

Consequences for a young person who has been sexually or physically abused

Not all young people suffer significant long term effects from an incident of abuse, including sexual assault. Many, perhaps most, manage to put it behind them and learn from the incident, though this should not in any sense be considered to diminish the serious and totally unacceptable nature of abuse.

On the other hand, some people do have long standing emotional consequences, sometimes appearing some time, even years, after the event. The most severe of these is the debilitating condition of Post Traumatic Stress Disorder. Other effects include distrust of others, particularly men in the case of women, disorders of sexual relationships and function, impaired self esteem and episodes of mood disturbance. People who have been consistently abused as children may be at greater risk of abusing others, including sexual abuse and bullying behaviour.

Physical outcome

The response to a reported incident should always be prompt and appropriate. Any possible physical consequence (physical injury, sexual transmitted or blood borne infection and possible pregnancy) should have immediate response, even if the possibility of infection is considered remote. There should be no long term physical adverse outcome

Emotional outcome.

The emotional outcome depends on a number of factors. The key factors include:

- **The prompt response of those caring for the young person.** Delayed response carries an adverse risk.
- **The state of mental health and previous experience of the young person.** A person who has in the past shown ability to cope with life without showing signs of behavioural or emotional difficulties, and who in general displays a stable personality and good social relationships will have a much better ability to cope with an incident of abuse. The outcome for such a person is likely to be good. On the other hand a person who has displayed difficulties in their emotional health or social interaction will be at risk from an incident of abuse.
- **The response of parents, significant adults and peers to the incident is an important determinant in long term outcome.** The response that is usually most helpful is one that allows the person to talk about the incident without being forced to describe details and not to expect the person to go over the event again and again. It may be helpful to talk about why the incident happened (Misunderstanding? Boy's sexual arousal out of hand? Lack of understanding of the risk? Defect in the perpetrator's own personality or experience?) This may

help the person consider future strategies to avoid a recurrence but still enjoy normal social intercourse. It is not helpful to show blame or display a moral attitude towards the person, even if it may appear that he or she has seemed to be in part to blame or placed herself at unnecessary risk.

- **Whether the person feels shame or guilt about the incident.** This needs to be explored and responded to with reassurance, often repeated.
- **Whether the person feels great anger** towards the person who assaulted her/him and the people who should have protected her/him. This needs resolution with evidence that appropriate action has taken place. Sometimes reconciliation or mediation can be helpful. Lack of any consequence for the abuser can make it hard for the abused to come to an emotional conclusion to the incident.

Professional counselling.

The question of whether professional counselling is always needed is open to debate and probably depends on the person's state of mental health before the incident and the degree of support the person gets from parents and other significant people, including peers and Head of House and other health and teaching staff well known to the person. Counselling should be offered, but repeated re-visiting the event and talking about it has been shown to sometimes prolong or even magnify the distress.

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3 May 2, 2004