL-90-R but not the IES. As predicted all parents of children sexually abused reported higher levels psychological distress than parents of non-abused children (Kelly 1990: 27). Parents of sexually abused children with ritual abuse had significantly higher levels of psychological distress, with significantly higher mean GSI *T* scores, than parents of abused children without ritual abuse (mothers, $t = 1.79$, $p < .05$; fathers, $t = 2.08$, $p < .05$). The author concluded that the study empirically validated that sexual abuse of a child is a major short-term and long term stressor for parents, especially for fathers (Kelley 1990: 25). However, Kelly noted that other studies [Moore et al. 1988; and Klein and Nimorwicz 1982 (as cited in Kelly)] have shown that mothers of sexually traumatized children are more psychologically distressed than fathers.

However, Smith et al. (2010: 1) conducted a study on mothers' reports of maternal support following child sexual abuse using the Maternal Self –Report Questionnaire (MSSQ). The study was designed to develop a reliable and valid mother-report measure for assessing maternal support following a child's disclosure of sexual abuse. A sample of 246 non-offending mothers of sexually abused children was interviewed about the support they give their children. The study resulted in the development of a brief self-report measure of maternal support that could be utilized in other studies of sexually abused children and their mothers. Smith et al. (2010: 5-6) also reported there was a need to develop a tool to assess what sort of support mothers would need to help the mothers better support their children.

Fong and Walsh-Bowers (1998: 32) found that mothers of sexually traumatized children in the USA received little support from communities and were also blamed and stigmatized for their children's sexual trauma. They further indicated that mothers were blamed by social workers, legal courts and social agencies. Concluded that there is a need for reconstructing assumption about incest, but nothing was mentioned about listening to experiences of mothers of sexually traumatized children in an attempt to develop a supportive intervention.

Joyce (2007: 1) conducted a qualitative study on the Production Therapy. The Social Process of Construction of the Mother of sexually abused child. The aim was to examine the perspective of clinical social work on non-offending mothers of sexually abused children. They examined whether clinician still use collusion. The findings concluded that although workers do not use collusion they still constructed mothers negatively. Unsupportive mothers had conflict with their own mothers, the maternal grandmothers also displayed less support to sexually abused children. Mothers presented with attachment behavior,

anxiety, and depression differences significantly from a comparison group in a small study (n=27).

De Jong (1988: 14) conducted a quantitative study on Maternal Responses to Sex Abuse of their Children. The aim was to define categories of maternal responses and determine their relationship to variables features between mothers and children. A (n=103) mothers returning for a routine 2-3 weeks follow up of sexual abuse episodes. Three categories of responses were identified: supportive, non- supportive with emotional changes and supportive without emotional changes .Non –supportive (n=32) believed abuse was a lie, misunderstanding or a fault. (n=71) believed that the child abused was true. Mothers commonly expressed anxiety, anger, fear, and guilt and 39 of supportive mothers expressed mood changes, crying, sleeping, appetite or somatic complaints. The author concluded that: maternal support was essential to both the child and mother and recommended counseling and social services support (emotional, social, environmental and legal). The study on The Importance of Childhood sexual abuse and other forms of childhood adversity on adulthood parenting was conducted by Barrett(2009: 489).The study investigated the independent impact of sexual abuse on the following dimensions of adulthood parenting after controlling other forms of childhood adversity in a predominantly African American(n=483) of mothers .The findings revealed that childhood sexual survivors reported significantly lower rates of parental warmth, and higher rate of psychological depression and more use of corporal punishment than mothers who have not experienced childhood sexual abuse.

The study conducted by Powel and Cheshire (2010: 141) in England on a Preliminary Evaluation of a Massage Program for Children Who Have Been Sexually Abused and their Non-offending Mothers focused on evaluating the use of massage program on mothers and their sexually abused children. The aim was to address the difficulties faced by non-offending mothers and their. It was a qualitative study that interviewed (n= 4) mothers before and after the program intervention. The findings reported improved bonding, communications between the mothers and their sexually abused children. The author concluded that further evaluation of the program is needed.

Bolen and Lamb (2007: 191) conducted a study on a (n=29) mothers whose resident partners abused their children sexually. After controlling variables to ambivalent it was found that there were no relationships that exist between post disclosure support and ambivalence. The authors concluded that there was a need for continuing research on constructs of parent support and ambivalence.

