

Children as Our Concern - Identifying A Sexually Abused Child

Susan Wesley Nalli

Abstract

'Sexual abuse' covers a wide range of unwanted sexual behaviors that are often used by offenders. There are many myths around what constitutes sexual assault is. If a child is sexually assaulted, they might experience a range of emotions and it's important to know there are support services that can help them. Sexual assault has not always been about sex or abuse, but it has been a way of showing power and control over someone, especially children who are easy prey and vulnerable. Sexual abuse is a serious crime and is never the fault of the victim.¹ Most often victims take it as their fault and end up with emotional struggle. The word abuse comes in various forms in relating to children, like luring the children for money or gifts, drug sexting or child pornography.

Keyword: Sexual Abuse; Assault; Child Sexual Abuse; Contact Abuse²; Non contact Abuse².

How to cite this article:

Susan Wesley Nalli / Children as Our Concern - Identifying A Sexually Abused Child. J Psychiatr Nurs. 2020;9(3):103–106.

Introduction

Sexual abuse assault is any unwanted sexual behavior that makes a person feel uncomfortable, threatened or scared which may further destroy them physically, emotionally and psychologically resulting in unseen trauma and pain enduring for their lifetime.

Facts about sexual abuse:

- Sexual abuse can happen to both girls and boys.³
- Abuse is often by a stranger, somebody you love and trust or a boyfriend or girlfriend
- Abuser might prefer same sex sometimes.
- Sexual abuse isn't always 'full sex'⁴ – it can also include touching, kissing, oral sex or anything sexual

- Sexual abuse can happen online as well as offline.⁵

Meaning: Child Sexual abuse is often done to a child by a caregiver / or trusted entity, where any completed or attempted sexual act, sexual contact, or exploitation may take place.

It covers:

- Rape: Physical abuse - forced, unwanted sex or sexual acts.
- Indecent assault⁶: indecent is related to a behavior - before, during or after an assault.
- Emotional assault

How Prevalent is Child Sexual Abuse

The exposure of a child to a sexual experience that is inappropriate for his or her emotional and developmental level and that is coercive in nature. It is estimated that 1 in 6 women and 1 In 20 children (fig. 1)⁷ are sexually abused. One study found that women who were abused prior to age 12 were more likely to have body dissatisfaction and meet criteria for eating disorders.

They speculate that early childhood sexual abuse may predispose females to eating disorders later in life. Child sexual abuse (CSA) involving sexual contact between an adult and a child (either forced or seduced). It has been reported by approximately 20% of men⁸ and 5 to 10% of women⁹ worldwide

Author Affiliation

Assistant Professor, Department of Nursing, Smt Sudha Devi Memorial Government Nursing college, Kawarda, Chattisgarh 491995, India.

Corresponding Author: Susan Wesley Nalli, Assistant Professor, Department of Nursing, Smt Sudha Devi Memorial Government Nursing college, Kawarda, Chattisgarh 491995, India.

E-mail: susan.nalli@yahoo.com

have a serious mental and physical health problems, substance abuse, and criminality in adulthood which is forcing into abusing the children or adults in various forms. Child sexual abuse research policy forum 2017 (CSA)¹⁰



Fig 1: One in 20 children is prone to child abuse by 2020 (as per central violence control force- 2013)

Types

There are 2 different types of child sexual abuse. These are called contact abuse and non-contact abuse.

Contact abuse² involves touching in various ways

It includes:

- Touching of any part of the body whether the child is covered in clothes or not.
- Penetrating by putting an object or body part inside a child's mouth, vagina or anus.
- Forced sexual activity.
- Making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities, such as grooming, exploitation, persuading children to perform sexual acts over the internet and flashing. It includes:

- Encouraging a child to see or understand sex.
- Meeting a child following sexual grooming with the intent of abusing them
- Online abuse including making, viewing or distributing child abuse images
- Allowing someone else to make, view or distribute child abuse images
- Involving a child in watching pornographic content.
- Child exploitation or Sexually exploiting a child for money, power or status.

Clinical Picture

Effectuated may show the following symptoms:

Everyone reacts differently to sexual assault. All of the following responses are normal:

Shock and denial¹¹: the child might come up with questions like, why me? Did this happen to me? Will people believe me, if I open up?

Fear: fear of not being taken seriously, fear of offender, fear of not being believed.

