

A Qualitative Study on the Impact of Sexual Assault and Its Approach to Cope with in Female Teenage Victims in Surakarta, Central Java

Nila Widya Keswara^{1,2)}, Bhisma Murti²⁾, Argyo Demartoto³⁾

¹⁾Diploma Program in Midwifery, School of Health Polytechnics, Dr. Soepraoen Hospital, Malang

²⁾Masters Program in Public Health, Universitas Sebelas Maret

³⁾Faculty of Social and Political Sciences, Universitas Sebelas Maret

ABSTRACT

Background: Studies have shown that sexual assault can lead to profound impact on the victims. It may last short or long, and can even generate a "ripple effect" of negative symptoms in the affected workplace or living environment. This study aimed to explore the psychological and biological impacts of sexual assault and approach to cope with the trauma in female adolescent victims in Surakarta.

Subjects and Method: This was a qualitative study conducted in Surakarta, Central Java. The informants were social workers working at Yayasan KAKAK, a non-government organization dealing with sexual harassment issues. The data were collected by in-depth interview. The informants provided information about psychological and biological impacts of sexual harassment as well as approach to cope with the trauma in female adolescent victims in Surakarta.

Results: The psychological impacts of sexual harassment included anger, fear, self-consciousness or embarrassment, difficulty sleeping, loss of appetite. According to the information provided by the informants, the victim's life turned into a misery, and school became a place to be avoided. The sexual attacks led to feelings of demoralization and humiliation, causing loss of self confidence and self esteem. The victims were reported as having trouble studying or paying attention, less able to perform well, participating less, no longer going to study group, thinking about dropping a class, or even leaving the school. Victims experienced symptoms such as headaches, stomach aches, nightmares and anxiety attacks. Yayasan KAKAK assisted victims by supporting and guiding about steps to be taken to protect victims and to cope with the aftermath.

Conclusion: Sexual harassment has serious emotional and biological effects on adolescent victims. According to this research finding, one of the greatest mitigating factors to trauma is the acknowledgment that it is happening. Victims of sexual harassment should be assisted to find support and guidance about what steps can be taken to protect themselves and how to cope with the aftermath.

Keywords: sexual harassment, female adolescent, coping

Correspondence:

Nila Widya Keswara. Diploma Program in Midwifery, School of Health Polytechnics Dr. Soepraoen Hospital, Malang. Email: nilakeswara_purwanto@yahoo.com. Mobile: +6281235555056.

BACKGROUND

Adolescents are the successor of the family and the nation. Adolescents need appropriate education that allows them to attain the optimal growth and development. Remarkable developments can occur in adolescence, which include the achieve-

ment of independence as well as identity, during the time spent outside their families. Adolescence is a transition from childhood to adulthood. It lasts from the age of 11 until 20 (Marmi, 2015).

During their adolescence, they often face conditions which are in conflict which are in the end generate problems. One of

those problems are reproductive health risks among others are free sex, unwanted pregnancy, abortion, sexual transmitted diseases, HIV/AIDS, sexual violence, and the limited access to health information and service (Rizki, 2012).

Various adolescent problems highlighted currently, not only globally but also in Indonesia are promiscuity up to sexual harassment which are related to adolescents' reproductive health in which the impact may determine their quality of life (Wijaya, 2014).

There was a significant increasing of cases in 2005 in which there were 2,898 cases, 59.30% of them were sexual violence National Commission for Children Protection recorded that most child abuse happen in the closest environment such as house and school. 62% child abuse happens in the closest environment such as family and school, and the rest 38% occurs in public places. Komisi

Agency for Community and Women Empowerment, Children Protection and Family Planning (Bapermas PP PA dan KB) which currently became Regional Technical Implementation Unit (UPTD) namely PTPAS (Integrated Service for Women and Children in Surakarta). Surakarta municipality handled 76 child abuse cases during 2016, psychological violence was the most dominant consisted of 25 cases, followed by sexual violence toward children with 20 cases, physical violence consisted of 25 cases, child exploitation consisted of 3 cases and 13 cases of other issues.

During 2016 KAKAK foundation had handled 35 cases of sexual violence on children with various reasons from rape, sodomy, and also incest.

One of the forms of sexual violence on adolescents is sexual harassment, it generates unwanted pregnancy, sexual transmitted infections, including HIV/AIDS,

depression and trauma even up to stress disorder (Welch, 2007).

