

Child Sexual Abuse and Sexual Well-Being Among Young Adults

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ABSTRACT

Child sexual abuse affects people of all sexes, regardless of caste, colour, religion, ethnicity, or socioeconomic status. Intense trauma and emotional issues brought on by sexual abuse result in severe short- and long-term behavioural issues. The study aims to check the close relationship between child sexual abuse and sexual well-being among young adulthood, ages 18 – 25 and a range of positive and negative aspects of women’s and men’s sexual well-being. A sample of N=102 college students (47 Females and 55 Males) from autonomous college was taken with all the participants being between the age range of 18-25. The Child Sexual Abuse Questionnaire and Short Sexual Well-being Scale was used to measure the relationship of Child sexual Abuse and Sexual Well-being respectively. Spearman Correlation and Mann Whitney U Test were used for statistical analysis of the collected data. Findings of the study revealed that there is negative negligible relationship between Child Sexual Abuse and Sexual Well-being among young adults.

Keywords: *Sexual well-being, Child sexual abuse, Sex-related affects, Sexual behaviours*

The period of young adulthood is a specific and important time of growth and change that takes place between the ages of 18 and 25. During this time, there are important developmental tasks that young adults must navigate in order to learn about themselves and establish their sense of identity. Currently, among various organizations there are debating on a stern definition and age range inclusions for young adulthood, which could cause disorder during program development, healthcare service delivery, and research properties. Young adulthood should be carefully categorized separately from adolescence and adulthood, because young adults have lower probability of healthcare utilization and worse health outcomes related to preventable causes of illness and mortality than the immediate age groups. Young adults partake in experiences which are relatively cost high rates of injuries, mental health issues, substance use, and sexual/reproductive health circumstances. Due to their amplified possibility of risk-taking behaviour and associated poor health outcomes, young adults are in a vulnerable state (Higley., 2019).

The word ‘Abuse’ is derived from a Latin word “abusus” meaning ‘misused’. According to the United Nations, child sexual abuse involves any unwanted sexual contact or interaction between a child and an older or more knowledgeable child or adult. The abuse may be

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perpetrated by a stranger, a sibling, a person in a position of authority, a parent, or a caregiver. The abuser seeks sexual pleasure, stimulation, or gratification through the child, using force, trickery, bribes, threats, or pressure. This type of abuse occurs within close relationships and involves sexual acts and betrayal, which can have a significant impact on the child's sexual well-being in adulthood. As a result, it is considered one of the most damaging forms of childhood trauma. **(Finkelhor & Browne, 1985)** study found that children who experience sexual abuse are likely to have distorted attitudes, emotions, and behaviours related to sex. The severity of the abuse can have a greater impact on women's sexual functioning and may also result in negative feelings about themselves. The abuse can also lead to a lack of trust in others. Therefore, the study focuses on the impact of abuse on interpersonal relationships and sexuality. Sexual well-being is defined as a person's freedom to achieve sexual satisfaction and perceived quality of their sexual life and relationships. Satisfaction judgments are essential for evaluating overall well-being related to sexuality **(Diener et al., 1999)**.

There were several studies conducted by scholar researchers adhering to the present study. **(Sable et al., 2006)** the study investigated the views of male and female victims of sexual abuse regarding the obstacles to reporting rape and sexual assault. The findings revealed that the most commonly reported barriers were feelings of shame, guilt, and embarrassment, as well as a desire to avoid disclosing the experience to friends and family. Worries about confidentiality and a fear of not being believed were also frequently cited. The research also identified additional barriers specific to each gender, such as male victims' concerns about being judged as homosexual, and female victims' fears of retaliation by the perpetrator. **(Briere et al., 2003)** The research examined the sexual abuse of children and found that those who have been sexually abused are more likely to experience a variety of psychological and interpersonal issues compared to those who have not had such experiences. The study also revealed that the degree to which a person experiences distress related to the abuse is affected by multiple factors, including abuse-specific variables, as well as individual and environmental factors that occurred before or after the abuse. The study found that sexual abuse had a greater impact on symptoms compared to physical abuse or adult interpersonal victimization. **(DiLillo et al., 2001)** review focused on the long-term effects of child sexual abuse and its impact on the adult interpersonal functioning of female survivors. It discussed various research findings and methodological issues related to the assessment of adult adjustment. The review indicated that early sexual abuse is a significant risk factor for a range of interpersonal problems among female survivors, such as difficulties in intimate partner relationships, disrupted sexual functioning, and challenges in fulfilling the parental role. **(Morel et al., 2015)** study investigated how childhood sexual abuse affects adult couple adjustment through the mediation of sexual avoidance and compulsivity. The results showed that individuals who experienced sexual abuse during childhood tended to exhibit more sexual avoidance and compulsivity in adulthood, which in turn led to poorer couple adjustment. **(Watson et al., 2012)** explored a theoretical model that explains how childhood sexual abuse leads to sexual risk behaviours by means of self-objectification. The findings showed that childhood sexual abuse was linked to a higher likelihood of experiencing alexithymia, which is the inability to identify and describe emotions in oneself, as well as feelings of shame about one's body. **(Byers & Suzanne et al., 2008)** studied investigated the impact of childhood sexual abuse on adult women's sexual functioning, taking into account the effects of nonsexual abuse during childhood. The results showed that sexual self-esteem played a partial or complete mediating role in most of the relationships between childhood sexual abuse and adult sexual outcomes. The study also found that nonsexual abuse in childhood and adult sexual victimization were independently associated

