Abstract: 
Sexuality is most natural and healthy when it is part of an emotionally genuine relationship, not even as its central part but rather as an upgrade of the intimacy of two people who are mutually loyal, committed, loving and respectful. However, if an individual was sexually abused in childhood, they may have suffered the severest consequences of sexual abuse trauma in the area of sexuality, and their experience of sexuality will be completely different from those who were not sexually abused. The article first describes what children learn about sex if they have been sexually abused, as this experience is very much related to the most common behaviours and experiences in adult sexuality. Then we present a theoretical overview of research on sexuality in adults who suffered childhood sexual abuse. The theory will be supplemented and supported by the statements of individuals who have been attending a therapeutic group for the sexually abused in childhood for two years. The statements quoted in the article refer to the period prior to the therapeutic process. Clinical experience shows that, until the victim has resolved the trauma of sexual abuse, the dynamics between the offender and the victim during childhood abuse is most often very similar to the dynamics of the abused with their partner, even in their sexual life.

Keywords: sexual abuse, sexuality, aversion, preoccupation, ambivalence.

Introduction

Sexual abuse is any non-verbal, verbal or physical act that violates dignity and transgresses the boundaries of another person of any age or gender for the pur-
pose of sexual gratification or violence (Saje, 2007). The consequences of sexual abuse affect all areas of human activity. Certainly, what stands out most is what the body remembers, what is stored in implicit memory and, among other things, what is reflected in one’s experience of sex (Repšič Slavič, 2019; van der Kolk, 2002). Who the individual is, how he or she functions, and above all, how he or she approaches another is manifested most fully in the area of sexuality. It is in this vulnerable area where many questions are raised: Will you be there if I need you? Will you please me or deplete me and use me? Will you be gentle, compassionate and will it matter to you what I want, or will you think only of yourself and forget about me (Gostečnik, 2017)? From a young age, a child learns to empathize by receiving compassion from their parents, to love and respect by being loved and respected, to fulfill basic needs for safety, belonging and trust by receiving safety themselves, feeling that they belong and that they can trust. When, instead of these feelings, the child receives severe unresolved emotions and distress that the parents (or the entire family system) cannot cope with, she or he becomes a carrier of horrors and complications (Simonič, 2018). In this way, the child unconsciously learns that it is possible to build the deepest intimacy through very painful affects, such as anger and sadness, and in the case of sexual abuse, most often also fear, shame and disgust (Gostečnik, 2008; Mitchell, 2002). The abuser has invaded their world of sexuality, thereby breaking down all boundaries. The body remembered all the inappropriate touches that, after many years, can emerge in an intimate couple relationship during most innocent lovemaking (Repčič, 2015). A child experiencing sexual abuse learns that the only way to gain love and affection is through sex. If these children were otherwise emotionally deprived, they can continue to seek attention and love through sex as adults. In relationships, they will primarily search for sex and remain emotionally empty, which will lead to looking for new sexual partners, hoping that they will finally find the emotional fulfillment they missed in childhood. They can also believe that the only good thing they can offer others is sexuality, or that sex is the only thing they are good at (Courtois, 2010).

1. A child’s experience of sex if he or she is sexually abused

Normal development allows the child to integrate sexuality on the emotional as well as physical and intellectual level. Even when children are very much excited about a teacher or a group leader at some point, this does not mean that their desires are related to any sexual fantasies: what they want is attention, a hug and a cuddle, which is, of course, respectful (Simonič, 2015). When sexual
abuse occurs, the child has no chance of going through developmental stages and experiences that would lead them to adult sex; adult sex is forced on them. Even if the child was not forced into a single touch during abuse, it is already enough if they had to just “watch” the adult masturbate in a space full of coercion, disgust and mysteriousness (Blume, 1998).

Children as victims of sexual abuse have not been taught how to protect themselves against potential abuse, since no one protected them when they were abused. Through abuse, they learn that they must do what others expect them to do. They also often learn that if they say NO, physical violence will follow. When these children grow up, it will be very difficult for them to identify potential danger, dangerous people and situations. They may even believe that they will be compensated with love they seek if they sexually surrender, and that they have no right to say NO. (“I was ready to endure the most violent sexual violence for one embrace: if only, when it was over, there was one embrace in which I felt most loved.”) Others dissociate when they realize that they cannot otherwise protect themselves from sex; or they feel obliged to be sexually “at disposal” of anyone who approaches them with the slightest kindness and desire (Allender, 2016).

