CONTEXTUALISING THE EXPERIENCES OF SOUTH AFRICAN WOMEN IN THE IMMEDIATE AFTERMATH OF RAPE

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Abstract.
The psychological impact of rape is most commonly described by drawing on a medical/ psychiatric framework, which feminists have argued fails to factor in the broader contexts of patriarchy and female oppression. Internationally, and in South Africa, feminist researchers have called for more research on rape trauma which seeks to understand the impact of rape in light of the marginalised and oppressive contexts within which particular groups of women live. In response to this need, this article presents a feminist discourse analysis of conversations with nine women living in a low-income area of Cape Town interviewed within 72 hours of being raped. The analysis revealed that the women's narratives of rape were informed by patriarchal discourses which operated to reinforce gendered relations of power. The discourses discussed in the paper are identified as discourses of damage, ostracism, resistance and survival, confessional discourses and discourses of masculinity and femininity. A multitude of cultural scripts informed the discourses drawn upon by the participants, highlighting the heterogeneous, fluid and dynamic nature of the participants' subjectivities and indicating that their relation to such discourses are far from being fixed, stable and unambiguous. Furthermore, the dominant discourses highlighted in the findings are understood to play a binding role in maintaining social structures of power.

Keywords: *rape; Rape Trauma Syndrome; discourse analysis; feminism.*

INTRODUCTION.
There is a substantial body of research which evidences that rape is highly pathogenic (for reviews see Koss, 1993; Foa & Rothbaum, 1998; Koss, 2005) Much of this research is dominated by literature from the United States and other developed nations, with the research focussed on the post-rape experiences of urban, employed, middle-class white women (Frazier, 1990; Koss, Figueredo & Prince, 2002). These sample groups tend to under-represent women from ethnic minorities in those countries (Koss & Figueredo, 2004). Potentially high-risk groups such as homeless women, children, sex-workers, and institutionalized women are similarly underrepresented in this international rape literature (Koss, 1993; Stefan, 1994; Harvey, 1996; Campbell, 2002; Wasco, 2003; Neville, Heppner, Oh, Spanierman & Clark, 2004).

This skewed focus in research on rape is problematic because traumatic events are not evenly distributed; poverty, lack of education and lack of access to supportive resources are all factors which render marginalised women more vulnerable to rape and are also likely to have a profound impact on what resources are available to rape survivors to assist their recovery (Christofides, Jewkes, Webster, Penn-Kekanna, Abrahams & Martin, 2005). With regard to rape in particular, an understanding of how women from marginalised groups understand and structure their experiences of sexual violence remains under-researched despite the over-representation of marginalised women in rape statistics (Wyatt, Notgrass, & Newcomb, 1990; Bletzer & Koss, 2004; Neville, Heppner, Oh, Spanierman & Clark, 2004). Research on gender based violence (GBV) in South Africa in particular continues to highlight the need for a more nuanced understanding of the impact gender inequities on women's vulnerability to violence (Jewkes, Levin & Penn-Kekana, 2003; Ludsin & Vetten, 2005; Jewkes et al, 2006; Motsei, 2007).

In an attempt to make a contribution to this particular area, this article presents a discourse analysis of conversations with nine female rape survivors living in a low-income area of Cape Town. It examines how, in the immediate aftermath of rape, these nine women draw on, revise and challenge dominant socio-cultural discourses when giving voice to their traumatic experience.

Research into the psychological impact of rape.
The first study which attempted to fully account for all of the major symptoms of psychological distress experienced by rape survivors was conducted by Burgess and Holmstrom in an emergency ward of an American city hospital (1974, 1978). The study examined the experiences of women from within a somewhat decontextualised and medicalised perspective, resulting in the documentation of phases of post-rape recovery which they termed Rape Trauma Syndrome (RTS). Consequently, there has been a burgeoning of research into rape trauma which has become significantly informed by this psychiatric or medical model.

