Child Sexual Abuse: who, when, where, why and how?

INDRAYANI1, RINI HENDARI2, NANDRY INDRYANA3, MOUDY E. U. DJAMI4, ONG TJANDRA5

ABSTRACT

Background: Increasing cases of child sexual abuse happen unreported. This has caused repetition of abuse and made accurate prevalence of happening difficult to predict. Repetition of abuse will result in worse negative impacts to children, both for long and short term.

Aim: To explore the chronology of child sexual abuse.

Methods: It is a qualitative study with phenomenological approach. The participants were those who were involved or who knew the happenings. Snowball technique was used for collecting data and the initial participants were the abusers jailed in IIB Class custody of Raba Bima, West Nusa Tenggara. Thorough interviews were conducted from February to March 2016, involving 22 persons for 8 cases of girl sexual abuse.

Results: This study reports the relationship between the victims and abusers; time, place and frequency of sexual abuse; occupation of abuser’s wife; reasons of committing sexual abuse; how it was revealed, the handling of victims and the intervention to abusers.

Conclusion: Sexual abuse is an unpredictable crime which may happen to anybody, anytime, anywhere and may be committed by anybody. Parents should give more attention to their children, choose and monitor the child’s environment, introduce sex education in their early age and tell them how to get help when they are sexually abused. Thematic oral analysis was used for data analysis whereas triangulation method was used for data verification.

Keywords: Sexual abuse, children, time, place, frequency, reason, handling, intervention

INTRODUCTION

Child sexual abuse is a very serious, complex and universal problem1,2,3,4 which is crucial to discuss, concerning that children are the nation next generation and valuable asset who will play important parts for the persistence of the country and nation. Childhood is a very important, sensitive and crucial time for the child development which will shape their future characters. Results of previous studies have shown that child sexual abuse is a traumatic experience which will disturb the child future development and give both long term and short term negative impact to their physical and psychological wealth5,6,7,8. Results of studies showed that 40.2% teenagers who experienced sexual abuse in their childhood were diagnosed to have suffered from post traumatic stress9.

Child sexual abuse is a much broader problem than it has been anticipated10. Generally, it happens repeatedly and it is only revealed after a long period of time. It is because the children who are sexually abused are threatened by the abuser who ask them not to tell anybody. This makes the children feel extremely scared that they do not dare to tell their family or anybody else. The same cases reported in the previous studies revealed that it was difficult to determine the accurate prevalence because in some cases the victims and the families felt ashamed of what happened and they kept it a secret4,11,12,13. Studies by Beitchman et.al revealed that the victims of sexual abuse tend to get sexual abuses again compared to those who never experience sexual abuse14. It was reported that repeated, frequent and severe sexual abuse negatively affected the child psychology when they were grown up15,16, such as cortisol increase and post traumatic stress disusare17,18; anxiety, depression, mental disorder and personality problem14,19,20,21,22,23; convulsion but not epilepsy24; chronic pain of pelvis25; dieting problem;26 lies;27 alcohol and drug abuse18,20; sexual problems or sexual disfunction;14 homosexual experience when they are teenagers or grown up14; venereal diseases, increasing risk of having infected by Human Immuno Deficiency Virus (HIV)19,28 and herpes simplex virus type 2 (HSV2)19; self-hurting but not suicide29 and effort to commit suicide20,30. To respond the problem more effectively, it is necessary to broaden the scientific proof base, consequence, and preventive action. Epidemiology and social health approaches are of vital importance in placing

\[1\text{Akademi Kebidanan Bina Husada, Tangerang}
\[2\text{Politeknik Kesehatan, Kementrian Kesehatan Bima Jurusan}
\[3\text{Keperawatan, Nusa Tenggara Barat}
\[4\text{Akademi Kebidanan Harapan Bunda Bima}
\[5\text{Akademi Kebidanan Bina Husada, Tangerang}
\[6\text{Sekolah Tinggi Kesehatan Bina Permata Medika}
\[7\text{Correspondence to Indrayani Email: indrayani_akkidi@yahoo.co.id}
\[8\text{Tangerang, Banten, Indonesia. Zip Code 15911 Ph. +6221-5569372 Fax. +6221-5569372}
the problem nationally and internationally concerning the consequences of child sexual abuse which should be endured by individual, society and government, and how to implement the preventive action. Therefore, it is very important to comprehend the case description and characteristics in order to decrease the level of prevalence. This study aims to describe the cases of child sexual abuse. Findings of this study are expected to be used as considerations in the efforts to prevent the same cases.

