# Attributes of Spirituality Described by Survivors of Sexual Violence

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This study focuses on what aspects of attributes of spirituality as defined by Martsolf and Mickley (1998) are most salient for female and male survivors of sexual violence. Content analysis of secondary narrative data, provided by 50 participants in a study of women's and men's responses to sexual violence, was coded to the five attributes of spirituality as defined by Martsolf and Mickley. The attribute aspects of connecting with others in spiritual ways and with God/higher power were particularly significant. The attribute of transcendence was found less important, and the attributes of value, becoming, and meaning were not found important. The Martsolf and Mickley framework helped organize narrative data for a content analysis of spirituality in survivors of sexual violence. Key Words: Attributes, Connecting, Content Analysis, Recovery, Sexual Violence, and Spirituality

# Introduction

This study's purpose was to determine what attributes of spirituality, as defined by Martsolf and Mickley (1998), are most commonly described and what aspects of these attributes are considered salient by survivors of sexual violence.

Throughout the world, sexual violence, including childhood sexual abuse and sexual assault in adults, is a prevalent problem with significant health implications (World Health Organization, 2004). The Centers for Disease Control (CDC) and Prevention (2006) defines sexual violence as:

Nonconsensual completed or attempted contact between the penis and the vulva or the penis and the anus involving penetration, however slight; nonconsensual contact between the mouth and the penis, vulva, or anus: nonconsensual penetration of the anal or genital opening of another person by a hand, finger, or other object; nonconsensual intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks; or nonconsensual non-contact acts of a sexual nature such as voyeurism and verbal or behavior sexual harassment. All the above acts also qualify as sexual violence if they are committed against someone who is unable to consent or refuse. (p. 1)

Childhood sexual abuse (CSA) is thought to affect 10% to 25% of girls and 5% to 10% of boys worldwide (World Health Organization, 2004). Researchers suggest that 20% of women throughout the world will experience a rape or attempted rape in their lifetime (United Nations, 2007). Little research has been conducted on men who are raped or sexually assaulted as adults, although some researchers in the United States estimate that 13% of men will be sexually assaulted in their lifetime (Bolen & Scannapieco, 1999).

Childhood sexual abuse is associated with a variety of negative effects including depression, anxiety disorders, substance abuse, and eating disorders (Berlinger & Elliott, 2002; Kendall-Tackett, 2002). The negative outcomes of adult sexual assault include post-traumatic stress disorder, depression, physical symptoms, and problems with social adjustment (Elliott, Mok, & Briere, 2004; Koss, Figueredo, & Prince, 2002). Individuals who experience sexual violence are at increased risk for unwanted pregnancies, sexually transmitted diseases, and HIV transmission (World Health Organization, 2004).

Researchers have examined factors that mediate negative effects in rape victims. Social cognitions, for example, have been found to influence health outcomes in sexual assault survivors. Blaming one's character for a rape and believing that one is powerless and helplessness are detrimental to health, whereas blaming one's behavior for the rape is associated with less distress (Koss et al., 2002). Factors that attenuate the outcomes of sexual violence have not been extensively researched, although the use of certain coping mechanisms, such as finding meaning in the violence and reestablishing a sense of mastery (Draucker, 1997; Perrot, Morris, Martin, & Romans, 1998); social support (Golding, Wilsnack, & Cooper, 2002); and trauma-focused psychotherapy (Martsolf & Draucker, 2005; Foa, Zoellner, & Feeny, 2006) have been found to reduce harmful effects.

