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A Comprehensive Look at Sexual Violence: Identification, Initiation and Impact

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ABSTRACT

This research paper is based on the widespread topic of sexual violence. It talks about the signs that a person has suffered through sexual assault, the ways to support a person who has gone through such an experience as well as the impact that has on them. This paper discusses sexual cyberbullying by peers as well as online strangers, the 'causes' of sexual assault according to society, and research based on it. It also includes the difference between sexual assault and sexual abuse and how dress codes objectify and sexualize children. The precautions that can be taken to prevent sexual assault are also a big aspect discussed.

KEYWORDS: Sexual Assault, Sexual Abuse, Cyberbullying, Teen Sexual Assault, Impact, Prevention, Causes, Dress Codes, Objectification, Coping Methods

INTRODUCTION

On 24th of March 2024, a 17-year-old student in Visakhapatnam died by suicide after jumping off her college building. In a long text exchange with her family minutes, before she took the plunge, the student said she was sexually harassed at the college and could not complain to the institution's authorities or the police because her harassers had taken photos of her and had threatened to post them on social media (Uma, Sudhir, NDTV 2024). This is the result and impact of sexual assault. In some cases, the victim decides that they can no longer continue with their lives and they end their suffering by suicide, and in some cases, the victim chooses to keep quiet, suppress and invalidate their experience. Only 1% of people have mustered up the courage to report the incident to the authorities and fight against their abuser for their human rights.

Sexual abuse often refers to sexual acts by adult caregivers in the family; by adults in the caregiving role, such as a coach; or by older children in the family, such as an older sibling or cousin. In contrast, the term sexual assault is often reserved for sexual acts by strangers or by same-age peers. The risk factors, prevention efforts, and treatment strategies may differ between these phenomena. Still, the statistics for each are often combined, making understanding the true occurrence of each difficult or impossible' (Rebecca L. Moles, M.D. John M. Leventhal, M.D. 2014). At least 120 million girls under the age of 20 – about 1 in 10 – have been forced to engage in sex or perform other sexual acts, although the actual figure is likely much higher (Unicef 2022). Most, if not all statistics on sexual assault and violence are conducted on the number of reported cases, however millions of assault victims never report or even talk about their experience because they are afraid of their abuser or their reputation in society.

A 13-year-old girl in Mississippi gave birth to a boy after she was raped as well as impregnated by a stranger – and then was unable to get an abortion (Aratani, Lauren, The Guardian 2023). In many cases like this one, the assault victim was left pregnant and then denied an abortion. A child was made to have a child. abused females scored higher on depression, trait anxiety, dissociation, PTSD, and somatic symptoms, as well as behavioral problems such as aggression, delinquent behaviors, and school problems (Bonanno, Noll, Putnam, O'Neill, & Trickett, 2003; Trickett et al., 2001). Teens and adolescents who are sexually assaulted are left to carry the mental and physical impact of the incident for the entirety of their lives. Their hormones and even bodily functions are also largely impacted.

Girls	Boys
Approximately 8% or an estimated 10 million experienced rape or attempted rape	0.7% or an estimated 791,000 experienced either rape or attempted rape
About 6% or an estimated 7 million experienced	Rape 0.4% or an estimated 500,000 experienced rape
About 4% or an estimated 4 million experienced rape involving drugs or alcohol	X
2% or an estimated 2.6 million experienced attempted rape	X

SEXUAL ASSAULT IN TEENS IN INDIA

“On the dark and cold night of December 16, 2012, a 23-year-old woman was brutally assaulted and raped in a moving bus in south Delhi. Jyoti Singh, a female physiotherapy intern was beaten, gang raped, and tortured on December 16, 2012, in Munirika, a neighborhood in south Delhi. She was traveling with her friend Awintra Pandey. As she fought back, one of the juvenile attackers inserted an iron rod into her private parts, pulling and ripping apart her intestines. The two friends were thrown out of the bus to die at the side of the road where they were found by a passerby. She succumbed to her injuries soon later in the hospital. Jyoti Singh was given the name ‘Nirbhaya’ which means ‘fearless one’ as the Indian rape laws do not permit the usage of the victim's names in the media (Times of India,2019)