The child often internalizes the abuser’s messages, which remain stored in their subconscious mind, but the impact is felt and seen when the child experiences a similar situation and an event can trigger and awaken abuse. A child who has been seduced by gifts can experience a great deal of distrust – in childhood or as an adult – towards people who are very attentive and bring presents. The connection is then awakened in the unconscious memory that someone who is kind and attentive can be very dangerous. This perception can be so overwhelming that this child will hate giving and receiving gifts, not wanting to celebrate their birthday, experiencing sheer aversion and horror if they have to accept a gift. They will feel even worse if they receive further messages from adults that they have to thank for the gifts, that they must be nice if they receive a gift, and so on. The reverse image of a child who was seduced by gifts, could be that later, when they want to win someone’s affection, they will use similar tactics – they will bring gifts (Repič, 2015).

In general, a child victim of sexual abuse learns that sexuality is something that is against their will and not under their control; which serves to satisfy the needs of another person; payment for kindness and affection; something he does not decide about; betrayal by those who are supposed to love and protect; betrayal by the body that can, in some moments, even feel pleasure; something by means of which others have control over them; the only thing they are good for; something dirty, shameful and, above all, painful (Blume, 1998).
Because a child is introduced to sexuality before developing his or her identity, sexuality becomes strongly permeated with the message that they are merely a sexual object, and the adult is acting out their sexual fantasies on this “object”. A child can also learn that sexuality is a way of showing care and love, especially in cases where the abusers are the very persons who should give love (e.g. parents) (Allender, 2016; Blume, 1998).

The problem with child sexual abuse is that the victim is always lacking in the right information and always receives a huge amount of misleading messages from the abuser. Victims often hear that they are those who are guilty of abuse: “You provoked and seduced me!”, “You like it, don’t you?”, “Because you are so very sexy, I can’t resist you!” “You turned me on...”, “You have to take care of me...” The perpetrator persistently imposes the idea that the child is responsible for abuse and that in some way they wanted and contributed to it. The perpetrator will have a carefully crafted plan to prove to the victim that they wanted and desired sex themselves.

2. History of sexual abuse and the experience of sexuality in adulthood

Clinical experience has shown that through sex, some sexually abused people experience most flashbacks, reminiscent of original sexual abuse. For others, sex will have an exactly opposite effect. In cases where sex becomes compulsive and beyond one’s control, it has most likely been completely dissociated from the early experience of sexual abuse and is in fact the way in which abuse remains unconscious. In general, most often the dynamics of the victim and the perpetrator are very similar to the dynamics that the victim later has with their partner, in most cases not even being aware of it. When it comes to similar positions, images, touches, it can also cause problems in sex, or vice versa – it becomes the most powerful path to “pathological” arousal (e.g. if physical violence, bullying, obscene words used to accompany sexual abuse, a person with a history of sexual abuse can experience the strongest arousal/freezing with sexual violence – bondage, handcuffs, whips and obscene words (Repič, 2015).

Courtois (1998) refers to “sleeping” effects that can occur in the abused during adolescence or adulthood when they become sexually active, even if these effects were not present and/or disturbing during sexual abuse itself. This is when recurring problems in an intimate couple relationship can begin to occur, especially as the relationship becomes more serious and a firm commitment is made. This is difficult to understand because it is paradoxical – usually the commitment is the very thing that provides the relationship with more security, but
in the sexually abused, the opposite can be true: commitment and closeness can be threatening, as they are reminiscent of the closeness of the abuser. For many abused people, to be sexually intimate with someone with no obligations can be a lot more exciting and full of adrenaline than with someone who is also emotionally close. For example, a man can be impotent and without sexual desire with his wife, but if he goes to a brothel (where there is no obligation other than to pay and leave), he may normally have an orgasm. Many abused individuals describe how their fears and vulnerability intensify as the relationship becomes more serious and intimate.