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with various negative sexual outcomes. Interestingly, the study did not find that women who experienced child sexual abuse involving actual or attempted sexual penetration and sexual assault in adulthood had worse outcomes than those who did not. Overall, the study underscores the significant and far-reaching consequences of childhood sexual abuse for adult women's sexual well-being. (Lynskey et al., 1997) study aimed to identify the factors that differentiate young people who experienced childhood sexual abuse (CSA) and developed psychiatric disorders or adjustment problems in young adulthood from those who did not. The results indicate that although young people who experienced CSA are more likely to have psychiatric disorders or adjustment difficulties in young adulthood, not all of them will develop such problems. The study suggests that protective factors against the development of adjustment difficulties in young people who experienced CSA are the quality of peer and family relationships.

Significance of the study

Child sexual abuse and sexual well-being are associated because child sexual abuse can have a profound impact on an individual's sexual health, relationships, and behaviours. The trauma of sexual abuse can lead to a range of difficulties that affect sexual well-being, including sexual dysfunction, difficulties with intimacy and trust, and risky sexual behaviours. It is important to study the connection between child sexual abuse and sexual well-being is to better understand the impacts of sexual abuse on survivors. By understanding the ways in which sexual abuse can impact sexual well-being, researchers, clinicians, and advocates can develop more effective strategies for prevention, treatment, and support. Understanding the link between child sexual abuse and sexual well-being can help inform prevention efforts. For example, by identifying risk factors for sexual abuse and promoting healthy sexuality, we can work to prevent sexual abuse from occurring in the first place and also, thoughtfully examining the impacts of child sexual abuse on sexual well-being, could be provided better advocacy for survivor's rights and needs. This could include promoting policies and programs that provide survivors with access to affordable, quality healthcare, mental healthcare, mental health services and legal support. Thus, the study aims to understand the relationship between child sexual abuse and sexual well-being.

METHODOLOGY

Objective

To understand the relationship between child sexual abuse and sexual well-being among young adult.

Hypothesis

H_0 There is no significant relationship between child sexual abuse and sexual well-being among young adults.

H_0 There is no significant gender difference in child sexual abuse and sexual well-being among young adults.

Research Design

The present study used correlational research design.

Procedure

In this study about 102 participants took part in this, and all of them were college students between the age group of 18 to 25. They participated in the study by answering 20 questions on an online survey that combined questions from two different scales. Prior consent was given to the client to take part in this study and was also instructed about the confidentiality

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that would be maintained throughout the study. The participants were made aware about the terminating the test anytime they felt like doing so. Working with the guide, getting approval for the two scales that were utilized, then transferring the questions used in the scale into Google Forms, and then circulating in groups and among those who fit the predetermined category was how this entire data collection process started.

Variables

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Description of Tools

Measures

- **Short Sexual Well-Being Scale:** SSWBS is a 7-point version of the scale which was created keeping mind arrangement of sexual well-being concept. It is also recommended to begin to construct a more comprehensive tool, which will make it possible to explore all spheres of sexual well-being more precisely and separately. The reliability of the scale Cronbach's α and McDonald's total ω (Gerymski & Krok, 2019) were used to evaluate the internal consistency of the SSWBS. Measures indicate good reliability of both versions of the scale. Removing any of the items did not increase the value of the reliability coefficients. The validity of the above SSWBS scale was verified using two methods: the method of content validity and criterion validity. In order to verify the relevance of esteem (weak effect size), life satisfaction (moderate effect size) and sexual satisfaction (strong effect size).
- **Child Sexual Abuse Questionnaire:** Mohler-Kuo and her team developed the Child Sexual Abuse Questionnaire (CSAQ) in 2014 to assess the frequency, characteristics, and circumstances of child sexual abuse experienced by children and young people in Switzerland. The CSAQ is a self-reported questionnaire that contains 15 questions, including 8 questions categorized as "CSA without physical contact" with yes/no response options. It is considered a valid and reliable tool for evaluating various forms of child sexual abuse. The reliability of the scale (CSAQ) is Cronbach's alpha coefficient assessed the questionnaire's internal consistency. "CSA with physical contact," the Cronbach's alpha coefficients were 0.88 and 0.89, respectively, indicating that the scale has good internal consistency.

