

# Fostering Socio-psychological Resilience in the Survivors of Child Sexual Exploitation and Abuse: A Study

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## Abstract

Child Sexual Abuse is a highly distressing phenomenon that creates havoc in the lives of Child Sexual Exploitation and Abuse victims. Various studies have shown that the abuse experienced by individuals leads them to stress, anxiety, and dissociation, leading to Post-Traumatic stress disorder (PTSD) and Complex Post-Traumatic Stress Disorder (C-PTSD) when it is untreated. Through previous research findings, the researchers identified that much research was done on improving the psychological resilience of CSEA survivors through counselling, treatments, and therapies. Treatments and therapies can help survivors develop psychological resilience but, most of the time, fail to make them socially resilient due to the victim's disbelief and suspicion over the established institutions like family, educational, and religious institutions after the adversities. Thus, the researchers identified the research gap in improving the counselling methods, treatments, and therapies, emphasizing sociological and psychological aspects equally. In order to have a novel dimension in creating more effective approaches to treating CSEA survivors, the researchers integrated the sociological theories, Resilience theory, Ecological Systems Theory and Social Support Theory along with the psychological theories, The Post-traumatic Growth Theory, Stress and Coping Theory, Empowerment Theory and Feminist Theory to frame an approach that will foster the socio-psychological resilience among them.

**Keywords:** Abuse; Child Sexual Exploitation; Empowerment; Psychological distress; Societal detachments; Socio-psychological resilience.

## I. Introduction

Child Sexual Exploitation and Abuse (CSEA) is a highly distressing and

reprehensible phenomenon, which encompasses unwelcome sexual approaches, abuse, or exploitation inflicted upon individuals who have not attained the age of legal consent. It is “unfortunately prevalent worldwide. It includes a plethora of physical, sexual, psychological, and economic violation or maltreatment targeted at an individual <18 years of age.” (Srivastava et al.). “The trauma associated with sexual abuse can contribute to arrested development, as well as a host of psychological and emotional disorders, that some children and adolescents may never overcome.” (Carson et al.). CSEA constitutes a significant transgression of individual boundaries, trust, and dignity, resulting in lasting emotional and psychological harm among the survivors. The consequences of such traumatic experiences are significant, extending well beyond the initial victimization and impacting various facets of survivors’ lives, “as it involves the destructuring of the child’s behavior and emotions and, sometimes, serious interference in his or her development” (Clayton et al.). The repercussions of CSEA are “associated with increased risk for a multitude of acute and long-term psychological and physical health problems, including depression, posttraumatic stress, and substance abuse problems, as well as sexual revictimization in adolescence and adulthood” (Cutajar et al.) and often entail a distressing journey marked by experiences of terror, pain, and psychological upheaval for several survivors.

Further, these experiences have the potential to result in a range of emotional and psychological difficulties, encompassing anxiety disorders, depression, Post-Traumatic Stress Disorder (PTSD), lowered self-esteem, and impaired interpersonal connections. “When sexual abuse goes unreported and children are not given the protective and therapeutic assistance they need, they are left to suffer in silence.” (Carson et al.). The heaviness of what the children have gone through in their childhood is substantial, leading to severe trauma. It can have long-term implications on the survivor’s educational and professional accomplishments and ability to establish and maintain positive and meaningful interpersonal relationships. CSEA is a profoundly concerning phenomenon that surpasses geographical, cultural, and economic barriers, rendering it a matter of utmost worldwide significance.

Human resilience arises from extensive hardship and adversity in most circumstances. The American Psychological Association defines resilience as “the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress—such as family and relationship problems, serious health problems, or workplace and financial stressors.” (Building Your Resilience). Sociology of resilience differs from the

psychology of resilience in a few aspects. It “attempts to deconstruct and reconstruct the self, dissect the unquestioned *doxa* and *nomos*, challenge the conservative orthodoxy, and spark possibilities for transformational change.” (Mu). Few individuals who have experienced CSEA exhibit notable resilience, showcasing their capacity to overcome and flourish in the aftermath of distressing events gradually and effectively. It is understood that “Both physical health and emotional stability are correlated with coping skills and resilience.” (Levine, 273). The survivors surmount hardship and frequently utilise their experiences as a foundation for resilience, personal development, self-empowerment, and motivation for vulnerable communities. Thus, this research investigates the phenomenon of resilience, focusing on the psychological and sociological aspects of resilience separately, as demonstrated by survivors of CSEA, to understand their resilience level. Further, it incorporates the Socio-Psychological approaches to find whether this approach to CSEA can improve their resilience level.