This well-developed body of research identifies common psychological symptoms experienced by rape survivors, which are most marked in the immediate aftermath of rape and subside significantly three weeks post rape (for reviews, see Foa & Steketee, 1987; Resick, 1993; Koss, 2005). These include anxiety, intense fear, depression, sexual disorders and social adjustment problems (Foa & Steketee, 1987; Kilpatrick, Best,

Saunders & Veronen, 1988; Koss & Harvey, 1991; Koss, 1993; Resick, 1993; Koss & Figueredo, 2004). Short-term effects of adult sexual trauma include shock, fear, anxiety, confusion and withdrawal (Herman, 1992). Furthermore, in studies of more severe cases, many survivors were found to receive psychiatric diagnoses, including major depression, alcohol abuse and dependence, drug abuse, generalized anxiety and obsessive-compulsive disorder (Kilpatrick, Resnick, & Lipovsky, 1991; Koss, 1993). These symptoms are all essential features of both Acute Stress Disorder (ASD) and PTSD as defined by the Diagnostic and Statistical Manual (DSMIV-TR-TM) (American Psychiatric Association, 2000).

Rape in context: A feminist perspective.
From a feminist position, the focus on rape reactions as fitting within a medical model of diagnosis neglects to factor in the broader contexts of patriarchy and female oppression on multiple levels. In essence, feminism views rape as the result of differentiated and unequal gender roles and deeply-rooted social traditions of male dominance and female exploitation, as originally defined in. Susan Brownmiller's (1975) groundbreaking book **"Against Our Will."** Feminists continue to maintain that patriarchal ideologies informing societal attitudes towards men, women and sex underpin conceptualizations of rape, which is reflected in the institutional treatment of sexual violence on a macro- and micro-level (MacKinnon, 1987; Ward, 1995; Wilson and Strebel, 2004; Gavey, 2005).

It has been argued that by locating post rape trauma within a psychiatric/medical paradigm there is a danger that the reasons for the degree of distress experienced by the survivor and expressed in classifiable symptoms is not seen to be informed by a broader socio-political context (Stefan, 1994; Boeschen, Sales, & Koss, 1998; Wasco, 2003; Yuan, Koss & Stone, 2006). Bracken (2002), suggests that current Anglo-American discourses on trauma, such as medical discourses informing PTSD, are simply inadequate to grasp the complexity of how different human beings in different cultures respond to terrifying events. Many theorists in South Africa and internationally have questioned the applicability of categories that structure Western psychological discourse, arguing that westernized understandings of traumatic symptoms do not give careful attention to the notion that people's ways of seeing the world, their assumptions, and the discourses available to them, inform the meaning which is attributed to trauma (Riger, 1992; Levett, 1994; Young, 1995; Swartz, 1998; Summerfield, 2001; Eagle, 2002; Staueble, 2004).

Bletzer and Koss (2004:144), for example, used a cross-cultural narrative analysis to compare scripts of coercion and scripts of consent, observing that "when themes of trauma and women's narratives are combined, women's accounts of rape balance our understanding of how gender and culture mediate the experience as well as expression of survived trauma." Similarly, the scant literature examining ethnic differences among rape survivors seems to suggest that the race-gender stereotype of non-White women being sexually promiscuous serves as a controlling image in terms of survivors understanding their own role in the rape (Wyatt, Notgrass, & Newcomb, 1990; Neville et al, 2004).

Research informed by this theoretical framework has sought to explore the ways in which contexts oppressive to women inform the way in which female rape survivors respond to and make sense of their rape trauma. This highlights the importance of gaining a deeper

understanding of the impact of ethnicity, culture and socioeconomic status on how women choose to make sense of, and recover from, rape (Wyatt, Notgrass & Newcomb, 1990; Lebowitz & Roth, 1994; Wood & Rennie, 1994; Neville & Heppner, 1999; Ramos Lira, Koss, & Russo, 1999; Neville, Heppner, Oh, Spanierman & Clark, 2004) Feminist scholars in Africa, such as Mama (1996), Salo (2001), and Kiguwa (2004), have echoed the need to incorporate the multiplicity of women's identities and experiences in feminist research, in order that survivors from marginalised cultural groups are not pathologised due to an inadvertent disavowal of the broader socio-political context within which their experience is situated.