Sample Distribution- Inclusive and Exclusive criteria

- **Inclusive Criteria:** For this study, everyone who qualified as a college student and who fell under the category of 18-25
- **Exclusive Criteria:** Individuals who were qualified as an employee were excluded.

Statistical Analysis

SPSS software was used in this study to interpret the data. The data was analyzed using the non-parametric test, Spearman correlation and Mann Whitney U Test Design. The sampling method that was used in this study was non-probability convenience sampling method. In convenience sampling method where units are chosen for inclusion in the sample because they are the easiest for the researcher to access.

Ethical Considerations

The participant's confidentiality was protected throughout the study. No type of incentive was given to the participants for completing the test. Participants gave their consent to

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participate in this study. They were instructed to terminate the exam at any time if so they desired. No subject was coerced into participating in this study.

RESULTS AND DISCUSSION

Table 1: The results show the non-parametric correlations between Child sexual abuse and Sexual well-being.

Variables	Child Sexual Abuse		
	N	ρ	Sig
Sexual Well – Being	104	-.182	.064

*Note: *Correlation is significant at the 0.05 level (2-tailed)*

According to the Table 1, the correlation coefficient is -.182 and the p value is .064 which is greater than 0.05. The sample size used in the study is 104. Since, p value is the greater than 0.05, it accepts the null hypothesis which states that there is no significant relationship between child sexual abuse and sexual well-being among young adults.

Table 2: The results show the Mann Whitney U Test between Child sexual abuse and Sexual well-being.

Variable	Group	N	Mean Rank	Sum of Rank	Mann Whitney U	Z	Sig
Sexual Well-Being	Male	47	49.62	2332.00	1204.000	-.597	.551
	Female	55	53.11	2921.00			
Child Sexual Abuse	Male	47	52.48	2466.50	1246.500	-.312	.755
	Female	55	50.66	2786.50			

According to the table 2, the mean rank for sexual well-being in male is 49.62 and 53.11 in female. The sum of rank for sexual well-being in male is 2332.00 and 2921.00 in female. The Mann Whitney U for Sexual Well-being is 1204.000. The Z for Sexual Well-being is -.597 and the Sig for Sexual Well-being is .551. The mean rank for Child sexual Abuse in male is 52.48 and 50.66 in female. The sum of rank for Child Sexual Abuse in male is 2466.50 and 2786.50 in female. The Mann Whitney U for Child Sexual Abuse is 1246.500. The Z for Child Sexual Abuse is -.597 and the Sig for Child Sexual Abuse is .755.

DISCUSSION

The data presented here can sustain a plausible hypothesis on how childhood sexual abuse relates to elements in a wider matrix of sexual health disadvantage to generate an increased vulnerability to sexual well-being. Individual's sexual well-being has been discovered to be inversely proportionate to the individuals past experience in their childhood. If the individual was a victim of child sexual abuse at a certain of time in their childhood respective after effects will manifest in their adulthood life. It could also be concluded that sexually abused individuals are at high risk of future sexual maladaptation concerning sexual functions and sexual well-being. Furthermore, if the individual is at their developmental stage they will be at disadvantage. It means a history of childhood abuse does correlate with an aftermath of increased risk for wide range of mental health problems which could have an allowance given the environmental surroundings. According to Cohler (1987), a difficult childhood does not necessarily result in negative outcomes if a child can find a sense of purpose and a fulfilling life task that suits their personality. The women who participated in

this study stated that their well-being was influenced by factors such as education, career, and finding a meaningful life purpose.

It's possible that some of the people who participated in the survey were abused at a very young age and don't remember it. The studies found that the age at which individuals disclosed their abuse varied, and this could be due to differences in how safe they felt to disclose at different stages of development. For example, there may be differences in how people perceive the consequences of disclosure on their current family, household, and social environments, as well as how it might affect their physical and mental health, education, and employment opportunities.