METHODS

Since March 2013 up to August 2015 the Police of Bima Regency and Bima City, the Province of West Nusa Tenggara had received eight reports on cases of child sexual abuse where sexual intercourses had happened. The victims were two grand daughters, two step daughters, one neighbour’s daughter, one niece, one classmate, and one girl in a rape case (violated by four rapists). All cases had been handled and 12 convicts had been proved guilty, and 11 were sent to Class IIB Raba Bima Custody, whereas 1 convict had been sent to more restricted custody in Mataram City because he was convicted of having multi criminal cases. The eight victims were females of 5-17 years old.

Qualitative study with phenomenological approach was used to explore the chronology of cases and the causes of child sexual abuse. Data collecting through thorough interviews was carried out from February to March 2016. Selection of participants was done using snowball technique where the initial participants were convicts of child sexual abuse who had been proved guilty and were jailed in Class IIB Raba Bima Custody.

Data collecting was carried out by two personnel. They were one experienced interviewer in qualitative study and one interviewer who had been trained previously. Thorough interviews involved 22 people. They were 11 convicts, 3 family members of the convicts (children and wives), 1 lawyer of the victims, 2 victim’s companions, 4 family members of the victims (mother, sister, aunty, relative), and 1 victim. Interviews were carried out using Bima-Indonesian in order to build a good and close relationship. Interviews were carried out after having been approved by the participants, including the approval to use a recorder in the process of interviews. During the interviews, interviewers were also doing the observation and making important notes related to the condition of interviews. Interviews were done face-to-face for 45 up to 50 minutes. The convicts of child sexual abuse were interviewed on the quiet corner of the hall of Class IIB Raba Bima Custody in order to give comfort to the convicts, whereas other participants were interviewed at home, office or places they wanted. The characteristics of the participants can be seen in Table 1.

Table 1 Participant characteristics

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td></td>
</tr>
<tr>
<td>&lt;20</td>
<td>5(22.7%)</td>
</tr>
<tr>
<td>20-30</td>
<td>3(13.6%)</td>
</tr>
<tr>
<td>31-40</td>
<td>8(36.4%)</td>
</tr>
<tr>
<td>41-50</td>
<td>4(18.2%)</td>
</tr>
<tr>
<td>51-60</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>&gt;60</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>Elementary school</td>
<td>4(18.2%)</td>
</tr>
<tr>
<td>Junior high school</td>
<td>4(18.2%)</td>
</tr>
<tr>
<td>Senior high school</td>
<td>10(45.5%)</td>
</tr>
<tr>
<td>University</td>
<td>4(18.2%)</td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
</tr>
<tr>
<td>Unemployed</td>
<td>5(22.7%)</td>
</tr>
<tr>
<td>School student</td>
<td>3(13.6%)</td>
</tr>
<tr>
<td>University student</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>House maid</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>Farmer</td>
<td>5(22.7%)</td>
</tr>
<tr>
<td>Business man</td>
<td>2(9.1%)</td>
</tr>
<tr>
<td>Teacher</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>Public worker</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>Lawyer</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>Staff of woman and child protection unit</td>
<td>1(4.5%)</td>
</tr>
<tr>
<td>The chairman of child protection institution</td>
<td>1(4.5%)</td>
</tr>
</tbody>
</table>

Results of interviews were processed and analyzed by thematic analysis. Data verification was done using data triangulation method, which was comparing the data obtained from the interviews of participants and the main participants. Besides, to examine the reliability, the researchers listened and learned the audio records, notes of anecdote and transcripts of interviews to find the main problem searched. In this study, data verification was done by the victim’s family, victim’s lawyer, victim’s companions, victim’s family, and the victim. One victim was interviewed after being approved by the victim’s family, officials who handled the rehabilitation of the victim and the victim herself. The interview was carried out with the presence of officials who handled the rehabilitation of the victim. This was done to verify the information since there was a difference between the information given by the convicts and information given by the victim’s family.

