



Effectiveness Of Intervention For Depression Among Sexually Abused Girls In The Rehabilitation Centres Of Kollam District, Kerala

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1. ABSTRACT

This study conducted at the Nirbhaya Rehabilitation Centre in Kollam, Kerala, explored the impact of sexual abuse on adolescent girls and assessed the efficacy of an 8-week comprehensive therapeutic intervention model integrating dance, art, music, and psychotherapy. The assessment tools utilized in this study encompassed a Socio Demographic Profile questionnaire, designed by the researcher and the guide, and the Beck Depression Scale using a mixed research design with 80 participants, the study revealed significantly higher depression levels before the intervention, but the structured program effectively alleviated these. Qualitative interviews with survivors highlighted enduring trauma across physical, emotional, psychological, and social dimensions. The findings underscore the potential benefits of a holistic therapeutic approach in reducing depression among sexually abused adolescent girls, offering insights for tailored interventions to enhance their well-being and resilience.

Key words: Intervention, Depression, Sexually Abused Girls.

2. INTRODUCTION

Child Sexual Abuse (CSA) is defined by the World Health Organization (WHO) as the involvement of a child in sexual activity without full comprehension or the ability to give informed consent, violating societal laws and taboos (Krug EG et al., 2002). This intricate issue is pervasive across ages, socioeconomic classes, and countries, with varying magnitudes of occurrence. Survivors of CSA may face physical, behavioral, cognitive, and emotional impacts, with adolescents experiencing higher victimization rates than adults. After such trauma, females are more prone to developing psychological disorders, including posttraumatic stress disorder, low self-esteem, guilt, and depression. The risk of chronic disorders like borderline personality and dissociative identity disorder also rises post-CSA, particularly among adolescents who are more vulnerable to such victimization (Murray, 1993).

Research indicates that a significant percentage of female sexual assault cases occur between the ages of 14 and 17, with juveniles forming most victims. Various forms of sexual abuse, including verbal manipulation, posing provocatively, and fondling, are documented in the literature. The risk of sexual victimization peaks dramatically between ages 10 to 14 and recedes by 20 years of age, underscoring the critical vulnerability of female adolescents during this developmental period (Snyder, 2000). The multifaceted consequences of CSA underscore the importance of comprehensive understanding and intervention strategies to address this pervasive issue affecting the well-being of individuals and societies alike.

Depression among Sexually Abused Girls

Experiencing sexual abuse can lead to a prevalent psychological consequence, namely depression. This traumatic event profoundly affects an individual's mental health and overall well-being. While not universal, depression emerges as a potential outcome for many survivors of sexual abuse. Major depression, a significant public health concern with high prevalence rates and substantial morbidity and mortality, serves as an illustrative example connecting a history of child sexual abuse (CSA) to severe adult psychiatric psychopathology. Numerous studies, including reviews by Beitchman et al. (1992), Neumann et al. (1996), Paolucci et al. (2001), and Polusny and Follette (1995), have consistently linked major depression and dysthymia to CSA.

Research findings consistently highlight the profound impact of child sexual abuse on both physical and mental health, as well as subsequent sexual adjustment. The severity and frequency of traumas experienced play a crucial role, with child sexual abuse demonstrating far-reaching and enduring effects. Individuals who undergo multiple traumas and lack sufficient parental support may be susceptible to developing post-traumatic stress disorder, depression, and anxiety, underscoring the gravity of the consequences associated with child sexual abuse.

Scope of the Research Study

In the disconcerting backdrop of Kerala, where every second child is exposed to sexual abuse and every fifth child faces severe forms of such atrocities, the researcher is compelled to address the alarming rise in sexual crimes against children, particularly girls. With a reported increase in cases and pending legal actions, the researcher advocates for urgent intervention to safeguard the survivors' life, development, and mental health. Recognizing the threat posed by Child Sexual Abuse (CSA) to the future of human civilization, the proposed intervention study aims to mitigate the impact on sexually abused girls. Through a multifaceted approach encompassing therapeutic strategies like dance, art, and music therapy, along with counseling, the research endeavors to create a comprehensive module to reduce depression among survivors. The anticipated outcomes of this study aspire to benefit counselors, lawmakers, parents, and society at large, fostering collaborative efforts for a better tomorrow.

