

# Childhood sexual abuse perceptions and experience among college students of Panchkula

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## Abstract

**Background and Objective:** Child sexual abuse (CSA) is a global public health and human rights concern. Hence, the present study was conducted to assess childhood sexual abuse perception and experience among college students of Panchkula. **Methodology:** A self-administered anonymous questionnaire which assessed perception and experiences of childhood sexual abuse was given to a convenient sample of 1000 college students. Using descriptive statistics and Chi-square test, perception and the experience of childhood sexual abuse were calculated. **Results:** The study showed that 18% (boys = 20%, girls = 16%) of the students were exposed to CSA, with boys more often affected than girls. The student's perception about abuse was not very clear. Myths and cultural beliefs justified abuse. **Conclusion:** Although preliminary in nature, the present findings are among the first to demonstrate the nature of CSA among students of Panchkula. Further, the study revealed that CSA manifests both as contact and noncontact forms. More boys than girls are exposed to most forms of abuse.

**Key words:** Childhood sexual abuse, experience, perception

## INTRODUCTION

Child sexual abuse (CSA) is a global public health and human rights concern. A meta-analysis of about 65 studies done in 22 countries found that 7.9% of men and 19.7% of women had suffered some form of sexual abuse before the age of 18 years.<sup>[1]</sup> Although studies of CSA conducted in developing countries are emerging, the process is slow and sporadic. India has the world's largest number of sexually abused children, with a child below 16 years raped every 155<sup>th</sup> min, a child below 10 every 13<sup>th</sup> hour, and one in every ten children sexually abused at any point of time.<sup>[2,3]</sup>

CSA can be defined as "any activity with a child before the age of legal consent that is for sexual gratification of an adult or a substantially older child. The perpetrators take

advantage of violate or deceive children or young people who have less power over elders."<sup>[4]</sup> Despite having varying definitions, CSA broadly falls under contact (sexually touching of different areas of the child's body as well as penetrative oral, anal, and vaginal sex) and noncontact acts (such as a child being forced to pose naked, take part in or watch masturbation, take part in or view pornographic materials, or watch others having sex).

CSA is associated with long-term physical and mental health consequences. The physical effects include vesicovaginal and rectovaginal fistulae and chronic pelvic pain.<sup>[5,6]</sup> The mental health consequences involve

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psychological/behavioral disorders which may manifest in suicidal thoughts, posttraumatic stress disorders, or depression.<sup>[4,7-9]</sup> Other behavioral disorders include bodily shame, abuse-related fears, substance abuse, and discomfort during sex.<sup>[10-12]</sup>

The paucity of studies dealing with CSA has been noted in Panchkula. It reveals clearly the scattered nature of research and identifies the need to gather data to dispel mistruths and myths. Hence, the present study was conducted to study childhood sexual abuse perception and experience among college students of Panchkula.

## METHODOLOGY

A cross-sectional questionnaire study was carried out to assess childhood sexual abuse perception and experience among college students of Swami Devi Dyal Group of Institutions.

### Ethical clearance

Ethical clearance was obtained from the Swami Devi Dyal Hospital and Dental College Institutional Ethical Committee before the start of the study.

### Questionnaire used

The self-administered closed-ended questionnaire was made in English language and later translated to Hindi language (local language) by a language expert. The back translation was done to ensure the adequacy of original translation. The questionnaire had 28 questions with some questions having multiple answers. The questionnaire focused on demographic details (such as age, gender, and socioeconomic status), perception, experience, and reporting of childhood sexual abuse.

### Pilot study

A pilot study was conducted among fifty college students. Test-retest and Cronbach's alpha were calculated to assess the validity and reliability of the questionnaire (Cronbach's alpha = 0.8).

Based on result of pilot study (margin of error = 0.025; z-score = 1.96; prior judgment of correct value of  $P = 0.2$ ), the sample size of 983 was calculated (rounded off to 1000).

