

Behind Closed Doors: Victim Narratives and the Psychological Toll of Childhood Sexual Abuse Survivors

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ABSTRACT

Childhood sexual abuse (CSA) is a deeply distressing experience that leaves lasting psychological and physical effects on survivors. The present qualitative study aimed to explore the lived experiences of females who encountered sexual abuse during childhood, focusing on understanding the characteristics of perpetrators, nature and frequency of abuse, victims' responses, reporting experiences, family reactions, help-seeking behaviors, and subsequent mental and physical health outcomes. Semi-structured individual interviews were conducted with five female participants from diverse backgrounds, selected through snowball sampling. Open-ended questions were used to elicit rich, descriptive narratives, which were transcribed verbatim and analyzed using content analysis. Findings revealed significant variations in the relationship with the abuser (family member or stranger), type and duration of abuse, and victims' emotional and psychological reactions. Patterns emerged regarding the role of family responses and the extent to which survivors sought counseling or treatment. To support and validate the findings, three anonymous online narratives of sexual abuse were also analyzed, demonstrating parallel themes. Overall, the study highlights the pervasive emotional impact of childhood sexual abuse and emphasizes the importance of empathetic family responses, accessible psychological support, and increased awareness to facilitate survivors' recovery.

Keywords: *childhood sexual abuse, qualitative research, victim experiences, content analysis, family response, psychological impact*

INTRODUCTION

In recent years, the cases related to childhood sexual abuse has increased rapidly especially for young girls. Dai and Kisson (2025) but no limited to girls also same behaviors have been observed towards boys (Wyles, O'Leary, Tsantefski, & Young, 2025). The present study focused on the phenomenon of sexual abuse. It studied various aspects of sexual abuse, i.e. , perpetrator characteristics, types of abuse, response of victim, frequency of abuse, reporting experiences, reaction of family, psychological reactions, seeking counseling to get from the individuals having sexual abuse, what are the actual experiences of

sexual abuse people and what type of psychological reactions are faced by the abused people (Ali, Pasha, Cox, & Youssef, 2024). The following chapter will present the varying definitions of sexual abuse. It will also clarify some related terms, present existing information of sexual abused people. It will also cite the relevant research done in this area provide theoretical rationale of this study. After summarizing data presented in this chapter, questions for the study will be formulated. Possible contribution of this study to existing body of knowledge will also be discussed.

Sexual Abuse is defined as behavior which is committed by one person by force to get sexual gratification and satisfaction without the will of other person or against the will of person (Seto, Roche, Rodrigues, Curry, & Letourneau, 2024). Abusers abuse child and adult both in fact the abusers committed sexual activities with same gender that is called homogenous and some abusers like to commit sexual activities with opposite gender that is called heterogeneous. It is also defined as acts of commission including intrusion or penetration, molestation with genital contacts or other forms of sexual acts in which children are used to provide sexual gratification for a perpetrator (Assini-Meytin, McPhail, Sun, Mathews, Kaufman, & Letourneau, 2025).

Sexual abuse is one form of abuse that can have negative consequences in long term such as psychological or mental problems, depression, lack of confidence, social; withdrawal and anxiety (Nagtegaal, & Boonmann, 2022). According to (Finkelhor, Turner, & Colburn, 2024) the sexual abuse is the mistreatment of a child for the sexual satisfaction of an adult. According to (Seto, et. al. 2024) the sexual abuse occur on developmentally young children and adolescents who are dependent, they do not really understand to which they are not capable to give permission, or that infringe the social prohibited of family roles.

Research evidence shows that women with history of CSA suffer from anxiety attacks and tension. The findings of (Celik, 2024) research was that the other dimensions of emotional experiences among the survivors are intense range and anger. However, anger is not necessarily directed at the abuser but is free floating, diffuse and without focus. Often anger is internalizes where it manifest in self-destructive and self-mutilator behaviors e.g., eating disorder the infliction of self-injury and suicide attempts.

Van Der Burgt, Widdershoven, Verhoeff, and Hein (2024) found that 82% victims blame themselves for the abuse. The sexual abuse and its consequences may be only part of the child's negative experiences and succeeding behaviors. Therefore, correctly diagnosing abuse is often complex. Certain physical evidence of sexual abuse is moderately excellent in supposed cases. For all of these reasons, when abuse is assumed, properly trained health professional should be consulted (American Psychological Association, 2025).

Hashim, Iqbal, Halligan, Alimoradi, Pfaltz, Farooqi, and Vostanis (2025) outlined several common forms of childhood sexual abuse. Sexual abuse is defined as any sexual activity between an adult and a child, where the child is used for the adult's sexual gratification. Exhibitionism refers to instances where an adult exposes their genitals to a child or compels the child to watch them masturbate. Sexual grooming involves adults showing pornographic materials to children or taking inappropriate photographs of them to fulfill their sexual desires. Sexual contact includes acts of rape or sexual penetration of a child, whether directly or through objects. Overall, child sexual abuse encompasses any situation where a dependent child is involved in sexual activities with an adult or older person for that person's gratification, with the child unable to give informed consent due to the imbalance of power (Hashim et al., 2025).