South African research into heterosexual relations have highlighted how constructions of masculine and feminine identities, gender and heterosexuality inform heterosexual relations for both men and women (Leclerc-Madlala, 2000; Shefer, Strebel and Foster, 2000; Boonzaier & de la Rey, 2003; Boonzaier & de la Rey, 2004). Furthermore, several local unpublished theses have focused on exploring the psychological impact of rape on women from marginalised groups, confirming that socio-cultural context influences meaning making and thus post-rape recovery (Sonnie, 2003; de Swardt, 2006; Duma, 2006; Booley, 2007).

In summary, it is clear from the research that in the immediate aftermath of rape survivors experience a number of acute reactions which have been described from within a medicalised paradigm. Feminist research has challenged this perspective, arguing that the meaning and impact of rape on the survivor is profoundly informed by the broader socio-political context within which the survivor lives. In response to the need for more research designed to examine contextually specific and culturally relevant aspects of post-rape recovery, this research explores the way in which nine survivors of rape describe their experiences in the immediate aftermath of rape.

METHODOLOGY.

Research site.
The research site was in the Western Cape at the Thuthuzela Care Centre, which provides forensic, clinical and counselling support for survivors of rape. The centre is located within the G F Jooste Hospital, a public hospital that serves the areas of Langa, Khayalitsha, Mannenberg, Gugulethu, Mitchell's Plain and Strandfontein. These areas were historically designated for black and coloured[1] residents under apartheid law and remain under-resourced, with poor service-delivery, high levels of unemployment, poverty and crime.

Research sample.
Nine female rape survivors, each presenting at Thuthuzela after having been raped in the past 72 hours, were interviewed. Participants ranged in age from 18 to 78 years old and included four English-speaking coloured women, two English-speaking black women, two

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[1] The following terminology will be used consistently throughout the article: "black", referring specifically to black Africans, "white", and "coloured" Although we acknowledge such racially constructed terms are offensive, they are used in order to reflect past history as well as the reality of contemporary social-economic divisions.

Afrikaans-speaking coloured women and two isiXhosa-speaking black women. Marital and family status varied. Male rape survivors were omitted from the sample as there are many important differences in how men and women experience the impact of rape within dominant discourses of heterosexuality (Gavey, 2005), which was beyond the scope of this research.

Procedure.
Seventeen rape survivors presenting at Thuthuzela over the period of two months were asked by the hospital staff or directly by the interviewer whether they were willing to take part in a research study. The nine women who agreed were interviewed by the first author using a semi-structured interview schedule which was guided by broad, open-ended questions aimed at eliciting participants' stories about their experiences surrounding the rape. Participants were told by the interviewer: "I'm interested in finding out how you are feeling after the rape, what has happened to you since the rape and what you are most worried about. It doesn't mean that we can't discuss other topics, and you can talk about your experiences in any way you want." The broad outline of this interview schedule was based on the same one used by Burgess and Holmstrom, where they aimed to elicit the details of the rape itself, the emotional reactions of the survivor, and the feelings towards the institutions dealing with survivors after the rape (Burgess & Holmstrom, personal communication, April 31, 2006). However, once the nature and purpose of the study was presented, participants were encouraged to relay their narratives in their own words with as little prompting from the interviewer as possible Interviews were tape-recorded and transcribed verbatim.

The semi-structured interview schedule was available in English and was translated and back-translated into Afrikaans using a procedure outlined by Brislin (1986). Two of the interviews conducted with isiXhosa speaking women were interpreted by isiXhosa speaking staff at the site. isiXhosa speaking staff on site translated the consent form for the survivors before beginning the interview, and subsequently interpreted the interview.

Ethical considerations.
Following the submission of a research proposal, ethical clearance for the study was obtained from the Ethics Committee in the Department of Psychology at the University of Cape Town. Consent was gained from the superintendent of the hospital, as well as from the participants themselves. Gaining consent involved informing the participants of the overall purpose of the research, of any possible risks and benefits involved in participation, and of the voluntary nature of the research. The participant's right to withdraw at any time was emphasised in an attempt to counteract potential undue influence and coercion (Kvale, 1996). All participants were referred to the free counselling facilities available at the centre and two affiliated Non-Governmental Organisations, explicitly framed as being distinct from the research. In order to respect participants' anonymity and confidentiality, identifying details have been changed and names have been omitted from this article.