Silence¹²: Out of fear of being judged most of the time, preferring to keep quiet even with close ones with the fear of abandonment.

Feelings of anxiety: feeling unsafe or unable to relax.

Sadness:

Guilt and blame¹³: questions like 'Why did I allow it/ why did I not fight back?'

Low self-esteem: feelings of self-unworthiness

Isolation: isolating self from family and friends.

Nightmares and flashbacks: constant images of memories of the assault flash before your eyes in your daily life and sleep.

Mood swings: moods of anger and rage, to tears and despair, and back again.

Loss of trust: Finding it hard to trust people in your social circle or family.

History taking¹⁴

- Focus on the genitourinary system (rectal or genital bleeding or other complaints) as well as behavioral issues (phobias, sleep disorders, etc.).
- Use an open ended interview style, preferring child's utterances.

Physical Examination

- Preferably by photographs, a detailed way of documenting trauma will be helpful; it can also be done by detailed illustrations.
- Major variations of the hymen or anus are often seen in abused children and minor variations in nonabused children.¹⁵

Children as our Concern: Included from Various Research Blogs

Effect of Sexual Abuse on Childhood Sexual Knowledge (CSK)¹⁶:

Sexual abuse affects children's sexual knowledge, as well as their sexual behavior. An exposure to sex, or full sex, or an abuse related to sex, has made sexually abused children more sex - knowledgeable than children who have never been exposed to sex or assaults previously. Sexually abused preschool-aged children are at greater risk for inappropriate

sexual behaviors (35%) than are sexually abused school-aged children (6%).

Sexual Behaviour Problems (SBP) in children¹⁷:

There may not be enough demonstration of SBPs in children, yet the presence of SBPs raises concern about child sexual abuse and exposure to sexual material. It is a evident proof that the child has undergone or seen some problematic stuff. Specific sexual behaviors (such as playing with dolls imitating explicit sexual acts and inserting objects in their own vaginas or rectums) are more likely to occur in children who have been sexually abused than in those who do not have a suspected history. The presence of sexual behavior may be enough to suspect sexual abuse and report to Parents or concerned authorities. Professional help may be then needed to further correct these behavior problems.

Body Image disturbance (BID)¹⁸

Sexual abuse has been shown to have long-lasting emotional and physical effects on children / women regardless of the age when the trauma occurred. Survivors of sexual abuse often internalize their symptoms that may lead to depression. In addition, studies have shown that following this experience, the children will have difficulty trusting in relationships, poor self-esteem, sexual problems, and higher rates of substance abuse. There would be dramatic impact on body image, Due to the physical and emotional violation that occurs in sexual abuse.

Presentations of Sexual Abuse In Children¹⁹

There are three common presentations of sexual abuse in children - 1. Presentation with an unmistakable traumatic injury i.e sexually transmitted infection, testimony that sexual abuse has occurred in the context of no physical evidence. There could be ample of evidence for this, yet the child has to be treated carefully, with less questions asked and the child should not feel intimidated in this process.

Teaching Safety Skills and self help/protection to Children:²⁰

As Most sexual abuse is perpetrated by a known individual who would gradually, comply to further win the child's trust initially and later begin with inappropriateness - As per: Clinical and Organizational Applications of Applied Behavior Analysis, 2015²¹

If you've been sexually abused and you're not sure how to bring it up with someone who could

help, try these steps;

- *Pick somebody you trust:* Often a best way to come forward in to communicate it to someone we can trust. Most often it could be a parent, caregiver or sometimes a supportive teacher.
- *Write it down:* venting things which cannot be spoken to anyone is through a form of writing it down in personal diaries.^{22, 23}
- *Get support:* If you have a close friend, you could ask them to be there when you tell somebody.
- *Understand that it's NOT your fault:* You may feel ashamed or embarrassed. But you shouldn't be. And you shouldn't let that stop you talking to someone you trust.
- *Know the Child* - helpline in your country.²⁴

How can we help: The Mental health team

Including psychologists, psychiatrists, social workers, and therapists/counselors, as well as corrections officers and allied professionals have their role into investigating its causes, consequences, and treatment strategies beneficial for children who seem to be suffering. Multiple interviews until the professional gains the trust of the child, might be helpful. These interviews can be in the presence of parent or alone, most preferably, with the due comfort of the child. Interview of the child should be conducted by a mental health professional with expertise in child sexual abuse and the appropriate police agency representative. The child psychiatry consultant's role may be as the interviewer or as the supporter of the child on the pediatric unit, without being involved in the sexual abuse examination.