The literature highlights several important issues related to sexual abuse experiences. These include the distinction between contact and non-contact forms of abuse, where non-contact experiences involve exposure, solicitation, or obscene communication, and contact experiences include physical sexual acts (Finkelhor, 2025). Another key factor is the age difference between the victim and perpetrator, as abuse

typically involves a significant power or age gap that precludes genuine consent. The use of force or coercion is not always necessary for behavior to be classified as abuse, since the child's inability to consent renders the act inherently exploitative (Guiney et al., 2024). Moreover, the relationship to the perpetrator plays a critical role; childhood sexual abuse can occur at the hands of both relatives and non-relatives, though researchers differ in their inclusion criteria. For instance, Downing, Akinlotan, and Thornhill (2021) included all sexual contact up to age 13, while applying stricter criteria for older adolescents.

only extra-familial contact where there was completed or attempted forcible rape.

Research Questions

The present research is guided by the following research questions:

1. What was the age of the participant at the time of abuse?
2. Where did incident happen?
3. What were the circumstances which they were abused?
4. Who was the perpetrator?
5. Did they report this abuse to anyone?
6. What response were given them when they reported?
7. What was the psychological impact?
8. Did they consult any psychological treatment after the incident?

Aim of the Study

The present study aims to explore the childhood sexual abuse experiences of females. Although numerous studies have examined various dimensions of child sexual abuse, limited research has been conducted in developing countries, particularly in Pakistan. Previous findings indicate that sexually abused children often suffer from severe psychological issues such as stress, anxiety, and depression, and therefore require mental health support and sensitive caregiving. However, little is known about how children in Pakistani society become victimized and what specific challenges they face following abuse. This study addresses this gap by examining key aspects of childhood sexual abuse experiences, including perpetrator characteristics, types of abuse, victims' responses, frequency, reporting patterns, family reactions, treatment-seeking behaviors, and the effects on mental and physical health (Finkelhor et al., 2024). The findings are expected to raise awareness of this hidden issue, encourage preventive efforts, and contribute to culturally informed therapeutic interventions for survivors.

METHOD

Research design

The present research employed a qualitative design to explore the lived experiences of females with a history of childhood sexual abuse. This approach was chosen to gain an in-depth understanding of the complex emotional, psychological, and social aspects of abuse, which cannot be captured through quantitative methods. As noted by Augarde and Rydon-Grange (2022), qualitative research seeks thematic saturation rather than numerical representation, focusing on the extraction of meaningful insights. The interview method was used to identify common underlying themes related to perpetrator characteristics, types of abuse, victims' responses, frequency, reporting experiences, family reactions, psychological effects, and help-seeking behaviors. Qualitative inquiry allows participants to narrate their experiences in their own words, providing the researcher with a deeper and more authentic understanding of their lived realities (Di Nicola et al., 2024).

Participants

The sample consisted of five female participants with a history of sexual abuse, recruited through snowball sampling due to the sensitive and uncommon nature of the population. This technique helped identify participants who met the study’s inclusion criteria and were willing to share their experiences. All participants came from diverse family, educational, and occupational backgrounds. Table 2.1 presents their demographic information, including age, education, marital status, and occupation at the time of the interview.

Table 1: Demographic Characteristics

Participants	1	2	3	4	5
Age at time of abuse	11	08	10	12	14
Current age	25	22	24	23	30
Education	Graduation	Matric	Primary	Matric	Matric
Occupation	Student	House wife	Stay at home	Stay at home	House wife
Marital status	Single	Married	Single	Single	Married

Table 1 shows the demographic characteristics of the participants. The age of participants at the time of abuse was between 8 to 14 years and their current age range was 22 to 30. The education of 3 participant was matric 1 is graduated and the education of 1 participant was primary. 3 were single and 2 were married.

Instruments: Demographic data sheet is used to gather the personal information about participants of the research. Demographic sheet was used independently to collect personal information about participants including their age, education, marital status, and socio-economic status. A semi structured interview was developed by the researcher to get detailed information about people having sexual abuse history. Interview protocol was constructed for the participants. Interview protocol consisted of seven questions.

Procedure: First of all process of interview protocol was designed for the interviews under the supervision of supervisor. Female participants having the history of childhood sexual abuse were contacted and approached them by personal contacts, which were agreed to participate in the study and talk about their bitter reality of life. Beginning with an orientation phase that was designed to explain the nature and purpose of the study, participants were ensured that personal information i.e., name and location, would be remained confidential and preserved anonymously. In the introduction process, the most important thing was to build rapport and keep eye contact with the participants. In this phase the consent was taken from the participants. After getting their consent the formal interview was started. The interview took 35-50 minutes. The interview began with context questions that provided the understanding about the context of the bitter reality experience of sexual abuse. The key question asked every participant was “Tell me about the bitter life experience”. This open-ended question was followed by probing questions when necessary to explore the information. After getting detailed information, the researcher paid thanks to the participants to share their experiences and giving their precious time.

