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Comparative Case Study; Two Rape Cases from Same City and Their Lasting Effects

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Rape is not just physical violence; it is also mental violence. It is not easily forgotten. (Unnamed victim/survivor in Easteal, 1994, p. 99)

I. INTRODUCTION

Rape is one of the most common offences against women in especially in country like India. The statistics of the rape in India are deeply shocking. As per statistics a woman is raped in India in every 15 minutes. The number is even more negatively astonishing when we take this into consideration that only 1% of rapes are reported after all. The staggering number has its roots in deeply settled misogyny, and patriarchal mindset that women are objects of mere consumption. It has made its way into the general populace, regardless of gender and age. Also, Child sexual abuse is a common and a serious public health problem in every society. It not only leaves a permanent scar on the mind and the body of the victim, but also put her entire family into shame and humiliation. Generally, in most of the scenarios the incidence of sexual assault cases is never reported to avoid social stigma and the number of reported sexual assault also is the only tip of the iceberg.

II. RISK FACTORS INFLUENCING IMPACT OF SEXUAL ASSAULT

A range of factors can influence the impact of sexual assault, including:

1) The Victim/Survivor's Relationship to The Perpetrator
2) The Extent and Severity of Any Accompanying Psychological Or Physical Abuse
3) The Severity of The Abuse
4) The Extent of Physical Harm
5) The Length of Time Over Which the Abuse Occurred
6) The responses of family and friends of the victim/survivor
7) The woman's experience of the various systems (health, police, courts etc.) with which she may have contact following the assault.
8) The personal history of the victim/survivor (Daane, 2005)

III. INTRODUCTION OF CASES

This case studies are about a case of two Rape victims native of Meerut, U.P, belonging to various age groups who suffered physically and mentally in their own ways in which one Girl age 6 year survived with sustained lacerated injury over the posterior wall of the vagina at its lower part including perineum, hymen and labia minora of both sides and multiple impact of trauma PTSD and the other one aged 100 year died after battling 15 hours in ICU hospital from intestinal perforation and also leaving the desire for living, out of shame .

A. Detailed Cases Description Of Two Different Rape Victims

Case Of 6-Year-Old Victim	Case Of 100-Year-Old Victim
At The Time of Admission A mother rushed her bitterly crying 6-year-old girl to OPD of the hospital with profuse vaginal bleeding throughout her frock, and scratches all over the body with mild temperature.	At The Time of Admission Servant of the women bought her to the hospital in condition of extreme stupor and drooling saliva with marks of bruises in her hand, thighs and face. The women were in a gloomy state not able to verbalise her feelings. After assurance after 1 hour, she was able to narrate the incidence to the medical officer concerned.

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Detailed Description of The Incident According to the mother the child was as usual playing with her neighbourhood friends when she went for doing her household chores. After 1.30 hour when she went outside to see the baby girl playing, she was been told by her friends that neighbourhood uncle came and offered chocolate and she went with him in his house. Considering it to be a normal situation the mother then left the spot. Then afterwards after 10 min the girl was dropped again with her as told to the mother by girl's friends by the same person. Then when while playing the frock got stained and blood stains were observed by her friends, they took her to her home and mother got shocked and alarmed seeing her teared genitals of her daughter and rushed to hospital and reported to police.	Detailed description of the incident According to the servant the victim used to stay alone with her. When she went to get groceries from outside. When she came the victim was lying on the floor speechless with lot of bruises mark of face, hands and thighs. Firstly out of shame she was very reluctant to speak, After repeatedly being asked she revealed that the milkman came and performed the physical assault and rape after which he fled from the spot. After which she immediately called ambulance and rushed her to hospital and informed police.
Treatment Modality On being the undergone the physical examination and detailed investigation it was diagnosed as second-degree perineal tear. After the diagnosis is been made the girl was been shifted to Operation theatre where under general Anaesthesia the suturing was been made. Meanwhile the intravenous fluids were been given to improve the fluid and electrolyte imbalance.	Treatment Modality After the physical examination it was revealed that one piece of stick was found inside the vaginal cavity, which was taken out then and there. After wards also when she was bleeding an ultrasound was been performed which revealed the intestinal perforation. Following which and urgent laparotomy was been performed and since due to excessive blood loss haemoglobin level got very low in the patient and the patient was shifted to ICU where her vital parameter got unstable and B.P got dropped and patient went to gasping state and finally got collapsed.
Prognosis The baby girl survived after the tears got repaired and also advised for hymenoplasty after the perineal wound gets healed. The girl got discharged after 1 week. After this incidence the girl got Apathetic and gloomy which is diagnosed PTSD for which 2 weeks counselling is advised.	Prognosis The victim could not survive due to intestinal Perforation due to forceful penetration with clog of wood in her genitals ascending up to her intestines and unstable vital parameters thereafter.
Psychological Considerations Although the victim survived after perineal repair but surely and likely to develop the PTSD in late future provided for which only several sessions of effective counselling is scheduled.	Psychological Considerations Majority of Older women feel shame, embarrassment, humiliation, self-blame and fear about telling others what has happened. For this reason, she was devastated and lost all her hope and will power due to which her vital parameter became unrecordable and finally died.

IV. IMPACTS OF RAPE, SEXUAL ASSAULT

There are various impact of sexual assault and rape on physical and aspect of the individual.

