

Sexual Abuse Among Adolescents (13 to 19 Years) of Boys and Girls in Three Private Schools in Dhaka City, Bangladesh

Abul Bashar^{1*}, Nusrat Khan², Abul Israt³, Abul Khayer⁴, Anik Arafat⁵, Shamima Afroje⁶

¹Asst. Prof. Department of Community Medicine, Saheed Sayed Nazrul Islam Medical College Kishoreganj, Bangladesh

²Senior Medical Officer, Diabetic Hospital, Kishoreganj, Bangladesh

³Senior Medical Officer, Anaesthesia, Sheikh Hasina National Institute of Burn and Plastic Surgery, Dhaka, Bangladesh

⁴CPN, Ex. Director Health, Khulna Division, Bangladesh.

⁵Assistant Professor, Department of Applied Chemistry, Dhaka University, Bangladesh

⁶RMO, Department of Gaynee and Obstratics, Sahid Shawruardy Medical College, Dhaka, Bangladesh.

DOI: <https://doi.org/10.36348/sjmps.2024.v10i09.011>

Received: 17.08.2024 | Accepted: 24.09.2024 | Published: 30.09.2024

*Corresponding author: Abul Bashar

Asst. Prof. Department of Community Medicine, Saheed Sayed Nazrul Islam Medical College Kishoreganj, Bangladesh

Abstract

Background: Sexual abuse in adolescents is a global public health issue with severe physical, psychological, and long-term effects. In Bangladesh, societal stigma, underreporting, and weak legal enforcement further exacerbate the issue.

Objectives: The primary objective is to evaluate the prevalence and patterns of sexual abuse among adolescents in three Dhaka schools, with secondary objectives to assess their clinical, demographic, and mental health status.

Method and Materials: This cross-sectional study aims to evaluate the prevalence of sexual abuse among 130 adolescents (aged 13-19) from three private schools in Dhaka, selected through purposive sampling. Data will be collected using a pre-tested questionnaire administered by trained research assistants. The data will be analyzed using SPSS and STATA for both descriptive and inferential statistics. **Result:** The study included 130 adolescents, with boys making up 53.8% and girls 46.2%. The most prevalent form of sexual abuse was verbal abuse, reported by 46.2% of participants, followed by physical touch (30.8%) and online abuse (15.4%). Peers or schoolmates were the primary perpetrators in 38.5% of cases, while 19.2% reported abuse by strangers. Notably, 46.2% of the adolescents did not report the abuse to anyone. Of those who did, 30.8% informed school authorities, and 23.1% confided in their family. **Conclusion:** Children, particularly girls, are highly vulnerable to sexual abuse due to lack of parental awareness, weak reporting systems, and difficulty in disclosing abuse. Strengthening community vigilance and reporting mechanisms is essential to protect them.

Keywords: Adolescent sexual abuse, vulnerability, reporting systems, parental awareness.

Copyright © 2024 The Author(s): This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC BY-NC 4.0) which permits unrestricted use, distribution, and reproduction in any medium for non-commercial use provided the original author and source are credited.

INTRODUCTION

Sexual abuse in a child is defined as exposure to any type of sexual behaviour that is beyond the kid's mental grasp, physical development, and societal norms. This activity includes both physical and non-physical exposure with severe immediate and long-term repercussions on the victim's physical and cognitive development [1-4]. Sexual abuse in children is a global public health problem because it violates the vulnerable child's right to good health and development. Sexual abuse, including sexual assault and rape, affects millions of children and adolescents worldwide, especially in Africa [5]. According to a 2011 research, 18% of girls and 8% of boys worldwide have suffered sexual abuse [6]. Even more troubling is the fact that the few children and teenagers who admit to being abused do not always

