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Psychological consequences of sexual and physical violence against Yemenite children of 6-11 years old

The results of empirical research of psychological consequences of sexual and physical violence against children in Yemen are represented in the article. They affect distorted personal development of children, change of their behaviour, thinking, and intensity of signs of Post-Traumatic Stress Disorder at them.

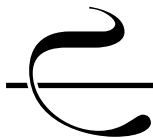
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During the last decades in connection with instability of political, economic and social conditions in Yemen the children violence has extended as a social phenomenon. In the Arabian society such information is traditionally concealed, accordingly, purposeful researches of psychological consequences of violent physical and sexual acts against children have not been carried out. The urgency of the given subject is determined with those facts that psycho-traumatic experience can lead to the development of affective disorders and social deconditioning of a various degree and it is also considered as a prognostic factor of development of disruptions of mental sphere.

The theoretical basis of the carried out research have been models of development of PTSD – psychological, biological and multifactorial ones, as well as modern concepts about the reasons and dynamics of development of PTSD (V.V. Znakov, (1989, 1990), N.V. Tarabrina (1992–2009), I.M. Cherepanova (1997), L.I. Antsyferova (1994), etc.). The purpose of the research is to study psychological consequences of sexual and physical violence against Yemen children. The subject of the research is components of post-traumatic stress disorder. 80 children of 6-11 years old, pupils of comprehensive schools of the city of Aden, Yemen, suffered from sexual or sexual and physical violence have been interrogated.

Psychological consequences of violence against children have been identified with the help of the following procedures: “Semi-structured interview for an estimation of traumatic experiences of children” [4]; a questionnaire “Quality of life at post-traumatic stressful event” [1]; a questionnaire “PAQ” (consists of questions combined into 7 scales: aggression, dependence, self-estimation, self-management, emotional responsibility, emotional stability, outlook). The first two procedures fix symptoms of PTSD on the basis of the description of phenomena. The adaptation of these procedures onto the Yemen language was carried out by means of double translation. The third procedure is adapted for the Arabian society by Momdohka Mohkamed Salama on the basis of “Child PAQ”. The statistical analysis has been applied for the data processing which included Mann-Whitney U-test and the factor analysis by means of program SPSS 13,0.

Let's address to the received results of the research. We have analysed such scales of the questionnaire “Quality of life at post-traumatic stressful event” as “changes in thinking”, “change of positive qualities for the opposite ones”, “change of external observable behaviour”. It has been found out that parameters of the scale “change



of external observable behaviour" are much higher than the others: average value is 69,7. The data on the scale "changes in thinking" are evaluated less than the others: average value is 47,3. Thus, PTSD at children, victims of violence, mostly affects changes of behaviour and least affects cogitative activity.

Let's turn to the analysis of the results of semi-structured interview for an estimation of traumatic experiences of children and the parental questionnaire for an estimation of traumatic experiences of their children. The parameters of the scales corresponding to criteria A (immediate reaction), B (obsessive reproduction), C (avoidance), D (increased excitability) and F (disruptions of functioning), are not equal from the point of view of children and their parents. So, parameters of the scales A, B, D and F are higher in the children's questionnaire in comparison with the parental questionnaire. It can be connected with that fact that parents aspire to give socially desirable description of the child behaviour, understate or hide the symptoms of post-traumatic stress disorder at children, or do not notice them. It correlates with that fact that parameters on scale C in the parental questionnaire are higher. Moreover, parameters of the scale C are higher than others both in semi-structured interview for an estimation of traumatic experiences of children and in the parental questionnaire.

Comparing symptoms of PTSD in two groups of children: suffered from only sexual (the 1st group) violence and from both sexual and physical (the 2nd group) violence (Mann-Whitney U-test) it has been found out that in the 2nd group the symptoms of PTSD (according to the results of "Semi-structured interview for an estimation of traumatic experiences of children") are evaluated to a greater extent on the scales A (immediate reaction) and B (obsessive reproduction); the parameters of the scales "change of positive qualities for the opposite ones" and "change of external observable behaviour" (the questionnaire "Quality of life at post-traumatic stressful event") are also higher; and the parameters of scales "self-estimation", "the emotional responsibility" и "emotional stability" (the questionnaire "PAQ") are much lower.

The factor analysis of the research data has been carried out with the principle component analyses. For the semi-structured interview it has been found out that overwhelming number of children suffered from the violence has got the increased reactivity (the factor including criteria A, B and D) in combination with the tendency to avoidance. Deterioration of the quality of life has been observed at all examinees. It has been characterized by either change of behaviour and thinking for a third of surveyed children, or only change of thinking for a half of examinees. Analyzing personal features, which have been determined with the questionnaire "PAQ", it is important to pay attention to the factor which we have called "aggressive dependence" (it includes such scales of the questionnaire as aggression, dependence, self-estimation, self-management, emotional stability) pays to itself. The pronounced aggressive dependence in a combination with changes in outlook is inherent in the basic part of the examinees.

So, from the above-stated it is possible to draw a conclusion that children emphasize to a greater extent than their parents such symptoms of post-traumatic stress



disorder as intensive negative emotions in the moment of the trauma (helplessness, fear, horror), obsessive repetitions of traumatic event in emotional experiences, symptoms of growing excitation, and also disruptions in social and other spheres of their lives. Probably, parents distinguish the given symptoms to a lesser extent because the majority of these symptoms have no evident visible displays of traumatic reaction. It is possible to assume that children suffered from sexual and physical violence and their parents distinguish among all symptoms of the post-traumatic stress disorder as the heaviest ones such symptoms as avoidance of the stimuli connected to the trauma, and also blocking of emotional reactions, stupor.

It has been found out that children, victims of sexual and physical violence, are inclined to changes in behaviour to a greater extent, have understated self-estimation, are emotionally unstable and are inclined to immediate reaction, have difficulties in expressing positive emotions and return to the psycho-traumatic situation by means of obsessive reproduction.

The research has revealed a number of psychological consequences of sexual and physical violence against children: the pronounced attributes of PTSD, changes in behaviour and in personality which show "closedness" of the situation traumatizing them for the nearest environment, insufficiency of support and help at their bearing of psycho-traumatic experience.

Referents

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