ATTRIBUTION OF BLAME IN INCEST CASES AMONG A SAMPLE OF STUDENTS AND PARENTS IN THE LIMPOPO PROVINCE (SOUTH AFRICA)

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Abstract

This study is an investigation into how people attribute blame in incest cases. 200 students from the University of the North, 100 learners from a high school in Dalmada near Pietersburg in the Limpopo Province and 100 of their parents participated in the study. The Jackson Incest Blame Scale was used. Results showed that students blamed situational factors for the occurrence of incest more than parents did. The students tended also to blame victim factors more than parents did. Parents generally blamed offenders more than non-offender factors. Males attribute more blame to victim factors than to non-victim factors. There was a significant positive correlation between age and attribution of blame to situational factors. Non-Christians were found to attribute blame to societal factors more than Christians do. Students attribute more blame to victim factors than parents did. The findings in this study indicated a pattern of offender blame avoidance. This could lead to further victimisation of the victims, absolving of the perpetrators of any wrongdoing, and both victims and perpetrators losing the opportunity to get relevant therapy in order to restore normal functioning.

Key words: incest, attribution of blame, South Africa.

Résumé

Cette étude est une recherche sur la façon dont la responsabilité est attribuée dans les cas d'inceste. Deux cents étudiants de l'Université du Nord, cent élèves d'une école secondaire de Dalmada près de la ville de Pietersburg et cent de leur parents ont pris part à l'étude. L'Echelle de Responsabilité de l'Inceste de Jackson (The Jackson Incest Blame Scale) a été utilisée. Les résultats
résultats montrent que les étudiants ont plus attribué la responsabilité aux facteurs ayant trait à la situation que leurs parents. Les étudiants avaient plus tendance à attribuer la responsabilité aux facteurs relatifs aux victimes que leurs parents. Les parents généralement attribuaient la responsabilité de l'inceste plus aux facteurs relatifs aux offenseurs que sur les facteurs non-relatifs aux offenseurs. Les hommes ont attribué la responsabilité plus sur les facteurs relatifs aux offenseurs que sur les facteurs non-relatifs aux offenseurs. Il y avait une corrélation positive significative entre l'âge et l'attribution de la responsabilité aux facteurs relatifs à la situation. Les non-chrétiens ont attribué la responsabilité de l'inceste plus aux facteurs relatifs à la société que les chrétiens. Plus spécifiquement, ils ont attribué la responsabilité aux valeurs sociales du moment comme ayant encouragé ou maintenu l'inceste. Les étudiants ont attribué la responsabilité plus aux facteurs relatifs aux victimes que les parents. Les résultats de cette étude indiquent une tendance des offenseurs évitant la responsabilité. Ceci conduirait à plus de victimisation des victimes, l'absolution des offenseurs et la perte par les victimes et les offenseurs de l'occasion d'obtenir la thérapie nécessaire pour restorer le fonctionnement normal.

Mots clés: inceste, attribution de la responsabilité, Afrique du Sud

Introduction

Research Problem
South Africa is rated as one of the countries with the highest rate of incest (Russel, 1995). Compared with 16 other countries in Europe and the United States of America, it is rated fourth. South Africa has a prevalence rate of incestuous abuse of girls of 10% while the others range from 2% in France, Great Britain and Sweden, to 16% in the Netherlands (Russel, 1995). Also, in a study carried out by Madu, Peltzer, and Mashego (1998) in the Limpopo Province, the overall prevalence of childhood incestuous abuse among their participants was found to be 15,2%. This was found to be similar to other studies carried out by Russel (1986) in the USA where the prevalence was 16,0%, and by Collings (1997) among South African women students, where the prevalence was 13,0%.

Various authors have pointed out that sexually abused children, like rape victims, are often held responsible for their own victimisation (DeYoung, 1982; Sandfort, 1984). The amount of responsibility attributed to the child victim of sexual abuse varies from one extreme of total attribution to the perpetrator, to collaborative responsibility, to greater responsibility for the child who is seen as provocateur. When the child is seen as responsible,
the sexual abuse is often viewed as not being detrimental to the victim (Broussard & Wagner, 1988).