Data Analysis

Each interview was transcribed and analyzed using content analysis. The themes were extracted from each interview and made sense of these interpretations.

Study II

The objective of this study II was to explore the depiction of sexual abuse stories taken from the internet.

Sample

Three anonymous stories were taken from the website of hero project and escaping Hades. The stories are selected on the basis of inclusion criterion i.e., childhood sexual abuse. These stories illustrated psychological and emotional disturbances of the victims and were analyzed to understand what effects and associated variables of sexual abuse are reported in these anonymous stories

Procedure

For this study, the stories of childhood sexual abuse was taken from internet and analyzed. The stories are read, and specific were generated to sexual abuse. Using a content analysis approach is the most rational way to engage this process because content analysis is essentially a coding operation. Coding involve the interpretation of the phenomenon under consideration and stating the observation in formal terms of an analysis.

Data analysis

In order to engage in specific analysis of the stories related to childhood sexual abuse, the content analysis strategy was utilized. Haginoya, Sun, Yamamoto, Mizushi, Yoshimoto, and Santtila, (2025) asserts that content analysis is an approach well suited for analysis of written communication. Content analysis is a methodology in the social science for studying the content of communication. Pompedda, Segal, Haginoya, Bakaitytė, Ustinavičiūtė-Klenauskė, Kaniušonytė, and Santtila, (2025) offers a broad definition of content analysis as any technique for making inferences by objectively and systematically identifying specified characteristics of messages.

Ethical Issues

All the ethical code of conduct were followed and participants were appropriately informed about the nature and purpose of the research. Informed consent was obtained from each participant. Psychological services were also providing the participants when they feel anxious or sad about their worse happening. Moreover, confidentiality of information was strictly ensured to participants. At the end, all the participants were humbly thanked for their cooperation and contributions towards the valuable future researches as suggested by Musah, Mohammed, and Mahmoud, (2025).

RESULTS

Results of Study I

Findings of this study enabled the researcher to understand the life experiences of people. A sample of 6 participants was interviewed with the help of open ended question. To analyze the interview data, content analyses was used.

Table 2: Content Analyses

No .of participants	Age at time of abuse	Age of Participants	Abuser relation	Types of abuse	Frequency of abuse	Feelings of victims	Reporting experiences	Reaction of family	Effects after experience	Taking counseling	Taking drugs
1	11	25	Uncle	Kissing	Sometimes	Feeling forceful attempt	Mother	Don't trust her	Feeling worthless no one care for her	Yes	Sleeping pills

2	08	22	Uncle	Touching genitals	1 time	Fear from that person or sometimes to all men	Mother and sister	Support her	Sad mood and don't want talk anyone	yes	No
3	10	24	Servant	Try to touch her genital, sexual intercourse	Many times	Fear from home	Did not tell anyone		Feeling trembling and high rate of heart beat	No	No
4	12	23	Friends cousin	Show pornography to pretend games on computer	3 times	Avoidance of friends home	Mother	Scold her	Think about the situation and feeling crying	No	No
5	14	30	Fathers colleague	Kissing and trying to touch her shoulder	1 time	Forceful attempt and fear to go informant	Tell her mother	Support her	Fear and cut off from everyone avoid of making friends	Yes (after a long time)	No

Table 3: Frequency Distribution of various characteristics of abuse

Main Category	Sub Category	Frequency
Setting	Where incident happen	
	Home	4
Relationship with perpetrator	Outside	1
	Relative	3
	Family friend	1
Kind of abuse	Servant	1
	Kissing	3
	Touching genitals	2
	Pornography	1
Reporting experience	Sexual intercourse	1
	Supportive	2
	Non Supportive	3
Psychological effects	No reporting	
	Depression	
	• Sad mood	4
	• Unhappy	6
	• Isolation	3
	• Crying	2
	• Self-blame	1
	• Worthless	4
	Anxiety	
	• Palpitation	2
• Trembling	1	
• Increase heart beat	2	

	Sexual repulsion	
	• Reluctant to make relation with men	1
	Phobia	
	• Fear from men	3
	• Fear of darkness	2
Taking treatment	Counseling/no treatment	3, 2
Taking drugs	sleeping pills	1

Table 3, describes frequency of various aspects of abuse. Incident happen in home have high frequency then outside. The present findings shoes that the 3 participants were victim by their close relatives and 2 were victim by family friend. Mostly perpetrators try to kiss for the harassment of children. It is observed that reporting experiences of the participants have high rate on non-supportive attitude of listeners and some do not have reported their experience due to feeling of guilt. Some psychological effects occur after happening of incident mostly have sad mood and feeling unhappy after that incident some feel they are isolated, worthless and some have feeling of cry. Some experience palpitation, trembling and increasing heart beat after happening of incident. It is also observed that some victims of sexual abuse having sexual repulsion and have difficulty to make relation with men. Half of the participants seeking counseling and feel relax than those who does not seek counseling. Some victims are taking sleeping pills for the mental relaxation.