In general, research (Bass and Davis, 2008; Bigras, 2015; Browne and Finkelhor, 1986; Hughes, Bean and Harper, 2015; Maltz and Holman, 1991; Roller et al., 2009) shows that sexual abuse has a negative impact on later sexual functioning in adults. These problems are mainly manifested in the following areas: negative sexual self-image, promiscuous behaviour that often leads to low sexual satisfaction and many short-term couple relationships, sexual phobias and aversions, revictimization, flashbacks, sexual orientation and inclination, painful sexual intercourse, dyspareunia, vaginism and other sexual dysfunctions, inability to enjoy or relax during sexual intercourse, lack of interest in and desire for sex, negative attitudes towards sex and one’s own body, experiencing confusion in sexual identity, strong reactions and negative emotions (fear, anger, powerlessness, etc.).

Courtois (2010) found that 80% of adults with the history of childhood sexual abuse report having problems in adult sexuality, and that sexual abuse is a predictor of sexual dysfunctions. She also states that an individual is much more prone to sexual problems in cases where sexual abuse included penetration.

Other studies (Jehu, 1987) on the effects of sexual abuse report that 95% of women who were sexually abused have sexual dysfunction; 92% have mood disorders, where they most often experience shame, self-blame, guilt and depression; 90% of them have issues in intimate couple relationships, including quarrels, insecurity, distrust, fear and dissociation during sexual intercourse. Certain emotional, rational, behavioural and physical reactions to arousal were also manifested, including aversion and compulsive and/or ritualized sexual activity, guilt following sexual intercourse or masturbation, sadomasochistic tendencies, sexual addiction and, in rare cases, paraphilias.

For women with a history of sexual abuse, there is, among other things, a positive correlation with a vast repertoire of sexual fantasies, liberal sexual attitudes, masturbation and frequent sexual intercourse with various partners. According to a review of research and theory, in general, experiencing sexual-
ity in sexually abused people can be divided into three most common possible responses or behaviours: aversion, preoccupation, and ambivalence. To the presentation of these three behaviours we will add statements from participants who attended group therapy for sexual abuse. It is not possible to predict how a person will react or what behaviour they will choose.

2.1. Aversion or resistance to sex and avoidance

When touched, especially by those who recall a memory of abuse, a sexually abused person will freeze, they will not feel their body, they will be unable to relax and enjoy sex. They will feel plenty of anxiety and guilt, and will have unpleasant feelings about sex; at the same time they will do anything to avoid thinking about sex, let alone having sex (Noll et al., 2003; Wohl et al., 2018). Clinical practice shows that these people often have an attitude towards sex as dirty, provoking shame and guilt, so they will most often reject any closeness (physical, emotional, and sexual). They will negate their emotional needs and live in isolation, lonely. The best way to avoid vulnerability is to avoid relationships with others, especially intimate couple relationships.

“During intimate touching with my boyfriend, it happened several times that I was numb and could feel nothing. I felt terrible because I felt like a log, a thing with which anyone could do whatever they wanted.”

The participant said that she also experienced these feelings during abuse because she froze and was unable to defend herself.

“I don’t like it if someone wants to hug me, whether it be him or her, it doesn’t matter how old he or she is, I freeze, I want just to wriggle out of the hug. Even shaking hands is uncomfortable.”

“It rarely happens that nothing bothers me during sex. Sometimes I feel I just don’t care, I stop feeling and start thinking about what I will do tomorrow, or about some everyday problems – it’s crazy. I don’t understand how I can be so absent during sexual intercourse, since sometimes I have such strong desire… Most of the time I also try to please my partner more than myself, I do my best to make it okay for her. Even if I don’t enjoy at all, or at least that’s how I feel…”

Emotional absence and disconnection are the ways of survival. An individual is dissociated, similarly to what often happens to children or adults during sexual abuse.

“In the most intimate moments, I see only darkness. I don’t really see anything. If anything, I see sexual violence from movies.”