According to Burt and Estep (1981), for a sexual assault victim to qualify for assistance from society, the victim usually must demonstrate active resistance to the attack or other circumstances of reduced responsibility such as unconsciousness, insanity, mental retardation or insufficient maturity to make a choice. The implication here is that if none of the above-mentioned circumstances apply, the blame then would be attributed to the victim. Such attribution of blame may not only affect the reporting of incest, but it may also influence the quality of legal and health services which victims and offenders receive (Jackson & Ferguson, 1983).

**Theoretical Concepts**

Incest is defined as sexual contact between family members, including not just sexual intercourse, but also mutual masturbation, hand-genital or oral-genital contact, sexual fondling, exhibition, and even sexual propositioning (Finkelhor, 1979; Zaphiris, 1978). According to the law in South Africa, incest is defined as the unlawful and intentional sexual intercourse between male and female persons who are prohibited from marrying each other because they are related within the prohibited degree of consanguinity, affinity or adoptive relationship (Cronje, 1991). Consanguinity refers to blood relatives with a common ancestor and having a direct line of descendants or ascendants as in parents and children, grandparents and grandchildren. In affinity, the sexual relations will be between the man and his ex-wife’s blood relatives, including ex-mother-in-law, a woman with her ex-husband’s blood relatives, including the former grandparents-in-law, and stepchildren. Adoptive relatives include parents and adopted children. Incest is defined as “any sexual encounter between a child and an older family member (parent, stepparent, or sibling) or extended family member (uncle or grandparent) or surrogate parent figure (common law spouse or foster parent), which exploits the child’s vulnerability” (Sandler & Sepel, 1990, p.217).

In most African cultures, incest is considered to be taboo, and severe punishment may befall the incest perpetrator. It is believed that disaster or great unhappiness will befall the transgressors, and also that the offspring of incest will be born with physical and mental deficiencies (Monnig, 1967). Irrespective of the incest cultural taboo, some forms of incest are sanctioned. For example, marriage between cousins is sanctioned and in instances where the wife is barren, the younger sister is introduced into the marriage to rescue it and have children on her sister’s behalf (Mashego, 1999). Blame or responsibility for incest is mostly affected by the manner in which the victims responded to the perpetrators. When the victims responded in what was perceived as an encouraging manner, or were passive, they were rated as more
responsible for the encounter, and the perpetrators as less responsible (Brous­
sard & Wagner, 1988; Waterman & Foss-Goodman, 1984). Attribution is
based on acts, appearances and all observable events as organised by the at­
tributer into a conception of the underlying entities to which they appear to

Attribution of Blame in Incest Cases
Jackson and Ferguson (1983) identified five factors in blame attribution in
incest cases. The factors are: victim blame, where the victim is seen as pro­
voking the rape; offender blame, where the blame is attributed to the perpe­
trator because of her/his deviant behaviour; society blame, in which prevail­
ing societal values were blamed for encouraging or maintaining the occur­
rence of assault; situational blame, which includes geographical and situ­
tional variables, as well as family system values, and offender mental status
or characteristics (see also McKenzie & Calder, 1993).

A study was conducted by Saunders (1988) among the following So­
cial Work and Judicial System Professionals in the US: public child welfare
social workers, police officers, district attorneys, public defenders and district
justices and common pleas court judges. Their way of attributing blame in
child sexual abuse was found to be consistent with the roles assigned to them.
The social workers, police and district attorneys were found to believe the
child victims more and hence to advocate for them. Public defenders were
found to be strong advocates for the offenders, and the judges to be more
neutral regarding both the victim and the offender (Saunders, 1988).

