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Title page

Woman-to-woman rape and sexual assault, and its impact upon the occupation of work:
victim/survivors' life roles of worker or student as disruptive and preservative

Abstract

BACKGROUND: Woman-to-woman rape and sexual assault globally remains largely unknown and unaddressed. Expectedly, victim/survivors often cope alone, or with limited support, in the traumatic aftermath of their sexual victimisation. Work is one occupation that is impacted upon at this time.

OBJECTIVE: The study explored the perceived impacts of woman-to-woman rape and sexual assault, the subsequent experience of disclosure, reaction, and support, and the consequences for victim/survivors' subjective experience of occupation.

METHODS: The study combined a sociological auto/biographical approach with an occupational science perspective. A web-based survey generated initial data, and was also used as a sampling tool; subsequently, 10 respondents were interviewed face-to-face, in various UK locations. An eleventh respondent shared her story through correspondence.

RESULTS: Four key themes emerged: 1) Identity; 2) Emotion; 3) Survival; and 4) Occupation. The latter – occupation – incorporated study and work.

CONCLUSIONS: For these victim/survivors, work or education can be experienced as either: disrupted (triggering) or as preservative (maintenance). Their life roles as worker or student were impacted by feelings that they could have performed better and achieved more. Occupational therapists and other relevant service providers could work with sexually victimised people in order to participate more satisfactorily and healthily in the occupation of work.

Keywords: dark side, occupation, education, trauma, posttraumatic stress disorder

1. Introduction

Occupation comprises all the things people do in their lives every day [1], including productive occupations that could be categorised as “doing”, such as paid employment, voluntary work, and educational pursuits [2] that involve engaging in study. Hammell [2] suggests “doing” occupations “... contribute to a sense of purpose and meaning in everyday life, and, thus, to a sense of well-being... [though they] are not necessarily interesting, fulfilling, or rewarding” (p. 111). Western culture has been based on the patriarchal premise that being productive and contributing to the economic fabric of society is crucial, and that paid employment is a fundamental social structure to sustain [3]. Despite some prevailing gender inequalities, such as unequal pay for the same work, contemporary western culture is prevalent worldwide, and sees women experiencing almost equal social standing to men; correspondingly there is the increasing expectation that women will engage in paid work activities [4].

From an occupational perspective of health, it is vital to appreciate that places of employment, work, and education provide environments in which healthy patterns of occupation can be experienced by people (workers, volunteers, or students) [5]. Although, there is a diversity of experiences in the occupation of work; this can be due to various factors, including a person’s age, ‘race’, ethnicity, gender, sexual orientation, viewpoints, beliefs, and life experiences. Traumatic life experiences (or events) – including rape and sexual assault – can impact upon a victim/survivor’s feelings of hope and expectations about their future, including their ability to engage in positive work opportunities [6].

Woman-to-woman rape and sexual assault is a form of sexual offending that has, on a global scale, been largely under-reported, unnoticed, disregarded, and, therefore,

unaddressed [7-11]. This is not because woman-to-woman sexual offending does not take place, as the aforementioned literature, and the findings from the research on which this paper is based, elucidate. Undeniably, the lack of recognition of women as offenders is reflected widely in statistics published regarding perpetrators of sexual offences like, for example, the statistics bulletin: 'An Overview of Sexual Offending in England and Wales' [12]. This presents data regarding characteristics for the offenders of the most serious sexual offences (of rape and sexual assault) against females. Between 2009 and 2012 no women reported their offender as being another woman. Interestingly, for no apparent or explained reason, this question was not asked in the survey until the period 2009/2010. Here, it is important to note that a precise account of the incidence and prevalence of all forms of sexual offending is challenging due to multifarious factors, including the use of differing legal definitions between countries and criminal jurisdictions, and the hidden nature of sexual offending [13]. That said, it has been estimated by San Francisco Women Against Rape [14] and Sexual Assault Crisis Team [15] that one in three gay women have been sexually assaulted by another woman. This of course excludes those other women that do not identify as gay.

Regardless of the gender or the sexual orientation of either offender or victim/survivor, sexually victimised people have been found to experience post-traumatic reactions that impede their ability to participate in their usual doing occupations, which includes working, volunteering, and studying [16]. The ability to return to doing such occupations is understood to be an indicator that the victim/survivor is – to some extent – recovering [17].

Due to the extremely limited amount of research available regarding woman-to-woman sexual offending, the purpose of this study was to explore the awareness and experience of woman-to-woman rape and sexual assault (amongst those respondents that saw and accessed the web-based survey). Specifically, the research question was: What are the perceived impacts of woman-to-woman rape and sexual assault, and the subsequent

experience of disclosure, reaction, and support, on victim/survivors' subjective experience of occupation?

2. Literature review

An extensive search strategy was utilised in order to retrieve literature pertaining to: woman-to-woman sexual offending; occupational science; the subjective experience of occupation; and the role of occupational therapists working with victim/survivors of rape or sexual assault. My literature search strategy included use of: 1) electronic databases (including: CINAHL; Medline; AMED; PsychINFO ; Sage Publications; ProQuest; Embase; PubMed); 2) Taylor and Francis Online; 3) Google Scholar; 4) Google; 5) citation searches; 6) hand-searches in a university library; and 7) searching the grey literature. A broad range of key search terms were entered, using Boolean operators and truncation/wildcard searching methods; for instance, entering: sex* abus* OR sex* assault* OR sex* viol* OR rape OR sex* offend* AND victim OR surviv* AND occupational therap*. Selected literature that was included in the final review was written in English language and published in the 20 year period preceding the year the researcher commenced her doctoral research studies (since 1993). The content needed to relate to adult victim/survivors of rape and sexual assault.

At the time of conducting the literature search, five pieces of primary research that explored (adult) woman-to-woman sexual offending were identified [7-11], as presented in Table 1. These are from a diverse range of interdisciplinary perspectives, and all are from the US. Compared to the UK – where the research reported in this paper was conducted -there are contextual differences that needed to be considered, such as socioeconomic, institutional, and those related to geopolitics, in addition to differences in the law, governmental guidance, and related policy. The review of the literature presented here includes that which is relevant to the topic of the doing occupations of work and education.