“When I feel his desire, I also feel aversion; I try to convince myself that he is my boyfriend, that he loves me, that he is not a pervert. When I feel desire,
I want everything to happen quickly, without words, as if I don’t want to feel him as a person. However, if not everything is as I want it to be, I feel aversion in the sense of ‘Give it a go if you want’, but I hold back and feel a lot of guilt, and I wonder if I love him at all. And then again the sense of guilt, because his thoughts are much purer, he knows what he wants a lot more than I do.”

A participant told that the perpetrator, too, often looked at her with lust and acted in perverted ways. And while he was abusing her, she wanted it to be over as soon as possible so that she would have some peace, but this “peace” was most often followed by the guilt of not defending herself enough.

From the above statements, we can see that the body freezes, dissociates when it comes to flashbacks that unconsciously remind the abused of sexual abuse. This was confirmed in a discussion in group therapy where participants found a connection between sexual abuse and feelings they experience during sex.

For example, the person who felt like a log that anyone could do with it whatever he wanted, said that during sexual abuse she froze, too, and had similar feelings.

For the person who says that most of the time he just doesn’t care during sex and begins to think about everyday problems, the easiest way to survive abuse was to dissociate and float into his own world. Similarly, the person who sees only darkness during intimate touching, mentioned that, while being abused, she often suffered abuser’s violence; that is why occasionally images of violence, even from films, appeared before her inner eyes...

2.2. Obsessiveness or preoccupation with sex

Sex will be the only “cure” that will really calm the abused person, and the strongest glue bringing the feeling of connection and belonging in the relationship. For this person, to love somebody will mean to be sexually close and to surrender physically. If their partner refuses to have sex, they will feel unloved, rejected or even discarded. This preoccupation with sex is indicative of unexpressed and deeply internalized sexual compulsions, which may also be manifested as excessive masturbation associated with pornographic images and other sexual devices which arouse sexual fantasies, excessive sexual games, early sexual intercourse (Meyer et al. 2017), etc. In the eyes of men, such a woman will be a very good lover, bold and provocative, passionate, without limits and with vivid imagination, as she will experience the greatest expression of love in sexuality and will totally surrender, without prejudice and a “healthy feeling of shame”. However, unexpressed and internalized sexual compulsions may also be manifested as other obsessive compulsive behaviours (e.g. excessive waste
of money, overeating, bulimia, anorexia, gambling, etc.), as phobias and anxiety disorders (Repič, 2015).

“I always find myself in situations that lead to sex. I go home to some unknown boy, most often when I’m drunk. There I often let him do whatever he wants. Sometimes the next day I don’t even know his name. I know this is stupid and naive, but it’s been happening since I was 12 years old and I started to live an active sex life ... But all the time I just want someone to love me.”

Most often, participants in therapy who were exchanging multiple partners and quickly decided to have sex even with strangers, mentioned that they didn’t really want sex at all, but just that one embrace that would feel safe and sweet, one gentle, respectful touch. Most often, however, they inadvertently selected the persons who abused them. This reflects the compulsive repetition of affects accompanying sexual abuse and the search for connection and love through sex (Gostečnik, 2017; Repič and Gostečnik, 2017). Relational Family Therapy (Gostečnik, 2011) points out in this respect that with repetition, genuine addiction and a sense of being driven can develop, connected with the unconscious desire to resolve trauma and with hope that the abused will experience something new – respect and love instead of sex during which they are used as an object. These are the dynamics of abuse – the perpetrator used them under the guise of love, so even now, many abused people mistake a touch, albeit disrespectful, for love. Similar search for connection and preoccupation with sexuality is indicated by the following statements, where it is obvious that by repetition, the abused re-traumatize themselves, unconsciously seeking sexual abuse so that they can calm down, seemingly resolve the conflict, or at least for a moment feel “loved.”

“I have often thought about sex with any man who was older and possibly nauseatingly sweet and friendly. And when I started getting offers from older men, the worst part was that I even thought about going with them, just to get the attention and the feeling that someone needed me to serve him, to be available to him and do everything for him in order for him to love me.”

“If my partner and I decided to live without sex for a year, that would definitely not be my decision. I would be scared, thinking, “How am I going to keep him now?” To me, sex is a means to keep someone close... So all the time I would be haunted by the feeling that I was not attractive enough to my partner and that he would get tired of me, although I know that he could get tired of me, even if I was active in sex.”