### **Statement of the Problem**

Child Sexual Exploitation and Abuse have a significant risk among the survivors regarding psychological, emotional, and social well-being. It is crucial to understand that not all individuals who have experienced such traumatic circumstances exhibit identical responses. Certain individuals possess a remarkable aptitude for psychological resilience, showcasing the capability to adjust and thrive in challenging circumstances effectively. Even after attaining psychological resilience, the survivors need more aptitude to overcome the traumatic experiences to be socially resilient. Thus, the researchers examine the psychological and social resilience elements among the CSEA by incorporating the socio-psychological mechanisms.

### **Significance of the Study**

The findings of this study may have substantial consequences for mental health practitioners and several stakeholders, including survivors, legislators, policymakers, and society. By elucidating the various elements and mechanisms that contribute to cultivating socio-psychological resilience in CSEA survivors who have experienced adversity, this research can provide valuable insights for enhancing therapies and support systems with novel dimensions in approaching the problem to attain greater efficacy. Recognising the extent and constraints of this study holds significance. This research aims to understand the need for socio-psychological resilience exhibited by individuals who have experienced CSEA. However,

this study is limited by some aspects, including participant availability and ethical constraints, which will be discussed in the methodology section.

## **II. Literature Review**

### **Definition and Types of Child Sexual Exploitation and Abuse**

Child Sexual Exploitation and Abuse have various definitions and types. The researchers understand the types of exploitation, abuse, and harassment to assess their impact on CSEA survivors through the definitions by various experts and organisations. The World Health Organisation defines Child Sexual Abuse as “the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violate the laws or social taboos of society.” (Report of the Consultation on Child Abuse Prevention). “Child sexual exploitation is a form of child sexual abuse in which a person(s), of any age, takes advantage of a power imbalance to force or entice a child into engaging in sexual activity in return for something received by the child and/or those perpetrating or facilitating the abuse.” (Child Sexual Exploitation: Definition and Practitioner Briefing Paper). “Sexual abuse means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. It includes sexual slavery, pornography, child abuse and sexual assault.” (What Is Sexual Exploitation, Abuse and Harassment?). These forms of abuse and harassment constitute a grave violation of trust, personal boundaries, and the fundamental rights of children.”

The manifestation of child sexual abuse experiences is characterized by complexities and diversities, encompassing explicit sexual solicitations “when an individual offers something such as money, property, object, or token in exchange for a sexual act” (What Is Sex Solicitation?) grooming strategies, “a method used by offenders that involve building trust with a child and the adults around a child to gain access to and time alone with her/him” (Pollack), online harassment via digital platforms, such as “sexual chatting, showing of child sex photos and live videos as well as sextortion.” (Ramiro et al.) and non-consensual sexual activities. The CSEA types, as mentioned earlier, of abuse and harassment not only elicit significant anguish but also have a profound influence on the psychological and emotional well-being of adolescent individuals who have experienced them. Early identification and immediate treatment of CSEA among sex-

ually exploited children is a significant step in their lives. The upcoming factors among the CSEA survivors include “the lack of disclosures, the diverse and non-specific physical and psychosocial symptoms, and the relative value of the anogenital examination and STI tests” (Vrolijk-Boschaart et al.) are challenging for the clinicians to treat the survivors. Recognizing the significance of a nuanced comprehension of these phenomena is crucial to using a comprehensive and compassionate approach to study and understand the intricate dynamics and varied forms of CSEA. Thus, being conscious of the distinctiveness of each case is crucial in developing and implementing efficient support and preventative strategies.

