



Category: Health Sciences and Medicine

CASE REPORT

Silent sufferers: long-term impact on physical and mental health of child sexual abuse survivors

Sufridores silenciosos: repercusiones a largo plazo en la salud física y mental de los supervivientes de abusos sexuales a menores

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ABSTRACT

Sexual harassment experienced in childhood has a devastating impact on the physical and mental health of the survivors. In India, 53 percent of children below 18 years face sexual abuse. In most cases, the survivors remain silent sufferers. This research paper examines the case of X, who belongs to a lower socio-economic family in southern India and has suffered 11 years of sexual abuse. Her case demonstrates how children are abused in their closest circle and how their family fails to protect them from the abuse. This research also addresses the danger of easy access to abortion drugs without proper medical supervision, which can lead to mortality. It also emphasizes the need for comprehensive support systems for CSA survivors that include medical, psychological, and social interventions.

Keywords: Child Sexual Abuse; Silent Sufferers; Physical Health Issues; Mental Health Issues and Social Support Systems.

RESUMEN

El acoso sexual sufrido en la infancia tiene un impacto devastador en la salud física y mental de los supervivientes. En India, el 53 % de los menores de 18 años sufren abusos sexuales. En la mayoría de los casos, los supervivientes son víctimas silenciosas. Este trabajo de investigación examina el caso de X, que pertenece a una familia de bajo nivel socioeconómico del sur de la India y ha sufrido 11 años de abusos sexuales. Su caso demuestra cómo se abusa de los niños en su círculo más cercano y cómo su familia no consigue protegerlos de los abusos. Esta investigación también aborda el peligro del fácil acceso a fármacos abortivos sin la debida supervisión médica, que puede provocar mortalidad. También hace hincapié en la necesidad de sistemas de apoyo integrales para las supervivientes de ASI que incluyan intervenciones médicas, psicológicas y sociales.

Palabras clave: Abuso Sexual Infantil; Sufridores Silenciosos; Problemas de Salud Física; Problemas de Salud Mental y Sistemas de Apoyo Social.

INTRODUCTION

Sexual harassment always leaves indelible scars in the victim's lives. Even after coming out of the abusive environment, their minds hold the heaviness of what they have undergone physically and emotionally. Child sexual harassment destroys the survivor's self-confidence and creates trust issues even within the family and social institutions. Undiagnosed physical health issues and untreated mental health issues for a longer period in

the survivors of sexual abuse can lead to various complications in their physical health and mental health.⁽¹⁾ “The trauma associated with sexual abuse can contribute to arrested development, as well as a host of psychological and emotional disorders, that some children and adolescents may never overcome.”^(1,2,3,4) If the survivors are not given proper treatment to overcome their painful experiences, the repercussions will be more severe in their lives. It may lead the survivors to an “increased risk for a multitude of acute and long-term psychological and physical health problems, including depression, post-traumatic stress, and substance abuse problems, as well as sexual revictimization in adolescence and adulthood”.^(5,6,7,8,9) They may undergo physical health issues “systematically related to higher rates of subsequent physical health symptoms, including general health, GI, gynecologic, pain and cardiopulmonary symptoms, and obesity.”⁽¹⁰⁾ They can also have mental health issues like “depression, psychological distress, low self-esteem, substance abuse, attempted suicide, severe post-traumatic stress, psychopathology disorders, harmful behaviors toward self, and dissociative disorders.” “Child sexual abuse in India is a prevalent and devastating issue, with a shocking 28,9 % of children experiencing some form of sexual crime”. Most of the sexual abuse has happened to the victims within their families, neighbors, or known circles.

Background of the Case Study - X

This research paper analyses the physical and mental health issues of a sexual abuse survivor who has been sexually abused from the age of 9 by her neighbour. He has continuously abused her for 11 years. During the interview, at first, she was hesitant to share her painful experience with us. After giving assurance and gaining her trust, we documented her painful experience. The alphabet X is used to refer to her identity throughout the research paper. Geographically, she is located in the southern part of India. The socio-economic status of her family is lower-middle class. She has completed S.S.L.C (Secondary School Leaving Certificate). Due to her family’s financial instability, she has dropped out of school and has been sent to work at a sewing company in the nearby district.