Reidy and Hochstadt (1993), regarding attribution of blame, carried
out a study among the following mental health professionals in the US: psy­
chologists, psychiatrists, social workers and marriage, child and family coun­
sellors of both sexes in incest cases. Their findings indicated that the mental
health professionals did not blame the victim, in contrast to earlier work car­
rried out by Virkunnen (1981). The blame was placed squarely on the perpe­
trator. According to Reidy and Hochstadt (1993), clinician experience in
treating child abuse victims was found to influence the attribution of blame to
societal factors. Psychologists and psychiatrists also tended to attribute more
blame to situational factors like broken homes in slums or bad areas, more
than social workers and counsellors. An emergence of gender differences was
noted, with males blaming more environmental factors than females.

A small number of mental health professionals, about 10%, tended to
attribute blame to the mother, and this was also consistent with a study con­
ducted by Kalichman, Craig and Crowe (1986) in the US, where 20% of the
respondents blamed the mother. Even if the influence of the mothers is per­
ceived as small, it is none the less important.
According to Ehrmin (1996), it is the responsibility of mental health professionals when dealing with abused children and their families, to gather all facts properly before making evaluations like blaming the mother. This view is shared by Herman (1981, p.36), who also believes that blaming the mother portrays the offender as not guilty for his behaviour, but the culprits as being the 'Seductive Daughter and the Collusive Mother'. Blaming the mother (where she is not the perpetrator) is said to attribute major responsibility to the non-perpetrator for the perpetrator's actions.

The purpose of the present study is to identify the main patterns of attribution of blame by the community. The understanding of how blame of incest is attributed may provide an answer to the question of why this social problem has continued unabated. Besides, the understanding of the thinking patterns on incest in the community would inform education and prevention efforts.

**Hypothesis**

In this study, the hypotheses are as follows:

1. Students attribute more blame to situational factors than to non-situational factors.
2. Parents attribute more blame to offender factors than to non-offender factors.
3. Males attribute blame more to victim factors than females do.
4. Age will correlate positively with attribution of blame to situational factors among all the participants.
5. Christians attribute blame more to societal factors than non-Christians do.
6. Parents attribute blame differently from students.

**Method**

**Participants**

The participants were selected among both male and female students at the University of the North; high school students from a high school in Dalmada, near Pietersburg; and parents of high school students. A sample of 200 students was selected from the university. One of the authors went to all the major classrooms and appealed to students to come to a particular hall on a particular date and time to participate in the study. Posters were also put up in strategic corners of the university making the same request. The first 50 students who came from each of the four faculties (Arts, Law, Education and Health) were included in the study. The researcher also went to all the classes (Grade 8 to 12) of the high school and appealed to them to participate in the study. The first 20 students from a grade who indicated the readinessnes to
participate were included for the study. Also on a parents' meeting day for the high school, the researcher appealed to the parents present to participate in the study. The first 50 men and 50 women who agreed to participate were included in the study.

The socio-biographic characteristics of the participants were as follows: 216 (54%) were females and 184 (46%) were males. Of these 357 (89.25%) were Christians and 37 (9.25%) were non-Christians. 161 (40.25%) were Sotho (Northern Sotho, South Sotho & Tswana), 120 (30%) were Tsonga, 69 (17.25%) were Venda, and 32 (8%) were Nguni (Zulu, Swazi & Xhosa). 117 (29.25%) were married, 252 (63%) were single and 29 (7.25%) were widowed/divorced. The age range of all participants was from 12 to 62 years.

Instrument
The Jackson Incest Blame Scale (JIBS) (Jackson & Ferguson, 1983), which contains 20 statements designed to represent ways in which people may attribute blame in incest, was used. Respondents were asked to indicate their level of agreement with each question on a scale of 1 to 5, with 1 indicating strong disagreement, and 5, strong agreement (McKenzie & Calder, 1993).

The scale which originally referred to fathers as perpetrators and daughters as victims was modified by the authors, to accommodate all types of perpetrators and victims. In this study perpetrators refer to all blood relatives, and victims can be of either sex.