Table 1

A summary of the primary research retrieved that explored (adult) woman-to-woman sexual offending

2.1. *Impact of sexual victimisation on life roles as worker or student*

Hammell [2] suggests the actual experience of doing activities, like working, might have purpose and meaning for an individual, even though it might not always be rewarding. The importance, purpose, and meaning of a person's subjective experience of, and engagement in, occupation influences the extent to which they experience positive outcomes, including enhanced health and wellbeing [18]. However, from an occupational perspective there is a need to explore how the disruption caused by being sexual victimised impacts upon the victim/survivor's ability to participate in and perform their daily occupations in a satisfactory and health-enhancing way.

Researchers of woman-to-woman rape and sexual assault have identified the loss of, or disruption to, life roles, as well as the preservative (maintaining) function they can yield for victim/survivors [7-11]. In such research, with respect to many of the victim/survivors' life roles as worker or student, these were disrupted due to their self-reported feelings of: depression; disbelief; shame; worthlessness; and suicidal ideation. These deleterious feelings were experienced in addition to their experiences of: flashbacks; nightmares; personal injury; and numbing-out, or completely blocking, memories of the experience. To illustrate, one respondent in Girshick's [11] study – Melanie – described the total impact her victimisation had upon her, especially including her role as worker, stating she:

“... immediately had no emotional response. I simply blocked out what had occurred. Years later, the emotional impact was so great I quit a \$50,000 a year job, was unemployed, went through two years of therapy, and had to learn a lot of new behaviors, patterns, and emotional responses” (p. 128).

In Campbell's [10] study, one victim/survivor was raped by a college dorm friend over the course of several months, until she decided to inform the authorities in her college. Yet, in

response to the authorities' reaction, she felt she had to choose to leave college, and thereby lost her role as student, stating: "... they did everything they could to make me feel responsible so that I'd never show the confidence to tell anybody else because they didn't want me to tell" (p. 78).

Interestingly, one respondent – Lynn – in Walters' [8] study was working in a domestic violence shelter at the time of enduring (same-sex) intimate partner violence herself. However, for Lynn, her workplace mired her ability to recognise what was happening to her as intimate partner violence and, subsequently, hindered her seeking help; she explained her thoughts about why she found her same-sex intimate partner violence difficult to recognise: "I was a counselor at the domestic violence shelter... and I think because there was no male component... I think it took me longer to accept what was really going on" (p. 258).

2.2. *Perpetrators as working professional, colleague, or peer*

The relationship of perpetrator to victim/survivor was identified in each piece of research; this is important to scrutinise, particularly in consideration of the prevalence of rape myths - which serve to uphold commonly-held stereotypes about rape - such as that women are raped by strangers in dark alleyways [19]. Campbell [10] found that five of the victim/survivors she interviewed were raped by intimate partners and the remaining five respondents were raped by acquaintances (labelled *opportunistic rapists* by Campbell); this included one respondent who was victimised by her co-worker and the co-worker's partner. Aside from one victim/survivor's perpetrator - who was a neighbour - the other three victim/survivors' perpetrators were known to them through being in the same education environment (the perpetrators were a dance teacher, a roommate, and a college (dorm) friend). Similarly, Girshick [11] found 13% of her respondents identified their perpetrators as either a working professional – namely, their therapist, teacher, doctor, mentor, or supervisor

(7%) - or as a co-worker (4%). In Gilroy and Carroll's [3] study, both victim/survivors of (what they term as) sexual violence knew their female perpetrators through having met in forums for survivors of male-perpetrated sexual violence; Sarah met Lois and (prior to her sexual assault) worked as an advocate with her in a student organisation geared toward preventing violence on college campuses. Kathleen met Janice at a support group for women who were adult victim/survivors of sexual abuse. It is impossible to explain such woman-to-woman sexual offending by women who were themselves rape and sexual assault victim/survivors, due to the limited research with this population.

2.3. *Limited education and support*

Many respondents were identified (in [7-11]) as using education – in the form of seeking to educate themselves about what had happened to them – to try to cope in the aftermath of their sexual victimisation. This was experienced as difficult, as there was a lack of relevant support services and resources available to them, as Wang [7] expresses of her respondent – Judy's – experience: "Survivors living in extremely remote areas may not have access to any culturally-sensitive helping resources" (p. 173). Likewise, Gilroy and Carroll [9] found that the lack of social and support services for woman-to-woman rape and sexual assault victim/survivors made Kathleen feel invisible, and that she would not be taken seriously by others, including criminal justice services. Both Kathleen and Sarah's feelings of shame and self-blame made them feel alone and largely unable to understand their same-sex sexual victimisation, as expressed by Kathleen: "I don't see myself represented in the oodles of literature about sexual assault. It is nearly impossible to find a person who has had a similar experience and can relate to me" (p. 429).

For many of these women, the impact of being sexually victimised by a woman led to feelings of guilt, shame, self-blame, and denial; of those women that identified as women with same sex attraction, this compounded their additional fears that their respective

families, friends, and communities would discover and dislike their previously undisclosed sexual orientation [7-11].

Limited support and understanding was experienced in the workplace; Wang's [7] single case study explores the experience of a victim/survivor (Judy) who was raped in her own apartment by a woman she met at a gay bar, in her local vicinity. In time, after disclosing her experience to two male co-workers, Judy said: "They were trying to tell me that rape's not any big deal. It's no worse than any other kind of attack... They're saying rape's all blown out of proportion, and all these people are just whining victims" (p. 172). Ultimately, the victim/survivors in each piece of research discussed here remained silent. This meant they could not access relevant support and, consequently, were alone in the aftermath of their traumatic sexual victimisation experiences.

2.4. Implications for research study

Evidently, primary research endeavours that have studied woman-to-woman rape and sexual assault are scant. From what is available, the authors have left a legacy for researchers (such as the researcher of the study on which this paper is based) who aim to further investigate this underexplored issue. Of particular significance is the finding that the dominant prevalence of heterosexist and homophobic assumptions about gender and sexual perpetration impede the prospect of scholarly work about woman-to-woman sexual offending being taken seriously [1, 3, 4, 13, 14].