Data analysis.
Analysis was carried out using discourse analysis, broadly informed by a focus on the patterns of language which control interactions and position the participants according to social structures of domination (Gavey, 1989; Gee, 1999; Gavey, 2005). A feminist, post-

structuralist analysis in particular advocates a critical focus on the role of language, meaning and subjectivity regarding issues of gender, gender relations and power which constitute, and are reproduced in, social institutions (Wood & Kroger, 2000; Danes, Haberman, & McTavish, 2005; Gavey, 2005). Within this framework, data is viewed as being co-constructed by both the researcher and those being researched and is thus contextually situated (Parker, 2005). Furthermore, a critically reflexive attitude towards thinking about the research relationship shapes the entire process (Gergen and Gergen, 1991; Reinharz, 1992; Finch, 1993; Boonzaier, 2003; Boonzaier & de la Rey, 2004).

In light of this feminist, post-modern framework of analysis, several points need to be highlighted with regard to this particular research. Firstly, by virtue of our Apartheid history, the differences in race and class between the researchers (white, middle class) and the participants (black and coloured, working class) further highlighted by language differentials are noteworthy. These differences speak to a power imbalance and divide which profoundly informed the conversations which developed between the researcher and the participant (Motsei, 2007). In addition, in analysing the interviews the researchers drew from pre-existing literature on feminist discourse analysis which assisted us in identifying dominant discourses (Hollway, 1984; Levett, 1992; Gavey, 2005). As such, the analysis does not claim to represent the women's perspectives, but rather seeks to locate the dialogue which unfolded between researcher and participant within a broader frame of reference.

DISCUSSION OF INTERVIEW DATA.

During the transcription process and upon first reading the completed transcripts, the researchers were struck with the degree of distress expressed by the participants. With repeated readings of the transcripts it became clear that the source of the distress was embedded within a complex set of discourses which inform the meaning attributed to rape and its ramifications. The impact of this damage appeared to manifest itself in a sense of alienation; being ostracised from their previously held positions in their respective communities. However, participants also resisted a damage discourse, thereby challenging their own sense of alienation by emphasising their identities as survivors. In addition to developing a discourse of survival, participants spoke about the importance of talking as a way of facilitating recovery, which we refer to as a confessional discourse. It is argued that all these discourses are located within an overarching discourse of patriarchy which informs gender relations and the meaning attributed to rape in this relationship.

The findings are thus presented under the following five main categories: discourses of damage, survival, ostracism, confession and masculinity and femininity. Due to the fact that two of the participants chose to speak in isiXhosa, and that extra information was added by staff on the site or family members of the participants, some of the quotes appear in the third person.

Discourses of damage.

During the interviews all the women expressed feelings of shock, disbelief and a profound sense of violation which disrupts a sense of self. All of these reactions are well documented in rape trauma literature. Trauma damages a sense of self, violating the autonomy of the survivor at the level of basic bodily integrity and shattering the

construction of self that is formed and sustained in relation to others (Herman, 1992; Gavey, 2005). Narratives were significantly informed by discourses of insanity abnormality, and an unstable sense of self. One of the participants, Caroline, stated:

"I imagine myself thinking … and I don't think it's good. I don't think it's all right because I'm scared I'll end up mad. I'm scared that I'll end up in a psychiatric hospital."

Many other participants similarly constructed their own identities as being unstable, unpredictable and abnormal, a feeling of being estranged from prior identities which contradicts discourses informing ideas of a coherent, stable self. When asked by the interviewer how she was, Patricia replied:

"I'm not right today. I'm not myself. I don't know who I am … I'm not feeling happy. Like I don't know what's going on. I don't know about it, if I'm okay."

Maria similarly stated:

"It's like there's a body, but there's no person … I feel that I can kill someone, that I can really hurt someone. And I feel that I won't be able to be in control of myself … I want me back, the way I used to be."

In psychiatric terms, these experiences described by the participants could be seen to be symptomatic of Acute Stress Disorder as described in the DSM IV-TR-TM (American Psychiatric Association, 2000). However these expressions of distress seem to speak to a more complex relationship between rape survivors and their contexts. Such discourses of damage serve to construct rape survivors as being fundamentally damaged, pushing them further out onto the outskirts of society and significantly informing the high levels of ostracism the majority of participants experienced within their communities. This identity was particularly salient with the seven participants who all expressed feelings of shame and humiliation as a result of being severely physically abused during the rape.