Lewin and Bergin (2001: 365) on their study: Attachment and Behavior Depression and Anxiety in (n=38) non offending mothers of sexually abused children acknowledged that psychological being of the mother affects her ability to be responsive and sensitive to her child and this will affect the recovery of the sexually abused children from the abuse. They further stated that supportive relationship and maternal warmth are predictors of the child psychological adjustment of the child. The authors concluded that heightened level of depression, anxiety and diminished maternal attachment behaviors was experienced by mothers whose children were sexually abused.

Domian et al. (2010: 1) recently conducted a qualitative descriptive study in the United States of nine mothers of sexually abused children. They presented a thematic summary of the mothers' experiences of participating in a home visitation parenting skills building program that used four coaches from various health related fields. Three major themes related to engagement were identified:

1. The mothers' struggle to meet the emotional needs of self and the child.
2. The mothers' lack of support in navigating complicated and stressful life events.
3. The mothers' consistency with the program engagement as mediated through a trusting and caring relationship with the coaches.

Mothers were consistently supported by coaches who demonstrated a continuous process of engagement by encouraging mothers to explore and discover self care strategies and ways to navigate life struggles. The authors concluded that trust increased program engagement and relationship building with the coaches.

The search yielded 40 articles, 14 were excluded as they did not meet the inclusion criteria. Ten articles were not original and did not highlight the areas of support program to mothers of sexually traumatized children, and therefore they were excluded. The (25%) reported that mothers experienced distress of different types and that culture contributes to mothers' inadequate support to the child when the perpetrator is a family members, (32%) reported that

mother need support systems (32%) also reported that support program was needed and (12.5%) supported the idea that sexually abused children should be supported by their mothers.

The results of articles searched are indicated in (Table 1). Sixteen original articles were searched, the research for 12 (75%) was conducted in USA, 2 (12.5%) in Canada and 2 (12.5%) in England. Eleven (69%)

Table 1: The process of searching

Author and year	*Location*	*Method*	*Sample*	*Conclusion*
Kim et al. 2007	USA	Prospective multigenerational Quantitative	N=127	Non offending mothers exhibits different patterns of psychological challenges
Neuberger 1993	USA	Longitudinal correlation Quantitative	N=42	Mothers suffered severe emotional distress following disclosures of the ACA of their children
De Jong 1998	USA	Comparative study Quantitative	N=103	Mothers commonly expressed anxiety and mood changes, crying, sleeping problems
Joyce 2007	USA	Qualitative	N=27	Presented attachment behavior, anxiety, and depression
Plumber et al. 2007	USA	Quantitative	N=125	Maternal rumination is a central factor
Barber 1995	USA	Exploratory study Quantitative	N=483	Programs for single parent support groups (SPSG) for divorced mothers could be used to develop similar programs for those whose children are sexually traumatized
Kelly 1990	USA	Comparative descriptive Quantitative	N=134	Parents need extended therapy because they received therapy for six months but continue to persist displaying PTSD disorders.
Smith et al. 2010	USA	Cross sectional Quantitative	N=246	Easily scored self-report measurement focusing on emotional could be used in future research to reduce cross study measurement comparability.
Domain et.al. 2010	USA	Descriptive qualitative design-prevention study	N=9	Mothers lack support in navigating the struggle
Lewin 2001	USA	Non-probability, purposive sampling, Qualitative.	N=38	Heightened level of depression, anxiety and diminished maternal attachment behaviors.
Barrett 2009	USA	Stratified random Quantitative	N=483	No independent impact on the dimensions of parenting explored
Martine et al. 2007	Canada	Quantitative	N=149	Mothers play a central role in facilitating recovery of their children but there has been little focus on their own needs and profiles
Bolen 2007	Canada	Linear regression Quantitative	N=29	Maternal support unrelated to ambivalence
Fong et al. 1998	England	Qualitative in-depth interview	N=6	Mothers received little support from the community and were blamed and misrepresented
Hill 2001	USA	Qualitative	N=11	Mothers of sexually abused children are affected by abuse of their children and yet professionals focus on assessing their ability to protect and not to meet their needs for support
Powel and Cheshire A2010	England	Qualitative design, interview	N=4	Improved bonding and commu nication observed between after the use of massage program mother and SAC.