The ‘Nirbhaya’ case was a wake-up call for India. This case was just one of thousands that have happened. It brought light to the brutality of sexual assault on Indians. The perpetrators of the Nirbhaya case chose to employ M.L Sharma as their lawyer due to his attitude. He was quoted by the media as having said that the girl and the boy had brought this upon themselves: they were a young, unmarried couple who had no business hanging around late at night. Furthermore, she then blamed Awintra Pandey for being a weakling and being unable to defend Jyoti Singh. (Talwar, Rajesh, 2013) Four out of the five perpetrators were given the death penalty by the government, while the fifth was not tried and sent to a correction facility as he was a minor at the time.

The Nirbhaya Case brought about the Criminal Amendment Act, 2013 is also popularly referred to as the Anti-rape Act. This act included-

- new offenses such as stalking, acid attacks, and voyeurism were added to the definition of rape
- Even the threat of rape is now a crime and the person will be punished for the same.
- The minimum sentence was changed from seven years to ten years considering the increase in the number of rape cases.
- In cases that led to the death of the victim or the victim being in a vegetative state, the minimum sentence was increased to 20 years.
- The **character of the victim** was irrelevant to rape cases and it doesn't make any difference in granting punishment for the crime.
- Since one of the accused in this case was a juvenile, another flaw in the system was identified after this case. So, the age for being tried as an adult for violent crimes like rape was changed from 18 to 16 years, that to the Juvenile Justice Act, of 2015.
- There was also the inclusion of registering complaints and medical examinations. The report categorically mentioned, Any officer, who fails to register a case of rape reported to him, or attempts to abort its investigation, commits an offense which shall be punishable as prescribed.
- The committee gave extensive recommendations regarding avoiding marital rape as well as rapes committed via the commission of void marriages. (Kumar)

In India, an alarming statistic reveals that one in every two children has endured sexual abuse before turning 18, predominantly at the hands of family members or individuals known to them. Tragically, this issue has escalated further during the pandemic-induced lockdown. (Chaturvedi, Megha, India Today 2023). This horrifying statistic proves how generalized and normalized sexual assault and abuse are in India. It is not strangers from whom a child has to be vary of rather it is the very people surrounding them, the abusers and rapists end up being the people they should feel the most comfortable around.

SEXUAL CYBERBULLYING

Sexualized bullying” is a term that has been used to describe bullying of a sexual nature. It has been defined as “unwanted sexual attention that makes the recipient feel uncomfortable, demeaned or humiliated (Sullivan Keith,2011). In the technological age that we live in, many if not all teenagers regularly use and/or post on social media platforms. When these adolescents post pictures of themselves and their friends, sometimes they are subjected to cyberbullying.

A study from Southern India surveyed 881 women in college and found that 83 percent of those women who had faced online harassment experienced sexual harassment, such as abusers manipulating their images to appear sexual, sharing their sexual images without consent, and making relentless unwanted requests for sexual contact (Gurumurthy, Vasudevan, and Chami 2019). Such violence is deemed sexual violence as it breaches a person's sense of security and safety and causes emotional distress. The sexualized cyberbullying of teen girls may manifest itself in numerous ways, including slut shaming, threats of sexual violence, harassment, cyberstalking, exclusion, and "outing" (revealing that someone is LGBTQ), and can "extend to highly sexual comments and visual pornography that dehumanizes women" (O'Neil, Susan)

In April 2012, 17-year-old Rehtaeh Parsons passed away after an attempted suicide. In November 2011, Rehtaeh was allegedly sexually assaulted by four perpetrators while attending a house party. A cell phone photo of the sexual assault was shared repeatedly by students at her school and across social media sites (Venton-Rublee, Jordan 2013). Subsequently, Rehtaeh was subjected to relentless sexualized bullying and cyberbullying (Huffington Post, 2013). There is a new way of adding to sexual assault in the 21st century. Sexual assault has started to be filmed and posted on social media. This causes further pain and humiliation to the victim as the victim's social media accounts can easily be found in this era of technology and they start to receive comments from pedophiles, online predators, and even their peers asking for sexual favors and get severely bullied.