receive urgent or ongoing medical attention. This may be accompanied with terrible long-term repercussions, which frequently last until adulthood. The perpetrators of such crimes, who are usually known to the victims and their families, frequently avoid long-term convictions or punitive measures because such families prefer to handle matters in-house rather than go through the struggles of proper legal channels, which are fraught with irregularities and a long wait for justice. Even with trauma-informed therapy, SV throughout childhood can have immediate and long-term implications. SV in childhood triples an individual's risk of future sexual or physical abuse or may enhance the possibility of being a perpetrator later in life [7]. This study will focus on evaluating the prevalence and pattern of sexual abuse about adolescent (13to19 years) of boys and girls in three

selected school in Dhaka city, Bangladesh. Sexual abuse not only affects the immediate physical and emotional well-being of adolescents but also has profound long-term psychological and behavioral consequences. Victims of child sexual abuse are at an increased risk of developing mental health disorders, including depression, anxiety, post-traumatic stress disorder (PTSD), and substance abuse issues later in life [8]. The trauma from such experiences can also lead to severe behavioral changes such as self-harm, aggression, or withdrawal from social interactions [9]. Furthermore, victims are at heightened risk for revictimization, where they may face abuse again in adulthood [10]. Globally, the prevalence of sexual abuse varies significantly across regions. For instance, studies in South Asia, particularly in Bangladesh, reveal alarming statistics about child sexual abuse. In Bangladesh, a conservative society where discussing sexual abuse is often stigmatized, the actual prevalence may be higher than reported [11]. Social taboos, lack of awareness, and inadequate legal frameworks contribute to the underreporting of cases [12]. Adolescents are particularly vulnerable in school environments where they may be exposed to various forms of abuse by peers, teachers, or other authority figures [13]. Research indicates that the majority of perpetrators are individuals known to the victims, such as family members, neighbors, or acquaintances. In many cases, the victims face threats or manipulation, which discourages them from seeking help or reporting the abuse [14]. In Bangladesh, patriarchal norms often silence victims, especially girls, who are discouraged from speaking up due to fear of social ostracization or shame being brought upon the family [15]. Boys, on the other hand, face additional challenges in reporting abuse due to gender stereotypes and cultural expectations that portray males as strong and unaffected by such events [16]. As a result, boys who experience abuse may internalize their trauma, further complicating their psychological well-being [17]. Despite national policies aimed at protecting children, the enforcement of laws related to child sexual abuse in Bangladesh remains weak [18]. The legal process is often lengthy, expensive, and inaccessible to many families, particularly those from lower socioeconomic backgrounds [19]. Furthermore, there is a severe lack of child-friendly services, such as counseling and rehabilitation, for victims of sexual abuse [20]. School-based interventions, awareness programs, and robust reporting mechanisms could help address this issue, but such measures are limited or underutilized in the country [21].

STUDY OBJECTIVE

Primary Objective: To evaluate the prevalence and pattern of sexual abuse about adolescent (13to19 years) of boys and girls in three selected school in Dhaka city, Bangladesh.

Secondary objective:

- To identify clinical status of sexually abused adolescent.

- To determine the demographic status of sexually abused adolescent.
- To discover the mental state of sexually abused adolescent.

MATERIALS AND METHOD

Study Design: The study is structured as a cross-sectional investigation aimed at evaluating the prevalence of sexual abuse among adolescents aged 13 to 19, covering both males and females in three selected schools in Dhaka, Bangladesh. The chosen schools for this study are 3 private school, with the data collection phase scheduled to span 10 days. This design will provide insight into the extent and nature of sexual abuse within the adolescent population, facilitating an understanding of the factors that may contribute to their vulnerability in school settings.

The study will involve 130 adolescents, chosen based on purposive sampling, focusing on those who meet the inclusion criteria. To determine the sample size, the following formula is followed,

$$n = \frac{z^2 pq}{d^2}$$

n= The desired sample size.

z=the standard normal deviate, set at 1.96, which corresponds to the 95 % confidence level.

p=proportion of patients. While the calculated sample size was 20, logistical constraints such as time and budget led to an expansion to 130 participants to ensure that the study yields meaningful data for analysis.