The use of spirituality may be one way survivors cope with the experience of sexual violence. Studies in the United States reveal that religious support (Glaister & Abel, 2001; Oaksford & Frude, 2003, Valentine & Feinhauer, 1993), belief in and connection with divine beings (Draucker & Petrovic, 1996; Smith & Kelly, 2001), and finding spiritual meaning in adversity (Smith & Kelly) can aide in recovery from sexual trauma. Researchers have also found, however, that survivors' religious faith can fuel shame and guilt, and church communities can minimize, deny, or enable violence and abuse (Giesbrecht & Sevcik, 2000). A systematic review of empirical studies examining associations between religion, spirituality, and personal growth following trauma revealed three major findings:

First,...religion and spirituality are usually, although not always, beneficial to people in dealing with the aftermath of trauma. Second, that traumatic experiences can lead to a deepening of religion or spirituality. Third, that positive religious coping, religious openness, readiness to face existential questions, religious participation, and intrinsic religiousness are typically associated with posttraumatic growth. (Shaw, Joseph, & Linley, 2005, p. 1)

While spirituality appears to be an important aspect of recovery for some survivors, little is known about what attributes of spirituality are most frequently described in narratives of survivors of sexual violence and what aspects of those attributes are most salient for survivors.

## Martsolf and Mickley (1998) spirituality framework

Martsolf and Mickley (1998) examined modern nurse theorists' work on spirituality to identify attributes of spirituality frequently discussed in the nursing literature. These researchers identified five attributes of spirituality and provided common definitions for each attribute. The five attributes and their definitions are:

- 1) Meaning the ontological significance of life; making sense of life situations; deriving purpose in existence.
- 2) Value beliefs and standards that are cherished; having to do with the truth, beauty, worth of a thought, object or behavior; often discussed as 'ultimate values.'
- 3) Transcendence experience and appreciation of a dimension beyond the self; expanding self-boundaries.
- 4) Connecting relationships with self, others, God/Higher Power, and the environment.
- 5) Becoming an unfolding of life that demands reflection and experience; includes a sense of who one is and how one knows among other things. (pp. 294-295)

The authors suggested that spirituality can therefore be conceptualized as "an inclusive term that refers to one or more of the five attributes of meaning, value, transcendence, connecting, and becoming" (Martsolf & Mickley, p. 295).

This framework has been used to characterize and define spirituality for clinical practice (McEwen, 2005; McSherry, Cash, & Ross, 2004; Meehan, 2003) and to further develop a conceptual understanding of spirituality (Clarke, 2006; Miner-Williams, 2006; Tanyi, 2002). The framework was chosen for this study because it has been widely cited in the nursing literature and offers a broad perspective that allows for consideration of the diverse social, cultural, and religious components; theistic and humanistic conceptualizations; and negative and positive aspects of spirituality.

## The Study

#### Aims

The purpose of this study was to determine what attributes of spirituality as defined by Martsolf and Mickley (1998) are discussed most frequently and which aspects of each attribute are most salient for female and male survivors of sexual violence. Content analysis of a data set developed for an on-going study of men and women's responses to sexual violence was used to answer two research questions:

- 1. In minimally-structured interviews regarding experiences of sexual violence, what attributes of spirituality as defined by the Martsolf and Mickley (1998) model do survivors discuss most frequently?
- 2. When survivors of sexual violence describe their spiritual experiences, what aspects of the attributes of spirituality are particularly salient for them?

Furthermore, to offer a sense of context for this study, I (Gregory Knapik) found in my years of clinical experience that sexual violence was a common experience challenging consumers of mental healthcare and causing much chronic suffering. This has cemented for me the significance of the survivors experiencing sexual violence as impairing their physical, emotional, and spiritual health. I found this was also reinforced in the parent study of 121 transcripts, many from survivors who did not use the mental healthcare system. As a researcher, educator, and nurse practitioner, I am invested in increasing and disseminating our knowledge of the complex recovery process from sexual violence, especially to other providers assisting in survivor recovery.