### **Psychological Consequences of Child Sexual Exploitation and Abuse**

The psychological ramifications of child sexual exploitation and abuse are significant and long-lasting, resulting in a lasting impact on survivors that continues well beyond the immediate traumatic experiences. The CSEA survivors undergo “depression, psychological distress, low self-esteem, substance abuse, attempted suicide, severe posttraumatic stress, psychopathology disorders, harmful behaviors toward self, and dissociative disorders.” (Harracksingh & Janagan Johnson). That is, it can result in an intricate web of psychological consequences. When Post-traumatic stress disorder (PTSD) is untreated, it can develop severe consequences in the children’s lives. A notable consequence of this ongoing trauma is the emergence of Complex Post-Traumatic Stress Disorder (C-PTSD), in which “sexual abuse of a child that is repeated and where the victim feels they cannot escape is often the trigger for CPTSD.” (Davis). In contrast to conventional PTSD, which stems from a solitary traumatic incident, C-PTSD emerges through continuous and recurrent exposure to trauma. This distinction renders C-PTSD especially pertinent to individuals who have experienced CSEA. The recurrent and enduring pattern of the abuse can result in a continual perception of powerlessness and a lack of ability to break out from the traumatic experience, thereby heightening sensations of fear and helplessness. Individuals who have survived traumatic experiences may encounter intrusive thoughts, nightmares, and flashbacks, perpetually exposing them to the trauma.

Moreover, the encounter of betrayal and violation perpetrated by an individual occupying a position of trust can significantly influence an individual’s capacity to establish secure emotional connections and place trust in others during their adult years. This phenomenon may present itself as challenges in establishing close interpersonal connections, sustaining friendships, or placing faith in individuals in positions of authority, exac-

erbing the sense of isolation and hindering their progress toward healing. That is, “this may be related to the difficulty of trusting others, which, in turn, may influence rejecting stable relationships in favor of multiple and sporadic relationships, with their entailed risk both of performing risky sexual behaviors and possible episodes of sexual victimization” (Senn et al.). Furthermore, it can impede cognitive development, resulting in challenges and “can cause emotional and cognitive impairments which have a significant impact on a child’s ability to concentrate in school, therefore weakening his or her academic performance” (Myers, 12) and problem-solving abilities. Further, sexual dysfunction and difficulties in establishing a positive self-identity are frequently encountered by those who have survived traumatic experiences. These experiences may present themselves as sexual avoidance, engaging in several sexual partners, or encountering challenges in setting clear sexual boundaries. Self-identity distortion can lead to a significant experience of perplexity and estrangement. The emotional anguish caused by CSAE can seriously deteriorate their self-esteem and self-concept, exacerbating shame and guilt.

Childhood abuse might render survivors susceptible to re-victimization, as it can result in lasting psychological damage. “Among CSA victims, victim sex, age at index abuse, and several psychiatric diagnostic categories were independently associated with revictimization risk, with different patterns of vulnerability emerging depending on the nature of revictimization.” (Papalia et al.). Thus, children who have undergone trauma in their childhood may be more vulnerable to engaging in violent relationships or being exploited in adulthood due to their distorted self-perception and challenges in setting and maintaining healthy personal boundaries. These psychological obstacles can be incredibly detrimental to occupational pursuits, diminishing the survivor’s quality of life. Hence, it is essential to recognize that the psychological ramifications are not the same and can intersect with other elements of an individual’s identity, including ethnicity, gender, sexual orientation, and disabilities.

### **Sociological Consequences of Child Sexual Exploitation and Abuse**

Child Sexual Exploitation and Abuse have the potential to undermine the confidence placed in societal institutions that bear the responsibility of protecting children. The mishandling or failure to treat allegations of abuse can significantly erode trust in the families, criminal justice system, child protective services, educational institutions, and religious organizations. The erosion of trust has wide-ranging implications, impacting survivors and their families and exerting a pervasive influence on society as

a whole, leading individuals to cast doubt on the efficacy of institutions established to safeguard the vulnerable. This disbelief will lead them to dissociate from all societal institutions and lead to self-distortion. It “may cause dissociative tendencies, which could interfere with the coding and processing of sexuality-related information.” (Zurbriggen & Freyd, 2004; Castro et al.). The societal impacts “include difficulties at school, truancy, running away from home, and early marriages by adolescent victims.” (Browne & Finkelhor). That is, “shame and self-blame may facilitate betrayal blindness by keeping the victim from perceiving any threat from the perpetrator and instead perceiving the self as the source of threat.” (Platt). The presence of scepticism can lead individuals to be hesitant in reporting instances of abuse or interacting with these establishments, thus impeding the efficacy of preventative and intervention measures required to address the issue of CSEA successfully. Another salient factor to contemplate is the continuation of gender inequality and power disparities. The reinforcement of conventional power hierarchies and gender-based violence is evident in that “numerous studies have found that the majority of known victims are female” (Coy), and most perpetrators are male. Furthermore, the dominant cultural phenomenon of assigning blame to victims and subjecting them to public humiliation might perpetuate the acceptance and normality of sexual assault targeting women and girls. The dynamics mentioned above hold sociological significance due to their contribution to the enduring nature of gender inequality and the establishment of an inhospitable atmosphere for survivors within the societal context.