Sexual harassment on children or adolescents is one the most vicious fact on earth and has attained public attention in the recent years and turns to be one of the highest profile crimes (Murray, 2014). This study aimed to determine the biological impacts of sexual harassment on female adolescent victims in Surakarta.

SUBJECTS AND METHOD

The study was a qualitative study with case study approach. The study aimed to analyze the biological impacts of sexual harassment on female adolescent victims in Surakarta. The key informants of the study were KAKAK foundation which was directed to the executive coordinator.

The next technique used in the study was purposive sampling technique with maximum variation sampling which was conducted based on the characteristics possessed by the subjects who were selected in accordance with the purpose of the study.

The informants for in-depth interview of the study consisted of main informants who were female adolescents who experienced sexual harassment, key informants which was KAKAK foundation, and supporting informants which were parents of female adolescents who experienced sexual harassment, KAKAK foundation of Surakarta, related community health center/ Hospitals/ providers of reproductive health service, PTPAS of Surakarta. In-depth interview was conducted with female adolescents to dig out the data of reproductive health problems generated by sexual harassment they experienced.

Data collection was conducted by doing in-depth interview and observation. The researches employed instruments in a form of interview guidelines, and other

instruments such as voice recorder, camera, and observation field notes. The data of the study were analyzed subsequently. The data underwent data reduction, data presentation, and drawing conclusion. The data obtained were then triangulated to ensure the information obtained (Sutopo, 2006)

RESULTS

The increasing number of sexual harassment cases on female adolescents in Surakarta is escalating the list of violence against children and adolescents cases. KAKA foundation is one of the facilities that assist the victims in facing the cases.

Kaka foundation was established as a form of concern if a group of people who care for issues on children and consumers. KAKAK foundation contributes in helping the victims of sexual harassment. The working area of KAKAK foundation is the entire area of ex Surakarta Residency including Surakarta municipality, Sukoharjo Regency, Boyolali Regency, Karanganyar Regency, Sragen Regency, Wonogiri Regency and Klaten Regency.

Characteristics

Most of the female adolescents in the study who experienced sexual harassment and under the assistance of KAKAK foundation were at the age of Junior High School students around 13 up to 15 years old, there were also some adolescents who were at the age of High School students. Among those female adolescents there were 2 girls who were willing to be informants of the study.

Impacts and Problems

Problems occur after experiencing sexual harassment were varied for respective victims.

Female adolescents who were assisted by KAKAK foundation suffered from health problems and changes post sexual harassment such as menstruation disorders, pregnancy, and also abnormal vaginal

discharge, as it was stated by several informants

"...my period was delayed for 4 days after the incidents..."(MI 1). (source: result of interview January 2017)

"it was itchy, the discharge was also smelly, it still happens often.. it comes again after I gave birth" (MI 2). (source: result of interview January 2017)

"there were some cases (where the victims) suffered from fluor albus or vaginal bleeding which was not menstruation and also got pregnant" (KI1). (source: result of interview January 2017)

"there was no fluor albus, only delayed period. It usually came on the 6th of each month, but it does not come yet on the 8th. Usually it came earlier each month, it gets me worried." (SI 1). (source: result of interview January 2017)

"I didn't figure it out either how did it happen, I just knew it by the time she got pregnant and felt pain. She was just going to school when she felt the terrible pain. "Mom, I get stomachache", I took her to a midwife, and she said she was pregnant. I got shocked and could not accept who (did it)" (SP 2). (source: result of interview January 2017)

Treatment

The occurrence of reproductive health problems on the victims of sexual harassment generates heavier burden that should be bear by the female adolescents.

The form of treatment to overcome reproductive health problems suffered by the female adolescents was by referring the victims to parties or institution related to the problems occur. In this case KAKAK foundation initially referred the victims to Puskesmas which was equipped with reproductive health service.

Below were the results of interview with several informants:

“well, from the result of the interview we carried out, we can identify the ailments and since here in KAKAK we don’t have any expert on reproductive health, therefore we suggest them to have a medical examination in community health center or hospital, because we do not know whether it is dangerous or it is because the perpetrator had often done it with the other (sex mates) thus the victims get infected and others, so what we do is more to give suggestion or illustration if the impacts occur, if they get infected by STD and we also tell them about HIV. From the assessment we ask them how their condition is, if they have indentified the condition, we can link them with our friends, in other words we know the condition from someone who is professional in their field” (KI1). (source: result of interview January 2017)

“we waited... tell father to wait first. If it is long enough (for the period to come) then we can try to buy (pregnancy) test pack. It was stressful for three days, we can only calm her down, and she also thought why she did not get the period yet. When I asked “Have you got your period?” she answered “No, not yet.” (SI 1). (source: result of interview January 2017).