IMPACT AND TRAUMA OF SEXUAL ASSAULT

More than 40% of the women entering the study university had an experience of rape or sexual assault during their teen years; an additional 24% experienced sexual victimization in their first semester of college, and another almost 20% were raped or sexually assaulted during their second semester of college.

'Women with prior teen sexual victimization experiences tended to enter college with lower GPA scores and tended to earn lower grades during their first freshman year than did non-victimized women students' (Jordan, Carol E.). Education is a tool that is carried throughout life and for teenagers who have been taken advantage of by the means of sexual abuse, it becomes difficult to acquire. According to many studies, teens who have experienced sexual assault tend to drop out of school or take many absences due to which they fall behind in class.' Anxiety and depression had a detrimental effect on academic performance which in turn led to further mental health and sleep problems resulting in a vicious spiral. Deterioration in conduct, including outbursts of anger and aggression, caused disciplinary issues, particularly where teachers were unaware of the assault. Participants reported a lack of understanding on the part of schools of how to support them post-assault and few allowances having been made for its effects on academic performance. Some were excluded, others dropped out permanently or temporarily or repeated a year, and several were relocated to another school.' (Clarke, V., Goddard, A., Wellings, K.)

Adolescents presenting after sexual assault have high levels of vulnerability over a year post-assault. Many remain at risk for mental health disorders, highlighting the need for specialist intervention and ongoing support. A key concern for young people is disruption to their education. Multi-faceted support is needed to prevent social exclusion and further widening of health inequalities in this population and to support young people in their immediate and long-term recovery. Adolescent victims of sexual violence are at increased risk of depression, post-traumatic stress disorder (PTSD), anger control problems, low self-esteem, eating-disordered behavior, and suicidality, compared to non-affected peers. (Clarke, V., Goddard, A., Wellings, K.). Support is the main thing any sexual assault victim requires. With a good support system, the victim can start to return to their old selves slowly with lower chances of developing mental health problems. Depression, PTSD, and low self-esteem can lead to the victim attempting or committing suicide. Their experience with assault completely changes their view of life to the point where they think that it is pointless to live or that it hurts too much to live life.

In one study involving seven general population surveys (i.e., surveys in which people were randomly selected to represent those living in a particular region or the entire country), the odds of persons who had been sexually assaulted having poor health was 1.63 times the odds of non-assaulted persons having poor health (Golding et al, 1997).

One of the most thoroughly studied health problems in this regard is chronic pelvic pain. Prevalence rates of sexual assault in 11 studies of patients with pelvic pain ranged from 26% to 82%, and when comparison groups were used, assault was significantly related to pelvic pain (reviewed by Golding, 1996b). Nearly all the research in this area has been conducted in clinical settings in which pelvic pain.

Sexual assault is also associated with other gynecologic problems, such as menstrual pain or irregularity, excessive menstrual bleeding, pelvic inflammatory disease, gynecologic surgery, multiple yeast infections, sexually transmitted diseases, and sexual dysfunction (reviewed in Golding, 1996b), and premenstrual distress (Golding & Taylor, 1996).

Other chronic pain syndromes are associated with sexual assault as well. Fibromyalgia (FM) is a chronic disorder with an unclear physiological basis. It is characterized by widespread musculoskeletal pain and specific tender spots. Estimated prevalence rates of sexual abuse among women range from 50% to 67% (reviewed by Walker et al., 1997); these rates are often significantly higher than rates of sexual abuse in patients with other musculoskeletal disorders with comparable pain and disability (most typically rheumatoid arthritis). Sexual abuse has a particularly strong relationship to FM if it occurred in childhood, occurred in both childhood and adulthood or resulted in more invasive sexual contact. (Although various studies of sexual abuse and FM have compared more and less invasive sexual contact, the exact definitions of these two categories have varied across studies.)