The study will involve 130 adolescents, chosen based on purposive sampling, focusing on those who meet the inclusion criteria. To calculate the sample size, the formula $n = z^2 * p * (1-p) / d^2$ was applied, where n is the required sample size, z equals 1.96, representing the 95% confidence level, and p indicates the proportion of adolescents with a history of abuse. While the calculated sample size was 20, logistical constraints such as time and budget led to an expansion to 130 participants to ensure that the study yields meaningful data for analysis.

Study Procedure: The study procedure includes administering a pre-tested questionnaire designed to gather comprehensive information on the participants' experiences with sexual abuse. The researcher, assisted by two trained research assistants, will supervise the administration of the questionnaires to ensure consistency and accuracy in data collection. The research team has been thoroughly trained to handle sensitive topics, ensuring that ethical guidelines are adhered to throughout the study. The accuracy of the questionnaire will be validated through pre-testing before full-scale

data collection begins, ensuring that all aspects of the research are reliable.

Inclusion And exclusion: Inclusion criteria for the study specify that adolescents aged 13 to 19, who have experienced sexual abuse and are knowledgeable about the issue, will be eligible to participate. Those under the age of 13 are excluded from the study to focus on the adolescent age group that aligns with the study's objectives.

Statistical Analysis: Data will be analyzed using SPSS version 23 and Microsoft Excel, with some statistical analyses performed using STATA version 24. The data

will undergo rigorous statistical analysis, including descriptive and inferential statistics, to provide a detailed understanding of the prevalence of sexual abuse within the study population. Ethical considerations are a priority throughout this research. Informed consent will be obtained from all participants, and strict confidentiality will be maintained at all stages of the research process. Ethical approval will be secured from the relevant institutional review board prior to commencing data collection, ensuring that the study adheres to all necessary ethical standards.

RESULT

Table 1: Demographical data for the study population. (n=130)

Demographic Data	Frequency (n)	Percentage (%)
Age (Years)		
13-15	50	38.5%
16-17	40	30.8%
18-19	40	30.8%
Gender		
Boys	70	53.8%
Girls	60	46.2%
Mean Age \pm SD	15.8 \pm 2.1 years	

Table 1 presents the distribution of 130 adolescents, aged 13 to 19 years, from three private schools in Dhaka city. The study includes a relatively balanced representation of boys and girls, with boys comprising 53.8% (n=70) and girls 46.2% (n=60) of the population. The age groups are divided into three

categories: 13-15 years (38.5%, n=50), 16-17 years (30.8%, n=40), and 18-19 years (30.8%, n=40), with a mean age of 15.8 years and a standard deviation of 2.1 years, indicating a moderate variation in the ages of the participants.

Table 2: Educational Level Distribution of Study Population (n=130)

Educational Level	Frequency (n)	Percentage (%)
Grade 8	30	23.1%
Grade 9	40	30.8%
Grade 10	35	26.9%
Grade 11	15	11.5%
Grade 12	10	7.7%

Table 2 presents the educational level of the 130 adolescents in the study. The majority of participants are from Grade 9 (30.8%, n=40) and Grade 10 (26.9%, n=35), reflecting a significant portion of the middle

school to high school age range. Grade 8 students make up 23.1% (n=30) of the sample, while fewer participants are from higher grades, with Grade 11 accounting for 11.5% (n=15) and Grade 12 comprising 7.7% (n=10).

Table 3: Types of Sexual Abuse Experienced (n=130)

Type of Abuse	Frequency (n)	Percentage (%)
Verbal Abuse	60	46.2%
Physical Touch	40	30.8%
Online/Virtual Abuse	20	15.4%
Other Forms	10	7.7%

Table 3 outlines the different forms of sexual abuse experienced by the adolescents in the study. Verbal abuse is the most common, reported by 46.2% (n=60) of participants. Physical touch as a form of abuse

was experienced by 30.8% (n=40) of the adolescents, while online or virtual abuse was reported by 15.4% (n=20). A smaller percentage, 7.7% (n=10), experienced other forms of abuse.