Statement of the Problem

In the current investigation, the researcher endeavors to assess the extent of depression among sexually abused girls residing in government and government-aided rehabilitation centers, specifically referred to as 'NIRBHAYA' in Kollam District. The primary objective is to implement an intervention model integrating diverse therapeutic approaches, including dance therapy, art therapy, music therapy, and psychotherapy. This comprehensive strategy aims to effectively diminish the levels of depression observed in sexually abused girls within the mentioned rehabilitation centers.

Objectives

1. To assess the level of depression among the survivors of sexually abused girls in the Rehabilitation Centres of Kollam District, Kerala.
2. To ascertain the effectiveness of intervention for reducing depression level among the survivors of sexually abused girls.
3. To evaluate the effectiveness of intervention programme for reducing various components of depression.
4. To find out the impact of sexual abuse on physical, emotional, psychological, and social well-being of survivors using Case Study.

Hypothesis

1. There exists no significant change in the level of depression among the survivors of sexually abused girls.
2. There exists no significant effect of intervention for reducing depression among the survivors of sexually abused girls.

3. There exists no significant effect of intervention programme for reducing various components of depression.
4. There exists no significant effect of sexual abuse on the physical, emotional, social and psychological area of the survivor.

METHODOLOGY

The current study adopts a Mixed Methods research approach, incorporating both a quasi-experimental design and a case study design. The quasi-experimental design involves 40 participants each in the experimental and control groups, while the case study design encompasses five individual cases. The sample, comprising 80 sexually abused girls, was purposefully selected. Data collection employed semi-structured demographic profiles and the Beck Depression Inventory (BDI) (1974) by Aaron T. Beck. The study implemented an 8-week comprehensive therapeutic intervention model, integrating dance, art, music, and psychotherapy.

RESULTS AND DISCUSSION

To find out the effectiveness of intervention for reducing depression level among the survivors of sexually abused girls.

Table No1: Data and results of test of significance in the pre-test scores of Depressions in the experimental and control group

Depression	Group	N	Mean	Std. Deviation	t	P value
Pre-test	Experimental	40	41.50	7.500	1.71	.091
	Control	40	38.93	5.868		

The calculated t-value of 1.71 is below the critical table value of 1.96 ($t=1.71$; $p>0.05$), indicating a lack of significant difference between the pretest scores of the experimental and control groups in depression. Therefore, it can be inferred that both groups exhibited similar levels of depression before the intervention.

Table No 2 Data and results of test of significance in the post-test scores of Depressions in the experimental and control group

Depression	Group	N	Mean	Std. Deviation	t	P value
Post-test	Experimental	40	24.93	7.318	9.26	.000
	Control	40	38.70	5.906		

In Table No. 2, the experimental group displayed a mean post-test depression score of 24.93, with a standard deviation of 7.318, while the control group exhibited a mean post-test score of 38.70, accompanied by a standard deviation of 5.906. Conducting a t-test to evaluate the significance of the difference between the two groups yielded a t-value of 9.26 and a p-value of .000. This outcome indicates a substantial difference in post-test depression scores, leading to the acceptance of the hypothesis. Particularly noteworthy is that the post-test scores for the experimental group were significantly lower than those for the control group, suggesting a positive impact of the intervention in reducing depression within the experimental group.

Comparison of Depression scores among the Survivors of Sexually Abused Girls in the Experimental and Control groups based on pre- test and post- test scores using ANCOVA.

To draw valid and reliable conclusions, statistical technique of ANCOVA was employed. This analysis aimed to assess the effectiveness of the intervention for depression among survivors of sexually abused girls in the rehabilitation centers of Kollam District, Kerala. Specifically, the pre-test and post-test scores of both the control and experimental groups were subjected to ANCOVA, providing insights into the intervention's impact on depression among the survivors. Table No. 3 presents a summary of the analysis of variance for the pre-test (x) and post-test (y) scores considered individually.