In view of this, the discovery of a complete absence of research study within occupational therapy regarding this issue was expected. Disappointingly, when it comes to issues related to working with diverse or minority populations, critics have cited occupational therapy services, and occupational therapists, as having been: heterosexist [20, 21]; unrepresentative of minority populations [22]; non-inclusive [23]; inconsiderate to the

importance of a person's same-sex sexual orientation [24]; and unconcerned with transgender identity, and related issues [25]. Still, helpfully, such critique highlights the importance for research that is designed to address these issues, affirming the need for an occupational perspective of diversity, injustice, alienation, and other such concerns affecting marginalised, minority, and vulnerable groups. Addressing the needs of such groups – including those who experience trauma-related symptoms and posttraumatic stress disorder (PTSD) - has the potential to improve the effectiveness of services provided by rehabilitation professionals. Though Strauser [26] writes about people with industrial injuries, he vitally asserts that rehabilitation professionals need to be aware of how trauma-related symptoms and PTSD negatively impact upon people's return to work, as verified by Precin [27]. Hence, research is needed in order to increase awareness of, and understanding about, the lived experience of surviving traumatic events, such as rape and sexual assault.

3. Methodology

The philosophical underpinning to the methods used in this study includes the combined use of the auto/biographical approach with an occupational science perspective. As Hocking [28] outlines, occupational scientists aim to research the complexity of human occupation in terms of understanding factors such as: the diverse reasons people do things (e.g. [29]); their subjective experience of doing them, and understanding how people's occupations are managed & organised (e.g. [30]); how occupations relate to well-being (e.g. [31]); and also the impact of not being able to participate in occupation (e.g. [32]).

Working from an occupational science perspective enabled exploration of the impact of being raped or sexually assaulted upon each victim/survivors' subjective experience of occupation, including how their daily lives, roles, tasks, and activities altered in the aftermath of being sexually victimised. The methodological value of the auto/biographical approach was understood to derive from its use by a range of disciplines and scholars that strive to

research people's lives and, importantly, the stories people tell about their lives [33]. Working auto/biographically necessitates the researcher being explicit about their own position which, as Ellis [34] explains, involves inclusion of the researcher's reflections on their own subjectivity and emotions. This is considered to enable the auto/biographical researcher to gain a deeper and richer understanding of the experiences of the phenomenon they are researching [35].

3.1. Procedures

Full ethical approval was received from the researcher's Faculty Research Ethics Committee. This was based on recruiting respondents over the age of 18, and included the criteria that those identifying as woman-to-woman rape or sexual assault victim/survivors would be sharing about victimisation experiences that occurred at or after age 16, the age of sexual consent in England and Wales (Great Britain, 2003). A mixed-methods approach was used in this study and was of value in enabling the researcher to collect varied data through more than one method of data collection alone would allow [36]. As such, there were two phases of data collection; during the first phase, purposive sampling was utilised to recruit respondents to a web-based survey. This was piloted internally at Plymouth University, with ten colleagues accessing and completing the pilot version, and providing suggestions for its improvement. The launched survey remained open for exactly one year, with the total amount of responses being wholly dependent upon how many people accessed and completed the survey during this time. The survey was promoted as effectively as time and financial constraints would allow, taking a strategic approach that involved: 1) emailing organisations (such as lesbian/gay/bisexual organisations, and other services that were rape-related); 2) distributing posters and leaflets by hand; 3) use of social networks (such as use of a Twitter account), and 4) paid advertising. Potential respondents were able to either scan a quick response (QR) code or to manually enter a webpage address (www) which directed them to where the survey tool was hosted. The first page of the survey was an

introductory information page which outlined the aims of this first phase of this study and gave details about completing the survey. Respondents were advised their data would be held anonymously and securely; this was crucial and straightforward to achieve, especially as the survey tool does not collect information regarding internet protocol (IP) addresses. In terms of obtaining informed consent, the information stated that by completing and submitting the survey respondents were agreeing to the use of this information in an anonymised form for research purposes.

Considering the gap in knowledge regarding woman-to-woman rape and sexual assault, it was deemed important that respondents were able to name their victimisation experience/s as they would so choose. Consequently, this became a question in the survey. For the purpose of needing to use a term in the survey, and to explain the research rationale, 'sexual assault' was used, with the following explanation:

The term 'sexual assault' is used to refer to any unwanted contact and behaviour that is perceived to be of a sexual nature and which takes place without consent. It has been used here as an umbrella term to represent the different ways women may refer to their experiences.

As a data collection method, the survey was intended to generate data that would indicate the level of awareness of woman-to-woman rape and sexual assault amongst those people that responded. The survey was also used as a purposive sampling tool to recruit consenting respondents to the second phase of the research. Hence, at the end of the survey there was an option to enter a contact email address for those respondents who were interested in sharing their stories in more depth than the survey allowed. The combination of qualitative and quantitative approaches has been suggested as a 'best of both worlds' approach [37] and did, indeed, result in the generation of more data than, for example, the face-to-face interviews alone would have generated; in total, the data from 159 survey responses, 10

face-to-face semi-structured interviews, and one written account (through email correspondence) was analysed. In addition, snowball sampling occurred, as some respondents had details of the research passed on to them by a partner, friend, or colleague.

3.2. Methodological quality

Theoretical data saturation was not an anticipated outcome (unlike in research that uses a grounded theoretical approach [38]) and so due to this, and after discussion with the researcher's supervisory team, it was decided that ample rich data had been collected from the first 10 interviews and the one form of correspondence for analysis. In addition to using a mixed-methods approach, rigor and trustworthiness were established through use of reflective diaries, field notes (e.g. noting responses during the face-to-face interviews), and member checking. The latter was achieved through "on the spot" checks [39] (meaning the researcher checked during the course of, and at the end of, each interview that what she understood from what respondents had said was as they intended). All interview respondents were also asked if they would like to read their interview transcripts; only two wanted to, and both agreed it was accurate. As an auto/biographical piece of work the subjectivity of the researcher is explicit. Arguably, by openly acknowledging the presence of researcher bias, and having reflected upon this, valuable data can be gathered [40].