Table 4: Themes depicted if feelings after incident

Main Category	Sub Category	Example
Fear	1. Felt fearful that a tragedy could happen felt vulnerable.	Dar lagta tha esa lagta tha kuch bura honay wala ha ai.
	2. Felt scared from home especially when mother was out of home.	Ghar sai dar lagna shuru ho gya khas tor pai tab jab ami ghar nahi hoti thi
Shame/Guilt	1. Shame towards their actions.	Muje apnay baray maai ganda ganda mehsoos hota tha yani mai lambay arsay tak ihsas e nidamat ka shikar ho gai thi.
	2. Felt shame if someone knows about this.	
Low Self-esteem	1. Low self-confidence and not feeling good about self.	Mai khud k baray mai acha mehsoos nahi kerti thi muje lagta tha mai baki logo ki tarha nahi rahi ho.
Depression	1. People with depressed mood have some somatic complaints (weight loss/gain and sleep disturbance), cognitive complaints (sense of worthlessness, guilt, difficulty concentration) and behavioral complaints (psychomotor agitation, psychomotor agitation).	Mai udas rehti thi khud ko bohat akela mehsoos kerti thi. Esa lagta tha meri kisi ko zarorat nahi or mai ziada waqt roti rehti thi or tanhai mai ziada achi lagti thi.
Anxiety	1. It include excessive worry	Har waqt bechaini hoti thi.

	and anxiety about number of activities or events difficulty controlling the worry related symptoms such as restlessness, tiring easily, body tension, and disturbed sleep.	Baithay baithay hath pao sai paseena choot jata or kabhi kabar dil ki dharkan b taiz ho jatithi.
Sexual repulsion Self-blame		Shohar acha nahi lagta tha. Koi b mard acha nahi lagta tha. Muje esa lagta tha aj mai jis halat mai ho apni hi waja saai ho.

Table 4, represents themes of feelings at time of incident is common in participants. It is observed that fear and low self-esteem almost have same in all participants. It is also observed that victims of this incident have guilt and shame from the situation. The findings also represents common symptoms of psychological reactions of participants. It is resulted the depression is on high peak after long time of incident. Some participants reported anxiety symptoms and some have sexual repulsion and have to face difficulty to make relation with their husband. It is also observed that the symptoms of phobia are also faced by the participants.

Study II

Analysis of online stories

Some stories from online sources were also analyzed to expand further the scope of study. There were taken from the website of hero’s project and escaping hades (Appendix E), then the stories were downloaded printed and content analyzed. These stories are supporting our findings.