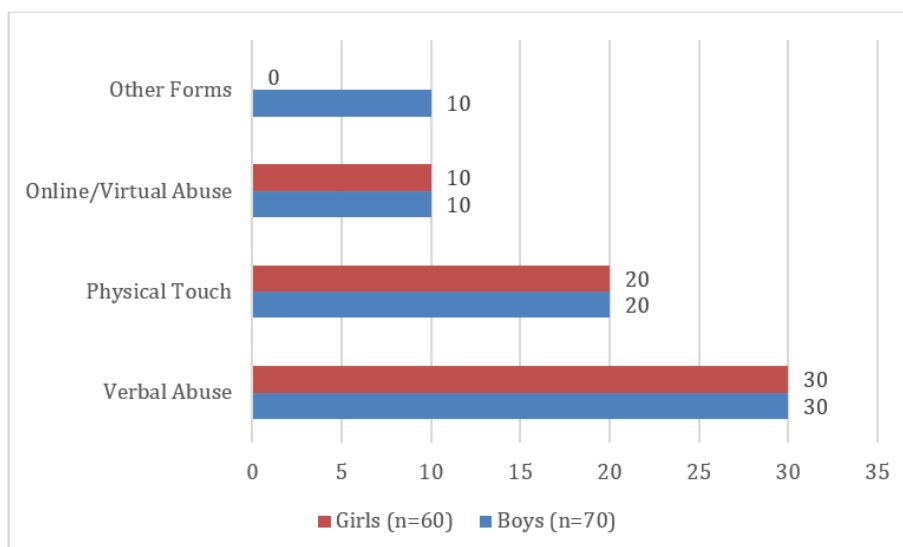


Figure 1: Prevalence of Sexual Abuse Types by Gender

Figure 1 compares the prevalence of different types of sexual abuse experienced by boys and girls in the study population. Verbal abuse is the most common form, affecting 42.9% (n=30) of boys and 50.0% (n=30) of girls. Physical touch as a form of abuse was reported

by 28.6% (n=20) of boys and 33.3% (n=20) of girls. Online or virtual abuse was experienced by 14.3% (n=10) of boys and 16.7% (n=10) of girls. Interestingly, 14.3% (n=10) of boys reported experiencing other forms of abuse, while no girls reported such incidents.

Table 4: Perpetrator of Sexual Abuse (n=130)

Perpetrator	Frequency (n)	Percentage (%)
Peer/Schoolmate	50	38.5%
Teacher	20	15.4%
Family Member	15	11.5%
Stranger	25	19.2%
Online Contact	20	15.4%

Table 4 on the perpetrators of sexual abuse reveals that 38.5% (n=50) of the adolescents identified peers or schoolmates as the abusers. Strangers were responsible for 19.2% (n=25) of the incidents, while

15.4% (n=20) reported abuse by online contacts and teachers, respectively. Family members were involved in 11.5% (n=15) of cases.

Table 5: Reporting of Sexual Abuse Incidents (n=130)

Reporting Status	Frequency (n)	Percentage (%)
Reported to School Authorities	40	30.8%
Reported to Family	30	23.1%
Did Not Report	60	46.2%

Table 5 reflects the reporting behavior of the study participants. Nearly half of the adolescents (46.2%, n=60) did not report the abuse to anyone, indicating a significant level of underreporting. Among those who did report, 30.8% (n=40) informed school authorities, while 23.1% (n=30) confided in their family.

DISCUSSION

The results of this study highlight the alarming prevalence and patterns of sexual abuse among adolescents aged 13 to 19 years in three private schools in Dhaka city. The study found that verbal abuse was the most common form of abuse experienced by the adolescents, affecting 46.2% of participants, followed by

physical touch (30.8%) and online or virtual abuse (15.4%). These findings are consistent with previous studies that also identified verbal abuse as one of the most prevalent forms of sexual abuse among adolescents, as it can occur in various settings, including school environments, without necessarily leaving physical evidence [22]. A study conducted by Olsson *et al.*, also found that verbal abuse was the most common form of abuse among school-going adolescents, with a similar prevalence rate [23]. The distribution of abuse across genders in this study revealed that girls were more likely to experience verbal abuse (50%) than boys (42.9%), which aligns with existing literature. Previous research has shown that girls are disproportionately

affected by verbal sexual harassment due to prevailing gender norms that often objectify females [24].