3.3. Data analysis

The Bristol Online Surveys (BOS) software [41] was used to design the web-based survey. This tool enabled the researcher to filter the data by question number and export this to Microsoft (MS) Excel for analysis [42]. Excel was used to present the basic quantitative data that was collected, such as through use of frequency distribution tables and graphs of respondent demographic variables [43]. For example, see Table 2 for information regarding

their sexual and/or gender identity. Respondents were asked 'How would you describe yourself?' and could indicate from a list of options or describe in their own words.

Table 2. Survey respondents' sexual and/or gender identity

The qualitative data generated from the open survey question, which asked respondents if they would like to add anything else, was analysed thematically. There is no explicit consensus on how to conduct thematic analysis [44]. As there was little existing theory regarding the phenomenon of woman-to-woman sexual offending, an inductive approach to analysing data involved using the data itself to develop the structure of analysis [45]. To describe the approach taken, after the interviews had been transcribed verbatim, thematic analysis was used to identify, analyse, and report patterns, similarities, and themes within the data [44]. Working through the survey responses, each interview transcript, and the written correspondence, the researcher manually analysed the qualitative data to identify emerging themes and subthemes, using tables to document these, and looking for similarities and differences. This involved: 1) making notes in margins that summed up what was being said (referred to as open coding); 2) collecting these words and phrases together to erase duplications and reduce the total number of categories; 3) looking for similar categories to group together and refine the list of final key themes (and sub-themes within these) [45]. Consequently, the following four open (key) themes [46] that capture the key aspects of the thematic content from the victim/survivors' narratives were developed: identity; emotion; survival; and occupation. Table 3 presents the emergent subthemes and sub-subthemes for the key theme discussed as the focus for this paper: occupation. Specifically, the discussion that follows attends to the findings from the sub-theme 'Work', and the two sub-subthemes: 'Work as triggering and as maintenance' and 'Could have performed better and achieved more' (as highlighted).

Table 3. Themes, subthemes, and sub-subthemes

3. Findings

There were a total of 167 survey responses. Eight of these were blank, leaving 159 full or partially completed surveys for analysis. The age range of the survey respondents was between 18 to 72, with the mean age being 33.5. This is based upon the ages provided by 157 respondents, as 2 did not respond. The survey asked respondents to indicate which of five options best described their experience/s that have occurred from anytime after they were at the age of sexual consent. The options ranged from 'I have experienced a woman sexually assaulting me' to 'I do not believe woman-to-woman sexual assault is possible'. It was apparent from the survey responses that the experience of being raped and sexually assaulted by another woman greatly impacted upon victim/survivors' daily lives. A total of 59 (37.3%) survey respondents indicated they have experienced a woman sexually assaulting them. Of these 59 victim/survivors, n=47 (80%) answered 'Yes' to the question that asked 'Do you think this experience had an impact upon your ability to satisfactorily perform the tasks, roles, and activities that are important to you in everyday life?'. This was further evident from the second phase interview data (which will be discussed from hereon), as the two sample quotes below demonstrate:

"... oh yeah it massively affected my life... I was just really unhappy in all areas of my life really" (Jessica).

"...it impacted on everything" (Isla).

3.1. *Work*

The second phase respondents' life roles were as either worker (in full or part-time paid employment, or in voluntary positions) and/or as student (in full or part-time education). One respondent – Tanya – expressed through her email correspondence with me that she is unable to work due to the considerable traumatic affects her history of rape and abuse continue to have upon her. The other second phase respondents all mentioned how the work they did at the time of their victimisation and, for many, that which they have done subsequently, was affected. This concurs with findings that work life can be disrupted [47], and that any form of interpersonal violence experienced as an adult can impact upon womens' employment, in terms of their self-perceived level of job satisfaction and their ability to fulfil the requirements of their work roles [48]. Theoretical perspectives regarding PTSD and the workplace can be drawn upon to understand and interpret such research findings. For instance, Menna [49] suggests:

“One of the many areas that PTSD affects is the work place. There are many individuals with PTSD who are able to work and are functioning at a level where they are able to hold a job; some successfully, and some just barely. The level of success one has at his or her place of employment depends on many factors including the level of impairment, and support outside and inside the work environment”.

From the literature reviewed, the largest study by Girshick [11] narrowly explores the impact upon her respondents' work - or doing - occupations. This could be indicative of her research focus, which was upon naming and describing the victim/survivor experience, rather than exploring the impact upon their lives. Hence, the findings from this study add to the extremely limited evidence regarding the impact of woman-to-woman rape and sexual assault. From an occupational science perspective, Western culture privileges doing, specifically in the form of being productive through engaging in paid employment [50].

Occupational science research explores the meaning of what people do, including the meaning of work; for instance, Blank et al. [29] explored the meanings of work for people with severe and enduring mental health conditions. Work was found to be one occupation through which their respondents could build and maintain an occupational identity, enabling them to feel connected to others, and to feel a part of society. However, just as Blank et al. [29] found, the respondents from this study had positive and negative experiences of work. As victim/survivors of woman-to-woman rape and sexual assault, the impact of this upon their life roles of worker or student was experienced as disruptive or preservative. For some, this was endured together with feelings of regret for not achieving more in this aspect of their occupational lives.

3.2. *Work as triggering and as maintenance*

Of all four respondents (namely, Gabby, Isla, Lauryn, and Simone) that said they are in paid employment as healthcare professionals, each described having experiences in their workplace when their traumatic memories have been triggered. Two respondents worked in mental healthcare services, sometimes working with people with histories of sexual assault and sexual abuse. One such respondent – Isla – described the personal and professional challenges this can present for her whilst at work:

“... you have to be very sort of self-aware when you’ve got patients saying similar stories, you know, is this appropriate for me to be working with them? Not putting your own judgements into it, things like that”.