## Method

Data for this research were drawn from an on-going study of women's and men's responses to sexual violence. The purpose of the larger study is to develop a midrange theory that describes, explains, and predicts women's and men's responses to sexual violence using grounded theory methodology. Institutional review board approval was obtained from Kent State University. A community-based sample of 64 female and 57 male survivors of sexual violence was recruited by public announcements, word-ofmouth referrals from participants, and referrals by community leaders in the metropolitan Akron, Ohio area. The public announcements consisted of placing a few dozen legal sized flyers in stores, churches, social service facilities, and bus stations in metropolitan Akron. Each flyer briefly described the study as looking at female and male survivors' response to sexual violence, and included a confidential toll free number to call, assurance of confidentiality, and a notification of cash compensation for participation. Small tear-off tags with the toll-free number were at the bottom of each flyer. The community leaders consisted mostly of staff at churches, shelters, community support organizations, and healthcare professionals. After obtaining written, informed consent, research associates conducted minimally-structured interviews about the participants' experiences of sexual violence, including the context of the violence, the ways in which the violence affected their lives, and factors that facilitated or hindered their healing or recovery. The interviews were audio-taped and transcribed, and data were entered into the N6 (QSR, 2002) qualitative computer software program. The research team audiotaped and transcribed the interviews and entered the data into the N6 (QSR) qualitative computer software program. Interviews were conducted from December 2004 to April 2006.

The results (findings) are organized according to how often the participants discussed the different spiritual attributes as described by the Martsolf and Mickley (1998) framework. Furthermore, and probably of more clinical significance, the importance of aspects of these spirituality attributes are analyzed based on the frequency

and intensity or depthness of the attribute aspect as described by survivors in the interview data, and agreed by the researchers as salient to the survivors.

## Sample

From the complete data set of 121 transcripts, 50 were chosen that contained data most relevant to spirituality. The first author read all the transcripts and highlighted any text units (sentences, phrases, paragraphs) thought to be related to spirituality based on the operational definition of spirituality as: "an inclusive term that refers to one or more of the five attributes of meaning, value, transcendence, connecting, and becoming". These procedures revealed from the initial 121 transcripts that 35 transcripts did not have text units related to spirituality and 86 transcripts had at least one text unit related to spirituality. From these 86 transcripts, 50 were selected that had the greatest number, the richest, or the most unique text units related to spirituality. Often a transcript contained a progressive description or discussion of spiritual struggle and growth. This procedure eliminated 36 transcripts that contained only passing references to a spiritually-related concept (e.g., "Thank God for my therapist....") but little in-depth information about spiritual experiences. After ongoing consultation with the research team , including two experts in qualitative research, a decision was reached that 50 spiritually rich transcripts would be adequate for analysis.

The sample was comprised of 27 women and 23 men. Participants' age ranged from 18 to 62; one half of the sample was between 40 and 50 years of age. Race of the participants was primarily African American (46%, n=23) and Caucasian (36%, n=18). Marital status was reported as: single (48%, n= 24), married (24%, n=12), divorced (12%, n=6), separated (6%, n=3) and engaged (2%, n=1). Participants who were parents (62%, n=31) had an average of three children. Many participants (52%, n=26) had an income under \$10,000; 24% (n=12) had an income between \$10,000 and \$30,000. Most participants (70%, n=35) indicated a Christian religious affiliation. No particular denomination was specified by the majority of the Christian participants, although some participants specified a denomination (e.g., Baptist, Catholic, Episcopalian). Of the remainder of the participants, ten did not report religion, one stated no affiliation, two had non-denominational affiliations, one had a Jewish affiliation, and one reported "Spirit" affiliation.

#### Data Analysis

The interview transcripts were analyzed initially by coding the spirituality-related text units in the 50 transcripts to the Martsolf and Mickley (1998) operational definition (five attributes of spirituality: transcendence, connecting, becoming, value, and meaning). The analysis occurred in several stages. First, two coders (the first and last authors who are advanced practice psychiatric/mental health nurses) independently read the same ten transcripts and highlighted the text units that each coder independently determined to be related to spirituality based on the operational definition. They presented their highlighted text units to each other and through discussion reached agreement on those text units to be included in the content analysis. These two coders then met with the second author who is an advanced practice psychiatric/mental health nurse, co-investigator on the larger

study, and author of the Martsolf and Mickley article. The second author confirmed the text units that met the operational definition of spirituality.