Disorganization.
Burgess and Holmstrom (1974:2) identified a period of "disorganization" during the acute phase in which there is a great deal of chaos in the women's lifestyle as a result of the rape. Consistent with these findings, many women in this study drew on discourses of disorganization and chaos in relaying the extent of the trauma. For Caroline:

"Everything was so deurmekaar [chaotic], you know, everything was out of place."

The disorder and chaos of rape was illustrated on both a physical, material dimension, as well as reflected in the survivor's turbulent state of mind. Some participants, however, resisted viewing the rape as an event which would disrupt their normal routines. In some cases, the period of "disorganization" identified by Burgess and Holmstrom (1974, 1978) was a luxury the women could ill afford. Two of the participants attended work on the very same day, presumably out of fear of losing their jobs. Tanya stated that "my daily life won't change much". Edith "just want[ed] to pay the bills and the accounts".

Contamination.
Discourses of damage were similarly manifest in the themes of contamination which arose in several of the women's narratives. Six of the participants expressed their need to wash, in order to feel clean again. Many rape survivors are reportedly diagnosed with Obsessive-Compulsive Disorder in light of an apparent obsession with cleanliness (Kilpatrick et al, 1991; Koss, 1993). However, a medico-psychiatric understanding of this phenomenon neglects to capture the complexity of the sense of mess referred to by the participants. Caroline stated that:

"I stood in front of the bed and I saw the blood on the bed and how the clothes were thrown, the cupboards were open, and it was still all messy in the house."

Esther similarly explained that:

"He took these pants and he just threw it and my clothes were all lying in the sand, in the grass, and in the sand and it was all wet … This pants of mine must be washed out, and my underpants, my underclothes and my jersey full of dirt."

One of the predominant concerns of many survivors was that their physical space be re-sanitised, either in the form of washing their own bodies in a bath or shower, cleaning the house or washing their clothes. Such discourses position rape survivors as, in the words of Tania, "dirty … useless … low." These discourses position rape survivors even further outside of patriarchal discourses, which demand a femininity which is pure and chaste, and consequently affords the survivors even less communal protection.

Discourses of ostracism.
According to Levett (1992, 1994), the stigmatic effects of rape depend on dominant discourses of damage, deviance and devaluation: ideas which are widely shared in one's community in association with patriarchal discourses of how women ought to behave. Kiguwa (2004) argues that prescribed gender-scripts of female sexual innocence position African women as moral guardians for their respective cultural values and traditions. Such scripts inform the ostracism of women who are considered sexually "impure," threatening their position within conventional patriarchal discourses.

One of the underlying messages reinforced by patriarchal discourses is that women who align their behaviour with communal ideals of feminine passivity will necessarily be afforded maximum protection both by and from dominant males, and can therefore never be raped. Attitudes informed by such discourses were reflected in all of the participants' accounts of the ostracism which they experienced within their respective communities. Esther , for example, was blamed by her family for the rape, as she was considered to be "too friendly" and too nurturing in her behaviour. However, behaviour which is in direct contravention to these discourses of femininity is similarly used to attribute blame, and is equally as contentious. For example, Nosipho was told that "she must stay away from liquor," since such unruly, unfeminine behaviour was seen to increase her vulnerability to rape.

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Many of the participants expressed fear at the fact that they were living alone, or not married. A single status was seen as making women more vulnerable to rape, which has been described by Hollway (1984) as the "have-hold" discourse of femininity, where the ultimate goal of the female is to have and hold on to one male to protect her. Patricia, for example, was told not to prosecute her abusive husband as he was the father of her two children and his imprisonment would cause the breakdown of the (nuclear) family. Likewise, such gendered discourses may have underlied the view expressed by many participants that single parenthood is in clear violation of heterosexual social norms The apparent lack of challenge to such discourses could indicate the extent to which deeply entrenched and socially condoned systems of patriarchy had been internalised by the individual participants themselves.