The sub-scale items for the Jackson Incest Blame Scale are as follows: six set of questions that refer to Victim Factors (blaming the victim); five set of questions that refer to Societal Factors (putting blame on current morality, media, regarding people as sex objects, societal values, sexually unhealthy society); five set of questions that refer to Situational Factors (putting blame on broken homes, alcohol and drug usage by the perpetrator, family poor interpersonal relationships, slum or bad areas, social isolation of families); two set of questions that refer to Offender Factors (blaming the perpetrator, personality traits of perpetrator); and two set of questions that refer to Offender Mental Status (blaming the mental health of the perpetrator, personality peculiarities of perpetrator) (McKenzie & Calder, 1993). The possible responses range from "strongly disagree" (1) to "strongly agree" (5).

Studies have been done in which factorial validity of this scale was established (McKenzie & Calder, 1993). For example, the JIBS yielded a Cronbach's alpha of .71 when tested for internal consistency, which reflects a psychometrically acceptable internal consistency, especially in the light of its multi-factorial nature (Jackson & Ferguson, 1983). The questionnaire for this study consists of two sections, with the first section containing biographical data, namely: age, sex, ethnic group, place of origin, marital status, type of
participants (university students, high school students and their parents), and their religion. The second section is the JIBS itself. The questionnaire was available in English, Northern Sotho, Tsonga, Venda and Nguni languages. The translation and back-translation method (by experts) was used to translate the original English version into the other languages. In the present study, the Cronbach's alpha is 0.73.

**Procedure**

Permission was obtained from the principal of the high school, from the children’s parents, who were asked to sign a consent form on behalf of their children, from the deans of the different faculties at the university, and from the university students themselves who signed consent forms.

On the agreed dates, a research assistant administered the questionnaires to the selected students in their classes. The questionnaire for parents was administered in the school hall on a parents’ meeting day. The purpose of the study was explained to all the participants, who were then allowed to ask any questions regarding the research before completing the questionnaires. The questionnaires were collected immediately after being completed.

Since incest is an emotional issue, those who felt emotionally aroused because it had happened to them or to their children, were offered an opportunity to contact the researchers (who are both clinical psychologists) for psychological help through their telephone numbers and addresses given to the participants. Alternatively they could contact any clinical psychologist, counsellor or psychotherapist in their area.

A promise was made to make the results of the study available to the high school principal and the university for use in planning for future health education programmes, and to the chairperson of the school parents’ association for parents’ information.

**Statistical Analysis**

The Statistical Package for Social Sciences (SPSS) was used to analyse the data, i.e. frequencies and t-test for testing the hypotheses.

**Results**

**Frequency and Mean Scores**
Table 1 illustrates how different participants (students and parents), attribute blame to all the different factors as discussed above.
Table 1: Patterns of Attribution of Blame in Incest Cases by Students and Parents.

<table>
<thead>
<tr>
<th>Patterns (Factors)</th>
<th>Situational</th>
<th>Offender</th>
<th>Victim</th>
<th>Societal</th>
<th>Offender Mental Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Students</td>
<td>3.79</td>
<td>0.96</td>
<td>3.78</td>
<td>0.66</td>
<td>2.52</td>
</tr>
<tr>
<td>Parents</td>
<td>3.95</td>
<td>0.96</td>
<td>3.79</td>
<td>0.66</td>
<td>2.29</td>
</tr>
</tbody>
</table>

The above mean scores will be used later to calculate the differences. The homogeneity of variance assumption was not violated since the p-value for all the factors are higher than 0.05.

Test of Hypotheses

Hypothesis 1 says that Students attribute more blame to situational factors than to non-situational factors. Paired Sample t-test analysis indicates that students attribute blame more to the situational factors than to non-situational factors (mean score for situational factors = 3.79, mean score for non-situational factors = 3.26; t = 11.73, df = 298, p<0.01, Std Error Mean = 0.05). (The mean score for non-situational factors is derived by calculating the average of the sum of scores on all the factors excluding situational factors.) Thus, the hypothesis is supported.