Survivors of CSEA frequently encounter significant stigmatization and marginalization within their communities. The phenomenon of stigmatization can exhibit itself in many ways, encompassing attributions of blame, acts of ostracization, or expressions of incredulity. The prevailing inclination within society to assign blame to survivors, particularly in cases involving family members or individuals in positions of trust, fosters an atmosphere in which significant social repercussions accompany the act of speaking out against abuse. As a result, those who have experienced abuse may exhibit a higher propensity to endure their suffering without seeking assistance, reinforcing the prevailing atmosphere of concealment that sustains the cycle of abuse. Furthermore, the marginalization experienced by survivors might hinder their ability to get crucial resources and establish support networks.

### **Previous Research on Resilience in Child Sexual Exploitation and Abuse**

The existing body of literature on the psychological ramifications of CSEA is considerable, yet a notable dearth of research explicitly examines resilience within this particular setting. Previous research has predominantly focused on investigating the adverse consequences and psychological suffering encountered by persons who have survived traumatic events and given considerable conclusions to improve psychological resilience. Consequently, a significant knowledge gap exists about how certain individuals demonstrate psychological resilience, experience personal growth after such distressing experiences, and still have issues connecting themselves to social attachments. Thus, the researchers identified the research gap and understood the need for sociological resilience among CSEA survivors in addition to psychological resilience.

Therefore, the researchers have taken two case studies of Sigurdardottir and Halldorsdottir and Singh and Bhatnagar as primary evidence to substantiate their arguments in this research paper. Both the CSEA survivors are female and belong to different cultural backgrounds. It is observed that the survivor, Anne, in the first case study, expresses the failure of her healthcare providers, who were silent and failed to address trauma-informed care. Singh and Bhatnagar did the second case study about the Indian girl, who is addressed in their paper as X, who struggled with a lack of self-acceptance and had suicidal thoughts. Thus, the researchers have emphasised the significance of examining the variables contributing to Socio-Psychological resilience within this vulnerable demographic for a better understanding of the human experiences and to contribute meaningfully to survival factors in society along with psychological treatments and therapies.

### **III. Methodology**

This research uses a qualitative research method. The researchers incorporate Dr. Norman Garmezy's Theory of resilience to study psychological and sociological resilience in the survivors of Child Sexual Exploitation and Abuse. After identifying the research gap, the researchers combine sociological and psychological resilience among the vulnerable demographics to become more resilient compared to the previous levels of attachment to society. No direct surveys or interviews have been conducted for this research. Instead, it collects data from already existing literature. Data from previously published research articles, reviews, and theses are gathered for the literature review as secondary sources to strengthen the arguments. It also uses the existing quantitative data and psychological metrics to analyze the intricate dynamics between individual psycholog-



ical processes, sociocultural factors, and systemic impacts on the CSEA survivor's resilience and to discuss real-time situations and attained results.

#### **IV. The Theoretical Framework**

The researchers conceptualize a theoretical framework that offers a comprehensive perspective on the complex dynamics between psychological and sociological factors that impact resilience among the survivors of CSEA. Through a literature review, this research understands the need to emphasise the sociological perspectives of approaching CSEA survivors along with psychological perspectives. It is identified that the CSEA survivors who can be psychologically resilient and prosperous also face difficulties attaching themselves to society lacking sociological resilience. Thus, this research integrates theoretical perspectives derived from sociology and psychology. This viewpoint acknowledges the inherent connection between the survivor's psychological processes and the social and cultural environments in which they take place to recognise the impact of societal norms, institutions, and support networks on the experiences and resilience of survivors.