A history of sexual assault has been reported by 39% to 45% of patients with chronic headaches (reviewed in Golding, in press), and a statistically significant association of assault with headache has been found in both clinical samples and a meta-analysis of data from five general population surveys (Golding, in press). Headache is particularly strongly related to sexual assault during childhood (Golding, in press) and invasive, physically injurious assaults (Leserman, Li, Drossman, & Hu, 1998).

PREVENTION METHODS

The necessity for support for the sexual assault victim after their traumatic experience can be reduced by just preventing the crime from happening. Prevention is always better than cure. However, that is not always realistic. Some ways to prevent sexual assault are:

- alter social norms that promote rigid sex role stereotyping and hostility toward women.
- change male roles that promote aggression, control, and the suppression of emotion.
- promote policies that raise the status of women, socially and eco-nomically.
- foster the development of empathy in male children.
- provide school-based programs on conflict resolution.
- provide early and ongoing sex education for children.
- integrate parenting skills into school curriculum (Mantak, Frances J.)'

SO-CALLED 'CAUSES' OF SEXUAL ASSAULT

There is a huge controversy behind the causes or the reasons for sexual assault. In society there are various statements attached to the causes behind sexual assault like 'What was she wearing' or 'She was asking for it' or 'Was she drinking alcohol?'. These statements make the victims believe that the horrifying incident that happened to them was their fault and not the perpetrator's fault.

There have been many experiments to find out the so-called 'causes' behind sexual assault one of them being conducted by Kim K. P. Johnson¹, Hae Won Ju², and Juanjuan Wu¹. They hypothesized the following about the victim and perpetrator.

Hypothesis 1: As compared to no alcohol use, when the victim has been drinking alcohol, victims will be rated higher on (a) responsibility for the incident, (b) wanting to have sexual intercourse, (c) behaving suggestively, (d) welcoming sexual advances, (e) as having led the alleged perpetrator on, and (f) lower on providing believable statements.

Hypothesis 2: As compared to no alcohol use, when the perpetrator has been drinking alcohol, we hypothesized that perpetrators will be rated lower on (a) responsibility for the incident, (b) providing believable statements, (c) being justified in his behavior, and (d) as nonaggressive.

Hypothesis 3: When the perpetrator is drinking alcohol, we hypothesized the victim will be rated (a) as less responsible for the incident, (b) as not desiring sexual intercourse, (c) low on suggestive behavior, (d) as not welcoming sexual advances, (e) as not having led the perpetrator on, and (f) as higher on providing believable statements.

Hypothesis 4: As compared to no alcohol use, when the victim has been drinking alcohol, we hypothesized the perpetrator will be higher on (a) responsibility for the incident, (b) higher on providing believable statements, (c) less justified in his behavior, and (d) as aggressive.

Hypothesis 5: Compared to women, men will rate the alleged victim as (a) responsible for the incident, (b) wanting to have sexual intercourse, (c) behaving suggestively, (d) welcoming sexual advances, (e) having led the alleged perpetrator on, and (f) as lower on providing believable statements.

Hypothesis 6: We also hypothesized that compared to women, men will rate an alleged perpetrator as (a) less responsible for the incident, (b) as providing believable statements, (c) as justified, and (d) as nonaggressive.

Hypothesis 7: As compared to an alleged victim described as wearing the nonrevealing dress, a victim described as wearing a body-revealing dress will be rated higher on (a) responsibility for the incident, (b) desire for sexual intercourse, (c) suggestive behavior, (d) having welcomed sexual advances, (e) having led the alleged perpetrator on, and (f) lower on providing believable statements.