The second hypothesis says that parents attribute more blame to offender factors than to non-offender factors.

Paired Sample t-test analysis indicates that parents attribute blame to offender factors more than to non-offender factors (mean score for offender factors = 3.75, mean score for non-offender factors = 3.20; t = 12.23, df = 99, p<0.01, Std Error Mean = 0.05). (The mean score for non-offender factors is derived by calculating the average of the sum of scores on all the factors excluding offender factors.) Thus, the hypothesis is supported.

The third hypothesis says that males attribute blame more to victim factors than females do.

A t-test for Equality of Means indicates that males attribute blame to victim factors more than females do (mean score for males = 19.69, mean score for females = 17.26; t = 7.10, df = 398, p< 0.01, Std Error Mean = 0.34). (The mean scores for males and females were derived by calculating the average of their sum of scores on victim factors.) Thus, the hypothesis is supported.
The fourth hypothesis says that age will correlate positively with attribution of blame to situational factors among all the participants. The Pearson Correlation shows that there is a significant positive correlation between age and attribution of blame to situational factors among all the participants (N=400, r=0.16, p<0.01). Thus, the hypothesis is supported.

The fifth hypothesis says that Christians attribute blames more to societal factors than non-Christians do. A t-test for Equality of Means indicates that non-Christians blame societal factors for incest more than Christians do (mean score for Christians = 18.15, mean score for non-Christians = 19.92; t = -2.35, df=392, p<0.01, Std Error Difference) = 0.75.) (The mean scores for Christians and non-Christians were derived by calculating the average of their sum of scores on societal factors.) Thus, the hypothesis is supported.

The sixth hypothesis says that parents attribute blame differently from students. A Multivariate Analysis of the data shows that on the overall, there is a significant difference between the scores of the students and those of the parents (F=2.22, df=15, p<0.01).

Table 2 indicates whether there is a significant difference between the scores of parents and that of students attributing blame in each of the factors.

Table 2: Comparisons between how Parents and Students Attribute Blame Regarding all the Factors.

<table>
<thead>
<tr>
<th>Factors</th>
<th>t</th>
<th>df</th>
<th>Sig. (2-tailed)</th>
<th>Mean Difference</th>
<th>Std. Error Difference</th>
<th>95% Confidence Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victim*</td>
<td>3.63</td>
<td>397</td>
<td>0.00</td>
<td>0.24</td>
<td>0.07</td>
<td>0.12 - 0.36</td>
</tr>
<tr>
<td>Societal*</td>
<td>-0.47</td>
<td>397</td>
<td>0.64</td>
<td>-0.05</td>
<td>0.10</td>
<td>-0.25 - 0.15</td>
</tr>
<tr>
<td>Situational*</td>
<td>-1.45</td>
<td>397</td>
<td>0.15</td>
<td>-0.16</td>
<td>0.11</td>
<td>-0.38 - 0.06</td>
</tr>
<tr>
<td>Offender*</td>
<td>-0.23</td>
<td>397</td>
<td>0.81</td>
<td>-0.02</td>
<td>0.08</td>
<td>-0.17 - 0.13</td>
</tr>
<tr>
<td>Offender mental status*</td>
<td>1.79</td>
<td>397</td>
<td>0.08</td>
<td>0.26</td>
<td>0.15</td>
<td>-0.03 - 0.54</td>
</tr>
</tbody>
</table>

* Equal variance assumed.

A t-test for Equality of Means indicates that the patterns of blame attribution do not differ significantly between parents and students, except in the case of
attribution of blame to victim factors. Students attribute blame more to victim factors than parents do (t = 3.63, df = 397, p <0.05). Thus, the hypothesis is supported only in the case of victim factors.

