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Imran Zafarzai, Aimal Amiri

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Clinical and Psychological Consequences of Sexual Assault

Imran Zafarzai
Associate Professor Forensic Medicine Department, Medical faculty Nangarhar University, Afghanistan
Email: imranzafarzai22@gmail.com

Aimal Amiri
Assistant Professor Forensic medicine department, Medical faculty Nangarhar University, Afghanistan
Email: aimalhospital1@gmail.com

Abstract
Sexual assault described as the sexual violence performed by the person physically or verbally, with our without assent of the respondent/ victim. In assault, the perpetrator misuses his position, circumstances or intimidation to soothe his craving. Afghanistan faces a political conflict for decades internally as well as externally. This prolonged political instability creates enormous number of problems for Afghanistan and sexual assault is one of them. Current study was conducted in year 2019 to find out the types and consequences (clinical and psychological) of sexual assault in Afghanistan. Main aim was to find out the consequences of and ways to uproot this evil from Afghanistan. For accomplishment of research objective, 55 female victims from Nangarhar Province have been deployed who faced sexual assault.

Keywords: Clinical, Psychological, Sexual Assault

Introduction
Sexual assault described as the Sexual violence performed by the person physically or verbally, with our without assent of the respondent/ victim. In assault, the perpetrator misuses his position, circumstances or intimidation to soothe his craving. Assault maligns the victim dignity, basic rights and mental & psychological Health. There is no restriction of age, region, gender, norms, and ethnic affiliations of both i.e. victim and perpetrator. Even there are no limitations of Place or Circumstances or relationship in between the perpetrator and Victim. Types of Sexual assaults are defined based on nature of Assault and relationship in between the perpetrator and victim (Hashimi, 2016).
Sexual assault can occur with or without physical contact. Sexual assault with physical contact includes rape/sexual abuse with penetration, attempt to commit sexual abuse with penetration (attempted rape); sexual touching is committed with the intent to commit penetration. Rape or sexual abuse intended with penetration includes act of penetration into any body hole varying the degree of intensification. Same as well with attempted or not
intended for penetration includes kissing, touching to any body parts either directly or through the victim’s clothing. While sexual assault without physical contact includes sexual harassment, imposed expression to sexual parts or proceedings ignite child to feel one’s body or orgasm, record the child in appropriate condition.

Types of sexual assault on the basis of relationship between the perpetrator and victim encompasses Intrafamilial Sexual violence, Extrafamilial sexual Violence, Sexual assault in a conjugal context and Sexual misconduct (Miller, 2007; Ullah, 2020).

In the case of Intrafamilial sexual abuse, in particular, the perpetrator can be the victim’s father or mother, the father’s or the mother’s spouse, a sibling, a grandparent, an uncle, aunt or cousin (Babur, 2007). Perpetrator could be from a close or far family. When the perpetrator is not a family member it could be the acquaintance i.e. friend, colleague, nearby resident, school or college mate or any stranger, it is defined as the Extrafamilial sexual abuse. Sexual assault can be committed in between the partners of various ages, thus both can be in marital, civil or dating relations.

In Afghanistan, culture and economy has suffered a lot due to the war since many decades, there has been great recovery after the Taliban Regime and the foreign agencies helped a lot in terms of economic support. Women comprise the half of the 27.5 Million Population, while one-third population lives below average. Even a young girl is perceived as extra load on a House and early marriages could be the solution to get rid of extra burden. Women are not independent in terms of earning in any means (Blunt et al., 2015).

Over last two decades, numerous bills and Laws passed by the Government for Women’s basic rights. Few milestones to mention are the production of a national human rights institution, ministry for women’s affairs at the national level and departments of women’s affairs at the provincial level, human rights units in various ministries, gender units in some ministries and the enactment in 2009 of the landmark Law on the Elimination of Violence against Women (Nazi, 2012; Ullah, 2020).