One strategy commonly used to decrease the likelihood of being reminded (or triggered) about being sexually victimised is to use avoidance of, for example, people, places, or situations [6]. For Gabby, Isla, Lauryn, and Simone this is fundamentally impossible because their workplaces are the very environments in which their traumatic memories are at risk of

being triggered. For instance, Simone described having daytime flashbacks (as one of her symptoms of PTSD) and mentioned the triggers she contends with whilst at work:

“I actually don’t know what they are triggered by... my heart races and I get sweaty and, you know, hot and things, and I noticed it’s when I’m at work when, you know, obviously in my job you do sometimes unfortunately hear about sexual violence or even, you know, we have some training, not a lot, but sometimes the issue of violence in terms of sexual violence is raised...”

However, the risks of triggered traumatic memories were experienced along with the need and want to work. For instance, Isla spoke fondly about her work-role, even though she lived with a heightened awareness of the need to control the potential of reliving her own traumatic memories; she said:

“... in my line of work if I’m having a bad day I can’t just hide behind like a computer screen in the office on my own, I have to go and put on this front, I have to be able to cope with stressful or emergency situations... it takes a lot of effort! And I love my job... but, yeah, if I’m having a really bad day then it makes it really hard at work”.

Similarly, another respondent - Lauryn - evidently valued the routine that having a work-role afforded her. This aligns with the occupational perspective of work as an occupation that can provide a healthy routine, as well as meaningful life habits and roles [51, 52]. However, Lauryn was regretful of an experience in her past, whilst she was a student, when her routine was disrupted. Lauryn had been on a work placement which had to be ended early because Lauryn had been triggered about her rape whilst working in this setting. This had a significant effect upon Lauryn, and her ability to work thereafter:

“And that was kind of the beginning of the end of the routine... so then it just got more and more chaotic and it was more about self-destructing and distracting myself than actually functioning”.

It was apparent that the containing benefit Lauryn expressed she experienced from being engaged in a productive work-related occupation is exemplar of the way in which work can meet important psychosocial needs for people [5]. Thus, work is seen as more than just an economic necessity, but also as a source of maintenance in the lives of these victim/survivors. Yerxa [53] once expressed this need as based upon the human spirit for occupation. Hence, the need to be “doing” correlates with the need for meaning, purpose, and choice following life disruptions, such as rape and sexual assault, in addition to other disruptions that other commentators have identified (e.g. Whalley Hammell [54] and Precin [55]). The need to be actively engaged, and to find purpose within that engagement, means that the respondents’ work occupations became a means to cope (or survive), and so functioned as a source of maintenance. Another respondent - Cailey - felt her engagement in full-time education helped to keep her occupied; completing the work required of her became an objective she strived to achieve:

“I was keeping up with my Uni work because that’s all I knew and I wanted to do well at it... I think that mostly what I was doing was trying to keep myself as busy as I could”.

In addition to Gabby, Isla, Lauryn, and Simone’s experiences, the respondent Jessica experienced her workplace as a safe place; being at work meant Jessica was away from her perpetrator’s (Selena, an ex-partner) abusive and threatening behaviour. Although, this was threatened when Selena began to stalk Jessica at her home and her workplace, thus compromising any feelings Jessica had about her work environment being a safe place to

be. Similar to the victim/survivor – Judy - in Wang’s [7] case study, Jessica developed a fear for her own safety, as well as anger and fear toward Selena as her perpetrator. Jessica said:

“I think actually work was a safe haven for me so actually if I was just left to my own devices at work I would have just cracked on and work wouldn’t have suffered. But this woman... would turn up at work and she would ruin work... it consumed my time at work and my work definitely suffered”.

3.3. *Could have performed better and achieved more*

The disruption to the working lives of the respondents in this study is, in part, understood to occur because many victim/survivors of sexual assault have feelings of low self-worth and self-doubt [47]. Eleanor expressed such feelings when she spoke about the challenges of trying to get a job. Eleanor had gaps in her CV that were due to the time she had out of education and work, during those periods when she was too unwell to attend; she said:

“... if you try and get any other type of job it’s like: ‘Well it’s a year and a bit since you graduated, what have you been doing with your time? Go away’”.

Ali¹ expressed feelings of guilt over his poor performance at school. He explained how his experiences of being sexually assaulted by an ex intimate female partner worsened his mental health problems. During the period he was being victimised, Ali described how he felt his performance at school was affected, saying:

“I did appallingly in my AS exams and stuff. Um, so I do think that it had an impact on my ability to kind of, I don’t know, maybe again it’s to do with the memory thing, like

¹ Ali identified as a bisexual female-to-male transsexual who identified as female at the time of his victimisation.

retaining information and stuff like that. Um, but also maybe not caring as much as I should because everything kind of felt, I guess, meaningless in comparison to what was going on”.

Ali’s reflection encapsulates the hidden and silent struggle that people who contend with PTSD, traumatic memories, and/or mental health problems on a daily basis must also endure [49].

Moreover, some respondents’ engagement in ‘the dark side of occupation’ (that is, those dimensions of occupation that may not necessarily lead to good health and/or wellbeing, or be productive [56]), such as addictive behaviours, had a further significant impact upon their performance at work. Keira believed that she could have performed better at work if she hadn’t been consuming large amounts of alcohol each night, which left her feeling tired, hung-over, and depressed. More positively, Keira then spoke about gradually getting her confidence back through the structure that her work role provided. However, Keira reflected that she still considers her victimisation to have impacted upon the current position she holds in her full-time working career, saying:

“I probably could have been even higher today in my role if I hadn’t have had that blip”.

Coupled with the fact that the majority of victim/survivors either do not disclose their victimisation, or have negative post-assault disclosure experiences (as in Walters, [8], for example), trying to perform ‘normally’ at work - let alone striving to achieve - was a hidden struggle for the respondents. Similar to Keira, Sarah started drinking when she was on her own in the evening, after work, and she mentioned that her use of alcohol meant that sometimes she had to miss work. She said:

“A couple of times I, err, had to call in sick to school because I knew I couldn’t go in... And I think they knew there was something wrong... I never spoke to anybody at school actually about the incident. I just felt I couldn’t”.