Discussion

In this study students were found to attribute more blame to situational factors than to non-situational factors. This is in line with studies carried out by Finkelhor (1979) among American college students. They were found to attribute blame to situational factors, such as broken homes. This usually results from the introduction of a stepparent, mostly a stepfather. The stepfather may see the children as strangers to him, since he was not present when they were growing up. He may therefore harbour no protective or parental instincts for them and could view teenage girls as potential sexual partners. Children who have been sexually molested by their biological father before family break-ups may display inappropriate sexual behaviour like acting seductively towards the new addition in the family, namely the stepfather, which can be taken advantage of by him. Sibling incest may also occur in broken homes because the children are often neglected and can turn to each other for warmth and comfort (Finkelhor, 1979). According to the African culture, incest is regarded as taboo, irrespective of the situational factors. One common situational factor to which blame is attributed is the failure of the mother to look well after her children and hence teach them to respect their elders, especially their fathers, who are the authority figures. They are expected to be the protectors of their children, and hence should guide their daughters in proper dress code to prevent incest. The absence of the mother has also been found to be a situational factor blamed in incest occurrence in the African culture, as this allowed the father and daughter to become close, and this could lead to incest (Mashego, 1999).

Parents have been found to attribute more blame to the offender factors than to non-offender factors in this study. This agrees with studies carried out among mental health professionals in the northern California area. The participants were mostly married and they were parents. The professionals were psychologists, psychiatrists, social workers and (marriage, child and family) counsellors of both sexes. The findings indicated that mental health professionals attributed blame on perpetrators (Reidy & Hochstadt, 1993). This contrasted with a study, which had been carried out by Virkunnen (1981) in the UK, which had indicated that professionals attributed blame to victim factors. The present way of blame attribution (offender blame) was thought to be due to a change in attitude based on experience gained through working with more abused children. Another study carried out by Saunders (1988), in a
large urban county in an eastern state of the United States among social work and judicial system professionals (who were presumably also parents), indicated that attribution of blame was based on the roles assigned to them.

Social workers, police and district attorneys were found to advocate more for victims and to blame the offender, as opposed to public defenders who were found to be strong advocates for the offenders. Judges were found to be neutral. In the African culture the blame is shifted from the offender to offender mental status factors, where the offender is said to have been mentally ill through being bewitched as no illness occurs as a result of chance (Manyike & Evans, 1998).

In this study males attribute blame more to victim factors than females do. This agrees with findings from studies carried out by Jackson and Ferguson (1983) among undergraduate psychology students at the University of Dakota (USA), and those carried out by Doughty and Schneider (1987) among lawyers and clinicians in Canada. Again in studies carried out by James and MacKinnon (1990) in Canada, and Herman (1992) in Cambridge (UK), males were found to attribute more blame to victims. According to the above authors, blaming especially the female victim was consistent with negative and sexist attitudes within the society. In the studies carried out by Broussard and Wagner (1988) among undergraduate students in the University of Southern Mississippi (USA), and that by Collings and Payne (1991) among undergraduate psychology students at the University of Natal (South Africa), victims were blamed for incest, by both sexes. It was indicated that the victims had reacted passively in incestuous encounters, instead of trying to fight off the perpetrators. Again blame was attributed to the victims according to their age, with older children being seen by both sexes as more responsible for the incest than the younger ones. Male respondents in the studies attributed more blame to male victims and regarded them as responsible for the abuse. Lay people, such as teachers, were also found to attribute more blame to the child victim in a study carried out among teachers and social workers in the USA (Johnson, Dewey & Eisenberg, 1990). In the African culture the victim is seen as responsible for the incestuous abuse mostly by females if the victim is seen as disrespectful to elders and if the victim dresses inappropriately or participates in the incestuous encounter for economic reasons (Mashego, 2000).

In this study a significant positive correlation was found between age and attribution of blame to situational factors. Studies carried out by Reidy and Hochstadt (1993) among mental health professionals in the northern part of California also indicated that professionals such as psychologists and psychiatrists also tended to attribute more blame to situational factors. They attributed more blame to situational factors, such as broken homes in slum or bad areas, more than social workers and counsellors. An emergence of gender
differences was noted, with males blaming more environmental factors than females. All these findings indicate that attribution of blame to situational factors and age correlate positively.