“When I can’t express my feelings and something is wrong, I try to kiss my partner roughly. Sometimes I wanted him to just undress me and be rough and sleep with me. Last month, however, I noticed that I wanted to be in this role – someone who insensitively undresses the other and...”
“Thinking that I would stop having sex for a year, it seems to me that I would have to work really hard to maintain our relationship. After every dispute, for example, we would have to show each other in a new way that we accept each other... I would be afraid, above all, that my partner would want to spend less time with me, that he wouldn’t pay attention to me.”

“When I’m very angry, my partner has to calm me down with a touch.”

“It happens, for example, that we quarrel over the phone and then we meet, hysterical, quarrel again (the quarrel always ends with me crying, and it hurts because he doesn’t understand me, ignores my pain and is always ‘right’), eventually I relent and the problem is somehow “solved “ – till next time. At that time I am scared of losing him. Eventually I started to believe that I was the problem... Then I usually need a ‘healing hug’ and he ‘comforts’ me and already we start making out. Then of course I feel guilty and miserable...”

Similarly, she felt guilty as a victim of sexual abuse – that she was to blame for abuse.

“I do not imagine that my partner and I would decide to live without sex for a while. I would miss warmth, tenderness, safety. I think that I would become cold, inaccessible, estranged, having every movement and every emotion under control; I wouldn’t believe my partner that he loves me and that I am physically attractive to him. I would become hard as a rock, but on the inside I’d be full of sadness, anger and despair.”

He was confronted with these feelings as a little boy when the perpetrator was leaving after he had abused him.

Similarly, the abuser calmed down his body by touch – by abuse. The child received, among other things, the message that sex was something that served to satisfy the needs of another, and that the body calmed down most quickly through touch, and then there came peace – for a while. In reality, the psyche (anxiety, fear, emptiness, etc.) calms down through the body: sexuality regulates fundamental affects and prevents the confrontation with pain (Gostečnik, 2007; 2011; 2017).

Abuse can even give a false sense of “security.” Some participants said that on a rational level, they long for tenderness, respect, mutually pleasant making love, but when the opportunity arises, they are most aroused and attracted to the very atmosphere, images or positions of abuse. Wohl et al. (2018) also write about this, stating that sexually abused people often experience intrusive or disturbing sexual thoughts and images during sex. Clinical experience has shown that these images are not always disturbing; rather, they contribute to a faster and stronger orgasm in the most exciting moments.
“In the most exciting moments, I usually need some image to get more aroused. Basically, I imagine that I am a third party, watching my boyfriend with that girl he used to cheat on me with how they make love...” Arousal at the thought of being a victim, deceived, in the role of a victim.

“In the most intimate moments, I am most aroused by the thought of all the things that the man who abused me did to me. And I also want my partner to do this to me. However, if none of this happens, I feel rejected by her. When I am angry, I usually soothe my anger with sexual intercourse, but after orgasm I feel bad.” When the abuser had calmed his body with him as a little boy, he had left, and the boy had felt bad and guilty that he had “participant.”

“In sex, I want a man to use my body for his all-round pleasure. I am happy when I even think about him enjoying my body, even if he regards me as an object. On the other hand, in my imagination, this man is very subtle and gentle despite his brutality. It is as if he consisted of two poles.” This shows the split between the good and the bad part of the perpetrator that a child most often creates so that he can bear all the fear he feels. Especially in cases where the perpetrator is someone closest, someone who is supposed to give safety and love.

“I would like to know somebody with whom I could feel that he loves and respects me as a person with a soul. Unfortunately, I have a constant feeling that someone wants to approach me solely because they want me sexually. At this point, I experience myself as two people. I don’t know how to connect my sex life with an intimate couple relationship.”

Preoccupation with sexuality is also reflected in the compulsive use of pornographic literature and masturbation.

“I’m most aroused and soothed by pornographic images when I masturbate.”

“When I’m most nervous, I calm down the most when I masturbate. Sometimes when I experience a crisis I do it eight times a day to get at least one iota of pleasure out of my body, even though everything hurts afterwards...”