The two coders then reviewed the five attributes of spirituality (Martsolf & Mickley, 1998) with the second author to develop a mutual understanding of the definitions of the attributes. Using a coding matrix form (six columns: one for each attribute and one for "others") to place each text unit under the appropriate attribute, the coders independently categorized the text units in the first ten transcripts. For example, "I attended a prayer group" would be coded to the attribute "connection." The coding matrix form included a sixth category entitled "other" to accommodate any text units thought to be spiritual in nature but which did not fit clearly in one of the five attribute categories. Each text unit could only be designated to one attribute, or to "other" (Miles & Huberman, 1984).

After ten transcripts were coded, the coders gave their matrices to the project manager who calculated an inter-coder reliability index by dividing the number of agreements (i.e., text units coded by both coders to the same attribute) by the total number of agreements and disagreements. According to Krippendorf (1980), and Miles and Huberman (1984) an index below 0.70 reflects an unacceptable inter-coder reliability and indicates the need for coders to review their interpretations of the category definitions, refine the definitions if need be, and/or clarify the coding instructions to improve inter-coder reliability. Because coding for the first ten transcripts resulted in an inter-coder reliability coefficient of 0.42, the three-member coding team discussed each text unit that the two coders had coded to different attributes to determine the nature of the discrepancies. The team noted that many of the discrepancies involved the attributes of *connecting* and *transcending* and determined that more clarity and specificity was required of the definitions of these attributes, and procedures for coding text to them also needed to be clarified.

After considerable discussion by the coding team, the definition of *connecting* was modified to read:

Joining, linking, or uniting with self, others, or God/higher power in a significant relationship that includes communicating with each other and/or being associated with each other in a harmonious way. (Adapted from Random House, 2001, p. 431-432)

The team added two guidelines for coding to *connecting*. First, participant references to prayers asking for help from God/higher power were to be coded under *connecting*. Second, whereas the original definition of *connecting* prompted the coding of text units describing references to secular relationships that were particularly passionate and deep to this attribute, the team determined that coding interpersonal relationships as *connecting* due to their intensity alone tended to reflect a psychological, rather than spiritual, focus. Therefore, the team agreed that only references to significant relationships focused on the sacred or divine, including relationships with a Higher Power, clergy, or others who shared the participant's spiritual experiences (e.g., other worshippers or spiritual supporters) would be coded to *connecting*. For example, "she just held my hand and started to pray with me."

The definition of *transcendence* was modified to read:

Experience of a dimension beyond the self or recognizing the fact that there is more than self; going beyond ordinary limits; surpassing, exceeding, to be above and independent of (the universe, time, etc.), superior or supreme. (Adapted from Random House, 2001, p. 2009)

The team agreed that the following types of references should be coded as *transcendence*: (a) situations not explained by ordinary phenomena, (b) situations that surpass what can usually be explained or predicted except by the power of a supreme being, (c) praise, honor, or adoration given to a supreme being because of awe of the superior nature of the being, and (d) realizations or experiences that confirm that there is a dimension beyond the self. An example being "I just started seeing miracles in my life, miracle after miracle."

With these clarifications, the inter-coder reliability coefficient increased to 0.65. The coders continued to have some difficulty differentiating *connecting* and *transcendence* because *connecting* was a necessary condition (in the context of connecting to God/higher power), but not always a sufficient condition for *transcendence*. *Transcendence* was therefore coded with text units that went beyond *connecting* in a substantial way via experience of supernatural influence in addition to relational connections With the expanded definitions of *connecting* and *transcendence* and clarification of a number of coding procedures, the team coded a total of 363 text units until agreement was reached. However, differentiation of between connecting and transcendence remained challenging at times, more so than other attribute differentiation.

#### Trustworthiness

Trustworthiness, or scientific rigor, and analogous to validity in quantitative research, must be considered throughout the qualitative research process. We primarily used Lincoln and Guba's (1985) approach to achieving and maintaining trustworthiness, that was also supported by Miles and Huberman's (1984) approach to qualitative study. Per Lincoln and Guba, trustworthiness is comprised of four components: credibility, dependability, conformability, and transferability.

