An overview of sexual assault survivors: a 5 year retrospective study in gynaecology department of NSCB medical college, Jabalpur, Madhya Pradesh, India

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ABSTRACT

Background: Rape and abuse of women are common occurrences, which many times go unreported due to social stigma or fear of retribution. Rape is a crime not against a single human being but against the entire humanity. For granting justice to the rape survivor, it becomes necessary that such matters are properly presented before the Courts of Law. Healthcare workers play an important role in this regard because they are the first people who examine the survivors. They document record of the history and medical condition of the survivor and do relevant sample collection. The objective of this study is to analyze demographic and event characteristics of rape survivors who presented to the gynecology department of Government NSCB MCH, Jabalpur with history of sexual assault.

Methods: Data was retrospectively collected from the medico legal records of the department of Gynecology between April 2013 to March 2018.

Results: An increase in number of cases of sexual assault reporting to the hospital every year is observed. Age wise distribution showed that 27.66% cases were in age group 6-10 years and 16-20years being the major affected group. Majority of the cases belonged to low socio-economic strata. 91.5% survivors were unmarried. 61.7% of the survivors were from rural areas. 44.7% of survivors reported within a day of the incident and most of the assailants were known to the survivors; only 36.2% were strangers. Most of the incidences (23.4%) took place in the assailant’s house and survivors house each. In 31.9% cases there was evidence of fresh hymen tear.

Conclusions: An understanding of the demography of sexual assault survivors will help us to better train our doctors in proper attitude and handling of such cases, an area often neglected.

Keywords: Assailants, Sexual assault, Survivors

INTRODUCTION

The crime of rape is as old as mankind, yet it has remained the most obnoxious and gravest of all human rights violation. It has also been recognized as a gendered crime, constituting a violation of the right and freedom of women and fueling gender inequality. Its definition varies slightly across countries, culture and religion. According to world health organization, rape is a form of sexual violence, defined as physically forced or otherwise coerced penetration of the vulva or anus. The under reporting of cases of sexual assault is mainly due to social stigma, prejudice with regard to the chances of marriage, being considered promiscuous and responsible for incident, attendant humiliation and shame, embarrassment caused by appearance and cross examination in court, publicity in press, risk of losing the love and respect of society, friends and that of her husband, if married.
In the present study, we have done a retrospective analysis of the sexual assault survivors reporting to Government Medical College, Jabalpur to analyze the profile of sexual assaults survivors, incidence to reporting time, relationship of the assailant with the survivor and severity of the injury.

METHODS

Our study is retrospectively done in a tertiary care hospital (NSCB, MCH) based on data procured and analyzed from the medico legal records of survivors of sexual assault between April 2013 to March 2018. The medico legal records carry the details of case history recorded by trained gynecologists, based on the details disclosed by the survivor about the incident and as well as details of physical examination. Samples were collected and sent for forensic examination according to “SAFE (Sexual Assault Forensic Evidence) kit protocol” when the survivor was presented either by the investigating police officer or when the survivor presented herself or by relatives directly after the incident for medical care.

Inclusion criterion

All the sexual offences survivors brought to the department of gynecology between April 2013 to March 2018.

Ethical committee clearance

As the data has been retrospectively collected and as no revelations of identity has been done, ethical committee clearance is not required.

The data was entered on predesigned data sheet, tabulated and then statistically analyzed. The pregnancy test result was also included.

RESULTS

This study analyses data of sexual assault survivors reporting to the gynecology department of NSCB MCH Jabalpur during the five years study period. There were 47 cases in all. In 2013, from April to Dec, there were 12 cases reported, which falling to 06 cases in the year 2014, 07 cases in 2015 and again went up to 22 cases in 2017 and 2018.

Table 1 shows the age incidence of the survivors. Though, majority of the survivors 27.66% were belonged to 6-10years and 16-20 years of age, 17.02% of the survivors were below the age of 5yrs. Table 2 – 4 show majority of these survivors were of the poor socio-economic status and unmarried. Most of survivor belonged to rural area (61.7%).