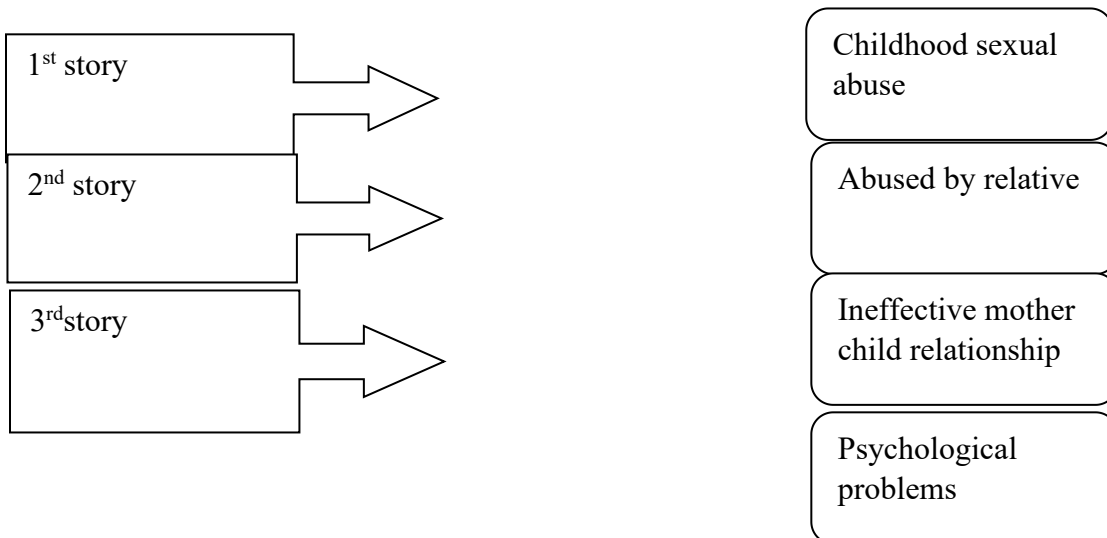


Figure 1: Similar themes found in the three stories

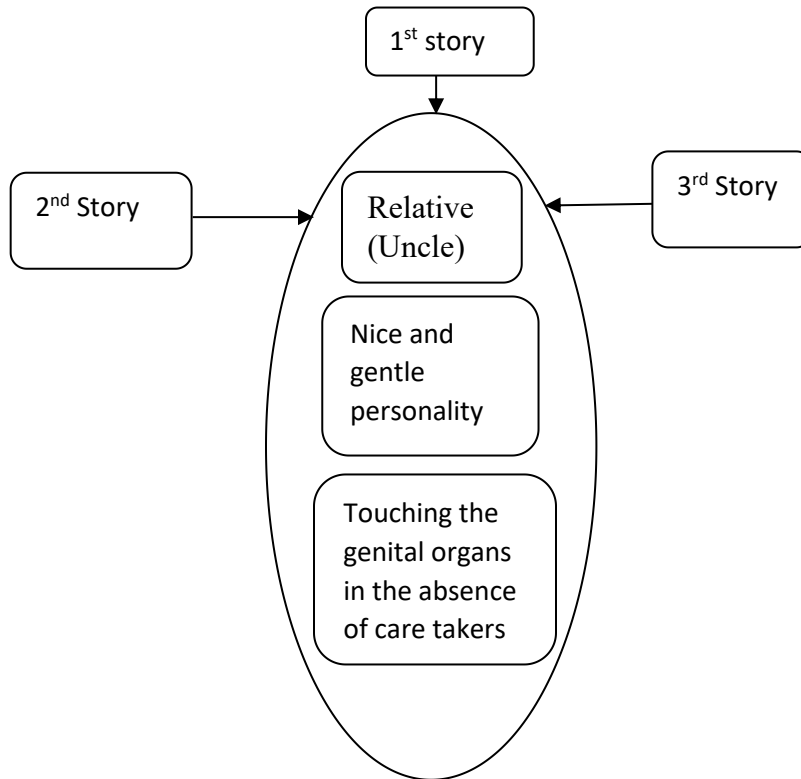


Figure 2: Similarity in the Role of perpetrator in all the Three Stories.

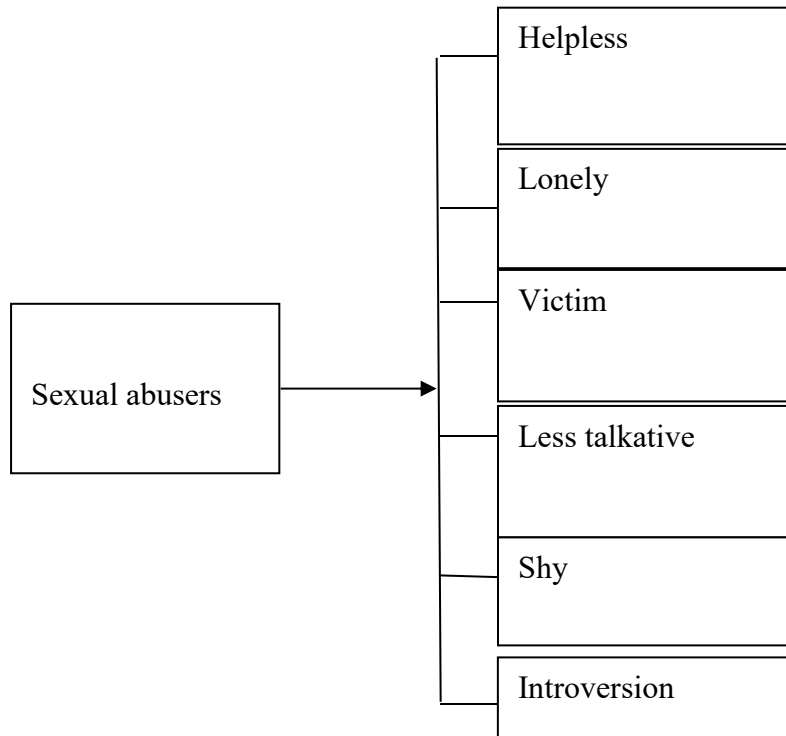


Figure 3: Similarity in the personality of victims in All Three Stories

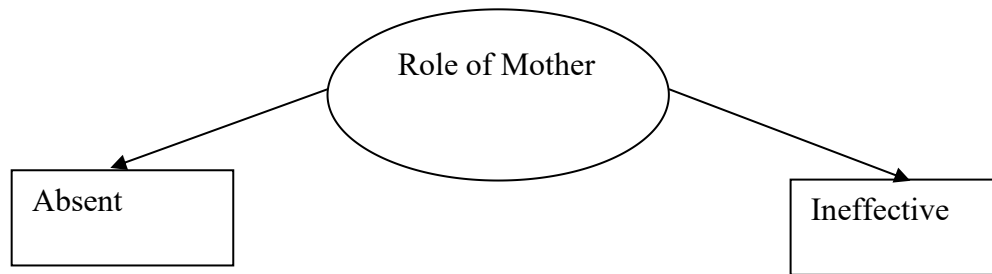


Figure 4: Similarity in the role of mother in three stories.