Credibility was supported by close, in-depth and ongoing engagement with the data, and peer debriefing, particularly focusing on discussing analysis and results with the research team and consulting a leading qualitative expert. Investigator triangulation was also employed by having two researchers code each transcript and three researchers to analyze the data using content analysis. Dependability and confirmability (adequately descriptive and accurate evidence based directions of the study's method and analysis) were supported by a detailed audit trail that documented and described decisions and theoretical developments, and by memoing- the process of writing down insights, reflections, questions and concerns regarding the analysis and findings. Finally, transferability (analogous to generalizability in quantitative research) was supported by the careful documentation and consideration of demographic data of the participants in this study in the context of larger populations.

## **Findings**

The findings answer the two research questions:

1. In minimally-structured interviews regarding experiences of sexual violence, what attributes of spirituality as defined by the Martsolf and Mickley (1998) model do survivors discuss most frequently?

While all five attributes had text units coded to them, text units were coded most frequently to the attribute of *connecting* (215 text units). When discussing spiritual experiences, participants were most likely to refer to significant relationships they had with God or a higher power. The next most frequently coded attribute was *transcendence* (70 text units). Many participants had experienced a dimension beyond themselves, often described as a presence of a higher being that was manifested by divine gifts or miracles. A fewer number of participants referred to spiritual attributes of: *value* - affirming their spiritual beliefs (39 text units), *becoming* - identifying how the spiritual unfolding of their lives was related in some way to the violence (20 text units), and *meaning* - revealing a sense of purpose or reason for the violence (19 text units). There were no text units coded to the "other" category.

2. When survivors of sexual violence describe their spiritual experiences, what aspects of the attributes of spirituality are particularly salient for them?

The 215 text units related to *connecting* demonstrated three aspects of the spiritual attribute of *connecting*. Among the aspects of *connecting* that were important to survivors of sexual violence were: (a) getting together with others in settings that were seen to be spiritual in nature, (b) connecting to others in very deep and spiritual ways, and (c) connecting with God (or the Lord, Jesus, or higher power).

Many participants talked about how church attendance was meaningful to them in their recovery process. Some had been taught to do so as a child and saw the return to religious services and activities as a sign of moving through or beyond the sexual violence experience. Others began to attend church after the abuse experience and saw church attendance as a way to deal with the negative effects of the abuse. A few participants talked about attendance at church youth group activities or Bible study classes as having importance for them.

Many participants talked about connecting with others in spiritual ways. Of particular significance to survivors was the connection made with others in spiritual support groups. For some participants the spiritual support group was a 12-step program like Alcoholics Anonymous.

Marie, a 43-year-old Caucasian survivor of CSA stated, "Sally was very instrumental, she would call me night and day and prayed for me, right where I was and that's when I started using the book [referring to Alcoholics Anonymous Big Book]." For others it was a church support group in which group members prayed for the concerns of each other and were sometimes referred to as "my church family." A few participants

described spiritual connections with pastors or ministers or lay religious counselors who helped the individual to forgive the perpetrator.

Almost all participants talked about *connecting* in terms of a connection with God (or Jesus, the Lord, a higher power). For some of these participants the connection was described as a "relationship with God/Jesus" and often included the participant's sense of being cared for or loved. The relationship was often depicted as keeping the participant going. Jeanette, a 36-year-old African American who had experienced CSA said "...No matter what I've been through, the Lord has been there for me." Almost all participants talked about connecting with God through prayer and Bible reading. Prayer was mostly described as a way of "getting through" and was seen as "helping me out."