2.3. Ambivalence in sexuality

Ambivalence in this context means simultaneous experience of aversion and obsession with sex. Such person will desire tenderness and sex, and at the same time they will experience genuine disgust and aversion (Noll et al., 2003). It is this disgust that will in some ways intensify arousal and attraction. Most often during the intercourse they will experience flashbacks, images from abuse itself, and before their inner eyes, the image of their partner will be replaced with the image of the rapist, the criminal. In such moments, they will sometimes even
desire violence and torture, so that the atmosphere could be totally permeated with abuse. At that moment, they may not even feel that what is awakening is abuse, as the desire for orgasm and the feeling of arousal will prevail; however, after the intercourse when the body calms down, guilt, disgust and contempt will be that much worse (Repić, 2015). If they were abused by the father, sexual ambivalence will be significantly higher. If the perpetrator did not use physical force during abuse, the victim will experience more feelings of guilt and self-blame, which will trigger a lot of confusion regarding arousal and lead to the development of sexual ambivalence (Allender, 2016).

In therapy sessions it became apparent that sexual ambivalence is often linked to the dynamics of abuse. In individuals who have been abused for a long time, where abuse began earlier and the perpetrator was someone who should give security and love, the ambivalence was much higher and more frequent. In this connection, participants said that they felt very guilty, as if they had participated in abuse, because in some way they even “liked” that someone was intimate with them in this way. Some mentioned that they were sometimes very aroused during abuse and had an orgasm. It is precisely this attraction, guilt, and aversion that have most often alternated during abuse, similarly as now they alternate in intimate couple relationship or masturbation. In this respect, Bass and Davis (2008) point out that even if the victim orgasms during abuse, it does not mean that they feel good and that they are responsible for abuse. An orgasm is the result of body arousal that produces “pleasure” from distress itself, but it certainly does not mean feeling pleasure in abuse.

“I am most aroused by rough sex and rough touching. Many times I lose contact with my body, I no longer feel, I do everything automatically, as if I know what I want and everything has to be done as soon as possible. I mostly don’t feel myself.”

“When I’m very angry, I usually feel disgust with my partner. However, several times in this rage I felt an unbearably wild sexual attraction to him. Something impersonal.”

“In the most intimate and titillating moments when things go so far, I become rude and begin to direct him how and when he has to do something for me to orgasm as soon as possible, but at the same time I feel disgust and helplessness. And after sex, I’d rather not see him anymore, at that time I’d prefer to tell him to go, and I wouldn’t get up at all, I wouldn’t even move, I would just sleep.”

“When I’m very angry, I usually push my anger into the background and sink into powerlessness and let him do whatever he wants with me. Then when he arouses me, I want penetration, as I need one strong feeling, I want to feel something!!! But I don’t really know what to want...”
“If my partner has hurt me a little earlier, I first want to push him away, but because he usually insists or is offended, I give up and think, ‘OK, just go on if you want to!’ Then internally I argue with myself, thinking that this is not right, that he only wants sex, but on the other hand, I know he loves me even though I don’t feel it at the time. When he forces me, I always have the feeling that this is an ultimatum and that if I don’t give in, he’ll go away. And then there was a situation when I really said no. He took it seriously and wanted to walk away in five minutes. I couldn’t bear the feeling despite the humiliation, and we started having sex again, only to prevent him from leaving.”

“Sooner or later, it always turns out that I only let close a man who abuses me and who makes me feel like a slave. Such a man is never interested in my need or what I might want. He only sees his pleasure, and that also arouses me the most, but at the same time, I feel horrible.”

“After having sex with my partner, I had an awfully bad conscience, felt a lot of fear, and swore I was no longer going to do it, but it all disappeared as soon as we met again.”

“I feel guilty because in quite innocent situations, sexual scenes begin to unwind in front of my inner eyes, and I struggle with these images. These thoughts were triggered already when someone was breathing heavily. And that feeling, those thoughts are horrible for me. I feel guilty, perverted, that I’m a bad and dangerous person.”