Conclusion

Reported rates of sexual abuse have declined since the 1990s. However, the incidence of sexual abuse is significantly increasing inspite of underreported cases and there are many methodologic difficulties with estimating the prevalence of sexual abuse. The most common (hidden) form of sexual abuse is father-daughter incest as per (35.2% of sexual abuse reports)²⁵ occur in the 12- to 15-year-old age range. Sexual abuse tends to be so disturbing and so emotionally intense a topic which is spreading like the wild fire, and stopping this, is not any individuals responsibility or right, instead the responsibility of the entire mankind.

References

1. Green and Schmidt. Child molester is a pejorative term applied to both the pedophile and incest offender. *Archives of Sexual Behavior* 2002. DOI 31 (6): 479.
2. Whiffen, V. E.; Macintosh, H. B. A critical review - *The Journal of Trauma, Violence, & Abuse reports* 2005. 6 (1): 24-39.
3. The Impact of Child Sexual Abuse on Health: A systematic review of reviews". *Clinical Psychology Journal*. 29 (7): 647-657.
4. The Role of Child Sexual Abuse in the Etiology of suicide and non-suicidal self-injury". *Acta Psychiatrica Scandinavica*. 124 (1): 30-41.
5. Pereda, N.; Guilera, G.; Forn, M.; Gómez-Benito, J. "The prevalence of child sexual abuse in community and student samples: A meta-analysis". *Clinical Psychology Review Journal* (2009). 29 (4): 328-338.
6. Whealin, Julia Whealin "Child Sexual Abuse" - Archived from the original Post Traumatic Stress issues on veterans in US 2009-07-30 (issue).
7. Catherine Acuff; Steven Bisbing; Michael Gottlieb; Lisa Grossman; Jody Porter; Richard Reichbart; Steven Sparta; C. Eugene Walker, - Board of senses, leading to abuses in women and children - *American Psychologist*. 54 (8): 586-593.
8. Martin, J.; Anderson, J.; Romans, S.; Mullen, P; O'Shea, M (1993). "Asking about child sexual abuse: methodological implications of a two-stage survey". *Child Abuse and Neglect*. 17 (3): 383-392.
9. Teitelman AM, Bellamy SL, Jemmott JB 3rd, Icard L, O'Leary A, Ali S, Ngwane Z, Makiwane M. Socio demographic factors associated with intimate partner violence. *Cannals of Behavioral Medicine*. 2017;51(2):170-178
10. Regier PS, Monge ZA, Franklin TR, Wetherill RR, Teitelman AM, Jagannathan K, et al. cocaine cues on Emotional, physical and sexual abuse are associated with a heightened limbic response - *Addiction Biology*. 2017 Nov;22(6):1768-1777. doi: 10.11
11. Courtois, Christine A. (1988). *Healing the Incest Wound: Adult Survivors in Therapy*. W. W. Norton & Company. p. 208.
12. Stoltenborgh, M.; van IJzendoorn, M. H.; Euser, E. M.; Bakermans-Kranenburg, M. J. (2011). "A global perspective on child sexual abuse: meta-analysis of prevalence around the world". *Child Maltreatment*. 16 (2): 79-101.
13. "Sexual abuse". American Psychological Association. 2018 American Psychological Association. Retrieved 28 January 2018.
14. Patricia, Mahoney. "The Wife Rape Fact Sheet". National Violence Against Women Prevention Research Center. National Violence Against Women Prevention Research Center. Retrieved 28 January 2018.
15. "Child Sexual Abuse". Medline Plus. U.S. National Library of Medicine,. 2008-04-02.
16. Child sexual abuse definition from the NSPCC
17. Seto, Michael (2008). *Pedophilia and Sexual Offending Against Children*. Washington, DC: American Psychological Association.
18. https://en.wikipedia.org/wiki/Sexual_abuse
19. <https://blogs.wsj.com/.../new-womens-helpline-widens-efforts-to-stop-sexual-violence-in>.
20. <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and.../child-sexual-abuse>
21. <https://au.reachout.com>
22. <https://www.goodtherapy.org>
23. <https://www.webmd.com>
24. <https://www.rainn.org>
25. <https://www.childline.org>