A. Physical Impacts Can Include

1) Damage to the urethra, vagina and anus (for some victims of penetrative sexual assault);

2) There can be Gastrointestinal, sexual and reproductive health problems; pain syndromes and eating disorders, especially bulimia nervosa (Astbury, 2006);

3) There is an increased risk of contracting sexually transmissible infections, including HIV/AIDS (Holmes et al., 1996, and Resnick, Acierno & Kilpatrick, 1997)

4) Increased chances of unwanted pregnancy and decisions regarding abortion (Wasco, 2003)

5) There is pelvic pain (Walling et al., 1994, cited in Stein & Barrett-Connor, 2000)
6) Evidence of irritable bowel syndrome is also present (Drossman et al., 1995, and Walker et al., 1993, both cited in Stein & Barrett-Connor, 2000)
7) Chronic diseases such as diabetes and arthritis (Golding, 1994, cited in Stein & Barrett-Connor, 2000)
8) Also, headaches (Golding, 1999, cited in Stein & Barrett-Connor, 2000) and
9) Gynaecologic symptoms; for example, dysmenorrhea (severe pain or cramps in the lower abdomen during menstruation), menorrhagia (abnormally heavy or prolonged bleeding during menstruation) and problems associated with sex (Golding, Wilsnack & Learmen, 1998).

B. Psychological Impacts of Rape

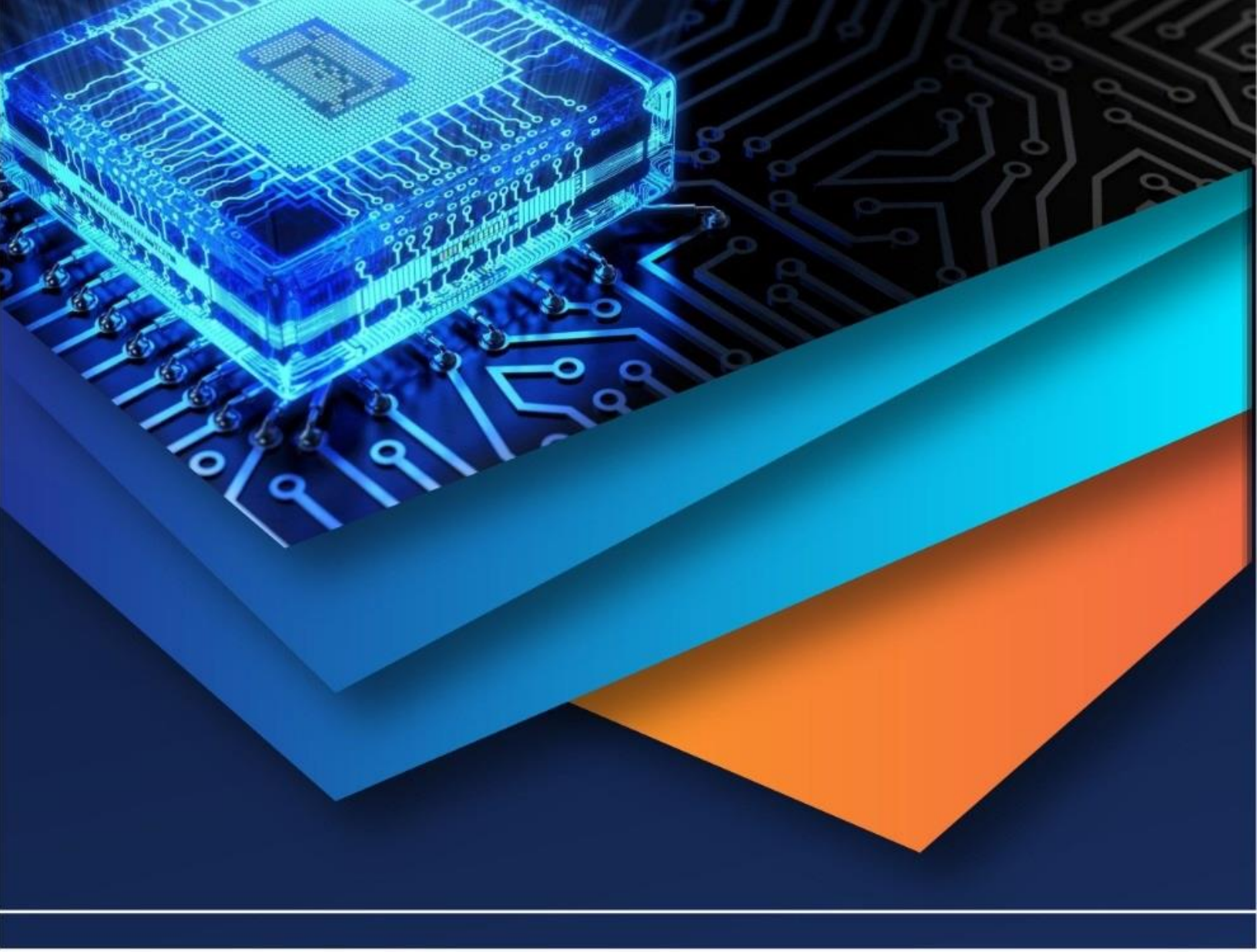
1) Anxiety and intense fear are the primary responses following rape
2) Feelings of low self-esteem, self-blame and guilt can endure for months and years after the assault.
3) Suicidal ideation is more common among victim/survivors of sexual assault than the general population (Stepakoff, 1998)
4) Nightmares and other sleep disturbances leading to PTSD.

V. CONCLUSION

Sexual Abuse can be perpetrated in many places, including own home as well as residential, care and nursing home environments. Victims experience emotional, physical, and cognitive reactions to the trauma of rape. Sexual abuse is a common and a serious public health problem in every society. It not only leaves a permanent scar on the mind and the body of the victim, but also put her entire family into shame and humiliation fearing which rape victim hesitates to speak up also and verbalise their feelings leading to Post Traumatic Stress Disorder and suffocation.

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