Ethics of study: Ethics of study is a guidance prevailing for any study which involves the researchers and other parties as the subject of the study. Aspects of ethics in this study is of vital importance since the subject of the study is a susceptible group and the topic of the study is very
sensitive. This study has been submitted to the fullboard in Ethics of Health Study Committee, The Faculty of Medicine of Padjadjaran University Bandung and has got an approval from Ethics of Health Study Committee, The Faculty of Medicine of Padjadjaran University with number 108/UN6.C1.3.2/KEPK/PN/2016.

**Results of Study:** Most family of the victim admitted that they would be happy to become participants because they did not want what their girls had experienced could happen to other girls.

**The victim-doer relationship:** Almost all cases of sexual abuse are done by the closest persons to the victims. Surprising findings were known from thorough interviews where six out of eight cases of sexual abuse were done by persons who were the relatives of the victims. They were cousins, uncles, grandparents from indirect relatives, and step fathers. The doers and victims had a long closer relationship so that the crimes committed by the doers were not suspected by the family.

“The girl has a blood relation with me, though she is not a direct relative. She is also my neighbour, you may say that she is my grandchild. The girl and her mother often came to my house, and that was the reason why I had a very close relationship with her. She used to come to my house because she knew that we were a family.” (Doer)

My husband and the girl is a family. They were close to each other because they are a family, that was why I did not suspect this (while taking a deep breath).” (Doer's wife)

**Time:** Sexual abusers are always looking for the right time to act. Mornings, afternoons or evenings are the chosen moments for them to commit sexual abuse. They always find the most suitable time depending on the surrounding condition and the absence of other family in the house.

“Sometimes she came in the morning because she did not go to school. At these moments, all of my family were not home and her parents were working, so I did it.” (Doer)

**Places of Action:** Places of action are usually empty houses. It can be the doer’s house, the victim's house, empty houses, on the mountain, in the toilet and in the fields.

“I did it in my house because there was no one in my house at that time” (Doer)

**Frequency of Sexual Abuse:** Almost all victims of sexual abuse do not dare to tell the crime committed by the abusers so that the victims are potentially getting repeated abuses. Findings in this study showed that there were some cases reported by the victims so that the abusers could be soon busted. However, most victims did not report the cases because they were threatened by the abusers. As a result, the victims were repeatedly abused. The frequency range of abuse was 2 up to 7 times.

“My daughter told me that she was sexually abused for 5 times (while crying)” (The victim’s mother)

**Wife’s Occupation:** Most of the abusers (45.4%) are married. The wives’ time-consuming activities have given more opportunities to their husbands to freely commit sexual abuse. The abusers admitted that their wives worked in the markets or in the fields where they spent most of their time so that the abusers had the opportunity to commit sexual abuse.

“I often stayed home alone in the morning since my wife worked in the market and my children went to school.” (Doer)

**Sexual experience:** Out of 11 abusers, 5 were married and 6 were not. Most married abusers admitted that they were not sexually served well by their wives so they often masturbated, and some others suffered from sexual divergences (hypersexual).

“My wife did not served me well. That was the reason why I did it to the child (while taking a deep breath). My wife and I only had sexual intercourse once a month because my wife was quite old, so her sexual desire had been decreasing badly.” (Doer)

**Economy:** Money plays a great role in life, particularly for children. Parents’ lack of awareness towards the danger potential which might be faced by children when getting money from other people makes children susceptible of being sexually abused. It is in line with findings in this study where most doers (87.5%) given money to the victims so that they wanted benefit from victims, however the victims preferred to keep silent because they got some money.

“I knew that he often gave money to my girl so she was happy to see him and get with the hope that she would have additional pocket money. My fault was that I let this happen. I was not aware that it would endanger my girl. I never imagined this would happen to my girl. I wished other parents would be more aware of this (while crying)” (victim’s mother)

**Opportunity:** Sexual abuse does not always happen because the abuser has already got a wish to do it. It can happen because the abuser has an opportunity which supports him to do it. Just because somebody has already got a wish to commit sexual abuse does not mean that he can do it without having an opportunity. On the contrary, some abusers admitted that they did not have a wish to commit sexual abuse, but they got an opportunity that supported them to commit the crime.