When we talk about literacy rate, only one Individual out of three can read or write, female percentage is 17 percent and for male, it is 45 percent at National Level. According to the reports, about three and half million-school going children are not going to school, even Government made great development in Education. Major portion of school-out children comprises of girls, rural area kids, debilitated Kids or socially exploited children. There have been several efforts to secure equal gender educations as different societal and cultural hurdles that kept many kids out of school. Even In-school problems such as separate Restrooms, poor sanitary facilities resulting in absence of girls in most of their Educational calendar (Yusufzada, Xia, & Xia, 2019). Availability of female teaching staff is a great obstacle in Girls education in remote areas. Even mobility of Female teaching staff or students alone is a risk to any sexual violence incident. Due to this low level of knowledge female suffer from violence and assault related issues.

Research Objective

Main objectives of the study are following:

- To find out the prevalent types of sexual assault
- To find out the consequences (clinical and psychological) of sexual assault on women health.
- To find the most effective treatment used by the women to end sexual assault.
Methodology
Sexual assault described as the Sexual violence performed by the person physically or verbally, with or without assent of the respondent/ victim. In assault, the perpetrator misuses his position, circumstances or intimidation to soothe his craving. Assault maligns the victim dignity, basic rights and mental & psychological Health. In the present study, structured interview was used for the collection of data from the females who faced sexual assault.

Sample
For accomplishment of research objective, the 55 female victims from Nangarhar Province have been deployed who faced sexual assault. Random sampling technique was used for collection of data from the respondents Average age of the participants was 27 while the actual age bracket ranged from 20 to 40.

Instrument Used for Research
This study has used primary data for collection of data through semi-structured interview. Questionnaire for the interview was prepared by using different guidelines. Different necessary domains of interpersonal relationships and psychology were covered in the guidelines. Descriptive analysis containing the type, frequency, sequencing, circumstances, and perpetrator behaviors at the time of the first and subsequent sexual assaults as well as actions the woman took to end the sexual assault.
A self-administrated questionnaire was used in this research as the variables employed in this research similar to variables used by (Chapman & Chapman, 2017; Khan, Ullah, Ashraf, & Iqbal, 2020; Ullah, 2020; Ullah, Afgan, Afridi, 2019). The primary data was collected through questionnaire, administered by interviewer because some of the respondents were unable to understand the written questions. The questionnaire was also narrated from English to their native language (Pashto).

Results
Types Of Sexual Assault
According to the information collected from women and from previous researches, it is clear that there are different types of sexual assault.

On the basis of Contact
Sexual assault can occur by physical contact and also without physical contact. Sexual assault with physical contact include sexual relations, which include penetration, any attempt to commit penetration or touching with specific intention of penetration. While assault without physical contact include sexual harassment.

On the Basis of Victim-Perpetrator Relationship
Sexual assault can be divided on the basis of victim and perpetrator relation. Two main forms based on the relationship are intra familial sexual assault (type of assault in which perpetrator belongs to immediate family or may be from extended family) and extra familial sexual assault (type of assault in which perpetrator belongs to friends or may be a stranger). It can be conjugal assault (a type of assault that occur between partners) or may be sexual misconduct (a type of assault in which any professional get benefit of his/her position.)
Clinical and Psychological Consequences
Sexual Violence impact victim’s mental health very drastically. Some women make rational decisions after enduring sexual harassment, others exhibit inappropriate or inadequate attitude (e.g. stuporous tolerance, unreasonable anger, personal fear flight, constant and incoherent talking, etc.) and prone people may represent psychopathological behavior.

Depression
Depression is the first and foremost effect of Sexual violence. It is clear from the literature review that prolonged Sexual Violence leads to an increased prevalence of depression among Victims of every age. Literature also tells that depression in young Victims is most common side effect and as compared to the middle aged Victims, as they are more vulnerable to such conditions. Depression can be treated both by medicine and by cognitive therapies, generally, therapies are more useful as compared to medicines but it also depends upon the expertise of therapist. Both treatments can be used in combination to maximize the results.

Anxiety
Anxiety is another common consequence of Sexual Violence in the country. A large proportion of victim’s Mild Sexual Violence suffered from anxiety and face periodic anxiety attacks. This mental illness is less severe form of depression. It is less severe because it is not constant and also its effects are less adverse. Again, both, medicines and cognitive behavioral therapies can be used to treat the anxiety but therapies are more effective in children and adolescents. WHO recommends some basic psychological interventions for the treatment of anxiety.