### Study population and informed consent

The contact list of 1000 students of Swami Devi Dyal Group of Institutes who had visited Swami Devi Dyal Dental Hospital in the past 6 months for any form of check-up/treatment was obtained. From April 15 to May 15, 2015, these students were invited in a group of fifty to dental institute for survey, followed by free lecture on childhood sexual abuse. A brief session was carried out which included the need of the survey, explanation of

the questionnaire, and the willingness of participation in the survey. The students were also ensured complete confidentiality and anonymity. Those who were not willing to participate in the study were excluded from the study. The questionnaire was distributed to all participating students, and ample time was given to the participants to complete the questionnaire. All were requested and inspected not to share their answers with the other participants. Such filled questionnaires were collected on the same day. After the completion of the study, an interactive session was scheduled to educate the participants regarding childhood sexual abuse.

### Statistical analysis

Data analysis was done using SPSS version 20.0 (SPSS Inc., Chicago, IL, USA). The prevalence of sexual abuse and the distribution of sociodemographic characteristics of participants were obtained using frequency distribution tables. Cross-tabulations were made to analyze the association between sexual abuse and sociodemographic/economic characteristics. Chi-square test was used to test for significant associations between the outcome and dependent variables.  $P < 0.05$  was considered statistically significant.

## RESULTS

Out of 1000 study participants, 86% returned completed questionnaire. Hence, 860 students formed the final sample. The mean age of study participants was  $20.6 \pm 3.3$  years with 46.5% of males and 53.5% of females.

### Perception regarding child abuse

The perception is shown in Table 1. Most of the study participants felt that abuser does not belong to child family. Twenty-one percent of the participants feel that only girls were victim of child abuse. More than 75% of the participants felt that children from reputable families were not victim of child abuse [Table 1].

### Information source about child sexual abuse

Only 5% of parents (80% by mother, 5% by father, and 15% by both) had talked to their children regarding sexual abuse ( $P > 0.05$ ). Eighty-five percent had not told that a family friend or family member could do such incident. Parents also warned not to tell to anyone if any such incidence happened with their child. No one had attended any information session before this questionnaire. Other sources of information include television and movies. Some information regarding sexual abuse was also gained from schoolteachers and friends.

### Prevalence of child sexual abuse

The study showed that 18% (boys = 20%, girls = 16%) of the students were exposed to CSA, with boys more

**Table 1: Perceptions regarding child abuse**

Perceptions regarding child abuse	Agree (%)	Disagree (%)	Don't know (%)
Some children are sexually abused by elder children	60	5	35
Most people who sexually abuse children do not belong to the child's family	74	10	16
Most of the time children are abused when they are alone at night and usually outside their home	77	20	3
Only girls are victims of sexual abuse	21	73	6
Sexually abused boys are usually not homosexuals	65	10	25
Children from reputable families are not victims of sexual abuse	78	20	2
Few children are victims of sexual abuse	49	21	30
Only young children are victims of sexual abuse	30	47	23
Boys are not sexually abused	27	65	8
A majority of sexual abuse perpetrators are retarded or mentally ill	10	85	5
Even if one lets a year ago by before talking about a sexual abuse situation, it is still possible to do something about it	27	45	28
In sexual abuse cases, the child himself/herself is never responsible	45	45	10

often affected than girls. Eighteen percent of boys and 13% of girls reported being forced to look at pornography. Forced sexual intercourse was experienced by 4.8% of boys and 2.7% of girls [Figure 1]. Abuse increased with age and diminished self-rated health. Perpetrators were most often neighbors (34%), teachers (18%), family (14%), and peers (10%). Most of the students who have sexual abuse experience did not want any action taken for the abuse [Figure 1]. No significant difference was observed based on the profession, so the separate results were not shown.

### Suggestions for change

When asked about their wishes for the future, there was a plea for a more effective legal system. They further reflected on the need for educating the community to raise awareness about sexual offenses, the rights of children, and their roles as preventive agents.

## DISCUSSION

"Somewhere in the world a child is suffering deliberate harm, inflicted by someone who is supposed to care about them, at this very moment."

-J. Hinchliffe

CSA is shrouded in secrecy, and there is a conspiracy of silence around the entire subject. In fact, there is a well-entrenched belief that there is no CSA in India.<sup>[2]</sup> Lack of empirical information on the dimensions of CSA makes it difficult to address the issue in a comprehensive manner. Hence, the present study was conducted to study childhood sexual abuse perception and experience among college students of Panchkula.