Table No. 3: Summary of analysis of covariance of pre- test and post- test scores in Depression among the Survivors of Sexually Abused Girls in the Rehabilitation Centres of Kollam District

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	9.585	1	9.585	.793	.000
Depression Pre-test	2518.633	1	2518.633	208.410	.000
Group	4902.925	1	4902.925	405.705	.000
Error	930.542	77	12.085		
Total	88207.000	80			
Corrected Total	7244.188	79			

a. R Squared = .872 (Adjusted R Squared = .868)

The obtained F ratio underwent a significance test, revealing that it is highly significant even at the 0.01 level ($F = 405.705$; $p < 0.01$), considering the table value of F ratio for df 1/77 as 7.01 at the 0.01 level. This significant F ratio underscores that the two final means, contingent on experimental and control variables, exhibit a notable difference after adjusting for the initial discrepancy on (x). Calculations were made for the adjusted means of post-test scores (x, y means) for participants in the experimental and control groups. The significance of the difference between the adjusted (y) means was then assessed, and the data for these adjusted (y) means of post-test scores for survivors in the experimental and control groups are detailed in Table No. 4.

Table No 4: Data for adjusted means of post- test scores in depression in the Experimental and Control groups

Groups	N	M_x	M_y	$M_{y.x}(\text{adjusted})$	Mean difference	S.Er	t	P value
Experimental	40	41.50	24.93	23.839	15.94	.792	20.126	.000
Control	40	38.93	38.70	39.786				

The adjusted (y) means for pre-test scores underwent a significance test for df 1/77, resulting in an obtained t value of 20.12. Comparing this to the table value for a significant difference with df 77, which is 2.58 at the 0.01 level ($t = 20.12$; $p < 0.01$), reveals a significant difference between the adjusted (y) means. This implies that participants in the experimental and control groups significantly differ in their depression levels in the post-test. Consequently, the mean post-test scores for the experimental and control groups distinctly indicate a more substantial reduction in depression for survivors of sexually abused girls in the experimental group. This tentative interpretation suggests that the depression levels of survivors in the intervention group are lower than those in the control group, leading to the acceptance of the hypothesis.

Conclusion

This study illuminates the effectiveness of a comprehensive intervention program in reducing depression levels among survivors of sexual abuse. The findings suggest that the intervention, which incorporated various therapeutic modalities, significantly improved participants' mental health, with substantial reductions in depression symptoms, as measured by Beck's Depression Scale. Crucially, the inclusion of a control group that did not receive the intervention strengthens the validity of these results. Future research should prioritize larger, more diverse samples and longer-term assessments to provide a more robust understanding of intervention effectiveness. Nonetheless, this study underscores the importance of multifaceted support for survivors of sexual abuse and highlights the potential for comprehensive interventions to make a positive impact on their mental well-being.

Recommendations

- 1. Cultural Sensitivity:** Recognizing cultural factors' impact on sexual abuse survivors, future research should explore how culture influences trauma and intervention outcomes, aiming for more effective, culturally sensitive interventions.
- 2. Technology-Based Interventions:** Study the effectiveness of online therapy and mobile apps in supporting sexual abuse survivors, especially in areas with limited access to traditional services.
- 3. Interdisciplinary Collaboration:** Promote collaboration for holistic support of sexual abuse survivors.
- 4 Prevention Strategies:** Explore and evaluate prevention strategies aimed at reducing the incidence of sexual abuse, focusing on educational programs, community awareness, and policy initiatives.
- 5. Intersectionality:** Account for intersectionality in interventions and research, recognizing the impact of intersecting identities on survivors' experiences.
- 6. Public Policy Advocacy:** Advocate for policy changes that prioritize the mental health and well-being of survivors of sexual abuse, including improved access to mental health services and increased funding for support programs.

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