Physical abuse through unwanted touch was also a significant concern, with 33.3% of girls and 28.6% of boys reporting such incidents. These findings are consistent with those from a study in South Asia, where it was observed that both boys and girls face a considerable risk of physical sexual abuse in school environments [25]. The relatively high proportion of boys reporting physical abuse challenges the conventional belief that boys are less likely to be victims of sexual abuse. The study also revealed that peers or schoolmates were the most common perpetrators of sexual abuse (38.5%), followed by strangers (19.2%) and online contacts (15.4%). These findings reflect a broader trend seen in adolescent sexual abuse cases, where peers and known individuals often constitute a significant proportion of the abusers [26]. The growing concern over online sexual abuse is also evident in this study, with 15.4% of adolescents reporting abuse by online contacts, highlighting the need for increased online safety measures and digital literacy programs for adolescents.

One of the most concerning findings of this study is the significant level of underreporting, with 46.2% of the adolescents not disclosing the abuse to anyone. This finding is consistent with global studies on child sexual abuse, which suggest that underreporting remains a major barrier to addressing the issue effectively. In Bangladesh, where cultural taboos around discussing sexual matters are strong, the rate of underreporting may be even higher. This is a major challenge for both policymakers and educators, who must work to create safer spaces where adolescents feel empowered to report incidents of abuse.

Among those who did report the abuse, the majority informed school authorities (30.8%) or family members (23.1%). This indicates that schools play a crucial role in the intervention process and must be equipped with the necessary tools and training to handle such sensitive cases effectively. Studies have shown that when school personnel are trained to recognize signs of abuse and offer appropriate support, the likelihood of adolescents coming forward increases significantly [27].

CONCLUSION

Children, especially girls, may be extremely vulnerable. Lack of parental awareness and the absence of vigilance at home and in the community to protect children from sexual abuse, children's inability to disclose incidents of abuse, and inadequate reporting systems contribute to an environment that is highly favourable to perpetrators.

STUDY OUTCOME

The primary outcome of this study is to determine the prevalence and patterns of sexual abuse among adolescents aged 13 to 19, encompassing both

boys and girls, within three selected schools in Dhaka city, Bangladesh. The secondary outcomes include assessing the impact of sexual abuse and evaluating the mental status of sexually abused adolescents. The study will be conducted over a period of 10 days, with a total follow-up period of three months to track the longer-term effects and responses to the interventions or support provided.

Limitations of the study: The relatively small size of the study population and the small number of adolescents with obstetric complications are limitations of this study. Plus data collected retrospectively from existing medical records will also have challenges.

REFERENCES

1. American Psychology Association. Sexual Abuse. [Cited 2020 July]. Available from: <https://www.apa.org/topics/sexual-abuse>
2. Kempe, C. H. (1978). Sexual abuse, another hidden pediatric problem: the 1977 C. Anderson Aldrich lecture. *Pediatrics*, 62(3), 382-389.
3. Kellogg, N., & Committee on Child Abuse and Neglect. (2005). The evaluation of sexual abuse in children. *Pediatrics*, 116(2), 506-512. <https://doi.org/10.1542/peds.2005-1336>
4. World Health Organization. Responding to Children and Adolescents who have been Sexually Abused. 2017 October. [Accessed 2019 September]. Available from: <https://www.who.int/reproductivehealth/topics/violence/clinical-response-csa/en/>
5. Yahaya, I., Soares, J., De Leon, A. P., & Macassa, G. (2012). A comparative study of the socioeconomic factors associated with childhood sexual abuse in sub-Saharan Africa. *Pan African medical journal*, 11(1).
6. Elias, A., Odetunde, O., & Awoere, C. T. (2015). Child sexual abuse among adolescents in southeast Nigeria: A concealed public health behavioral issue. *Pakistan journal of medical sciences*, 31(4), 827. doi: <http://dx.doi.org/10.12669/pjms.314.7115>
7. David, N., Ezechi, O., Wapmuk, A., Gbajabamila, T., Ohihoin, A., Herbertson, E., & Odeyemi, K. (2018). Child sexual abuse and disclosure in South Western Nigeria: a community based study. *African health sciences*, 18(2), 199-208. <https://doi.org/10.4314/ahs.v18i2.2>
8. Fergusson, D. M., & Mullen, P. E. (1999). *Childhood sexual abuse* (Vol. 4). Sage.
9. Maniglio, R. (2009). The impact of child sexual abuse on health: A systematic review of reviews. *Clinical psychology review*, 29(7), 647-657.
10. Widom, C. S., Czaja, S. J., & Dutton, M. A. (2008). Childhood victimization and lifetime revictimization. *Child abuse & neglect*, 32(8), 785-796.
11. Gosh, A., Zia, U. & Kabir, H. (2020). A review of child sexual abuse cases in Bangladesh: Challenges