Table 1: Age Incidence of survivors.

| Age       | Numbers of survivor | Percentage of survivors (%) |
|-----------|---------------------|-----------------------------|
| 0-5 years | 08                  | 17.02                       |
| 6-10 years| 13                  | 27.66                       |
| 11-15 years| 07                 | 14.89                       |
| 16-20 years| 13                 | 27.66                       |
| >20 years | 06                  | 12.76                       |
| Total     | 47                  |                             |

Table 2: Socio-economic status of survivor.

| Socio-economic status | Number of survivor | Percentage of survivor |
|-----------------------|--------------------|------------------------|
| Lower                 | 32                 | 68.08                  |
| Middle                | 12                 | 25.53                  |
| Upper                 | 03                 | 6.39                   |
| Total                 | 47                 |                        |

Table 3: Locality of survivor.

| Locality of survivor | Number of survivor | Percentage of survivor |
|----------------------|--------------------|------------------------|
| Urban                | 18                 | 38.3                   |
| Rural                | 29                 | 61.7                   |
| Total                | 47                 |                        |

Table 4: Marital status of survivor.

| Marital status of survivor | Number of survivor | Percentage of survivor |
|---------------------------|--------------------|------------------------|
| Married                   | 03                 | 6.4                    |
| Unmarried                 | 43                 | 91.5                   |
| Widow                     | 01                 | 2.1                    |
| Total                     | 47                 |                        |

Table 5: Place of incident of survivor.

| Place of incident /other place | Number of survivor | Percentage of survivor |
|-------------------------------|--------------------|------------------------|
| Survivor house                | 11                 | 23.4                   |
| Accused house                 | 11                 | 23.4                   |
| Relative house                | 07                 | 14.9                   |
| Roadside /other place         | 18                 | 38.3                   |
| Total                         | 47                 |                        |

In present study most of the incidences took place in assailant’s house and survivors house were same i.e. 23.4%. 38.3% cases was a roadside/isolated place (Table 5). In our institute 95.7% survivors was assaulted by a single person (Table 6).

Table number 7 shows the number of times a survivor was assaulted. Majority of survivors 80.9% were assaulted only once. But there were 19.1% of survivors who were assaulted more than one time. These were mostly those who were raped over months mostly by...
family members or close relatives or some close friend or known to of the family.

| Table 6: Number of accused. |
|-----------------------------|
| Number of accused | Number of survivor | Percentage of survivor |
|-------------------|--------------------|------------------------|
| 1                 | 45                 | 95.7                   |
| >1                | 02                 | 4.3                    |
| Total             | 47                 |                        |

Table 7: Numbers of episodes.

| No. of episodes | Number of survivors | Percentage of survivor (%) |
|-----------------|---------------------|----------------------------|
| 1               | 38                  | 80.9                       |
| >1              | 09                  | 19.1                       |
| Total           | 47                  |                            |

Table 8 shows 63.8% survivor known to assailants and Table 9 shows the incident to reporting time. 44.7% of cases were those who presented to the casualty within 1 day.

| Relation to survivor | Number of survivor | Percentage of survivor (%) |
|----------------------|--------------------|----------------------------|
| Known                | 30                 | 63.8                       |
| Not known            | 17                 | 36.2                       |
| Total                | 47                 |                            |

Table 9: Incident to reporting time.

| Incident to reporting time | Number of survivor | Percentage of survivor (%) |
|-----------------------------|--------------------|----------------------------|
| Within 24hrs                | 21                 | 44.7                       |
| Within 72hrs                | 08                 | 17                         |
| After weeks                 | 18                 | 38.3                       |
| Total                       | 47                 |                            |

When the survivors were examined and a urine pregnancy test was done, 32% were found to be pregnant. Some of these pregnancies were alleged to be due to the act of assault and they had presented to the casualty months after the assault mainly because they needed MTP. This was either because they were presenting long after the incident and knew examination will not help them as there would be no forensic evidence available.

| Table 10: Pregnancy of survivor. |
|----------------------------------|
| Pregnancy of survivor | Number of survivor | Percentage of survivor (%) |
|-----------------------|--------------------|---------------------------|
| Yes                   | 15                 | 32                        |
| No                    | 32                 | 68                        |
| Total                 | 47                 |                            |

Table 11: Type of injury.

| Type of injury     | Number of survivor | Percentage |
|--------------------|--------------------|------------|
| General            | 1                  | 2.1        |
| Breast             | 1                  | 2.1        |
| Perineal           | 10                 | 21.3       |
| Fresh hymen tear   | 15                 | 31.9       |
| Old hymen tear     | 26                 | 53.1       |
| Vaginal injury     | 06                 | 12.8       |
| Anal injury        | 04                 | 8.5        |

According to table 11 Out of the total examined survivors only one survivor presented with sign of general injury. Breast injury was also seen in only 1 survivor and perineal injury seen in 21.3% of survivors. Fresh hymen injury was present in 31.9% of cases. The presence of fresh vaginal injury was seen in 12.8% of cases. Anal and rectal injury was seen in 3.1% of survivors. Only 8.5% of the survivors are those who required major procedure 3rd and 4th degree perineal tear repair in the emergency OT under anaesthesia.