Trust.
In many instances, the ordeal of rape and subsequent ostracism had led many participants to question the extent to which they were able to trust members of their respective communities. This is a phenomenon similarly outlined by Ahrens (2006), who argues that such a lack of trust, significantly informed by discourses of ostracism, results in survivors' silence and powerlessness. This was evident in many of the participants' choices to remain silent about the rape. It was common for participants to worry about whether they would be seen on television or heard on the radio as a result of participating in the research.

Despite narratives informed by a shattered worldview and broken trust, a common experience for trauma survivors which has been described in detail by Janoff-Bulman (1992), there were instances when this was contested. Esther claimed, "I will always trust people. Always." She explained how she was using forgiveness to rebuild her trust and faith in people. Patricia similarly claimed, "I have faith in myself and in my family," constructing a worldview of relative trust and safety.

Resistance and survival.
There were instances when the above-mentioned gendered discourses informed by a deeply entrenched patriarchal system were challenged. Examples of resistance to these discourses can be seen in the following words of Patricia and Maria:

"He doesn't understand. If I say that no, I don't want to do this, he must know that if I say no, I don't want to do this, I mean it. He mustn't force me." (Patricia).

"I just said to him, 'You will never touch me again'. And I left." (Maria).

Such resistance was echoed throughout all of the interviews, with four participants explicitly choosing to share their resilience and strength in the face of the rape, strongly emphasising their identities as survivors. This is a phenomenon echoed in much of the literature surrounding post-traumatic growth, where resistance to discourses of powerlessness and victimhood serves as a useful way of construing and normalising survivors' experiences (Thompson, 2000; Frazier, Conlon, & Glaser, 2001). According to Maria:

"I know that I will get myself together again … But it's up to me, not to other people, because I can't think about other people, I think about me. I want to be happy, again. Like I used to be. I'd like to get my life back together. And start walking away from the people who have hurt me the most … I'm ready for it."

Grace similarly stated:

"I have my own wild power. I know it now. Let him come. I'm prepared for all circumstances, I have courage."

Maria and Grace both stated the primary agent of change as being their own personal power, and not the support of those around them. The underlying assumption is that the ostracism of rape survivors from their respective communities is so deeply ingrained that one cannot rely on any else besides oneself in the recovery process. To resist gender-based violence is therefore to resist the gendered discourses dictating all societal interactions, and to resist them single-handedly.

Confessional discourses.
As part of this individualised process of recovery, all of the survivors expressed a strong belief in the need to alleviate internal emotional pain through talking about it with someone else, and this formed a significant basis of the research relationship. Participants' reflections of their own feelings can be seen as being positioned within dominant psychological discourses of "the therapeutic process of confession" (Hook, 2004:228). Emotional trauma was contextualised by the participants as being something inside of the individual which would only be released through talking or the expression of such emotions. According to Patricia: "I mustn't be quiet about it because then it's going to hurt me."

This idea was one similarly understood by those providing support to the survivors. Esther's daughter explained that:

"My mother is [affected], but she doesn't know how to, to, express it now. But it will affect her in the long run. It will affect her."

The underlying discourses informing that remark dictate that expression of emotion forms a fundamental part of the recovery process. Caroline demonstrated a resistance to such discourses of confession:

"It's very difficult to explain because inner, inner emotions inside of you, that you can't, like, express to people. There are no words to express it like you have to go through the thing itself to experience the feelings."

She partly resisted the psychological discourses which inform the beneficial nature of talking about the trauma, yet her reference to expressing "inner emotions" is still situated within these discourses. Foucault views such confessional technology as ironically reinforcing objectifying forms of power, subjecting the individual to the scrutiny of disciplinary surveillance (Foucault, 1978; Hook, 2004). Women are therefore liberated at
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the cost of rendering their self-knowledge dangerously dependant on the categories and assumptions of dominant institutional discourses of power (Hengehold, 2000).

Discourses of masculinity and femininity.
All of the discourses discussed above rest upon the bedrock of what could be termed patriarchal discourses. In line with this theoretical understanding of the nature of patriarchal discourses and the way in which they operate, participants scripted narratives of male domination and female submission (Boonzaier & de la Rey, 2004), which dictate how men and women are positioned in society, illustrating how social beings are produced through discourse and culture as gendered subjects (Gavey, 2005).