Hypothesis 8: As compared to when an alleged victim is wearing a nonrevealing dress, when a victim is wearing a body-revealing dress, the alleged perpetrator will be rated lower on (a) responsibility for the incident, and higher on (b) providing believable testimony, (c) as justified in his behavior, and (d) as nonaggressive.

Hypothesis 9: Appearance schematics moderate the influence of dress on inferences made about both the alleged victim and perpetrator.

Hypothesis 10: The gender of the participant, the dress of the victim, and the alcohol use of both the victim and perpetrator interact to influence inferences concerning the victim of an alleged sexual assault.

Hypothesis 11: The gender of the participant, the dress of the victim, and the alcohol use of both the victim and perpetrator interact to influence inferences concerning the perpetrator of an alleged sexual assault. (K.P.Johnson, 2016)

All of these hypotheses are based on different factors that affect the outcome of court cases related to sexual assault and rape. These hypotheses show how the victims are given responsibility for the incident because of their clothing choices and alcohol consumption whereas the perpetrator is given leeway if they have been drinking alcohol and their victim was wearing revealing clothes.

These hypotheses were tested in different scenarios where the victim was named Amy and the perpetrator was named Mark.

Hypothesis 2 addressed the effect of alcohol use by Mike on inferences about Mike. Mike's alcohol use had a significant effect on inferences of the responsibility of Mike (Hypothesis 2a) and the believability of Mike's testimony (Hypothesis 2b). Thus, Hypothesis 2 was partially supported.

Hypothesis 4 addressed the effect of alcohol consumption by Amy on inferences about Mike. Alcohol use by Amy had only a significant effect on the believability of Mike's testimony. Mike's testimony was rated as more believable when Amy was described as consuming alcohol (drinking). Thus, Hypothesis 4 was not supported.

Hypothesis 6 addressed the effect of the gender of the participant on inferences about Mike. There were no significant effects for gender, thus Hypothesis 6 was not supported.

Hypothesis 8 addressed the effect of Amy's dress on inferences about Mike. As compared to when was described as wearing a non-vealing dress when Amy was described as wearing a body-revealing dress, Mike was rated as less responsible (Hypothesis 8a) and less aggressive (Hypothesis 8d). Thus, Hypothesis 8 was partially supported.

Hypothesis 11 was concerned with the interaction effects of Amy's dress, Amy's alcohol use, Mike's alcohol use, and the gender of the participant on inferences about Mike. Female participants rated Mike significantly higher on being responsible when Amy was described as wearing a non-vealing dress, and Mike did not drink alcohol as compared to all other conditions. Male participants rated Mike highest on responsibility when Mike did not consume alcohol, and Amy was described as wearing a body-revealing dress as compared to when Amy wore a body-revealing dress and Mike consumed alcohol. When Amy wore a body-revealing dress, inferences of Mike's responsibility showed the most dramatic change. Male participants indicated that Mike was least responsible when Amy wore a body-revealing dress and only Mike consumed alcohol.

Female participants rated Mike as more aggressive when Amy wore a non body-revealing dress and Mike consumed alcohol as compared to when Amy wore a non body-revealing dress and Mike did not consume alcohol. When Amy wore a body-revealing dress, female participants rated Mike as being more aggressive when he did not consume alcohol as compared to when Mike drank alcohol. Male participants rated Mike as being more aggressive when Amy wore a body-revealing dress and Mike consumed alcohol as compared to when Amy wore a body-revealing dress and Mike did not consume alcohol. When Amy wore a non body-revealing dress, male participants rated Mike as being more aggressive when Mike did not consume alcohol as compared to when Mike consumed alcohol. Thus, Hypothesis 11 was partially supported.

Through this research, we see that the responsibility given to the victim or the perpetrator of the incident is given according to the situation or the setting they were in. One needs to know the full story behind the incident to make any assumptions on it but do people take the time to understand the situation? We can also see that the victim is given more blame when they have consumed alcohol and are wearing a body-revealing dress, but does the victim's clothing choice speak out as to whether she wants to be sexually assaulted? It is the perpetrator who objectifies the victim in their mind and thinks that the victim is 'asking for it' because of their clothing choice.