“It just happened without any plan. At that time, my house was empty and nobody was home but me.” (Doer)
“I already had an intention to do it since a long time ago but I had not got the opportunity. So when my house was empty, I got the opportunity to do it.” (Doer) **Desire to experience:** Adolescence is a period of searching self-identity and it is a very critical period for teenagers. During the transformation period from children to grown up, teenagers will experience some changes. Without good understanding and well self-guidance, the changes may result in teenagers’ sexual deviation which in turn will affect their behaviours, manners and attitudes. It is in line with findings of this study, where few abusers were still in adolescence period. One of the abusers admitted that he committed sexual abuse because he wanted to know how it felt to have sexual intercourse. “I did it when I was 16 and the girl was only 5 years old. It happened 2 years ago. I had this curiosity since some years ago. I often masturbated when I was still in Junior High School. I really wanted to have sexual intercourse but I had no idea with whom I should do it. At that time, I did not know that there was a consequence of committing sexual abuse to a girl. I feel regretted now.” (Doer) **Technology:** The rapid development of technology and information is one characteristic of globalization. It is like two-edged knife which has potential to give both negative and positive impacts. One group which is susceptible to globalization is teenagers. Misuse of technology will give serious impacts to their future life. Dissemination of porn videos and the ease to access them make some teenagers deviate their sexual behaviour. Some sexual abusers were teenagers who admitted that technology had provided them with imagination of their sexual life. “First, I watched porn videos from my friend’s handphone. He said that he got it from internet. Since then, I often watched such videos from internet and in turn, my desire to have sexual intercourse was getting bigger and bigger.” (Doer) **Family:** Parents’ lack of child monitoring, both monitoring of what children watch in the internet and child social life, as well as changes of child body, manner and behaviour and complaints make cases of sexual abuse too late to detect. As a result, children have to suffer from repeated sexual abuse. “I am not her mother but her aunty. Her parents entrusted the girl to us since she was 3 years old. Her parents worked in another province. We realized that we did not give enough attention to her because we worked in the rice fields. After knowing what happened to her child, her parents went home but it was only for 4 days. Then, they left and went to work again.” (Victim’s family) Divorce is not only the cause that increases child psychological disorders but also the reason why children are susceptible to experience sexual abuse. “It is my second marriage after divorcing my ex-husband. I never suspected that my second husband would do this to my girl. He once said that he loved my girl like his own child.” (Victim’s mother) **Alcohol:** Alcohol plays a big role in cases of sexual violation. Some cases of rape were initially started from drinking alcohol. Alcohol influences one’s mental and physical capacity. One tends to show high level of agression when under the influence of alcohol. The same cases can be found in this study. Some sexual abuses and rapes were committed by 4 men when they were under the influence of alcohol. “I did not think anything when raping the girl because we were drunk. We collected money to buy a 5-litre gallon of Soffie. We drank it up. I often met my friends to drink together.” (Doer) **Appearance:** Some abusers admitted that they were provoked to commit the crime because they were tempted by the girl’s sexy appearance. Therefore, it is important for the parents to pay attention to their girls’appearance. Parents need to ask their girls to wear clothes which would not provoke men to commit a crime. “I was interested in her because she was beautiful and sexy. Moreover, I had a great desire to love with my wife.” (Doer) **Revelation of cases:** According to the victims’family, sexual abuse was revealed in various ways. Some victims told their family soon after being sexually abused. Some others told their grandmothers after being abused repeatedly. However, there were some victims who preferred to keep silent. There were also cases when the neighbours suspected a girl who was pregnant. Some family realized that there must be something wrong happening to their girl after watching their girl’s changing of behaviour. The victim usually becomes a sad girl or she has some complaints about pain in her genital. “My girl did not want to tell me or my husband about it because she was scared. However, she changed and became a sad and restless girl and she often had nightmares, so I suspected that something might happen to her. We made efforts to approach her and ensure her that we were here to help solve the problem. Finally, she told us about the sexual abuse. When I knew this, I felt like I was a useless mother since she had been abused many times (crying).” (Victim’s mother) **Management of Victim:** Based on the results of thorough interviews, it was known that the handling of child sexual abuse started from reports of cases, then the police unit of woman and child protection would
Child Sexual Abuse: who, when, where, why and how?

do an investigation. Results of investigation would be followed up by the court.