In this study it was found that non-Christians attribute more blame to societal factors than Christians do. According to a study carried out by Reidy and Hochstadt (1993) among mental health professionals, clinician experience in treating child abuse victims was found to influence the attribution of blame to societal factors. Indeed the more experience the clinicians gained, the more likely it was that they would give more consideration to other factors than victim or offender factors. In the above study the religious inclinations of the participants were not noted. In a study carried out by Jackson and Ferguson (1983), it was found that victims of past sexual abuse blamed societal factors more than non-victims did. In a study carried out by MacKenzie and Calder (1993), no significant difference was found among victims and non-victims regarding the societal factor subscale. Also in these studies the religious inclination of the participants was not noted.

In this study, differences in attribution of blame between parents and students regarding all the different factors, was also analysed. The only significant difference was noted for attribution of blame regarding factor 1, which represents victim factors. Here it was found that students tended to attribute more blame to victim factors than parents did. This agrees with a study carried out by Broussard and Wagner (1988) in the University of Mississippi, where students attributed significantly more responsibility to the child victim, especially where the child was described as being passive or encouraging the encounter. Again in a study carried out by Collings and Payne (1991) amongst undergraduate psychology students at the University of Natal (South Africa), students tended to blame the victim more, influenced among other things, by expectations of child self-protection. This implies that victims, who were passive during the encounter, were regarded as responsible for the encounter, as compared to those who tried to fight off the perpetrator. Regarding attribution of blame to the other factors, the attributional pattern of blame of the parents and the students were not significantly different.

**Implications of this study for psychotherapy**

From this study it has been noted that both the victim and the offender have often been blamed by the different participants for the incestuous abuse. This implies that in order for harmony to be restored to the family, all the above should receive psychotherapy. All should receive individual therapy initially because their emotional needs would be different, then perpetrators should join other perpetrators for group therapy. Thereafter the victim and the perpetrator should undergo therapy together to facilitate reconciliation between them, and thereafter the mother, (where she is not the offender), should join
them. The mother is an important part of therapy as she will be able to bring
the family together again and she should learn to support the victim as she/he
recovers from the abuse. Then all family members should join the therapy,
more specifically intensive family therapy. Family therapy in African culture
should also involve the extended family members for harmony restoration
procedures.

Limitations of the study
In this study there were more female participants than males, especially
among the students. Besides, more of the participants were Christians, which
could have influenced their responses. No qualitative method (e.g., focus
group discussions and in depth interviews of key informants) was employed
to throw more light on the qualitative results.

Conclusion
In conclusion, this study has established that different groups of people differ
in how they attribute blame in incest cases. Parents, having more life experi­
ences, tend to blame more the perpetrators than students do. On the other
hand, students tend to blame the victim more. This can lead to serious set­
backs regarding treatment and rehabilitation programmes for both victims
and perpetrators. Situational factors tend to be blamed by both parents and
students, which to some extent tends to shift the responsibility away from the
perpetrator. Attribution of blame to societal factors appears to be signifi­
cantly less. Given all the differences in attribution of blame in incest cases,
educational programmes that benefit the victims, the perpetrators, their fami­
lies and communities should be established.

Recommendations
The fact that students attribute blame more to the victims suggests that the
public needs educational programmes that will change their perceptions of
incest victims as being responsible for their victimisation. Mental health pro­
fessionals, nurses and teachers, would benefit much from the education, and
also be able to pass the knowledge to their subordinates. The educational pro­
grames will help the public to understand that child victims, even if they
seem passive in incestuous encounters, are often subdued by the strength and
authority level of the perpetrator. The educational programmes should also
empower the children to be able to talk about the abuse and not to keep it se­
cret. Family oriented treatment and rehabilitation programmes should be
conducted, whereby all the family members will benefit and be able to func­
tion as a family unit.
References


A Comparison of Mental Health Professionals Child Abuse and Neglect, 17, 371 – 381.


Cape Town: Oxford University Press.