Contributors such as Ahrens [57] and Suarez and Gadalla [58] suggest that the silencing of rape victim/survivors (like Sarah) occurs because many fear disclosure of their experience will be met with disbelief, or because of having a prior experience of being blamed when they have disclosed.

4. Limitations

Though this study used a mixed-methods approach, the amount of quantitative data collected was limited, mainly because the researcher intentionally designed the survey so that it was short and not too time-intensive to complete. Due to this, differences in impact based upon demographics was not examined; nor was this an aim of the research. Higher level statistics were not run as the quantitative data collected was basic and so was analysed as discussed in section 3.3.

Given the traumatic nature of the topic, and the virtual silence and invisibility of woman-to-woman rape and sexual assault , the sample size was relatively small; this was reflective of the small sample sizes in the five pieces of primary research that were found to have previously explored (adult) woman-to-woman sexual offending [7-11]. Because the data only represents a small sample the findings cannot be generalised; this was not an aim of the study. Rather, given the focus upon the subjective lived experience, it is stressed that the findings should not be generalised to other victim/survivors of woman-to-woman sexual perpetration, nor to other contexts. However, the study still remains the largest and only UK study to have been conducted specifically on this issue, with its key contribution being to

highlight the ways in which human rights are restricted by an ignorance and invisibility of woman-to-woman sexual offending.

5. Discussion and recommendations

Evidently, woman-to-woman rape and sexual assault are complex forms of offending that have equally complex effects upon the victim/survivors. Issues regarding disclosure and being believed are coupled with feelings of self-blame, guilt, or regret; together, the effect of this has a disruptive impact upon victim/survivors' life roles of worker or student. However, such life roles may also offer a more preservative function, providing an opportunity for victim/survivors to engage in work they see as giving routine, meaning, purpose, something to do, and, even, safety. Hence, the occupation of work is understood as a means through which people can express themselves, connect with others, encounter meaning and satisfaction, and experience enhanced health and wellbeing. Traumatic experiences, like woman-to-woman rape and sexual assault, need to be far better understood, considering they have very real potential to cause a significant disruption in people's occupational lives.

Utilising an occupational science perspective facilitates the systematic study of humans as occupational beings and, as proposed here, this aims to enhance occupational therapy practice [59]. Indeed, working from an occupational science perspective enabled an exploration of the impact of woman-to-woman rape and sexual assault upon victim/survivors' subjective experience of occupation; these findings are significant for occupational therapy (and other relevant) service provision.

In addition, although the research findings may not be applicable to all, recommendations and strategies have been identified from this doctoral study that would contribute to improving: 1) general awareness of woman-to-woman sexual offending; 2) the provision of relevant services; and 3) the understanding and, ultimately, the response of the criminal

justice system. In terms of the relevance of the findings to the occupation of work in its entirety, increasing awareness of the possibility of woman-to-woman sexual offending amongst the general population is crucial if victim/survivors' work-related needs are to begin to be appreciated, let alone met.

There are several issues regarding the impact of being sexually victimised that those who hold senior positions in work and education settings (for instance, as employer, or teacher/tutor) need to be aware of. Regardless of gender, it is highly likely that rape and sexual assault victim/survivors will find it difficult to disclose their victimisation to anyone, due to shame and fear of being disbelieved or blamed [60]. There is limited research regarding disclosure to employers by rape and sexual assault victim/survivors (those that have not been victimised at work, or by a co-worker) whose work performance has been negatively impacted upon. This is in contrast to the wealth of research that exists regarding female victim/survivors of male-perpetrated intimate partner violence [61]. An implication of this for rape and sexual assault victim/survivors is that, even though prevention is not achievable once a person has been victimised, any assessment of a person's work-related needs is rendered impossible. Full disclosure does not always need to occur in order for an employee's/student's needs to be acknowledged; rather, there needs to be improved understanding regarding the impact of rape and sexual assault. This includes the necessity to enhance understanding regarding the complexity of PTSD, and to appreciate its symptoms, which can be uniquely experienced by victim/survivors. Considering this, Menna explains how it is important for employers to understand posttraumatic symptoms because: "Knowledge can lead to understanding reactions, which may seem out of the ordinary. It can also provide a framework for adapting the work environment to suit the needs of the individual with PTSD" [49]. Any noted poor or altered performance at school or work could be indicative of the fact that the person has experienced or re-experienced (when an experience in the past has been triggered) a traumatic sexual victimisation.

Another important objective for teachers and employers is to ensure they are clear about their role and responsibilities when a student or employee does disclose being raped or sexually assaulted. Local policy and procedures will dictate the recommended response but, in the case of woman-to-woman rape and sexual assault, it is necessary to consider that external support services may not be equipped to respond to victim/survivor needs. Researchers have found that female victims of male-perpetrated rape and sexual assault can have traumatising disclosure experiences with relevant service providers, including health professionals and the police [62]. In the case of woman-to-woman rape and sexual assault, research is greatly needed to explore this experience. Findings from the research on which this paper is based certainly reveal that a significant barrier to reporting to the police was that many respondents (all living in the UK) were aware how woman-to-woman rape is not recognised under current UK law. This, coupled with concerns about disclosure, has meant the victim/survivors' health, wellbeing, occupational needs, and - as this paper focuses on - work-related needs are unknown and, therefore, unmet. It is the silence of woman-to-woman rape and sexual assault that needs to be shattered so that victim/survivors do not continue to feel alone, as verified by Simone:

“I probably avoid talking about things because, when we do talk about them at work, it’s always about men that have done things to women and... I’ve had this experience... I know that women are able to do things, are able to rape other women, or to do things and force that upon other women... [and] I can’t be the only one”.