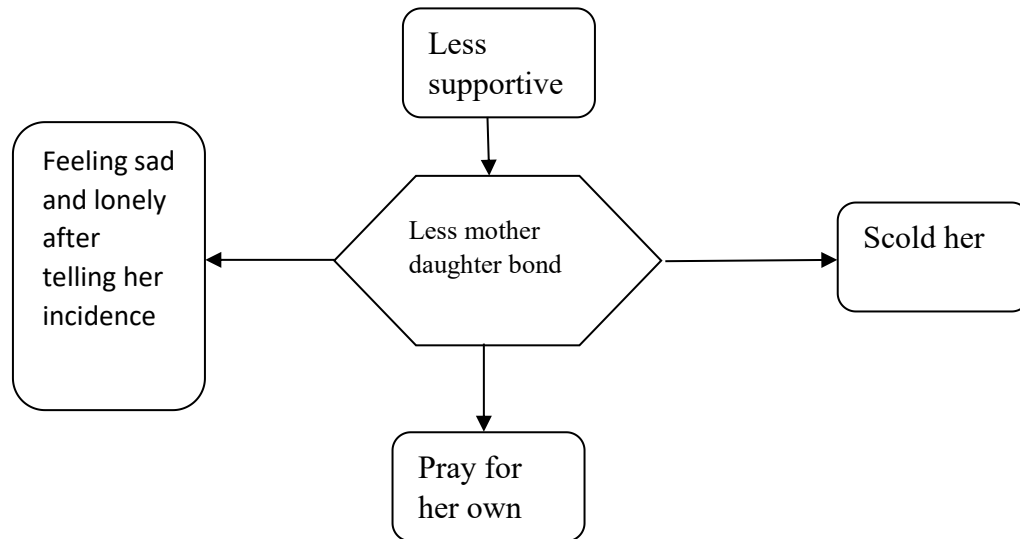


Figure 5: Mother Child relationship of 3rd story.

Summary of the Findings

The research attempted to gain an understanding the perceive problems of the experiences of childhood sexual abuse. The results highlighted many problems that are faced by the sexually abused people. The face psychological problems like anxiety, depression, phobia, sexual repulsion, adjustment problems and issues related marriage and education.

The themes that emerged from the analysis of experiences are similar to those of interview and in content analysis. The similar themes are psychological problems faced by the participants like symptoms of depression, anxiety, sexual repulsion, phobia, adjustment problems, less bond between parent and child, marriage issues and education effected by the situation.

Collectively, it was found that the results are significant because the real life experiences of people having history of sexual abuse reported the same as we heard.

DISCUSSION

There has been a growing rate of child abuse like emotional abuse, physical abuse, verbal abuse and sexual abuse this leads to many psychological and social problems in Pakistan. There is limited indigenous data on this specific topic to know about the causes of sexual abuse, its issues and problem faced by the victims. Due to the lack of adequate information on sexual abuse in Pakistan, the mostly literature is based on western text. This study sought to gain a detailed understanding and in-depth knowledge regarding sexual abuse, the depiction of sexual abuse in stories, and the real life experiences of people having history of childhood sexual abuse. Qualitative research method was used to gather this knowledge. Results revealed themes related to personality characteristics of perpetrator and victims, issues and challenges faced in life, and life experiences of the respondents. Major themes in relation to research on sexual abuse are discussed in this chapter. Furthermore, limitations of the research and implications of the findings primarily for parents, psychologists and professionals are discussed as previously discussed by Goetzl, Pichlmeier, Walter, Stickel, Jud, Streb, and Dudeck, (2025).

One major theme that emerged in all studies i.e., content analysis and interview was less positive relationship with family members. The people perceive that there was lack of affection, less warmth and less control in relationship. They perceive that there was lack of sharing with parents. As a participant expressed her views regarding family:

“When I suffered from unusual state I was terrified and ran inside the store to her family. I was trembling and told her mother about this incident. My mother did not believe me and slapped me.”

Another participant reported during her interview as:

“One day my uncle sits me on his lap and trying to kiss me in a wrong way. I was feeling ashamed. I tried to run away but he held me tightly. I tried to tell my mother about this situation but she scolds me and advice to quite.”