“After receiving a report, the case will be investigated by the police working together with child protection institution. The result would be then followed up by the court.” (Victim’s lawyer)

Each victim of sexual abuse experiences various traumatic levels - low, medium, and high. Children who experience low-medium traumatic level tend to be treated by their own family since the rehabilitation centre is in Mataram City, the Province of West Nusa Tenggara, which is far away from where they live. However, children with medium-high traumatic level are all treated by experts who work in the rehabilitation centre in Mataram City. The rehabilitation centre works together with Social Department and Department of Education in handling cases of child violation.

“The child has been handled by Social Department and now she goes to a Traditional Moslem School in Mataram. She will get a special attention to ensure that she can live her childhood normally. She has been given treatment focusing on the efforts to remove child traumatic. Pregnant victims will be treated and given special therapy until they give birth. Next, the babies will be taken care by the rehabilitation centre. However, some families are willing to adopt the babies.” (Victim’s companion)

Intervention to abuser: Sentences applied to the convicts of sexual abuse vary depending on the case classification and other supporting proofs (strengthening or commutating). Not all sexual abuses are committed by adults, some are committed by teenagers (<18 years old). This creates a dilemma for law upholders, particularly in Bima Regency and Bima City.

“The handling of child cases is a dilemma. Parents of the victim wanted the boy (convict) to be sentenced and sent to jail. Meanwhile, custody is not applicable for the case based on Laws of child protection. Moreover, Bima does not have any child custody so that the abuser who is still a child is sent to adult custody. However, the boy gets a special treatment and he is allowed to play and he also has free access under supervision.” (Victim’s companion)

DISCUSSION

All cases of sexual abuse in Bima, West Nusa Tenggara, involved girls as victims. The same cases were also reported by Dhaliwal et.al that the higher prevalence of cases of sexual abuse was in group of female.33 Child sexual abuse is a big problem of public health. This is not only related to long term impact of violation on child neurogical, cognitive and emotional development, but it has also given a serious consequence which should be borne by the victims all their lives, the family, and the society. Besides, the government’s cost budgeting will increase, which will hinder investation of policy and prevention programs.20, 34 Society’s lack of understanding on the issue results in more cases of child sexual abuse which are not reported.35-36 Moreover, most cases of child sexual abuse are not well recognized and handled 37 because of the close relationship and dependence factor between the victim and the abuser as found in this study, and lack of supporting proofs to help reveal such cases.

It is of vital important to identify the case as early as possible in order to prevent worse impacts to the victims. As proven by previous studies, bad experiences in childhood are related to the risk of having serious mental disorders38,39,40 and give impact to the increase of psychotic risk41. Case identification can be done by observing changes of child behaviour and attitude because children will generally experience physical and social disturbances such as depression, trauma, restless, change of diet pattern, having no self-confidence, disorientation of self-identity, pain in pelvis, and self-hurt14,17,23,25,26,29. In accordance with the findings of this study, some victim’s parents identified the cases by observing the change of behaviour and attitude shown. But if this way is not effective for such an identification, imaging study may become an alternative option where neuroimaging proof can be used to support mediation. As revealed by endocrinology study which shows that child bad experiences cause static change on response of hypothalamus-hypophysic-adrenaline axis toward stress, therefore it may increase the risk of becoming depression42,43. Disturbance of emotional development is also related to extreme functional and structural changes which may last for years until the children become adults. It is assumed that it is related to limbic hypersensitive and decrease of hippocampal volume which happen to those who have bad experiences in their childhood44. Hippocampal is very susceptible to stress and involved in the regulation of hypothalamus-hypophysic-adrenaline axis. Results of studies show that depression and post traumatic stress are related to smaller volume of hippocampal45,46 and this is also seen in the subject which has the risk of being depressed or experiencing post traumatic stress47,48. Depressed patients show smaller volume of hippocampal when experiencing sexual abuse in their childhood46. This is in line with Rao’s study that smaller volume of hippocampal can become a mediation of relation between pre disturbance and pre depression50. Sexual abuse is also related to hyperresponsive amygdala towards negative
stimulant and smaller volume of hippocampal in healthy adults without history of mental disorders. These neurobiological characteristics can become the sign of increasing susceptibility of emotional disturbances.44