Abusive Neighbour

X calls her neighbour a brother (Anna). He is also a distant relative to her family. He started to abuse X from her childhood, that is, from 9 years old. At present, she is 21 years old. He usually abuses her when her parents go to work in the morning and come back in the evening. Throughout the discussion, X cried a lot and sometimes kept silent. She says that those days are the worst days of her life. Being a kid, she is unable to understand what he is doing to her, but she feels the pain and discomfort whenever he harasses her. She said that he always forced her to touch his genitalia, and he started touching her whole body. Whenever she cried in discomfort and pain and tried to get away from him, he took her to a nearby shop and bought some eatables to console her.

X remembers how her mother didn’t take her words seriously and kept letting her in her neighbour’s care when they went to work. She further says, “My life got worse after my puberty. He made me pregnant and gave me abortion pills.” She also said he is more cautious about her monthly cycle and asks about it every month. If she had delayed periods, he would buy drugs and ask her to take them. Since she has taken the pills often, she has suffered from excessive periods, nausea, and abdomen pain. She has always been in depression for all these years, and she is unable to get out of the hostile environment. He controlled her, saying that if she revealed this to anyone, it was she who was going to bring shame to her family.

At the age of 17, she had a delayed period of 15 days. When she did not tell the neighbour about her delayed periods, he threatened her and beat her not to repeat this. He bought pills on that day, and she waited two days to get her periods. Since the tablets didn’t work, he purchased an injection and injected her. She says, “After taking the injection, my abdomen pained as if it is going to tear. While I was standing, the blood flowed over my thighs, and I got frightened. That moment I thought I am going to die.” When she told him that she was feeling heavy pain, he also panicked. So he took her to the hospital in the nearby district where she was working. There, he took her to a gynecologist, stating he was her brother, and told the doctor that she got pregnant out of an affair. He cried in front of the doctor and said he didn’t want his sister and her family to suffer.

X says, “It was a painful day. I attempted to commit suicide after coming from the hospital to a working women’s hostel. But I feared. If I committed suicide in my autopsy, my abortion may be revealed to my parents and relatives, which will bring an ill name to my family.” She further stated that she thought of committing suicide using the shawl or by pushing herself before the bus or train. She says, “I should not have been born.” She also stated that she hates her body and gender. If she weren’t a girl, she wouldn’t be facing these struggles in her life. When a boy from her company proposed to her, she ignored him, thinking she was impure and she was not capable of having love, marriage, and children. Though she likes him, she fears being in a relationship, thinking about her past life.

Humans are more capable of being resilient after facing adversities in their lives. After a traumatic childhood to adulthood, X wanted to stand up for herself, though she fears about the abusive neighbour. She said that she

went home for the Diwali festival after three months. She says, “When I went to my home, I thought of telling him that I am going to reveal to everyone what he has done to me all the years. If he is not frightened, I should write a letter and commit suicide.” When her parents went to the temple, he abused her and ordered her to obey his words. She says that at that moment, she behaved differently. She said, “All of a sudden, I had the courage and wanted to kill him. I strangulated him ferociously. But, he pushed me away and left my home.”

After that incident, he gradually reduced abusing her. Now he got married and has a kid. Whenever she saw him now, he acted like nothing had happened and pretended to be normal in front of everyone. Though she has come out of the hostile environment, she has developed numerous health issues. Her regulars had become abnormal. She had regulars for one month and no regulars for three months. Though she consulted doctors to get treatments, she still feels continuous abdomen pain and vaginal irritations even after taking the medicines. She states, “I feel ashamed to tell everything that had happened to me to the doctors to get treated. I can only explain my pain, not the cause of the pain.” She further stated that she was ashamed of the doctor’s look when she explained a little to a gynaecologist about her abortions. So, she doesn’t want to reveal this to anyone.

Through the discussion, we observed that apart from her physical health, she is also undergoing severe mental health issues. She says, “I am afraid to be alone. I am also afraid to be with a man. I don’t want a marriage. I know it is not my fault, but I don’t want to suffer.” She says that at night times, she is hearing voices and disturbing thoughts. She couldn’t come away from it. So, it is evident that she needs proper counselling for her mental health and treatment for her physical health issues.