Researches have proved the same results. As Liu, Shi, Xie, Xing, Wang, Li, and Zhao, (2025) found that anxiety disorders and acute stress reactions were the most frequently recorded diagnostic category among victims of child sexual abuse, being equally prominent in males and females. Included in this broad category of anxiety and stress disorders are post-traumatic stress disorders. Individuals in the child sexual abuse cohort were more than three times more likely to be diagnosed with an anxiety disorder or an acute stress reaction. Previous research has focused predominantly on females and these results extend those findings of a positive association to males.

A study conducted in China, found that those who reported ever having been forced into sexual contact also reported higher levels of depression, lower body image and self-esteem, higher rates of illicit drug use and poorer general physical health than young women who did not report abuse (Tao, 2025). Another study was conducted on child sexual abuse and later effects on mental health. The researcher investigated the links between child sexual abuse, later mental health, family organization, parenting behaviors and adjustment in offspring to summarize the findings indicated that child sexual abuse has long term repercussions for adult mental health, parenting relationships and child adjustment in the succeeding generation (Schneider, Rukundo-Zeller, Bambonyé, Muhoza, Ndayikengurukiye, Nitanga, & Crombach, 2025). A study was conducted on childhood sexual abuse and childhood mental disorders. The study reveals that the childhood mental disorders were considerably more common in the child sexual abuse group with males having an even higher risk than females. The general finding of this study increased the rates of disorders in children was no surprise, although the even greater excess of such cases in male subjects has not been reported previously.

Previous research has concentrated on girls where a wide variety of emotional and behavioral problems, including depression, anxiety, social withdrawal and somatic complaints, have been described among victims of abuse. The damage of sexual abused child can cause self-concept, sense of trust and perception of the world as a relatively safe place, it is reasonable to assume that male victims will also experience childhood adjustment difficulties. Indeed, the present investigation verified that childhood mental disorders were the second most frequently recorded diagnostic category for both males and females in the child sexual abuse cohort.

The present findings on conduct disorders accord with research that has consistently verified higher levels of behavioral problems in sexually abused males compared with females (Hashim, et. al. 2025). However, the present study also demonstrated that conduct disorders are significantly more likely in sexually abused females relative to their non-abused female counterparts. Conduct disorders are not exclusive to males and even the higher prevalence of this disorder in males may reflect more a willingness to recognize and refer conduct disorders in boys (Townend, Staginnus, Rogers, Smaragdi, Martinelli, Bernhard, & Fairchild, 2025).

A participant who had reported her psychological reactions after experiencing of sexual abuse as:

“I felt trembling and high rate of heart beat whenever I thought about it or sometimes I feel that situation when I face him”.

Another participant reported as:

“I was feeling worthless I thought there is nothing for me. Most of the time I feel sad and unhappy and want to be isolated”.

These results are consistent with the research conducted by Odedede, and Uzochukwu, (2025) who stated that effects of sexual abuse on social interpersonal and sexual function in adult life. At this interview get a detail inquiry of CSA and current social interpersonal relationships and sexual functioning. The results revealed that a significant association emerged between CSA and interpersonal relationships increased sexual problems and a disruption in intimate relationship by difficulties with trust and perceived their partner as uncaring person. CSA was more common in disturbed families and in those who reported physical and emotional abuse. But not all of the associations have negative outcomes. Those who reporting CSA are more likely to suffer social interpersonal sexual difficulties in adult life (Odedede, et. al., 2025).

A participant who had experience difficulties of interpersonal relationship (sexual repulsion) reported as:

“My relationships with my husband are not enough satisfactory we are not close enough... I mean....I always reluctant to share my feelings with him and sometime I refuse to close with him avoid to make relation for a long time”.

Researches supported that family and child sexual abuse has been studied by Csorba, Elfrink, and Tsikouras, (2024) which revealed that Child sexual abuse (CSA) was a widespread and alarming issue throughout the whole world, with an estimated global prevalence of 12–13% with an estimated population affecting 18% of girls and 8% of boys. Despite the fact, many physicians working with children having insufficient knowledge of the medical diagnosis of child sexual abuse, lack of expertise, combined with the sensitive and complex nature of these cases, often hampers proper identification and management. Diagnosing CSA is particularly challenging and requires specialized skills. A majority of children assessed for suspected sexual abuse present with normal genital and anal findings, which complicates the diagnostic process. Another study revealed that the respondents acknowledged the prevalence of child sexual abuse further demonstrated their knowledge of the predisposing factors, perpetrators of the

problem, and effects of sexual abuse on children. The researchers placed major emphases on community involvement in fighting against the problem: appropriate education of children, parents, families, and community members about child sexual abuse; and improvement on the laws that protect children against sexual abuse to successfully curb the problem (Ramabu, 2020).