Total articles searched: 16

used quantitative design and 5 (31%) use qualitative approach. The sample size ranged from n=4 to 3,637. Out of same article (12%) reported an existence of support program to mothers.

Sixteen journals were searched, out of that (75%) were authored in USA, (12.5%) in England (12.5%) in Canada, none in African courtiers including South Africa.

Table 2: Literature search focus

Factors	*Outcomes*	*%*
Program for the mothers	5	31.25
Need for the support system	5	31.25
Experiences(different types of distress) of the mother regarding the child's sexual trauma	4	25
Mother support to the child after disclosure	2	12.5
Existing health care policies focusing on support for mothers of sexually abused children.	0	0

DISCUSSION

Mothers experience different types of distress, post traumatic stress disorders which is an evidence of psychological sequelae after being aware that that her child is sexually abused. Post traumatic stress disorders symptoms have shown to be among the most prevalent health outcomes of trauma exposure to mothers. The aftermath of stress associated with traumatic events of their children's sexual assault resulted in adjustment behavior such as anxiety and it also limited mother child bonding. Mothers are also confronted by supporting and protecting their sexually abused children whiles they, themselves are not supported and are experiencing a secondary trauma. Mothers who experienced childhood sexual trauma are more challenged than those who never experienced it. Mothers are blamed by professionals, family members and community for sexual trauma experienced by their children. Mothers express different feelings of stress and maternal responses are determined by mothers 'coping mechanism.

Mothers need counseling sessions after experiencing a traumatic situation of their children's sexual abuse. This is emphasized by Kelly (1990: 26) mothers displayed persistent psychological distress after receiving some therapy of less than 6months and that joint counseling sessions with mothers and their sexually abused children will be beneficial. Social and psychological support is vital in preventing victimization, stigtimization and blaming after being aware that the child is sexually abused.

Other authors have noted that social support can enhance the psychological being of mothers of sexually abused children. Mothers with support experience less stress than mothers of those that are not sexually traumatized

Mothers' support programs must be responsive to the interrelationships between the mothers' program and those of their sexually abused children. Mothers should be assisted to learn parenting especially after being aware that the child is sexually abused. Disclosure of a child is sexually abused lead to domestic violence, intimate partner abuse especially if the perpetrator is a family member or known.

Professionals are to inquire about mothers of sexually abused children experiences post child sexual abuses that intervention can be sort. Intervention programs should be developed to enhance mothers support to their sexually abused children.

Nurses are to recognize that child sexual abuse, is serious and it affects mothers negatively and they need support. Kelly (1990: 28) immediate counseling should be provided to mother to reduce their impact on stress.

Research

More research is needed in South Africa to investigate the strategies that can be put in place to support mothers whose children were sexually abused after their children disclosed.

Research is to be conducted on professionals to find out what makes them not be sensitive to the needs of mothers whose children were sexually abused.

The authors recommended that mother of sexually abused child need financial, physical, social, and spiritual support, and that distress of a sexually abused child should be considered from both maternal and child perspective. Authors also mentioned that a model program for divorced couples could be used to develop similar program for mothers of sexually abused child and that parents need counseling and extended therapy for them to recover.

Measurements developed for emotional abuse could be used in future research to reduce cross study measurement and that there is a need to research this topic further. The research find-

