Contextual Predictors of Sexual Abuse Among Adolescent Girls, Kerala: A School Based Survey

Simi Mohan[1], Kochuthresiamma Thomas[2], Suba Joice[3], Joye James[4], Rajamohanan. K[5]

[1]Post Doctoral Fellow, School of Public Health, Thiruvananthapuram
[2]Retired Emeritus Scientist, overnment College of Nursing, Thiruvananthapuram
[3]Professor, Dr. S.M.C.S.I. Medical College, Karakonam
[4]Secretary of Jesuit Higher Education in Indian Institute of Social Sciences, Bengaluru
[5]Professor in Charge, School of Public Health, Thiruvananthapuram

ABSTRACT

Child sexual abuse is not only a frequent and arduous legal problem but also major public health challenges that is rampant both in the developed and developing countries. The likelihood that someone will sexually offend a child, often occurs in the context of a dysfunctional family environment, parental psychopathology, compromising parental alcohol and drug use, witnessing of domestic violence, divorce of biological parents, parental incarceration, parental suicide and low family support. The overall objective of the current study was to identify the predictors of sexual abuse among adolescent girls in Kerala. A Cross-Sectional design was amended for the study using a multistage sampling technique among 1087 adolescent girls belonging to eight and ninth standard. A predesigned, pretested questionnaire prepared by the investigator was administered during the school-based survey to estimate the prevalence and explore the predictors of sexual abuse among adolescent girls. The tool was validated by subject experts and content validity index was 0.9. The prevalence rate was 17.5% and a statistically significant association was found in all the predictor variables like family constellation, paternal psychopathology, maternal support, paternal substance abuse and parental social relation with the occurrence of sexual abuse. On further bivariate analysis with logistic regression only Maternal support (B value: 912; p value <0.002**; OR (Beta): 2.490; CI: 1.408-4.406) and Paternal substance abuse (B value 1.242; p value <0.001**; OR (Beta): 3.461; CI: 2.145-5.583) were found to be the true, strong predictors of sexual abuse among adolescent girls, Kerala. The results conclude that when a number of comorbid risk variables are assessed simultaneously, paternal substance abuse and maternal support were the contextual predictors of childhood sexual abuse.

Keywords: Predictors, Sexual abuse, Adolescent girls

INTRODUCTION:

> **"The best way to predict the future is to study the past" - Robert Kiyosaki**

Child sexual abuse is not only a frequent and arduous legal problem but also major public health challenge that is rampant both in the developed and developing countries which as a matter of urgency, requires interventions at various levels of human interactions. It has the potential to harshly emasculate the healthy psychosocial development of children. Worldwide, it has been documented that approximately 150 million girls and 73 million boys under 18 years of age experienced coercion in which (50%) of sexual abuse is perpetrated against young girls and majority of whom are adolescents.[1]

The likelihood that someone will sexually offend a child is not uniformly distributed over time. While no child is immune, there are child and family characteristics that significantly heighten or lower the risk of sexual abuse.[2] Child sexual abuse often occurs in the context of a dysfunctional family environment, parental psychopathology, compromising parental alcohol and drug use, witnessing of domestic violence, divorce of biological parents, parental incarceration, parental suicide and low family support.[3]

A predictor is a circumstance, characteristic or event that occurs while an action is taking place that favours either a positive or a negative outcome, while risk factor is an event, circumstance or characteristic that is present in a subject which has a negative connotation. Predictors may be risk factors but not all predictors are risk factors.[4] It enable to predict (anticipate) the probability of occurrence or the probability of existence of sexual abuse victimization like social isolation and experiencing the death of a mother, physical abuse, having no one to confide in, having no caring female adult, having an alcoholic father or a mother. [5,6]

Most researchers investigating the predictors of child sexual abuse have examined such risk variables in isolation from one another, despite their high co morbidity in distressed families. Though there have been a lot of factors identified which is an eye opener in predicting the onset of sexual abuse, there is still a paucity of research in this area in developing country like India. The purpose of the present study was, therefore, to examine a number of comorbid risk factors [7,8] with the goal of identifying the strongest predictors of childhood sexual abuse. In particular, we assessed parental substance use (alcohol), parental social relation, paternal psychopathology, maternal support and family functioning. These risk factors are not exhaustive, but were chosen because previous studies have linked them to child sexual abuse.