SUMMARY AND CONCLUSION

The present study aimed at studying the relationship between Child sexual abuse and Sexual well-being among young adults. A total of 102 participants took part in this present study. The sampling method that was used was convenience sampling method and the data was interpreted using the Spearman correlational design, and the researcher's hypothesis which was set. Even if the null hypothesis is accepted, we cannot say that there is no relationship and according to the results there is negative negligible correlation between the variables. The two variables are inversely proportional to one another which means that if one variable increases the other decreases.

Limitation

The present study results indicate negative negligible relationship between child sexual abuse and sexual well-being. But with normally disturbed larger sample size we could draw significant relationship between child sexual abuse and sexual well-being.

REFERENCES

- Abu El-Nasr, H., El Nagar, Z. M., Reda, M. M., & El-Sehrawy, T. M. (2022). Reliability and Validity of Arabic Translation of Child Sexual Abuse Questionnaire for Use in Children and Adolescents. *Journal of Child Sexual Abuse*, 31(5), 616–631. <https://doi.org/10.1080/10538712.2022.2080143>
- Briere, J., & Runtz, M. (1987). *Post Sexual Abuse Trauma*. *Journal of Interpersonal Violence*, 2(4), 367–379. doi:10.1177/088626058700200403
- DiLillo, D. (2001). *Interpersonal functioning among women reporting a history of childhood sexual abuse: empirical findings and methodological issues*. *Clinical Psychology Review*, 21(4), 553–576. doi:10.1016/s0272-7358(99)00072-0
- Downing, N. R., Akinlotan, M., & Thornhill, C. W. (2021). *The impact of childhood sexual abuse and adverse childhood experiences on adult health related quality of life*. *Child Abuse & Neglect*, 120, 105181. doi: 10.1016/j.chiabu.2021.105181
- Fergusson, D. M., Horwood, L. J., & Lynskey, M. T. (1997). *Childhood sexual abuse, adolescent sexual behaviors and sexual revictimization*. *Child Abuse & Neglect*, 21(8), 789–803. doi:10.1016/s0145-2134(97)00039-2
- G.C, N. (2019). Adolescent Survivors of Child Sexual Abuse a Psychological Study. *University*, 10. <https://shodhganga.inflibnet.ac.in/handle/10603/318450>
- Gerymski, R. (2020). Short Sexual Well-Being Scale – a cross-sectional validation among transgender and cisgender people. *Health Psychology Report*, 9(3), 276–287. <https://doi.org/10.5114/hpr.2021.102349>
- Higley, E. (2019). *Defining Young Adulthood*. https://repository.usfca.edu/cgi/viewcontent.cgi?article=1017&context=dnp_qualifying

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- Laumann, E. O., Paik, A., Glasser, D. B., Kang, J.-H., Wang, T., Levinson, B., ... Gingell, C. (2006). *A Cross-National Study of Subjective Sexual Well-Being Among Older Women and Men: Findings from the Global Study of Sexual Attitudes and Behaviors*. *Archives of Sexual Behavior*, *35*(2), 143–159. doi:10.1007/s10508-005-9005-3
- Radford, L. (2018). A review of international survey methodology on child sexual abuse and child sexual exploitation A review of international survey methodology on child sexual abuse and child sexual exploitation 2 Centre of expertise on child sexual abuse. <https://clock.uclan.ac.uk/21733/1/CSA%20international%20survey%20methodology.pdf>
- Sable, M. R., Danis, F., Mauzy, D. L., & Gallagher, S. K. (2006). *Barriers to Reporting Sexual Assault for Women and Men: Perspectives of College Students*. *Journal of American College Health*, *55*(3), 157–162. doi:10.3200/jach.55.3.157-162
- Sigurdardottir, S., & Halldorsdottir, S. (2012). *Repressed and silent suffering: consequences of childhood sexual abuse for women's health and well-being*. *Scandinavian Journal of Caring Sciences*, *27*(2), 422–432. doi:10.1111/j.1471-6712.2012.01049.x
- Talmon, A., & Ginzburg, K. (2017). *Between Childhood Maltreatment and Shame*. *Psychology of Women Quarterly*, *41*(3), 325–337. doi:10.1177/0361684317702503
- Vaillancourt-Morel, M.-P., Godbout, N., Labadie, C., Runtz, M., Lussier, Y., & Sabourin, S. (2015). Avoidant and compulsive sexual behaviors in male and female survivors of childhood sexual abuse. *Child Abuse & Neglect*, *40*, 48–59. doi: 10.1016/j.chiabu.2014.10.024
- Valentine, L., & Feinauer, L. L. (1993). *Resilience factors associated with female survivors of childhood sexual abuse*. *The American Journal of Family Therapy*, *21*(3), 216–224. doi:10.1080/01926189308250920

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Conflict of Interest

The author(s) declared no conflict of interest.

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