SIGNS TO IDENTIFY SEXUAL ASSAULT VICTIMS

It's important to know the signs. Differs from normal teen moodiness and signs of sexual assault. Reiterate the sexual abuse point-caregivers etc.

Physical signs:

- [Sexually transmitted infections \(STIs\)](#)
- Signs of trauma to the genital area, such as unexplained bleeding, bruising, or blood on the sheets, underwear, or other clothing

Behavioral signs:

- Excessive talk about or knowledge of sexual topics
- Keeping secrets Not talking as much as usual
- Not wanting to be left alone with certain people or being afraid to be away from primary caregivers, especially if this is a new behavior
- Regressive behaviors or resuming behaviors they had grown out of, such as thumb-sucking or bedwetting
- Overly compliant behavior
- Sexual behavior that is inappropriate for the child's age
- Spending an unusual amount of time alone
- Trying to avoid removing clothing to change or bathe

Emotional signs:

- Change in eating habits
- Change in mood or personality, such as increased aggression
- Decrease in confidence or self-image

- Excessive worry or fearfulness
- Increase in unexplained health problems such as stomach aches and headaches
- Loss or decrease in interest in school, activities, and friends
- Nightmares or fear of being alone at night
- Self-harming behaviors
(<https://www.rainn.org/articles/warning-signs-young-children>)

DRESS CODES & OBJECTIFICATION

Sexualization differs from a general appearance orientation (or being appearance-focused). Appearance orientation involves self-surveillance and monitoring one's appearance, with a focus on being attractive, and is associated with being well-groomed, clean, and "natural" (Smolak, Murnen, & Myers, 2014). Although both boys and girls can show concerns about their appearance, girls are typically more appearance-focused than boys (Dunn, Lewis, & Patrick, 2010; Jones & Crawford, 2006). Indeed, a focus on appearance is a key component of the feminine gender norms that influence. Appearance orientation is contrasted with sexualization, which refers specifically to behaviors that relate to being "sexy," and is associated with wearing heavy makeup and tight clothing that emphasizes sexual body parts (e.g., breasts and buttocks; Smolak et al., 2014). A person can be attractive, but not necessarily sexualized, and girls are much more likely to be shown as sexualized than boys (Hatton & Trautner, 2011; Near, 2013). In the current studies, sexualization is operationalized as wearing tight clothing that emphasizes sexual body parts and wearing makeup (Smolak et al., 2014). Sexualization is also related to, albeit distinct from, objectification (defined as being turned into an object for someone else's use). Although it is possible to be sexualized without being objectified, they are often confounded and most of the research on sexualization has examined the impact of the sexual objectification of women and girls. Specifically, research has shown that television, music videos, magazines, and video games are saturated with messages in which women and girls are portrayed as sexual objects for men's pleasure (Aubrey, Hopper, & Mbure, 2011; Conrad, Dixon, & Zhang, 2009; Daniels, 2009; Downs & Smith, 2010; Ward, 1995, 2004)

Young girls develop a way of thinking about their bodies because of what they see around them. As mentioned, there has been an increase in sexualizing women and girls in the media, in recent times which impacts impressionable young girls easily. Negative comments about women with chubby stomachs lead young girls to feel insecure about their stomachs or lead young children to make comments about others' bodies. Objectification and sexualization were the factors that gave birth to dress codes.