References

1. Sundkvist Y, Zingmark K. Leading from intermediary positions: first-line administrators' experiences of their occupational role and situation. *Scandinavian Journal of Occupational Therapy*. 2003;10(1):40-6.
2. Hammell KW. Self-care, productivity, and leisure, or dimensions of occupational experience? Rethinking occupational "categories". *Canadian Journal of Occupational Therapy*. 2009;76(2):107-14.
3. Parrish M. *Social work perspectives on human behaviour*. 2nd ed: McGraw-Hill Education (UK); 2014.
4. Dixon VK. Western Feminism in a Global Perspective. *Student Pulse*. 2011;3(02):11.
5. Waddell G, Burton AK. *Is work good for your health and well-being?* Norwich, UK: The Stationery Office; 2006.
6. Treatment CfSA. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 2014.
7. Wang Y-W. Voices from the margin: A case study of a rural lesbian's experience with woman-to-woman sexual violence. *Journal of lesbian studies*. 2011;15(2):166-75.
8. Walters ML. Straighten up and act like a lady: A qualitative study of lesbian survivors of intimate partner violence. *Journal of Gay & Lesbian Social Services*. 2011;23(2):250-70.
9. Gilroy PJ, Carroll L. Woman to woman sexual violence. *Women & Therapy*. 2009;32(4):423-35.
10. Campbell PP. *Sexual violence in the lives of lesbian rape survivors*. Saint Louis, Mo: Saint Louis University; 2008.
11. Girshick LB. *Woman-to-woman sexual violence: Does she call it rape?* Boston: Northeastern University Press; 2002.
12. Ministry of Justice HO, and the Office, Statistics fN. *An Overview of Sexual Offending in England and Wales*: Ministry of Justice, Home Office & the Office for National Statistics: Statistics bulletin. . London: Crown Copyright; 2013.
13. Wiseman J. *Incidence and Prevalence of Sexual Offending*. Washington, DC: Office of Justice Programs, Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering and Tracking, 2014.
14. Rape SFWA. *Resources > facts & information 2011* [Available from: <http://www.sfwar.org/facts.html>].
15. Team SAC. *Who can be a victim? Sexual violence does not discriminate*. 2011.
16. Westmarland N, Alderson S, Kirkham L. The health, mental health, and well-being benefits of rape crisis counseling 2012 03/03/2016:[0886260513496899 p.]. Available from: <http://www.nr-foundation.org.uk/downloads/Taking-Back-Control-full-report.pdf>.
17. Rape Crisis. *The Crisis in Rape Crisis Report*. England and Wales: Rape Crisis; 2008.
18. Wilcock AA. Occupational science: Bridging occupation and health. *Canadian Journal of Occupational Therapy*. 2005;72(1):5-12.
19. Service CP. *Rape and Sexual Offences: Chapter 21: Societal Myths* London: The Crown Prosecution Service [Available from: http://www.cps.gov.uk/legal/p_to_r/rape_and_sexual_offences/societal_myths/].
20. Radomski MV. Assessing context: personal, social, and cultural. In: Radomski MV, Trombly Latham C, A, editors. *Occupational Therapy for Physical Dysfunction*. 6th edn ed. Philadelphia:: Lippincott Williams & Wilkins; 2008. p. 285-309.
21. Devine R, Nolan C. Sexual identity & human occupation: A qualitative exploration. *Journal of Occupational Science*. 2007;14(3):154-61.
22. Lyon S. *TODOS: Promoting Diversity within Occupational Therapy 2015* [updated 01/10/2015. Available from: <http://otpotential.com/blog/diversity-in-ot>].

23. Jackson J. Understanding the experience of noninclusive occupational therapy clinics: Lesbians' perspectives. *American Journal of Occupational Therapy*. 2000;54(1):26-35.
24. Kingsley P, Molineux M. True to our philosophy? Sexual orientation and occupation. *The British Journal of Occupational Therapy*. 2000;63(5):205-10.
25. Beagan BL, Chiasson A, Fiske CA, Forseth SD, Hosein AC, Myers MR, et al. Working with transgender clients: Learning from physicians and nurses to improve occupational therapy practice Travailler auprès des clients transgenres: Apprendre des médecins et des infirmières en vue d'améliorer la pratique de l'ergothérapie. *Canadian Journal of Occupational Therapy*. 2013;80(2):82-91.
26. Strauser DR. Trauma symptomatology: implications for return to work. *Work*. 2008;31(2):245-52.
27. Precin PJ, Precin P. Return to work after 9/11. *Work*. 2011;38(1):3-11.
28. Clare H, Valerie Wright-St C. Occupational science: adding value to occupational therapy. *New Zealand Journal of Occupational Therapy*. 2011;58(1):29.
29. Blank AA, Harries P, Reynolds F. 'Without Occupation You Don't Exist': Occupational Engagement and Mental Illness. *Journal of Occupational Science*. 2015;22(2):197-209.
30. Watters AM, Pearce C, Backman CL, Suto MJ. Occupational Engagement and Meaning: The Experience of Ikebana Practice. *Journal of Occupational Science*. 2013;20(3):262-77.
31. Riley J. Weaving an enhanced sense of self and a collective sense of self through creative textile - making. *Journal of Occupational Science*. 2008;15(2):63-73.
32. Jakobsen K. If Work Doesn't Work: How to Enable Occupational Justice. *Journal of Occupational Science*. 2004;11(3):125-34.
33. Merrill B, West L. Using biographical methods in social research. Using biographical methods in social research. SAGE Publications, Ltd. London, England: SAGE Publications, Ltd; 2009.
34. Ellis C. The ethnographic I: A methodological novel about autoethnography. WalnutCreek, CA: Rowman Altamira; 2004.
35. Roth WM. Auto/Biography and Auto/Ethnography: Finding the Generalized Other in the Self. In: Roth WM, editor. *Auto/Biography and Auto/Ethnography: Praxis of Research Method*. Rotterdam: Sense Publishers; 2005. p. 3-21.
36. Wheeldon J, Ahlberg MK. Visualizing social science research: Maps, methods, & meaning. London: Sage; 2011.
37. Bryman A. *Quality and Quantity in Social Research* London: Unwin Hyman (Routledge); 1988.
38. Kolb SM. Grounded theory and the constant comparative method: Valid research strategies for educators. *Journal of Emerging Trends in Educational Research and Policy Studies*. 2012;3(1):83.
39. Shenton AK. Strategies for ensuring trustworthiness in qualitative research projects. *Education for information*. 2004;22(2):63-75.
40. Letherby G. Objectivity and subjectivity in practice. In: Letherby G, Scott J, Williams M, editors. *Objectivity and subjectivity in social research*. London: Sage; 2013. p. 127-47.
41. Bristol Uo. Bristol Online Surveys: About BOS 2014 [Available from: <http://www.survey.bris.ac.uk/support/about>
42. Bristol Uo. Exporting response data 2015 [Available from: <https://www.onlinesurveys.ac.uk/help-support/exporting-response-data/>
43. Carlson KA, Winquist JR. *An introduction to statistics: An active learning approach*. London SAGE Publications; 2013.
44. Braun V, Clarke V. Using thematic analysis in psychology. *Qualitative Research in Psychology*. 2006;3(2):77-101.
45. Burnard P, Gill P, Stewart K, Treasure E, Chadwick B. Analysing and presenting qualitative data. *Br Dent J*. 2008;204(8):429-32.
46. Strauss AL, Corbin JM. *Basics of qualitative research: grounded theory procedures and techniques*: Sage Publications; 1990.