Most participants said that sooner or later they engage in sex when they are angry or have a conflict with their partner, because at least at that moment, sex feels calming and gives them a false sense of security, because “even though we hurt each other so badly, we still love each other and are staying together, otherwise we wouldn’t have sex.” Physical touch and sex are often mistaken for emotional closeness and intimacy. However, it is precisely such touches that leave the most disgust, guilt, sadness, and emptiness. This shows a strong ambivalence between longing, attractiveness, beauty and aversion, disgust, guilt.

The sexually abused have often mentioned a sense of duty associated with sex.

“I realized that I deeply offended my partner when I confessed to him that during all the years of our relationship, I had not enjoyed sex with him, but had only offered a kind of service – somehow I had felt obliged to do.”

“During the rape I managed to escape. I remember him crying out to me that I still owe him and that he would definitely get it... Maybe this is the reason that whenever I meet a man and if he is just kind to me or does me a favour, I feel I owe him, and what most calms down this sense of duty is if we have sex, if we touch...”
If based on our clinical experience, we summarize the content of statements related to experiencing sexuality in sexually abused participants, we can say:

- In general, we can divide the experience of sexuality into three groups: sexuality as aversion, sexuality as preoccupation, sexuality as ambivalence.

- With some, the body freezes, dissociates when it comes to flashbacks that are unconsciously reminiscent of sexual abuse; but again and again they still find themselves in situations where the atmosphere of abuse is repeated; this manifests an unconscious desire to resolve the trauma.

- Most often, in relationships they only seek an embrace, someone who would love them and touch them with respect, but this for the most part ends in sexual intercourse. They seek connection and love, but they get abused again; they mistake sex as an expression of love, most often confuse it with emotional security and therefore experience genuine horror and fear when the partner is not open, accessible to sex; similarly, as children, they only received attention and affection through abuse, sex, not love.

- In most cases, by means of sex and touch – through physical component – they calm their difficult affects and resolve conflicts.

- The dynamics between the perpetrator and the victim during abuse are mostly repeated in sex.

- They often associate sex with attraction.

- Even in adult sex, the roles of victim and perpetrator can alternate.

- After sexual intercourse or other intimate touching, they often feel guilt, sometimes even disgust, which is also reminiscent of the feelings of sexual abuse, where all perpetrator’s guilt and disgust remained with the victim.

- Through sexuality, they regulate their fundamental affect and prevent confrontation with their pain.

- During sex, they often experience images, atmosphere, behaviour and other flashbacks from the original sexual abuse, which triggers sexual arousal in some of them, while blocking others by numbing and freezing.

- In sex, most experience a split between good and bad, and ambivalence in affects – between disgust and desire, attraction and aversion, fear and arousal, guilt and passion, etc.

- Often, they associate sex with a sense of duty and feel obliged to be at others’ disposal, which shows the violated boundaries destroyed by abuse, i.e. the abuser.
In the context of the consequences of sexual abuse in adult sexuality it is important to mention two behaviours that are exactly the opposite; these are prostitution and compulsive masturbation. Prostitutes are labelled and recognized as inferior, they are attractive precisely because one does not have to do anything to please them, satisfy them, and reach their standards, gain their approval of one’s impulses and desires (Gostečnik, 2018). They take sex very impersonally, and for payment, their bodies are available to others, most often men. With a prostitute, a man can let go of all his anxiety, disgust, fantasies and shame; he can just pay and leave. This dynamic is very reminiscent of abuse when someone just kept coming and leaving in order to satisfy his own sexual needs and needs for power and control, while the abused were left with all emotions – anxiety, disgust, shame, feelings of inferiority, etc. In this respect, prostitution can be said to be a way of self-medication where the body and the psyche compulsively repeat original trauma in order to be able to resolve it, but sex always proves to be a false solution. Clinical experience shows that on a symbolic level, some female prostitutes perceived their activity as an attempt to “revenge” men, in the sense that they “drain” and “consume” their last drops of energy, their power. This strongly demonstrates ambivalence in their perception of sex – the greater the disgust, the greater the sexual arousal and gratification. Whatever evokes most aversion is reminiscent of the aversion experienced by a child during sexual abuse. The child was helpless at the time. An adult female prostitute can, with this history of abuse, re-traumatize herself and calm her anxiety, and through her body, through sex, give herself the feeling of self-worth. Someone was interested in her and “needed” her most when abusing her body for his own sexual pleasures – this contact and the feeling that she was interesting, attractive, and good, was also given to her in some way by all these men who leave their rage with her.