A participant reported as:

“I was sexually abused in the car by my maternal uncle. My uncle had taken my family shopping and had dropped them at a store while he waited in the parking lot. I was with my uncle. My uncle offered her to come sit on the front seat. I jumped to the front seat. He first started touching on my chest, then put his hands inside the shirt, and then into the trousers. I was too much scared”.

Another participant reported that:

“I was molested in my home by maternal uncle. My uncle sometimes asked me to sit in his lap. One day he sat me in his lap and trying to kiss me in a wrong way. I was feeling ashamed and feeling that I was being forced. Tried to run away but he held me tightly”

Another interesting theme that came into the view that the parents of the victims are not trusted their child they suffer more than their parents support their children. As a participant reported that:

“I told my mother about this incident. But my mother did not believe me and slapped on my face.

Another participant reported as:

“When I try to tell my mother she did not trust me and scold me even she said never speak out this abusive words for her uncle”.

Mary’s story also supports this theme as:

“I told my mother at first time but she did not trust me and I was being abused for a long time with different people and then I did not tell my mother because she did not trust me at first time then how it is possible to trust me another time”.

Another theme was emerged that the literature is not supported and that is the usage of drug after being abused. A participant reported as:

“I was too much disturbed I was feeling unhappy and sad after experience of sexual abuse and also feeling worthless when my mother did not trust me I was mentally disturbed and I took sleeping pills for the mental relaxation.

Practical Implications

The strength of qualitative research has enhanced knowledge in area of the experiences of sexual abuse through this research. The present study allowed the detailed exploration about the experiences of sexual abuse in females. The present research is probably the first in its nature to look at psychological reactions of people and their life experiences of sexual abuse at the same time. Prior researches have investigated issues related to sexual abuse using quantitative research method. However, the general people express their perceptions and life experiences about the victims. Therefore, this qualitative research method was compatible to deal with this need.

The participants in this study provided detailed information through interviews about their experiences of being sexual abuse. This information has important implication for sexual abuse people, extended family

members and social community. Children spend more time with their family, parents, siblings and relatives sometimes they experience sexual abuse at their homes by their relatives and face many problems and challenges in this regard. This study will bring awareness to them about the issues and problems that are faced by them and other family members as well. It will help them to know that how they should support them and try to make the things easier for them.

An implication that can make service practice with sexual abused people more effective and more focused is need for professional training. The findings of this research underline the special issues and complexities that are challenging for sexual abuse people point out the need for professional training to work with sexually abused people.

Implications for practice with the extended family members, school system, and other social community should be mentioned. These networks can provide support that will be beneficial for abused people. A useful way to inducing good will from these people is psycho education. The main drive of work necessary in this area is to reduce negative societal biases and schemas towards sexual abuse. The mass media which is considered an influential tool for keeping the public informed and shaping public opinion about different issues. The ideal outcome of these methods is that sexual abuse people do not have to remain invisible and society embraces a more inclusive definition of the sexual abuse.

LIMITATIONS OF THE STUDY

The Qualitative research is an interpretive project in which the participants allow to express their feelings, thoughts and experiences in detail. However, as in any research, there are some limitations that the researcher must admit. The first limitation of this study was institutional approval due the sensitive nature of the study. Another limitation was this study only analyzed by qualitatively so that's why the results of this study cannot be generalized but it emerged themes and issues can be used to examine the observable fact on a larger scale through quantitative to qualitative measures.

The qualitative analysis of data from large sample can generate more detailed information about the experiences of sexual abuse because in this study only neurotic symptoms are in front of the researcher may be study on the large sample have some psychotic symptoms. So, then the findings can be identified strengthened themes and can be reported more conclusively. There is another limitation that it is included only sexual abuse females as a sample in interviews. May be males having sexual abuse experiencing the same psychological and emotional reactions or may be different.

CONCLUSION

The results of this study revealed that majority was abused in their homes and by their relatives mostly uncle and the anonymous stories also showed the same results the victims of the anonymous stories were also abused by their relatives and inside their homes. It also concluded that the kind of abuse like kissing, touching genital organs, sexual intercourse was common in the participants and the anonymous stories. The majority reported experiences about the incident was non supportive that leads some psychological problems that are; mostly have sad mood, feeling unhappy, worthless feeling cry, palpitation, trembling, self-blame but suicidal ideation was not indicated in the participants but in the anonymous story was present. Results conclude that mostly victims took drugs after the incident. And those were taking counseling for the satisfaction of life. The findings also reveal that the people who have experience of sexual abuse may be they are on higher rate of depression in adolescence or young adulthood and previous literature also support it. Adolescence is the most defenseless phase for those youths who may take drugs frequently. Childhood Sexual Abuse was an uncommon experience of those individuals. Mostly girls are exposed as childhood sexual abuses the victim's characterized high levels of marital conflict and poor parenting style and they are having adjustment problems. So, from the results of current

study and from the literature, it was concluded that individual who have experience of sexual abuse face many problems in their lives.

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