#### **V. Understanding Psychological and Sociological Theories for analysing Effective Resilience among the survivors of CSEA**

Resilience is "not necessarily impervious to stress. Rather, resilience is designed to reflect the capacity for recovery and maintained adaptive behavior that may follow initial retreat or incapacity upon initiating a stressful event" (Garmezy). Using Garmezy's resilience theory, this research integrates the two sociological theories, the ecological systems theory and the social support theory, with the existing psychological theories for fostering resilience among CSEA survivors. The Ecological Systems Theory, developed by Urie Bronfenbrenner, seeks to understand human development within the context of several interconnected systems "namely, the (1) micro-, (2) meso-, (3) exo-, and (4) macrosystems. These levels range from smaller, proximal settings in which individuals directly interact to larger, distal settings that indirectly influence development." (Ettetal et al.). It emphasises the presence of nested and interrelated systems that impact an individual's development and ability to overcome adversity. It emphasises the importance of both immediate environmental circumstances, the microsystem, and broader societal, cultural, and institutional influences, known as the macro system. Social support is another prominent factor in achieving resilience. It is "defined as function and quality of social rela-

tionships that one receives from other people such as help and support” (Schwarzer, Knoll, & Rieckmann; Yildirim & Çelik Tanrıverdi). The Social Support Theory, grounded in sociology and psychology, examines the significant function of social networks and support systems in fostering resilience. It helps to elucidate the impact of survivors’ access to and utilisation of social support networks on their psychological and sociological resilience. Having the Resilience theories, The Ecological Systems theory, and the Social Support theory as connecting edges to other psychological theories, Trauma theory, Stress and Coping theory, Intersectionality theory, Feminist theory, Empowerment Theory, and Post-traumatic Growth theory, this research attempts to find the possibilities in creating more efficient ways to attain the therapies, counselling methods and treatments that will make the CSEA survivor more resilient at both psychologically and sociologically.

The Trauma theories help in understanding the traumatic levels of CSEA survivors. Most of the time, the CSEA occurs as a chain of events in survivors’ lives. It leads to chronic and complex trauma causing PTSD and C- PTSD. Overcoming those traumas after a list of treatments and therapies challenges the adversities and boosts their psychological resilience. “Survivors of CSA do not only cope with the negative effects with CSA but engage in dynamic processes that include growth as well as recovery.” (Draucker et al.). Post-traumatic growth recognizes that survivors frequently demonstrate remarkable growth, transformation, and personal development despite their profound trauma. This theory emphasizes how most survivors have a “significant positive change arising from the struggle of a major life crisis” (Calhoun et al.) and can discover new meaning, purpose, and inner strength as they navigate the aftermath of CSEA through their healing journey.

Post-traumatic Growth theory emphasizes the significance of support systems, trauma-informed care, and psychological interventions that facilitate positive psychological changes in survivors, fostering higher self-esteem, resilience, and a sense of empowerment. It recognizes that while the trauma of CSEA is undeniably devastating, survivors may emerge from their experiences with renewed resilience, a deeper comprehension of themselves, and a greater capacity to lead fulfilling lives. It is observed that “survivors of CSA within secure and disorganized attachment relationships may be at higher risk of psychological maladjustment because their IWMs or social-cognitive patterns associated with attachment insecurity – perceptions of the self as unlovable and of others as unavailable in times of need” (Ensink et al.) even after being psychologically resilient

individuals, they failed to be socially resilient having the impacts of their past struggles in coping with society.

The examination of CSEA survivors' evaluation and reaction to the trauma of sexual exploitation and the impact of their coping mechanisms on their resilience holds significant importance in assessing their resilience level. "Coping refers to effortful behavioral and cognitive strategies activated in response to actual or anticipated stressful situations that serve to regulate both the stressful context and its negative socio-emotional and physiological consequences." (Proulx & Aldwin). Stress and Coping theory builds upon the research conducted by Lazarus and Folkman, and it specifically examines the cognitive and emotional strategies that individuals utilise to handle stressors effectively. It is identified that "despite the accumulating body of information addressing adult coping in response to CSA, several important areas remain unexplored." (Walsh et al.), and the important among them is their social attachment.