Uniforms are touted as a way to reduce gang influences and violence, improve student discipline and learning, and reduce socioeconomic distinctions among students. Whereas dress codes usually focus on what students cannot wear, uniform policies specify what students should, and in some instances must, wear in school (McCarthy, Martha M.). In 2022, the U.S. Government Accountability Office, a federal watchdog agency, found that 60 percent of school dress codes call for adults to measure students' bodies and clothes, often in ways that require them to touch students. The dress codes also more heavily control girls' attire: 90 percent of schools restricted girls' clothing items like tank tops or skirts, 20 percentage points more than the share of schools that restricted boys' clothing (Harwin, Alex)

It is teachers who feel uncomfortable with students' bodies rather than the students themselves feeling uncomfortable with the bodies of their peers. Dress codes often present a double standard between boys and girls. A teenage boy wearing a tank top is far less likely to be dress-coded than a teenage girl wearing a tank top in the same class. Dress codes as set up to 'make school a distraction-free space' but is the skin of women distracting?

SEXUAL ASSAULT VS SEXUAL ABUSE

Sexual abuse often refers to sexual acts by adult caregivers in the family; by adults in the caregiving role, such as a coach; or by older children in the family, such as an older sibling or cousin. In contrast, the term sexual assault is often reserved for sexual acts by strangers or by same-age peers. The risk factors, prevention efforts, and treatment strategies may differ between these two phenomena, but the statistics for each are often combined, making understanding the true occurrence of each difficult or impossible. Overall, the authors found that one in four girls and one in twenty boys experienced sexual abuse or assault in their lifetimes. When just sexual abuse by an adult was examined, the lifetime prevalence was one in nine girls and 1 in 53 boys. Juvenile offenders committed well over half of the total abuse and assault episodes of female or male children. (Rebecca L. Moles, M.D. John M. Leventhal, M.D. 2014)

We can see, through many studies that sexual abuse is far more prevalent in young children who are unable to comprehend the severity of the situation whereas sexual assault is more prevalent during later stages of life.

COPING METHODS AND SUPPORT

An experience like sexual assault or abuse is extremely traumatic. A support system and ways to cope and rise back up stronger than before are necessary to take charge of your life again if you have been sexually assaulted.

However coping strategies may not always be positive, they may be harmful for a person as well. Such negative shopping strategies include:-

1. Alcohol
2. Substance abuse
3. Self-Harm
4. Isolation

There are many ways to urge and help the victims towards healthy coping methods like trauma counseling, an outlet for suppressed emotions, etc.

As a human being who has not experienced sexual violence the best supportive things to do are -

- Listen
- Believe them
- Remember that it is not their fault
- Respect their decisions
- Give them control
- Be patient with them (idas.com)

Once the victim is ready to share their story and spread awareness about their experience and possible experiences that may occur to other people, they can use platforms such as Rise, which organizes an art exhibit to spread awareness of clothes that they were wearing that day of people who were sexually assaulted. You can see the diversity of the outfits – in terms of age, gender, culture, and occasion – and read their stories. The exhibit is intended to demonstrate the pervasiveness of the crime of sexual assault, and the many different faces of the survivors among us. This exhibit has traveled across the globe from UN meetings to museums. (“What were you wearing? | Sexual assault survivor exhibit.”)

CONCLUSION

Sexual violence has been discussed in this paper with a bird’s eye view. Many different types and situations of sexual violence have been researched. Research on sexual assault in young adults and teens and India has yielded the result that most teenagers have been sexually assaulted by people they knew rather than strangers. Sexual cyberbullying is deemed as violence against a person as it breaches their sense of safety and security. Sexual cyberbullying is also found to occur in the younger generation of humans who have access to technology. Sexual assault differs from sexual abuse. Sexual assault is used to define sexual violence perpetrated by people who are strangers to the victim whereas sexual abuse is used to define wrongful sexual acts by people familiar to the victim. It is found that the consumption of alcohol and clothing choices by the victim and perpetrator of sexual assault greatly affect the court cases and society’s opinions. Victims may be identified by the people around them by changes in their personality, behavior, eating habits, etc. Although support and identification of a victim of sexual assault is extremely important, the prevention of sexual assault and violence is a great need. Education in society is important to prevent sexual assault. Objectification and sexualization of young girls have been found to begin from extremely young ages, which allows young children to generate a certain idea of themselves.

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