Text units related to *transcendence* were far less numerous. Examples coded as *transcendence* were primarily about God intervening in a supernatural way in the lives of these survivors. Healing (including from alcohol and drug abuse and depression) and sending helpful people into the survivor's life were common ways in which participants described God intervening supernaturally in their situations. A few participants described miraculous events in their lives which they attributed to God's powerful action in their lives. Wanda, a 46-year-old African American survivor of CSA described how she had been miraculously spared when someone shot a gun at her car. "...But it was by the grace of God that he missed that tank by the bat of the eye, only by the grace of God." Some participants described God "talking to me" often telling the participant that the abuse was not their fault. A few participants described feeling protected by God and being blessed.

Text units related to *value* were less common and reflected the spiritual values of the participants that often were expressed as dearly held beliefs. Among these beliefs were a belief in God (or Christ) and His existence, the truth of the Bible (or Torah), and the necessity of attending church. Dwayne, a 45-year-old African American survivor of CSA explained, "... I do believe in the Bible, some things in the Bible. I carried a Bible with me every day." Rarely were references made to the *value* of specific religious doctrines. However, several participants did talk about the importance of their denomination (often Roman Catholic), baptism, and the Golden Rule. Very few of the text units coded to *value* spoke directly to the survivors' experience with sexual violence. Rather *value* text units were primarily about generally held spiritual beliefs that the participant cherished. A few participants shared how holding God as a cherished belief allowed them to avoid suicide.

Text units about *becoming* were discovered in the transcripts of a small group of participants. These text units described how the participants' lives were unfolding from the past to the present and, sometimes, into the future. Many of the participants talked about moving forward with God's help. For some people, *becoming* was described as getting back on track or being brought "back around to accomplish things." In many of these text units the participants talked about saying "goodbye to the old", getting past the abuse, and forgetting the past and working past it. A few participants described this *becoming* in a very specific sense as "becoming a Christian" or being trained or ordained as a pastor or minister. For a few participants, the idea of *becoming* included "being prepared by God for the future", saying "hello to the new", and "looking ahead, not back." This sense of *becoming* was, for these participants, very clearly related to moving from the abuse to a new present and the possibility of a different future. Edward, a 43-year-old African American who survived CSA said, "I always try to look ahead and I try

not to never look back but sometimes you have to look in order to grow in your mind, in your body, and your spirit."

Few text units were about *meaning*. These text units were primarily about God having a plan for the participant's life in which the abuse makes sense. Adam, a 22-year-old Caucasian who survived CSA reasoned, "[There is] a reason why I was going through this [the abuse], God won't put me through more that I can handle." A few participants talked about a spiritual understanding that the abuse was not their fault and that they were not bad people. Others described understanding the perpetrator as being a sick person in need of forgiveness. A handful of participants attached fatalistic meanings to the abuse including having "bad kharma" or being alive for the purpose of being abused or to suffer.

## Discussion

The Martsolf and Mickley (1998) conceptualization provided a broad operational definition of spirituality that was used to guide what content in a large narrative data set could be considered to be about spirituality. The content analysis was an iterative process that resulted in a modification of the Martsolf and Mickley framework, rendering it more useful for research with a sexual violence population. The methodology of this study therefore provides an example of how an existing theoretical framework can be modified for use with particular populations. The procedure can be replicated with any population for whom spirituality is likely to contribute to healing for some individuals.

Participants in this study did not indicate that spirituality had negative effects on their recovery. Rather, attributes of spirituality as described by the participants were seen as being primarily part of the healing process or indications of healing. This finding is similar to that of Shaw and colleagues (2005) who indicated that spirituality has been shown to be of benefit to the healing of trauma victims.

*Connecting* to others in spiritual settings or in deeply spiritual ways was important to sexual violence survivors who participated in the study. This finding supports findings of prior studies in which religious support was shown to be helpful in coping with sexual violence (Glaister & Abel, 2001; Oaksford & Frude, 2003; Valentine & Feinhauer, 1993). Participants in the current study indicated that *connecting* with a divine being or Higher Power was of particular importance. Previous studies (Draucker & Petrovic, 1996; Smith & Kelly, 2001) have shown that belief in and connection with a higher power can aide in recovery from sexual violence.