Feminist theory emphasizes the importance of recognizing the intersectionality of individual identities, which influence the distinctive experiences of survivors. In addition, it "has demonstrated a sustained concern with the sexual exploitation of women (and children) within patriarchal systems and societies." (Warner) These theories emphasise the power dynamics inherent in CSEA situations and amplify the voices and agency of those affected by such abuse. In addition, feminist perspectives emphasize the significance of preventative measures, educational initiatives, and trauma-informed care to disrupt and combat societal norms enabling CSEA, and "there is little information about how factors, such as gender and SES, may moderate this association." (Walsh et al.). In addition, the need for legal and policy reforms and efforts to promote economic empowerment and community engagement are all essential components for constructing resilience against CSEA. The Empowerment theory highlights the importance of fostering survivors' agency, self-determination, and control over their lives. It strongly emphasizes giving survivors access to resources, extensive support services, and educational opportunities so they can start over. This strategy advocates for legal rights and justice while simultaneously acknowledging the importance of peer relationships, social support networks, and cultural sensitivity. The organization motivates survivors to engage in activism, participate in advocacy projects, and attain economic empowerment by providing employment training and financial education. By promoting the active engagement of victims of child sexual exploitation and abuse (CSEA) in processes such as self-reflection, self-empowerment, and revitalization and encouraging

them to assume responsibility for their experiences, this initiative ultimately establishes a structure that enhances the resilience of CSEA victims.

## **VI. Discussion**

By using established sociological and psychological theories, this study develops a conceptual framework to comprehend the socio-psychological conditions that survivors of child sexual exploitation and abuse (CSEA) encounter. Through the integration of sociological and psychological concepts, an effort is made to foster social resilience. The proposed framework addresses every facet of resilience, including but not limited to institutional influences, social dynamics, cultural conventions, and individual cognitive processes. An essential differentiation should be made between psychological and social resilience when examining the experiences of individuals who have managed to survive CSEA.

Psychological resilience refers to an individual's capacity to recover successfully from adverse reactions, traumatic incidents, or demanding circumstances. It also describes the capacity to adjust to challenging circumstances to enhance overall well-being. Individuals who have been victims of child sexual exploitation and abuse demonstrate psychological resilience and attempts to overcome the emotional and psychological harm these traumatic experiences have produced when they get proper psychological, emotional, and social support. Many individuals think resilience is a natural trait that may be improved via personal growth, social support systems, and therapeutic interventions. Survivors frequently turn to therapeutic treatments, such as therapy or counselling, in order to form adaptive coping skills, effectively navigate and integrate their traumatic experiences, and increase their psychological resilience.

Sometimes, the failure to understand their unique struggles leads to extending health and psychological struggles and keeps them in a confused state throughout their lives. It is observed in the case study of Anne, who is now a 40-year-old woman whose father has sexually exploited her from 8-month-old child till 9 years old. She "was also raped by her uncle, her stepfather, her friend's father, and by more than one relative." (Sigurdardottir and Halldorsdottir). Throughout her life, she faces unique challenges to overcome traumatic experiences and health problems. Even after a chain of counselling and treatments, she faces health issues and trust issues. "She experienced violent nightmares, which intensified when she became sexually active. Anne claims that she was able to endure the

abuse by disconnecting herself. She exited her body through dissociation." (Sigurdardottir and Halldorsdottir). The victims choose to disconnect themselves from society, which again pulls them to another layer of struggle. Anne "has difficulty defining her own and others' boundaries." (Sigurdardottir and Halldorsdottir). At some point in time, she also had suicidal thoughts.

In the case of Anne, the healthcare providers "failed to provide any consideration, or even validation, of her traumas. Health providers' solution for her problems was mostly medication: "I've been using a lot of pain medication, but I'm now trying not to take them unless strictly necessary."" (Sigurdardottir and Halldorsdottir). It is observed that the survivors may be able to reclaim control and mastery over their personal lives and emotional experiences with the use of psychological support and therapeutic intervention. However, their complete recovery is still a question, and Anne's case study shows that more effective methods and treatments need to be implemented. Building and maintaining supportive relationships with friends, family, or support groups is essential for survivors to cultivate psychological resilience since these relationships offer the emotional support and validation that are essential to their well-being. But, when the sexual abuse has happened in the victim's close circle, it is hard for them to develop trust in the family and social institutions. Hence, there is a need to improve and implement an approach to treating the CSEA survivors with effective physical, psychological, and social along with medications. Studies have indicated that engaging in self-care practices, like mindfulness, physical activity, and relaxation techniques, can assist those who have experienced trauma in effectively managing their stress and anxiety. These behaviours significantly influence the development of psychological resilience.