Post-traumatic Stress Disorder
Review of different literature researches indicate that PTSD are very common and can be treated only by psychological interventions. These interventions should be customized for every person depending upon his/her individual symptoms and level of severity of disease.

Feeling of Shame
Many sexual assault victims felt ashamed and disgraced. They feel embarrassed to be with other people and look with contempt and hatred at themselves. They feel tainted or tarnished, have lost their sanity (quite often asking if they are still living things), and feel like (as a woman or a wife, for example) they have destroyed their inherent value.

Feeling of Guilt
Victims of sexual harassment may feel bad for their own actions: for example, not defending themselves, preferring rape to suicide, preparing to leave when warned of an approaching intervention, or heading to the location where they were raped.

Physical Asthenia
It can also be described as chronic exhaustion unremitting by relaxation. After the physical exertion, the rash of fatigue and a recurring sense of exhaustion and/or general restlessness. This condition is faced by most victims of psychiatric stress.
Pain
Victims also incur from stomach, chest, or muscle pain, headaches, and pain that is systemic. A painkiller or Constant rest relieve the relevant pain. Every women experience pain and inflammation after the assault.

Sexual Disorders
These are ubiquitous in sexual assault victims, which involve reduced or decreased sexual attraction, hostility of sex (bafflement and denial to sex), anorgasmia (inability to reach orgasm), dyspareunia (stressful coitus), and vaginismus. Menstrual irregularity is the most common like Amenorrhoea (absence of periods), menorrhoea (profuse periods) & dysmenorrhoea (painful periods).

Treatment
• Evaluate the mandate, structure and functioning of the Ministry of Women’s Affairs and provide it with sufficient human, technical and financial resources to fulfil its mandate;
• Allocate adequate human, technical and financial resources to ensure that all criminal justice officials can fulfil their mandate, including ensuring fair and equitable distribution of resources across the country.
• Ensure that legislation clearly specifies the obligation to register all marriages and divorces;
• Ensure that the criminal law establishes criminal liability for all parties involved in the organization of child and forced marriages.
• Incorporate gender-specific offences, including rape, into the new penal code. These offences should be clearly defined and the sanctions applicable to each offence should be specified to ensure that gender-specific offences are treated with the same degree of gravity as gender-neutral crimes.
• Clear guidelines and policies on the use of mediation to settle disputes be developed, including provisions on non-discrimination and sanctions for non-compliance;
• The processing of a case by jirgas or shuras not preclude such cases from being brought before the formal justice system;
• There has been a valid court decision to sentence the detainees to imprisonment, or in the case of pretrial detention, an order by the authority competent under the Criminal Procedure Law;
• That the women or girls have been found guilty or stand accused of crimes expressly punishable under codified law currently in force;
• That the women have been given their rights to fair trial and due process.
• The Government should consider alternatives to detention and address the question of transit houses for women who are released from detention.
• The Government should increase the number of shelters for victims of violence against women; strengthen support services for victims, including counselling, medical and rehabilitation services; provide training and skills development programs; assist with financial and technical support to ensure good practices and sustainability; and develop a strategy to ensure financial support.
Conclusion

Sexual assault described as the Sexual violence performed by the person physically or verbally, with our without assent of the respondent/victim. In assault, the perpetrator misuses his position, circumstances or intimidation to soothe his craving. According to the information collected from women and from previous researches it is clear that there are different types of sexual assault.1) On the basis of contact 2) On the basis of victim-perpetrator relationship. Each type cause different clinical (pain, physical asthenia, sexual disorders etc.) and psychological consequences (depression, anxiety, STDS etc.). Government should take proper measures at community and individual level as described above to stop such cases in future.

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*Imran zafarzai*

Associate Professor Forensic medicine department Medical faculty Nangarhar University, Afghanistan

*Email: Imranzafarzai22@gmail.com*

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*Aimal Amiri*

Assistant Professor Forensic medicine department Medical faculty Nangarhar University, Afghanistan

*Email: Aimalhospital1@gmail.com*