DISCUSSION

The children were abused by their known circle, and the parents would also trust them about their care towards the children. That is, the “Data and information obtained from cases of child abuse indicate that 99 % of the perpetrators are someone known to the child. It could be a family friend, a friend of the parents, a new partner, an uncle, an aunt, a grandparent, or a stepfather. These are people close to the child whom the child trusts.”^(11,12) It is observed that X is also abused by her neighbour, who is her brother and whom her parents trust.

Victim blaming and disbelief in the child are two prominent issues that make the child suffer silently. “A victim-blaming culture and approach may result in inappropriate or ineffective interventions and support plans that lead children to feel that they are being punished for their own abuse.”⁽⁷⁾ It is observed in the case of X that her mother didn’t believe her words seriously and kept on letting her in the abusive neighbour’s custody when they went to work. It is also observed that the victimizer controlled her, saying that if she revealed his sexual behaviour towards her to anyone, she would bring shame to her family.

The easy availability of drugs without a proper prescription from the gynecologist is also a notable reason behind the deaths of many sexual abuse victims when they are forced to take abortion pills by the victimizers. In India, “Self-managed abortions at home were more prevalent in women of lower socio-economic status, adolescent girls” and according to the United Nations Population Fund (UNFPA)’s State of the World Population Report 2022, in India, eight women die from causes related to unsafe abortions each day. It is observed in the case of X that she has been forced to take abortion pills many times and has nausea, vaginal irritations, and abdomen pain. The abuser also used an injection to abort the pregnancy, clearly showcasing the easy availability of the drugs. Most of the self-managed abortions lead to severe health issues in the sexual abuse survivors.^(13,14,15)

The CSA survivors have long-term physical health issues when the child has been abused continuously. “Experiencing CSA has been associated with a wide range of adverse physical health outcomes. Acute physical injuries to the genital area can result from penetrative abuse, as can sexually transmitted infections.”⁽⁹⁾ They also have “gynecologic problems, including chronic pelvic pain, dyspareunia, vaginismus, nonspecific vaginitis, and gastrointestinal disorders.”⁽²⁾ It is observed that X has faced gynecologic problems that are untreated due to the forced self-managed abortions.

Mental health issues are another concern that needs to be addressed among CSA survivors.⁽¹²⁾ Most of the survivors are not getting proper counselling since they suffer in silence. “CSA and other forms of maltreatment are significantly associated with a wide range of psychiatric disorders in adulthood that range from depression, post-traumatic stress disorder (PTSD), panic disorder, and substance abuse to schizophrenia and antisocial personality disorder.”⁽⁶⁾ It indicates that the survivor has no support for a longtime abuse. X is also traumatized by the sexual abuse and stated that she always disassociates herself from others. She started to think of herself as impure and not capable of living. She also had suicidal thoughts. It is evident that X is undergoing severe trauma and mental health issues.

Social and peer support plays a significant role in creating a positive impact on CSA survivor’s mental health. “Peer support may fill an important gap in the provision of support for victim-survivors of sexual violence and abuse.”⁽⁸⁾ It can rebuild the trust that they have lost in family, social institutions, and humans. When proper social support, along with physical and psychological treatments, the survivors can live a normal life like others

without self-blaming and guilt of their no fault. In the case of X, she has support from her friend to get away from the mental agonies.

CONCLUSION

The patriarchal ideology dominates most societies around the world, and being a victim of no-fault, women and children are still afraid of letting the world know about their sufferings and injustices in the domestic sphere and public spheres. Sexual harassment is the most distressing phenomenon, and in most situations, the victims are afraid of telling that they are the victims of sexual abuse due to the negative impacts they have to face in society. For instance, blaming the victim, isolating them, and making them homeless are such negative impacts that the survivor has to suffer along with their abuse. Healthcare providers need to provide extra care when handling CSA survivors, which can have positive impacts on their lives. X is one of the victims who suffered a lot and needs social support. At present, she has been given counselling for mental health issues and taken to the hospital for a complete health checkup.

X is a friend of my friend's relative. Both are working in the same company and share the same hostel room. After a few abnormal activities of X, her friend asks her and gains her trust. She sought help from my friend, and my friend intimated this to me since my research is on gender studies. At present, X is under counselling for mental health issues and will be given treatment periodically for her physical health issues. After drafting the case study, the voice recordings of X were deleted, as assured at the beginning of the interview.

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