DISCUSSION

The incidence of cases of sexual assault reporting to our hospital has gradually increased over last few years. It is not only because of the fact that the actual crime rate has increased but also for the fact that people are more aware after extensive media coverage of various cases and coming forward to seek justice. Sweta L et al and Namita G et al also recorded the year wise increase of rate of cases of sexual offences reported at their concerned institutions. 5,6

According to age

Majority of the survivors was below 16 years of age consisting of 28 cases (59.6%). These results are in agreement with study by Sarkar SC et. al. (13) (68.9%), Tamuli RP et al (55.76%), Arif M. et al (68.8%) Praveen M et al (51.6%) Kumar Pal et al (54.28%). 7,10

According socioeconomic status

Survivors covered by this study mostly belonged to lower socioeconomic status and are uneducated. Lal s et al., also find the same observation.5

According locality of survivor

In present study 29 cases (61.7%) are from rural area and 18 numbers of cases (38.3%) are from urban area. In study by Bijoy TH et al recorded that 67.3% cases were from rural and 32.7% cases were from urban area.11 Study by Demisew A et al recorded that 31.3% cases, were from urban and 68.7% cases were from rural area.12 This difference in proportion of rural and urban area in
different studies might be due to difference in sociocultural backgrounds in different areas. Also it depends on the distribution of population in the study region and referral of cases from the periphery.

**According marital status of survivor**

Most of the survivors were unmarried (91.5%) and widow (2.1%) in our study. In contrast to our observation; Masho SW et al, reported that sexual assault survivors were mostly divorced, separated or widowed. According to the study done by Soumya Jyoti et al., maximum (63%) of cases were unmarried.

**According to place of incidence**

In present study maximum incidence took place at accused house and survivor’s house in 11 cases (23.4%) and road sides which was 18 cases (38.3%).

In Study by Samuel O. et al, most incidences occurred at assailant home (50%). In Study by Kumar Pal et al, also most incidences occurred at alleged accused home (31.40%). Study by Sarkar SC et al and Grossin C et al, reported that most of incidences occurred at survivor home (41%).

**Based on number of accused**

Our study showed that in 95.7% of cases was assault by one person and 4.3% cases find by more than one assailant. Conversely According to Riggs N et al., the number of assailants was greater than 1 in 20% of cases. A study done by Hassan Q et al., in Lahore stated that two or more assailants were involved in 30% cases.

**Accused known to survivor**

In our study, 63.8% of cases known to accused. In a study done by Riggs N et al., C level and also find the same observation.

**According to incident to reporting time**

In present study 44.7% of survivors reporting within 24 hrs of assault and 17% of survivors reporting with in 72 hrs. A study done by Namita G et al, found 40% of survivors reporting within 24 hrs and Santos JC et al, Lisbon found 61% of survivor reporting with in 72 hrs. It shows an increased awareness among women and their guardians that such cases need to be reported early in spite of the social stigma attached to it.

**Pregnancy of survivor**

Out of all the 47 cases 32 % were found to be pregnant at the time of the assault. Susanne Scherer et al., studied 184 survivors in a retrospective analysis and found only two of the survivors (1.1%) to be pregnant.

**According to type of injury**

In present study out of 47 cases we found 31.9% having fresh hymen torn , 21.3% having perineal injuries and only 4 cases (8.5%) who require major procedure 3rd and 4th degree perineal tear repair in the emergency OT under anesthesia.

Similar observations were made in a study by Sweta L et al. Out of the total examined survivors, 13.5% of survivors presented with any sign of general injury and perineal injury seen in 13.5% of survivors, fresh hymen injury was present in 7.5% of cases while 35.5% had old healed hymen tear and Anal and rectal injury was seen in 3% of survivors.

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