Construction of masculinity: The rapist versus saviour dichotomy.
All of the participants drew upon gendered discourses of masculine identity, constructing the male rapist as a sexual, emotionless animal, as illustrated in the words of Siyabonga, Esther and Caroline:

"They don't have pain. They don't have any emotion, they don't show any emotion. Because you can beg, you can scream, they will still hurt you … How can someone just do that to you?" (Siyabonga).

"He spoke so rude to me … to me it was that he's used to doing something like that. The way he pulled me … it just means that you are used to doing it, to anybody. He is that violent kind of person." (Esther).

"I mean, they slapped my baby. I mean, she's just four months old and they slapped her. What kind of human being is that? That's being inhumane." (Caroline).

The identity of the (generalised) rapist was constructed as being something other than human in an attempt to understand how someone could engage in such a violent act as rape. This depiction constructs rapists as being dissociated, out of control and emotionless; "screwed-up people" who "hang around at night, just hunting for their victims." Thus, many participants positioned themselves as subjects of a dominating, uncaring male. According to Caroline:

"They weren't interested in hearing anything I had to say … You know how rough they are, they don't care, they don't have emotions, they don't have feelings. They just treat you the way that they want to."

The rapist was thus constructed by many participants as being uncompromising in his heartless violence. Caroline's use of the familiar, confidential "you know" implies that this notion is commonsense, and universally understood by, and shared among, women; something that transcends racial, class and linguistic barriers between the participant and interviewer. This notion is similarly reflected in her use of the plural pronoun "they" as opposed to the singular "he". Esther, however, presented an example of resistance to such a discourse, explaining:

"But he spoke so nicely to me … I got sore when he wanted to put his penis in my back passage, and then I said "But I'm getting sore' and so he turned me around again."

Despite her challenging discourses of male aggression and lack of emotion, Esther did, however, later go on to describe her rapist as "rude" and "heartless." All of the participants took great pains to explain how completely powerless they felt in the face of the man's need for sexual domination which was more powerful than rationality or empathy. The words of Caroline below illustrate how she felt herself to be at the mercy of her rapist's sexual urges:

"I was sleeping inside my panties and my sweater, and the time they lifted the blanket, it's where they got the idea of raping me because they saw me there."

The idea that the sight of a woman in a particular position results in a loss of emotion or empathy in the face of this greater sexual drive, has been described by Hollway (1984) as the male sexual drive discourse, and enables a process of dehumanising the rapist.

Discourses of the male saviour.
Accounts of masculinity were largely informed by discourses of power. This discourse necessarily creates a dichotomy between the male as rapist and the male as saviour. If it is men who dominate, it is only by men that women can be protected, a concept similarly referred to by Moffett (2006:144) who said of men that "if they are not to be predators, they are urged to be protectors." Many other significant males, particularly family members, in the lives of the women felt the need to protect them from rape, both physically and financially. This was indicated by the many reports of men moving into the same house as the rape survivor in order to protect her.

It is therefore clear that discourses of masculine power abound, and largely informs the dichotomy of the male as either a rapist or a saviour. According to Kiguwa (2004) this dichotomy effectively camouflages the complicity and complacency of many so-called "normal" men – and legal institutions – in the abuse of women, a system of patriarchy strongly informed by what Butler (1990:151) refers to as the "heterosexual matrix" informing gender roles and relations.

Discourses of femininity.
Femininity has traditionally been constructed as nurturing, caring and selfless (Boonzaier & de la Rey, 2004). Seven out of the nine participants portrayed their own identity in line with discourses of femininity, which inform nurturing, empathetic, accommodating and maternal behaviour. "Positive" character traits associated with such discourses of femininity became most salient when the participant was asking what she had done, or not done, to deserve being raped. According to Esther and Caroline:

"I don't have enemies around me where I stay. I'm very friendly towards everyone and everybody. I greet everyone on the street. That's why I couldn't understand why it happened to me."

"I'm just thinking about my child, and asking: 'Why me?' I don't fight with people, I don't speak to anyone … I'm just going along, minding my own business."