METHODOLOGY:

An explorative cross-sectional study was adapted to identify the predictors of sexual abuse from 1087adolescent girls of standard eighth and ninth between October 2015 – March 2017 through a school-based survey. A multistage cluster sampling was used to cover the schools which come under the NCERT curriculum in the southern district of Kerala. Ethical clearance was obtained from Institutional Ethics Committee, Director of Education, Nodal Office of Child line, Head of the Department of Schools chosen randomly. After explaining the study purpose to the participants an informed consent from parents and a written assent was obtained prior to tool administration. Participation was voluntary due to the subtle nature and legal commitments. Anonymity and confidentiality were sustained throughout the survey and no facts were seeped out to the public.

A predesigned and pretested questionnaire developed by the researcher was used to estimate the prevalence of sexual abuse and to explore its predictors among adolescent girls. Factors which are more likely to predict the onset of sexual abuse like family constellation; paternal psychopathology; poor maternal support; paternal substance abuse and parental social relation in a developing country like India were included as variables in the tool. All these variables were measured on a Rating scale with reverse scoring for negative statements. [1 = Never; 2 = Seldom; 3 = occasionally; 4 = Almost always; 5 = Always]. There are five sub questions in each variable and thus a total of twenty-five questions from five variables. The maximum score for each variable was 25 and minimum score was 5. A cut off score of above 15 (16-25) was considered as a positive effect and a score below 15 (5-15) was considered to have a negative effect. Tool validation was done by subject experts and content validity index was (CVI = 0.92). Test-Retest reliability also was done and the Cronbach's Alpha Coefficient is 0.85 which indicated high level of internal consistency. Pilot study was done and the study was found to be feasible. Data was analyzed by Chi Square test to find the association and logistic regression with bivariate analysis to further explore the predictor's using software SPSS trial version 21.0.

RESULTS:

A. Demographic characteristics among adolescent girls, Kerala

The prevalence rate of sexual abuse was found to be (17.5%.) Among 1087 adolescent girls, 185 of them were victims of sexual abuse, while 901 were non-victims. There was a near equal distribution of study participants in both the age group. Majority (53.1%) belong to APL status and (90.9%) of them were from the rural areas. Most of the participants (54.7%) father was working on daily wages basis and (61.3%) of the mothers are home makers. Majority (75.2%) of them belong to nuclear family with both parents (77.9%) being the care taker.

B. Predictor variables of sexual abuse among adolescent girls, Kerala.

To check whether the independent variables should have been included in the binary logistic regression, the independent variables were initially cross tabulated with the dependent variable. About (86.5%) of victims of sexual abuse hail from poor family functioning (dysfunctional family) background whereas only (4.8%) of victims come from healthy family functioning background. Around (66.12%) of victims of sexual abuse has their father with unhealthy paternal psychopathology whereas only (19.2%) of the non-victims have their father with unhealthy paternal psychopathology. Only (15.6%) of the victims have good maternal support and (84.4%) of victims of sexual abuse has poor maternal support. About (70.97%) of sexual abuse victims have paternal substance abuse whereas only (29.03%) of the victim has no paternal substance abuse. Nearly (82.8%) of victims of sexual abuse have parents with poor social relation and only (17.2%) of the victims have good social relations. In all the variables the difference observed is statistically significant at p value < 0.001** as in Table 1

Table 1 Distribution of participants based on association of sexual abuse with predictor variables among adolescent girls, Kerala. (N = 1087)

PREDICTOR VARIABLES	CLASSIFICATION	VICTIMS (N=186)		NON-VICTIMS (N= 901)		CHI-SQUARE	P VALUE
Family	Dysfunctional	161	86.55	43	4.8		