Like Anne, X is a 22-year-old female who has also undergone child sexual abuse from her close circle and is under counseling. "At the age of five years while she was playing with children of the neighbourhood, one of them older to her took her to his house and sexually abused her." (Singh and Bhatnagar). She has also been sexually abused by her brother, and she got blamed for this by her mother, though her brother has forced her. It is observed that she feels dirty and has "auditory and visual hallucinations, the former dominating the latter, preoccupation with suicidal thoughts and few attempts of running away from home" (Singh and Bhatnagar). Though she is under counseling for self-acceptance, her complete recovery is still a question. Thus, in both case studies, the survivors struggle to be psychologically and socially resilient after taking treatments and ther-

apies.

Sociological resilience is the capacity of people or groups to endure and bounce back from social pressures, misfortunes, and other external factors. Sociological resilience, as it relates to CSEA survivors, is the capacity of the person to negotiate social elements, including discrimination, stigma, and institutional impediments that could make it difficult for them to get resources, seek help, or pursue justice. Because these institutions can effectively address survivors' societal challenges and barriers, connecting with community organizations, legal aid, and advocacy groups is essential to survivors' sociological resilience. Developing and enhancing legal and legislative frameworks that safeguard survivors' rights, guarantee their access to justice, and encourage public awareness and preventative actions are essential for bolstering sociological resilience. It can be reinforced by holding educational and community awareness campaigns to dispel negative stereotypes, fight stigma, and create a welcoming atmosphere for those who have experienced adversity. In brief, psychological resilience in survivors of CSEA is developed through nurturing internal coping mechanisms and emotional strength. Sociological resilience refers to effectively navigating and overcoming societal challenges and limits. The interconnectedness and differentiation between these two forms of resilience are vital factors to examine in facilitating the survivors' path towards healing and recuperation. Addressing both kinds of issues is crucial to ensure that the survivors have enough access to essential resources and opportunities to lead successful lives within society.

## **VII. Conclusion**

The research offers a nuanced and comprehensive understanding of the resilience of survivors of CSEA by employing a socio-psychological theoretical framework. It emphasises that resilience is not exclusively an inherent characteristic of an individual but rather a complex interaction between internal and external elements. "Social support has been hypothesized to be one of the protective factors that buffer children from the impact of these negative early experiences" (Scott Heller et al.). "Those who have social support and/or have developed abilities to cope with these stresses are assumed to have better outcomes." (Sperry & Widom). "Such positive changes occur when they take control of the direction of their lives, experience acceptance from others, care for and nurture themselves, experience a sense of liberation and freedom, and gain a sense of accomplishment, achievement, belongingness, and connection." (Draucker et al.). Furthermore, it recognised the significance of sociocultural variables

in moulding the experiences and results of survivors. It is needed to have an improvised “treatment approaches attempting to address posttraumatic stress symptomatology in the aftermath of sexual assault need to address social reactions from social network members that affect survivors’ coping strategies and symptoms over time.” (Ullman & Relyea). Thus, this research argues that CSEA survivors’ struggles are unique, and they need effective treatment along with medication, counseling, therapies, and adequate social support. The above socio-psychological approach will serve as a guiding tool for researching and exploring the complex nature of resilience and its implications for both theoretical understanding and practical applications in supporting and intervening with CSEA survivors.

Further, this research suggests that the notion of intersectionality can intensify the psychological difficulties experienced by survivors, highlighting the need for a therapy and support strategy that is both culturally sensitive and inclusive. It is essential to create a society without CSEA for the “elimination of all forms of trafficking and sexual exploitation, as outlined in the 2030 Agenda for Sustainable Development adopted by the United Nations” (Bruhns et al.; United Nations Goal 5) and to create an environment where the “survivors identify an inner drive toward growth and report positive changes in self-perception and new perspectives on life as a result of healing from their abuse.” (Bruhns et al., 2018). Thus, this understanding serves as a foundation for designing customized therapeutic interventions and establishing support systems that effectively tackle the unique obstacles encountered by individuals like Anne and X, who have experienced CSEA, and helps them to become resilient at psychological and sociological levels.

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