47. Morrison Z, Quadara A, Boyd C. "Ripple effects" of sexual assault Melbourne: AIFS; 2007 [Available from: <http://www.aifs.gov.au/acssa/pubs/issue/i7.html>].
48. Banyard V, Potter S, Turner H. The impact of interpersonal violence in adulthood on women's job satisfaction and productivity: The mediating roles of mental and physical health. *Psychology of violence*. 2011;1(1):16-28.
49. Menna A. Post Traumatic Stress Disorder and the Workplace: What Employers and Coworkers Need to Know 2014 [Available from: <http://www.gifffromwithin.org/html/PTSD-Workplace-What-Employers-Coworkers-Need-To-Know.html>].
50. Hammell KW. Dimensions of meaning in the occupations of daily life. *Canadian journal of occupational therapy Revue canadienne d'ergotherapie*. 2004;71(5):296-305.
51. White JA, Dieleman Grass C, Ballou Hamilton T, Rodgers SL. Occupational therapy in criminal justice

In: Cara E, MacRae A, editors. *Psychosocial occupational therapy: An evolving practice*. 3rd ed. Clifton Park, NY: Nelson Education; 2012. p. 715-65.

52. Christiansen C, Townsend EA. *Introduction to occupation: the art and science of living: new multidisciplinary perspectives for understanding human occupation as a central feature of individual experience and social organization*. 2nd ed. Upper Saddle River, NJ: Pearson; 2010.
53. Yerxa EJ. Health and the human spirit for occupation. *American Journal of Occupational Therapy*. 1998;52(6):412-8.
54. Hammell KW. Dimensions of meaning in the occupations of daily life. *Canadian Journal of Occupational Therapy*. 2004;71(5):296-305.
55. Precin PJ, Precin P. Occupation as therapy for trauma recovery: a case study. *Work*. 2011;38(1):77-81.
56. Twinley R. The dark side of occupation: A concept for consideration. *Australian occupational therapy journal*. 2013;60(4):301-3.
57. Ahrens CE. Being silenced: The impact of negative social reactions on the disclosure of rape. *American journal of community psychology*. 2006;38(3-4):31-4.
58. Suarez E, Gadalla TM. Stop blaming the victim: A meta-analysis on rape myths. *Journal of Interpersonal Violence*. 2010;25(11).
59. Clark FA, Parham D, Carlson ME, Frank G, Jackson J, Pierce D, et al. Occupational Science: Academic Innovation in the Service of Occupational Therapy's Future. *American Journal of Occupational Therapy*. 1991;45(4):300-10.
60. Scotland N. Rape and Sexual Assault: What health workers need to know about gender-based violence. In: Scotland N, editor.: *The Scottish Government* 2009. p. 1-20.
61. Hanson RF, Sawyer GK, Begle AM, Hubel GS. The impact of crime victimization on quality of life. *Journal of traumatic stress*. 2010;23(2):189-97.
62. Campbell R. *Mental health services for rape survivors: Current issues in therapeutic practice* 2001 [Available from: <http://www.mincava.umn.edu/documents/commissioned/campbell/campbell.html>].

Tables

Table 1

A summary of the primary research retrieved that explored (adult) woman-to-woman sexual offending

Author/s	Type of resource	Content and/or aim of resource	Sample size
Walters [8] (2011)	Research paper in <i>Journal of Gay and Lesbian Social Services</i>	A qualitative study of lesbian survivors of intimate partner violence.	4 interview respondents (2 cited sexual violence)
Wang [7] (2011)	Research paper in <i>Journal of Lesbian Studies</i>	To present findings from a case study of a rural lesbian's experience of woman-to-woman sexual violence.	1 case study
Gilroy and Carroll [9] (2009)	Research paper in <i>Women and Therapy</i>	To explore therapeutic and treatment issues involved with counselling survivors of woman to woman sexual violence (p. 424).	2 client case studies
Campbell [10] (2008)	Unpublished PhD dissertation thesis	To understand woman-to-woman sexual violence from the perspective of a same-sex sexual assault survivor (p.2).	10 interview respondents
Girshick [11] (2002)	Published book	To explore whether woman-to-woman sexual violence and battering survivors need different interventions from heterosexual male-to-female abuse survivors.	70 survey respondents

Table 2. Survey respondents' sexual and/or gender identity

How would you describe yourself?	Number of responses	% of 158 that responded*
Bisexual woman	23	14.6%
Gay woman	39	24.7%
Heterosexual woman	42	26.6%
Lesbian woman	46	29.1%
Other:	8	5.1%
1. Asexual		
2. Biological woman, pangender, attracted to women		
3. Bisexual female to male transsexual		
4. Female-bodied trans masculine		
5. Have been bi and gay and straight		
6. Lesbian (without the word "woman")		
7. Queer		
8. Sexual		
*No response	1	N/A

Table 3. Themes, subthemes, and sub-subthemes

Theme	Subthemes	Sub-Subthemes
Occupation	Daily occupations	
	Care and restoration	Self-care Caring for others
	Work	Work as triggering and as maintenance Could have performed better and achieved more
	Leisure Roles and relationships Alienation and regret (failure to satisfy inner needs)	