Constellation	Functional	25	13.45	858	95.2	19.754	<0.001**
Paternal Psychopathology	Unhealthy	123	66.12	173	19.2		<0.001**
	Healthy	63	33.88	728	80.8	19.520	<0.001**
Maternal Support	Poor	157	84.4	51	5.6		
	Good	29	15.6	850	94.4	19.765	<0.001**
Paternal substance abuse	Present	132	70.97	89	9.8		
	Absent	54	29.03	812	90.2	49.510	<0.001**
Parental Social Relation	Poor	154	17.2	108	88.01		
	Good	32	82.8	793	11.99	3.741	<0.001**

Inference: Relationships that were found to be significant were included in the binary logistic regression and hence all the variables like family constellation ($X2=19.754$; p value= <0.001***), paternal psychopathology ($\chi^2=19.520$; p value=<0.001**), maternal support ($X2=19.765$; p value= <0.001***), parental substance abuse ($X2=49.510$; p value= <0.001***) and parental social relation ($X2=3.741$; p value= <0.001***) in logistic regression analysis among 186 victims of sexual abuse.

Table 2 Distribution of participants based on predictor variables with victims of sexual abuse among adolescent girls, Kerala (N = 186)

PREDICTOR VARIABLE	B	SE B	Wald	P Value	Exp (B)	95 % CI Upper	Lower
Family constellation	.510	.313	2.656	0.103	1.666	.902	3.078
Paternal Psychopathology	.075	.227	.109	0.741	1.078	.691	1.680
Maternal Support	.912	.291	9.830	<0.002**	2.490	1.408	4.406
Paternal substance abuse	1.242	.244	25.896	<0.001**	3.461	2.145	5.5803
Parental social relation	-.154	.241	.405	0.525	0.858	.534	1.376
Constant	-.774	.369	4.390	<0.036*	0.461		

Inference: A statistically significant association was found in all the predictor variables with sexual abuse; further in logistic regression with bivariate analysis only Maternal support (B value: 912; p value <0.002**; OR (Beta): 2.490; CI: 1.408-4.406) and Paternal substance abuse (B value 1.242; p value <0.001**; OR (Beta): 3.461; CI: 2.145-5.583) were found to be the true, strong predictors of sexual abuse.

DISCUSSION:

In the current study in exploring the predictors of sexual abuse among adolescent girls , the difference observed among victims and non-victims is statistically significant at p value < 0.001*** For all the variables examined gives a clear hint that adolescent girls being raised up in families with dysfunctional family background, unhealthy parental psychopathology, poor maternal support, paternal substance abuse and poor social relation are at an increased vulnerability of being abused. It also indicates that adolescent girls who don't get adequate maternal support [9] often catch hold of the perpetrator's attention and they gain easy entry as these girls rarely ventilate their day-to-day issues with their mother.

Paternal substance abuse[8] also makes these adolescent girls vulnerable and the literature too highlights that blood relatives are the chief perpetrators (16.13%) in sexual abuse cases.

The results of the present study correspond to the study findings which identified child sexual abuse often occurs in the context of a dysfunctional family environment, separation from parents, parental psychopathology, compromising parental alcohol and drug use, witnessing of domestic violence, parental incarceration, parental suicide, low family support and other forms of neglect and abuse [10]. Families that display multiple risk factors and minimal protective factors need to be identified as detecting risk and protective factors help to develop both universal and besieged approaches to reduce child abuse by tumbling risk factors and endorsing protective factors in family unit. Strengths-based practice, emphasizing the assets and strengths within families is a common strategy used to build and enhance protective factors and promote quality communication and engagement with families.

As there is a rarity of research in this sensitive topic, a lot of research needs to be done on further identification of predictive factors in the occurrence of child sexual abuse in a developing country like India. There is also a need to comprehend further risk demands as the amount of variance in sexual abuse was diffident in the current study. As well, further focus has to be drifted to males as they constitute a large marginal of sexual abuse victims. There is also the possibility of reporting bias as they have to recall the past and a longitudinal study would provide a means to corroborate children's reports and curtail distortion through retrospective reporting. In summary, the results of the present project showed that when a number of comorbid risk variables are assessed simultaneously, paternal substance abuse and maternal support were the contextual predictors of childhood sexual abuse. The need to include maternal support and paternal substance abuse as a high-risk factor in future research on predictors of sexual abuse is made clear.

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