Table 3: Results regarding the authors' conclusion

Topic	*Outcome*	*Author conclusion*
Evaluation of a Massage Program for Children Who Have Been Sexually Abused and their Non-offending Mothers	Reported improved bonding, communications between the mothers and their SAC.	The author concluded that further evaluation of the program is needed.
Factors influencing mothers' abilities to engage in a comprehensive parenting intervention program	Continuously supported by couches to explore and discover self care strategies and ways to navigate life struggles	That trust increases program engagement and relationship
Attachment and Behavior Depression and Anxiety in Non offending Mothers of CSA	Psychological being of the mother affects her ability to be responsive and sensitive to her child and this will affect the recovery of the CSA from the abuse	Heightened level of depression, anxiety and diminished maternal attachment behaviors was experienced by mothers whose children were sexually abused.
Can mothers of non-offending mothers of CSA be both ambivalent and supportive	There were no relationship that exists between post disclosure support and ambivalence.	The authors concluded that there was a need for continuing research on constructs of parent support and ambivalence
The independent impact of sexual abuse on the following dimensions of adulthood parenting after controlling other forms of childhood adversity in a predominantly African American sample of mothers	That childhood sexual survivors reported significantly lower rates of parental warmth, and higher rate of psychological depression and more use of corporal their punishment than mothers who have not experienced childhood sexual abuse	The author recommend that future research in this area should include an analysis of mother's differential experiences and differing access to social and material resources in how which childhood adversities impact adulthood parenting
Maternal Responses to Sexual Abuse of their Children.	Mothers commonly expressed anxiety, anger, fear, and guilt and 39 of supportive mothers expressed mood changes, crying, sleeping, appetite or somatic complaints	Maternal support was essential to both the child and mother and recommended counseling and social services support (emotional, social. environmental and legal.) on their stress.
Production Therapy. The Social Process of Construction of the Mother of sexually abused child	They examined whether clinician still use collusion.	Although workers do not use collusion they still constructed mothers negatively. Unsupportive mothers had conflict with their own mothers, the maternal grandmothers also displayed less support to sexually abused children. Mothers presented with
Voices of the blamed: Mothers' responsiveness to father-daughter incest	They further indicated that mothers were blamed by social workers, legal courts and social agencies.	Concluded that there is a need for reconstructing assumption about incest.
Preliminary psychometric data on the Maternal Self –Report Questionnaire (MSSQ).	Brief easily scored self-report measure was developed focusing on emotional support of mothers.	Concluded that the measure could be used in future research o reduce cross study measurement compaability
Parental Stress Response to Sexual Abuse and Ritualistic Abuse Of Children in Day –Care centers	Parents of sexually abused children with ritual reporting greater psychological distress than parents of those who are sexually abused without ritual and parents of children with no abuse	The author concluded that parents need extended therapy because they received therapy for six months but continue to persist displaying PTSD disorders.

Table 3: Contd...

Topic	*Outcome*	*Author conclusion*
Preventive intervention with adolescents and divorced mothers: A conceptual framework for program evaluation		a model which could be used to develop similar programs for those whose children are sexually traumatized
Current evidence on perinatal home visiting and intimate partner violence	Focus on support program after the child's sexual abuse disclosure and to identify gaps for future research;	Found that although there are numerous support programs developed for mothers, none have been developed to specifically target the mothers of sexually traumatized children
Mothers of sexually abused children	Mother distressed	Distress of victimized child should be considered from both maternal and child perspective
'No –one else could understand': Women's Experiences of a Support Group run by and for Mothers of Sexually Abused Children	The women failed to share The women failed to share to social workers their doubts about own abilities as mothers, this was due to the fact that social workers were making judgments about their ability to protect children.	The author concluded that social workers should support and encourage the formation and use of peer support groups for mothers. The author also emphasized the fact that the social workers should develop the humility and the skill to facilitate and to back the women's own action.
Factors linked to the distress outcome in mothers of children disclosing sexual abuse	The findings revealed that: more than half of the mothers reported clinical level of psychological distress. Mothers play a central role in facilitating recovery of their children but there has been little focus on their own needs and profiles.	The author recommended that mother need financial, physical, social and spiritual

ings revealed that there is a need to develop support program for mothers of sexually abused children in South Africa and even globally.

Strength

The current research has generated number of useful insights and gap is identified. The study displayed an opportunity for future research on the subject to examine support program to mothers of sexually abused child. The search also produced a rationale or justification for studying the support program to mother of sexually abused child.

Limitation

Not all countries have contributed on researching the topic, so there is a need to conduct more research on this area. South Africa did not contribute in anyway and yet there is a high statistics of sexual assault.

CONCLUSION

There is little research evidence in South Africa and in other African states related to programs for mothers of child survivors of sexual abuse. The existing evidence addresses the need for support program for children but no support program has been designed or evaluated. More research on this topic is necessary to ensure that the mother is fully supported at disclosure and post disclosure of sexual abuse. To effect policy change in South Africa globally in terms of support program for mothers whose children are sexually abused, the government, society and clinicians' awareness needs to be increased. Public education through workshops, mass media and research is essential to creating awareness and disseminating best practices.

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