The other pole and another way of escape from closeness is manifested in compulsive masturbation as a form of distorted sexuality. It is about self-comforting, about calming the body, but it also conveys an essential interpersonal message: ‘I don’t need anyone.’ I can arouse myself, satisfy myself, and regulate my desires, regardless of your willingness. The pressure that drives compulsive masturbation is not endogenously aroused tension, but anxiety and the resolution of feelings of intense personal vulnerability experienced in a physical way (Mitchell, 2002). This way, the husband will be able to masturbate immediately after having sex with his wife to regain control of his body and regain autonomy. Being open and vulnerable in an intimate relationship is too risky, so it is safer to be self-sufficient and to calm the body with masturbation. A similar picture, only from a different perspective, can be seen in a child who
masturbates. In this way, maybe he is telling adults that something is going on with his body and he needs to calm himself with touching because someone has blemished and upset him with touching. On the other hand, his behaviour may tell the story of his loneliness, of the body as the only consolation he has left; maybe he calls his parents to finally hear him once in his desires and needs for safety, belonging and love (Allender, 2016). If he does not find safety, peace and inner satisfaction outside of himself (with his parents, in his family), he will seek it within himself – in his body. Compulsive masturbation never means that one is so eager for sex and touching that they need “more” orgasms, but rather tells that this individual is so full of anxiety and distress that he can only soothe them through body and sex. Only in this way does he or she fill that void and silence the pain (Gostečnik, 2007; 2018). This dynamic can also be reminiscent of sexual abuse when someone went calming their bodies and anxiety with the child who was absorbing all their distress and terror. When the abuser received “his dose”, in the most inappropriate way quenching his emotional hunger and distress, the child, too, felt for a while that he would be “safe” and left in peace. Sooner or later, abuse recurred and the child had already become “accustomed” to the tension, fear, horror, and anxiety that began to build up after some hours or days of peace, again temporarily calming down when the offender did his worst and left. The body remembers this and can also later, in adolescence or adulthood, alleviate all tension, anxiety and fear on body level – by masturbation. If childhood arousal patterns are associated with fear, deprivation, loneliness, and vulnerability, adults with a history of sexual abuse will associate these feelings with sexuality (Gostečnik, 2008).

**Conclusion**

Sexual abuse always has consequences. They may show up immediately or several years after experiencing trauma. In some cases, the unresolved effects of sexual abuse are even passed on to future generations: the phenomenon is known as transgenerational transmission of trauma. Sexuality is just one of the areas that can be affected, and not everyone who has been sexually abused will necessarily experience difficulties in functioning sexually. They will be able to experience sex as something beautiful and pure, without intrusive memories of abuse: but they will suffer from panic attacks or phobias in other situations that are unconsciously reminiscent of abuse.

Clinical experience in the therapy group for the sexual abuses, as well as in individual therapy sessions, has strongly shown that many sexually abused
use “pictorial, behavioural, affective, kinaesthetic... material from the original sexual abuse trauma as a device for arousal or just the opposite – their bodies will freeze, numb or experience genuine panic and anxiety when flashbacks of abuse occur.

In further papers, it would be worthwhile to introduce the experience of sex after the two-year therapeutic process in the group for the sexually abused. Only as a finding it can be stated that the effects of therapy (Repič, 2015) with the victims of sexual abuse have been very positive, which means that images and disturbing memories have significantly decreased or, in some participants, completely disappeared. Generally, where there was an aversion, it was replaced by longing and desire for a gentle touch. Where there was preoccupation and calming the body through sex, clients began to find resolution of distress through dialogue or other more appropriate means. Ambivalence disappeared, which means that disgust, guilt, and shame also diminished greatly. As a result, a new space has opened for sexuality, a space where sexual abuse is replaced by love and respect.

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