In contrast to constructions of masculine identity, participants constructed their own feminine identities as being nurturing, kind and submissive, making such statements as "I never forget to pray. I love and respect all my children" and "I do have a heart, I do care." The six participants who were mothers all cited their children as being their primary concern and much of the discussion was informed by discourses surrounding the maternal instinct, and what it means to be a good mother. For example, many participants talked about their roles as mothers, and two of the participants introduced the researcher to their children. Aspects of this feminine identity became particularly salient when the issue of blame arose, and relates back to the idea that evidence of conformity to feminine behaviour absolves a woman of blame or responsibility for the rape.

Access to this kind of support and protection is particularly critical for women who do not have the resources to protect themselves. Three of the participants expressed their frustration at being subordinately positioned within a patriarchal community, and being unable to move or to change the situation as a result of their socioeconomic situation. According to Tania:

"If I had money, I want to go and stay somewhere else. In a totally different place, in a very secure place … I wanted to move but unfortunately, because of the situation, I can't."

Maria similarly stated:

"It's almost like I'm trapped. I can't get out … I'm in a corner, I can't move. Now I'm a cripple."

Participants thus expressed a need to change their situation in life, but felt powerless to do so. This powerlessness is inextricably linked to what Kiguwa (2004:239) terms the "triple oppression" of "many black South African women … oppressed in terms of race, class and gender." These powerful discourses, particularly of patriarchy, which pervade daily lived experience have clearly informed the way in which the participants experienced the rape and how they sought, in the immediate aftermath of rape, to make meaning of it, a meaning necessarily informed by the broader context within which the women live.

CONCLUDING REMARKS.

In the study, gender was an important axis of similarity between the interviewer and the participants, and is presumed to have assisted in making the participants feel more at ease when discussing topics so inextricably linked to gender. However, race, class, language, education and age differentials were apparent before the interviews had even begun, significantly informing the way in which the research relationship developed. This issue was of particular concern with the two interviews conducted in isiXhosa which were interpreted by staff at the site (Swartz, 1998). Despite these limitations, the participants responded to the interview with a high degree of openness as evidenced by the depth and quality of their responses, which seems to reflect a trust and confidence in the process. In undertaking this research we hoped to make a contribution to an understanding of the way

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in which women's immediate post rape experiences are contextually determined and embedded within dominant societal discourses informing sexual assault.

The findings of this study suggest that the dominant socio-cultural discourses are often blaming, alienating and degrading of women and their sexuality, which in turn negatively impact on post rape recovery. The participants' narratives of rape were all significantly informed by such patriarchal discourses, which operated to reinforce gendered relations of power compromising women's choices and control (Gavey, 2005). However, at an epistemological level, the study reveals the heterogeneous, fluid and dynamic nature of the participants' subjectivities. A multitude of cultural scripts informed the discourses drawn upon by the participants, reflecting the heterogeneity of cultural meanings assigned to the discourses. This is further indicative of the fact that the participants' relation to such discourses are far from being fixed, stable and unambiguous. Thus, they not only drew on, but also revised and challenged these dominant socio-cultural discourses.

This has implications for facilitating recovery for survivors and suggests that any intervention requires not only a recognition of the underlying assumptions of patriarchy and how these inform women's experience of the trauma, but also necessitates an active challenging of these assumptions in order to de-shame and de-pathologise rape survivors' experiences (Levett, 1992; Lebowitz and Roth, 1994). The utility of a feminist, post-structuralist approach to the issue of rape therefore lies in its acknowledgement of gender as a relational dynamic going beyond individualistic and potentially pathologising understandings of the problem (Gavey, 1989; Boonzaier, 2008). Furthermore, as Levett (1992) argues, it serves an important function in recognising the power of language, discourses of trauma in particular, as a means of control. As such, the dominant discourses highlighted in the findings must be understood to play a binding role in maintaining social structures of power, re-inscribing traditional systems of racial, cultural, gender and sexual privilege (Burman, Kottler, Levett & Parker, 1997).

It is important to note that only women who recognised the fact that they had been raped and chose to report it to the authorities were interviewed. Unfortunately, it is impossible to record the voices of those women who have survived rape, but who cannot or choose not to disclose it, or even recognise it as rape. This study only provided a snapshot of the participants' experiences within 72 hours of the rape. Undoubtedly the tracking of the participants over a longer period of time would have yielded different findings and is a suggestion for future research in this area.

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