That so few text units were coded to *meaning* is of particular interest. Prior studies have shown that for trauma survivors (Shaw et al., 2005) and survivors of sexual violence (Smith & Kelly, 2001) finding meaning is important in the recovery process. Finding meaning for participants in this study was not described as a spiritual process and might have been experienced as more of a psychological process.

Healthcare practitioners who work with female and male survivors of sexual violence could use findings from this study to support spiritual care interventions for this population. Based on the findings, appropriate interventions would be focused on assisting the client to develop meaningful connections in spiritual or faith-based communities, especially for those for whom spirituality has been important in the past.

Connection with specific or formal religious organizations was not described as necessary.

The major limitation of the study is the relatively homogeneous nature of the sample. Reflecting the demographic composition of the sampling area, the sample was comprised of mainly African Americans and Caucasians, with only a few participants from other ethnic groups. The lack of diversity of religious affiliations is particularly limiting, as the majority of the participants considered themselves as Christian. Although some of the attributes reflect beliefs endorsed by many of the world religions (e.g., connection to a higher power, transcendence beyond the self), specific ethnic, cultural, and religious factors are likely to affect which attributes are most meaningful and how the attributes are expressed. For instance: experiencing the supernatural dimension, or TRANSCENDENCE, by praying the Rosary, or receiving Jesus Christ in Holy Eucharist for Roman Catholics; African-American Protestant Christians CONNECTING bv celebrating worships services with lively Gospel hymns and spontaneous prayer; and BECOMING exemplified by a person with alcoholism explaining a surrendering to a "higher power" to forfeit alcohol and maintain sobriety. These findings, therefore, support the need for further research using the Martsolf and Mickley (1998) framework with samples of varying ethnic and religious diversity to help guide culturally sensitive assessments of spiritual attributes.

Sexual violence is a widespread and devastating problem affecting the health of men and women survivors alike. Spirituality, especially as a *connection* made with God/higher power and other individuals in spiritual settings, was shown in this study, guided by the Martsolf and Mickley (1998) spirituality framework, to have benefits for promoting healing in survivors of sexual violence.

#### References

- Berlinger, L., & Elliott, D. M. (2002). Sexual abuse of children. In J. E. B. Myers, L. Berlinger, J. Briere, C. T. Hendrix, C. Jenny, & T. A. Reid (Eds.), *The APSAC handbook on child maltreatment* (2nd ed., pp. 55-78). Thousand Oaks, CA: Sage Publications, Inc.
- Bolen, R. M., & Scannapieco, M. (1999). Prevalence of child sexual abuse: A corrective metanalysis. *Social Service Review*, 73, 281-313.
- Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (2006). Uniform Definitions for Sexual Violence. Retrieved July 10, 2007, from

http://www.cdc.gov/ViolencePrevention/sexualviolence/definitions.html

- Clarke, J. (2006). A discussion paper about 'meaning' in the nursing literature on spirituality: An interpretation of meaning as "ultimate concern" using the work of Paul Tillich. *International Journal of Nursing Studies*, *43*, 915-921.
- Draucker, C. B. (1997). Early family life and victimization in the lives of women. *Research in Nursing and Health, 20, 399-412.*
- Draucker, C. B., & Petrovic, K. (1996). Healing of adult male survivors of childhood sexual abuse. *Image: The Journal of Nursing Scholarship*, 28(4), 325-330.