The next findings of imaging which are often described to patients who are depressed or having post traumatic stress.56,58 show hyperresponsive amygdala towards negative emotional stimulant. Amygdala is central structure in processing series of limbic emotion which is critically involved in rapid processing especially stimulant related to threat.59 Hyperactivity of amygdala is also related to patogenetic of major depression, which may cause processing of negative emotion.61,62. It is in line with Dannlowski et al. study which suggested that cases of sexual abuse and childhood depression could be mediated by hyperresponsive amygdala.44 Results of imaging study which show high responsivity of amygdala towards negative stimulant prove to be related to the characteristic of anxiety level of depression and cognitive bias which supports processing of negative stimulant.

Though some children do not experience long term mental disorders related to sexual abuse, and the proportion of children who experience long term mental disorders is significant, it is assumed that one-third up to two-third of them will get better from time to time without any treatment. However, there is a long term consequence on population who do not get any treatment. This may last until they are grown up so that it will give additional burden to the health treatment system in order to take care of those who are depressed, who are trapped into drug abuse, who are given in-house treatment, and who are having other mental health problems.67 The impacts may continue for the next generation where children of depressed parents may have greater risk of being exposed to violence by their parents or through genetical tendency.

No matter big the problem and the increasing awareness of social high cost of handling are, prevention of child violation is not the political priority in most countries. It can be proved by the findings of this study where upholders faced a dilemma in handling certain cases since there was no government regulation which could be applied for particular convicts. Considering that the right handling of cases can improve child life quality in the future and save the country budget, primary prevention should be considered important and urgent and it needs to be given more attention.59,70 Various approaches of psychosocial treatment which focuses more on the handling of symptoms of negative childhood experiences have been proven effective to many patients. Therefore, such handling should be available more in service units of rehabilitation centres.

RESEARCH SIGNIFICANCE

Findings of this study were able to describe how child sexual abuse happened. This can be used as feedback for parents so that they can be more aware of both child environment and changes of behaviours, manners and attitudes. The government can also use it as a consideration in formulating the policies to prevent sexual abuse. The formulation of policies related to the handling of child sexual violence can be based on these findings.

CONCLUSION

Child sexual abuse can happen to anybody, anytime, anywhere and it can be committed by anybody. Parents need to do better monitoring on their children, be more careful in choosing child environment, and teach them how to get help when they are sexually abused. Besides, it is necessary to give parents educational program on how to introduce early sex education for children and how to identify child changing of behaviour as well as particular laws which regulate sanctions for child sexual abuser.

Acknowledgments: We would like to thank Mr. H. M. Qurais H. Abidin as the Mayor of Bima and Mr. H. Ahmad H. Daahan, S.Kep, Ners, M.Pd as The Head of Yayasan Harapan Bunda Bima who have supported this study; The Head and Official Officers of Class IIB Raba Bima Custody who have given permission to the researchers to conduct this study; The Police and Child Protection Institution that have helped the researchers to complete this study.

Author Contributions: II and NI made the concept of the study, data processing and analysis. II and NI conducted the thorough interviews. II made the initial draft of the manuscript. II, RH, MD and OT were involved in contributing feedbacks and revision of the final manuscript. All authors have read, given comments and approval to the final manuscript.

Competition Interests: All authors state that they have no competing interests within this study.

REFERENCES


68. Widom CS, DuMont K, Czaja SJ. A prospective investigation of major depressive disorder and comorbidity in abused and neglected children grown up. Arch Gen Psychiatry. 2007;64(1):49-56.


70. Scott J, Vargheese D, McGrath J. As the twig is bent, the tree inclines adult mental health consequences of childhood adversity. Arch Gen Psychiatry. 2010;67(2):111-2.