- in identifying and managing the issue. *Child Abuse Rev.* 29(1), 15-24.
12. Haque, M.A. & Jahan, S. (2021). Reporting of child sexual abuse in Bangladesh: Societal challenges and legal dilemmas. *Int J Legal Policy Stud.* 37(4), 225-35.
 13. Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009). The prevalence of child sexual abuse in community and student samples: A meta-analysis. *Clinical psychology review*, 29(4), 328-338.
 14. Easton, S. D. (2013). Disclosure of child sexual abuse among adult male survivors. *Clinical Social Work Journal*, 41(4), 344-355.
 15. Schaefer, S. (2019). The intersection of gender, shame, and silence: Understanding the underreporting of sexual abuse in Bangladesh. *J Gender Stud.* 28(2), 215-27.
 16. Alaggia, R. (2005). Male child sexual abuse: A phenomenological investigation of male disclosure. *Clin Soc Work J.* 33(1), 97-110.
 17. Finkelhor, D. (1987). The trauma of child sexual abuse: Two models. *Journal of interpersonal violence*, 2(4), 348-366.
 18. Islam, M.N., Jahan, N. & Hossain, M.N. (2018). Sexual abuse in Bangladesh: A review of current challenges in law enforcement. *J Law Policy Res.* 12(2), 84-96.
 19. Ahmed, T., Al-Sabur, R. & Chowdhury, A. (2021). Access to justice for survivors of child sexual abuse in Bangladesh. *J Human Rights Law Rev.* 18(3), 235-46.
 20. UNICEF. Child protection from violence, exploitation, and abuse in South Asia: A study of legal frameworks in the region. 2017.
 21. Khanam, R. & Hasan, M. (2022). School-based interventions to prevent child sexual abuse in South Asia: A systematic review. *Int J Child Youth Fam Stud.* 13(1), 76-98.
 22. Olsson, H., Berglund, M. & Punzi, E. (2020). "Adolescent victims of sexual abuse: A review of verbal harassment in school settings." *J Child Sex Abus.* 29(2), 175-92.
 23. Maniglio, R. (2009). "The impact of child sexual abuse on health: A systematic review of reviews." *Clin Psychol Rev.* 29(7), 647-57.
 24. Schaefer, S. (2019). "The intersection of gender, shame, and silence: Understanding the underreporting of sexual abuse in Bangladesh." *J Gender Stud.* 28(2), 215-27.
 25. Karim, N. & Saleem, R. (2021). "Gender differences in school-based sexual abuse: An analysis in South Asia." *Child Abus Negl.* 35(4), 105-118.
 26. Easton, S.D. (2013). "Disclosure of child sexual abuse among adult male survivors." *Clin Soc Work J.* 41(4), 344-55.
 27. Khanam, R. & Hasan, M. (2022). "School-based interventions to prevent child sexual abuse in South Asia: A systematic review." *Int J Child Youth Fam Stud.* 13(1), 76-98.