Children who were sexually abused were more disturbed than their peers after 5 years


Question
What are the 5 year outcomes (behaviour, depression, self esteem, anxiety, eating problems, drug use, suicide attempts, self injury, running away, criminal activity, and attributional style) in children who have been sexually abused compared with children who have not been sexually abused?

Design
Cohort study within a case control study.

Setting
Sydney, Australia.

Patients
84 children who had been sexually abused (74% girls) were evaluated at the Child Protection Unit of 2 hospitals from 1988–90. They were 5–15 years old, lived in the metropolitan area, and had experienced some form of abusive sexual contact with either physical evidence or a clear and consistent description of events that the hospital staff deemed confirmatory. Exclusion criteria were consensual sexual activity between peers and developmental delay. Control children were matched for age and sex and chosen at random from area schools. Follow up was 81%.

Assessment of prognostic factors
Children and non-offending parents were interviewed at baseline and at 5 years. Prognostic factors were abuse characteristics, family demographic factors and socioeconomic status, family functioning, recent life events, and mental health of the mother.

Main outcome measures
Behaviour (Child Behavior Checklist, Youth Self-Report, and Teacher's Report Form); depression or unhappiness (Beck Depression Inventory or Children's Depression Inventory); self esteem (Piers-Harris Children's Self-concept Scale or the Adult Form of the Coopersmith Self-Esteem Inventory); anxiety (Revised Children's Manifest Anxiety Scale); family relationships (Parental Bonding Instrument or a project specific instrument); attributional style (Children's Attributional Style Questionnaire); and other behaviours using project specific questionnaires (self-injury, suicide attempts, running away, eating problems, drug use, and criminal behaviour). Age determined which questionnaires were used.

Main results
After 5 years of follow up, children who had been abused had completed fewer years of school (p = 0.001); had lower socioeconomic status (p < 0.001); were less likely to be living with a biological parent (p < 0.001); experienced more parental changes (p < 0.001); had mothers who had more somatic complaints, anxiety, and insomnia (p < 0.04); experienced more negative life events (p < 0.001); had lower behaviour scores (2 of 3 scales); were more depressed (p < 0.001) or likely to have been pregnant or had a child (p < 0.04); had lower self esteem (p < 0.001), more anxiety (p < 0.03), and more binge eating (p = 0.02); used more cigarettes (p = 0.003) and hallucinogens (p = 0.05); reported more parental drug use (p = 0.02); thought more about (p = 0.003) and attempted suicide more often since intake (p = 0.03); and reported more self injury in the past 12 months (p = 0.02) and since intake (p = 0.009) than children who had not been sexually abused. These data were adjusted for age at time of assessment, sex of child, recent negative life events, and family functioning using regression analyses. Other outcomes did not differ between the groups.

Conclusion
Children who had been sexually abused were more disturbed than their peers who had not been abused, after 5 years of follow up.

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Commentary

The study by Swanston et al, by showing the long term consequences of child sexual abuse, provides ammunition for practitioners who have argued for short, medium, and long term services for survivors of sexual abuse. The study will be relevant to many of the findings from this study to fight for better service provision. As the authors say in their conclusion, what is needed is "long term commitment to care of these children".

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