“..She was just going to school when she felt the terrible pain. “Mom, I get stomachache”, I took her to a midwife, and she said she was pregnant. I got shocked and could not accept who (did it). She has fluor albus now. She drank herbal drink once, it was when she got menstrual pain and she asked for traditional herbal drink.” (SI 2). (source: result of interview January 2017).

DISCUSSION

Several cases of reproductive health problems suffered by female adolescent victims of sexual harassment who were

assisted by KAKAK foundation were part of sexual harassment cases happening in any regions. With the occurrence of menstruation disorder, pregnancy, abnormal Fluor albus as it was suffered by those victims, therefore it needs thorough attention and carefully conducted screening for the impacts of sexual harassment cases undergone by adolescents.

The impact may be in a form of sexually transmitted diseases (STD). Sexual violence and sexual harassment may cause internal wound and hemorrhage, it may cause internal organ damage and even death (Ratmasari, 2015).

Things related to reproductive health problems need to be identified by health-care service providers, decision makers, educators, and the organizers of programs for adolescent, and even for the adolescents themselves in order to promote the reduction of reproductive health problems occur among adolescents (Dephi, 2013).

Reproductive health problems occur among others are rape, free sex, unwanted pregnancy, abortion, marriage and pregnancy, STD and HIV (Marmi, 2015).

Risk behaviour that backgrounds the sexual behaviour of adolescents is increasing the number of adolescents’ deviant behaviours such as the frequency of unprotected sexual intercourse, age at first sex, anal sex, alcohol consumption, the involvement of sexual workers, promiscuity, drug abuse, and the possibility of infected by sexually transmitted diseases and HIV (Mahapatra, 2013).

KAKAK foundation as the assistant of sexual harassment victims does not directly conduct examination related to reproductive health disorders, instead they facilitate the victims by referring them to institutions or parties related to the problems occur. The referral is carried out with the consent from the victims and family.

Each treatment to handle the occurring reproductive health disorders needs special consideration that is adjusted with the psychological condition of the victims. People who experience sexual harassment usually ask for healthcare service to reveal the harassment problems. Management of healthcare service provided are treatment of injury, emergency contraceptive use, infection prevention up to contracting HIV and also social support for sexual harassment victims (Welch, 2007). Adolescents assisted by KAKAK foundation are assisted from the initial process of the case management.

REFERENCE

- Marmi (2015). Kesehatan Reproduksi. Pustaka Pelajar : Yogyakarta.
- Rizki NA (2012). Metode Focus Group Discussion Dan Simulation Game Terhadap Peningkatan Pengetahuan Kesehatan Reproduksi. *Jurnal Kemas* 8(1): 13-29.
- Wijaya, I Made K, et al (2014). Pengetahuan, Sikap Dan Aktivitas Remaja Sma Dalam Kesehatan Reproduksi Di Kecamatan Buleleng. *Jurnal Kemas*, 10 (1): 33-42.
- Welch, Jan dan Fiona Mason (2007). Rape and Sexual Assault. *British Medical Journal*. 334:1154-8.
- Murray, Laura K. et al (2014). Child Sexual Abuse. *Child Adolesc Psychiatr Clin N Am*. 23(2): 321–337.
- Sutopo HB (2006). *Metodologi Penelitian Kualitatif*. Surakarta: Universitas Sebelas Maret.
- Ratmasari, Intan P (2015). 4 Dampak Pelecehan Seksual Pada Anak. <http://guetau.com/cinta/integritas-tubuh.html>. Accessed 15 October 2016.
- Dephi (2013). <https://tips-sehat-keluargabunda.blogspot.co.id/2013/09/gangguan-kesehatan-reproduksi-remaja.html> (Accessed 30 September 2016).
- Mahapatra B, et al. (2013). Factors Associated with Risky Sexual Practices among Female Sex Workers in Karnataka, India. *PLOS ONE*. Volume 8.