In this study, college students were included because they are mature enough to be able to make an informed choice to participate and to answer sensitive questions. On the other hand, there are numerous ethical dilemmas in asking

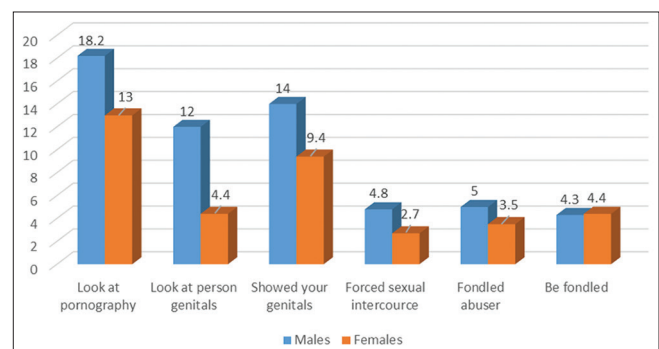


Figure 1: Childhood sexual abuse experiences

about sensitive and painful experiences, and parental consent is needed for children younger than 18 years of age.<sup>[13]</sup> Anonymous self-administered questionnaires were used as they were seen as less embarrassing compared to face-to-face interviews.<sup>[14]</sup>

Preferably, a randomized representative sample of the general population should be surveyed. However, because this is one of the pioneer studies of CSA in Panchkula, a convenient sample of Swami Devi Dyal Group of Institutions was deemed more accessible.

Most of the study participants feel that abuser does not belong to family. However, 50% of abusers are persons known to the child (or from family) or in a position of trust and responsibility.<sup>[2]</sup> More than 75% feel that CSA victims are not from reputable families, which was found to be contrary to the finding of an epidemiological review of 21 studies that revealed the prevalence of sexual abuse in upper and middle classes was found to be proportionately higher than in lower or in lower middle class.<sup>[15]</sup> Hence, the student's perception about abuse was not very clear. Myths and cultural beliefs justified abuse.

The study indicates the seriousness of CSA in Panchkula. Among the 860 study participants, 16% of girls and 20%

of boys ( $P = 0.06$ ) experienced at least one sexual abuse incident. Similar estimates were reported by McCrann *et al.* based on self-reported data in a lecture hall and Andersson *et al.*<sup>[16,17]</sup> The study on child abuse done by Kacker *et al.* found that 53.22% of children reported having faced one or more forms of sexual abuse. The results obtained by study might have underestimate the true extent of problem because factors such as the secrecy which surrounds the abusive situation, the shame felt by the victim when speaking about what has happened, the criminal penalties to which the abuser may be subject, and the young age of victims combined with their dependence on adults.<sup>[18-21]</sup>

In all the qualitative substudies, examples were given of perpetrators being known to the survivors. Furthermore, this information was confirmed by the present study which revealed that the majority of perpetrators were neighbors, teachers, family members, and peers. Similar results were shown in the national survey (URT, 2011), where neighbors (girls = 32% and boys = 17%), followed by strangers (girls = 32% and boys = 26%), were the most common perpetrators.

Moral and psychological support by medically trained persons was organized and offered to participants in need. This is recommended by the WHO/Council for International Organizations of Medical Sciences (2002) for studies that may evoke emotional reactions.<sup>[22]</sup>

This study has some limitations, such as the convenient sampling method and self-reported questionnaires that may cause several biases including recall and social desirability bias.

However, the strength of our study remains in the fact that it provides an overview on childhood sexual abuse perception and experience among college students in Panchkula population for the first time and can prove to be a benchmark for future comparisons by the public health personnel and decision-makers.

## CONCLUSION

Childhood sexual abuse is a public health problem in Panchkula. CSA manifests both as contact and noncontact forms. More boys than girls are exposed to most forms of abuse. The student's perception about abuse was not very clear. Myths and cultural beliefs justified abuse. Thus, based on the results from this study, preventive measures are needed to engage the government in policy changes as well as to enhance community involvement in improving the situation.

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## Conflicts of interest

There are no conflicts of interest.

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