- Elliott, D. M., Mok, D. S., & Briere, J. (2004). Adult sexual assault: Prevalence, symptomatology, and sex differences in a general population. *Journal of Traumatic Stress*, 17(3), 203-211.
- Foa, E. B., Zoellner, L. A., & Feeny, N. C. (2006). An evaluation of three brief programs for facilitating recovery after assault. *Journal of Traumatic Stress*, *19*(1), 29-43.
- Giesbrecht, N., & Sevcik, I. (2000). The process of recovery and rebuilding among abused women in the conservative evangelical subculture. *Journal of Family Violence*, 15, 229-248.
- Glaister, J. A., & Abel, E. (2001). Experiences of women healing from childhood sexual abuse. *Archives of Psychiatric Nursing*, 15(4), 188-194.
- Golding, J. M., Wilsnak, S. C., & Cooper, M. L. (2002). Sexual assault history and social support: Six general population studies. *Journal of Traumatic Stress*, 15(3), 187-197.
- Kendall-Tackett, K. (2002). The health effects of childhood abuse: Four pathways by which abuse can influence health. *Child Abuse and Neglect*, *26*, 715-729.
- Krippendorf, K. (1980). Content analysis: An introduction to its methodology. Beverly Hills, CA: Sage.
- Koss, M. P., Figueredo, A. J., & Prince, R. J. (2002). Cognitive mediation of rape's mental, physical, and social health impact: Tests of four models in cross-sectional data. *Journal of Consulting and Clinical Psychology*, 20(4), 926-941.
- Lincoln, Y., & Guba, E. (1985). Naturalistic inquiry. Newbury Park, CA: Sage.
- Martsolf, D. S., & Draucker, C. B. (2005). Psychotherapy approaches for adult survivors of childhood sexual abuse: An integrative review of outcomes research. *Issues in Mental Health Nursing*, 26, 801-825
- Martsolf, D., & Mickley, J. (1998). The concept of spirituality in nursing theories: Differing world-views and extent of focus. *Journal of Advanced Nursing*, 27, 294-303.
- McEwen, M. (2005). Spiritual nursing care: State of the art. *Holistic Nursing Practice*, 19(4), 161-168.
- McSherry, W., Cash, K., & Ross, L. (2004). Meaning of spirituality: Implications for nursing practice. *Journal of Clinical Nursing*, 13(8), 934-941.
- Meehan, T. (2003). Careful nursing: A model for contemporary nursing practice. *Journal* of Advanced Nursing, 44(1), 99-107.
- Miles, M., & Huberman, M. (1984). *Qualitative data analysis: A sourcebook of new methods*. Beverly Hills: Sage.
- Miner-Williams, D. (2006). Putting a puzzle together: Making spirituality meaningful for nursing using an evolving theoretical framework. *Journal of Clinical Nursing*, 15, 811-821.
- Oaksford, K., & Frude, N. (2003). The process of coping following child sexual abuse: A qualitative study. *Journal of Child Sexual Abuse*, *12*(2), 41-72.
- Perrott, K., Morris, E., Martin, J., & Romans, S. (1998). Cognitive coping styles of women sexually abused in childhood: A qualitative study. *Child Abuse & Neglect*, 22(11), 1135-1149.
- QSR International Pty Ltd. (2002). N6 Qualitative Data Analysis Program (Version 6 ed.) [Computer software]. Cambridge, MA: Author.

- Random House (2001). *Random House Webster's unabridged dictionary*. (2nd ed.). New York: Random House Reference.
- Shaw, A., Joseph, S., & Linley, P. A. (2005). Religion, spirituality, and posttraumatic growth: A systematic review. *Mental Health, Religion, & Culture, 8*(1), 1-11.
- Smith, M., & Kelly, L. (2001). The journey of recovery after a rape experience. *Issues in Mental Health Nursing*, 22(4), 337-352.
- Tanyi, R. (2002). Towards clarification of the meaning of spirituality. *Journal of* Advanced Nursing, 39(5), 500-509.
- United Nations Development Fund for Women. (2007). Violence against women: Facts and figures. Retrieved July 12, 2007, from http://www.unifem.org/attachments/gender\_issues/violence\_against\_women/facts \_figures\_violence\_against\_women\_2007.pdf
- Valentine, L., & Feinhauer, L. L. (1993). Resilience factors associated with female survivors of childhood sexual abuse. *The American Journal of Family Therapy*, 21(3), 216-224.
- World Health Organization, Department of Reproductive Health and Research. (2004). *Progress in reproductive health research: Sexual health – A new focus for WHO*. Geneva: World Health Organization.

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