To the Editors:

## Sexual violence against women: a challenge

T Dias<sup>1</sup>, A Kociejowski<sup>2</sup>, S Rathnayake<sup>1</sup>, S Kumarasiri<sup>1</sup>, S Abeykoon<sup>1</sup>, T Padeniya<sup>1</sup>

Ceylon Medical Journal 2014; 59: 107-108

Sexual abuse is a serious global public health issue with wide-ranging consequences for the physical, emotional and socioeconomic wellbeing of the survivor [1]. Worldwide, up to 35% of women are estimated to have suffered some form of physical and/or sexual violence in their lifetime, with 20% reporting childhood abuse [2]. In 2012, the United Nations called for a global concerted effort to improve reporting on sexual abuse to facilitate strategies to reduce all forms of violence against women and girls [3]. Our aims were to describe the patterns of sexual abuse in an ethnically diverse population in Sri Lanka. In addition, we sought to identify the relationship between the assailant and survivor. These were according to categorised guidelines of the United Nations Office on Drugs and Crime, and the categorisation of sexual abuse in the Sri Lanka Penal Code [4,5].

A retrospective descriptive study was carried out of cases of sexual abuse among women and girls which were reported to the Police Women and Children's Bureau in Ampara district between April 2012 and April 2013. We obtained population data by gender, ethnicity and administrative area from the National Census 2012 [6]. Victims of sexual abuse were categorised into three age groups: <16, 16-18 and >18 years of age. They were further grouped according to the ethnicity (Sinhalese, Tamil, or Muslim). The relationship between the victim and assailant was classified according to guidelines set out by the United Nations Office of Drugs and Crime [4]. All reported cases of sexual abuse were also categorised according to the Sri Lanka penal code into major and minor offences [5]. Major offences included grave sexual abuse, rape and sex trafficking. Minor offences included sexual harassment.

We identified 145 reported cases of sexual abuse among women and girls between April 2012 and April 2013 (Table 1). This included 62 cases among women aged more than 18 years, 14 cases among girls aged 16-18 years, and 69 cases among girls aged less than 16 years. The number of reported cases was highest among women and girls of Sinhalese ethnicity (103 out of 145, 71.0% of all reported cases). This compares to 21 (14.5%) cases reported among Tamils, and 21 (14.5%) cases reported among Muslims. Strangers were most commonly named as the perpetrator 89 (61.4%). Seventy six reported cases were classified as minor offences (52.4%), while the remainder were major offences 69 (47.6%).

## Table 1. Sexual abuse cases reported to the Women and Children's Bureau in Ampara Division, April 2012 – April 2013

	Nu	umber of cases (%)
Age	>18 years	62 (43)
•	16 - 18 years	14 (10)
	<16 years	69 (48)
Ethnicity	Muslim	21 (14)
	Sinhalese	103 (71)
	Tamil	21 (14)
Alleged assailant	Current intimate partner	36 (25)
	Relative blood relatives and non-blood relatives	9 (6)
	Otherwise known to victi Includes teachers and neighbours	m 11(8)
	Stranger	89 (61)
Class of offence	Major offence	69 (48)
	Minor offence	76 (52)

Our data suggest that the majority of reported cases were of Sinhalese ethnicity. However, we cannot exclude the possibility that females from Tamil and Muslim populations were less likely than their Sinhalese counterparts to report sexual abuse. Indeed, the literature suggests that cultural norms and religious practices associated with particular ethnic groups may influence a person's willingness to report sexual abuse [7]. Our analysis showed a majority of serious offences were committed against children. A total of 69 major offences were recorded in all age groups of these, 51 occurred in

<sup>1</sup>District General Hospital, Ampara and <sup>2</sup>St George's University of London, United Kingdom.

Correspondence: TD, e-mail: <thiran\_dias@yahoo.com>. Received 2 April 2014 and revised version accepted 29 May 2014. Competing interests: none declared.

children  $\leq$ 18 years. Children constitute a vulnerable group in society and a systematic approach is required to reduce the burden of childhood sexual abuse and the accompanying physical and emotional sequelae. Overall, strangers were most commonly identified as the perpetrator of sexual abuse in our study. It is possible that a pre-existing relationship with the assailant influences a victim's likelihood of disclosing sexual abuse. Therefore our finding may not accurately reflect the relationship between the victim and the assailant.

The large number of major offences involving the victim's current intimate partner in girls aged less than 16 years suggests a need for education and discussion about Sri Lanka's penal code on sexual offences. This can be based on the approach in the United Kingdom on sexual offences in minors within a consensual relationship [8].

The main limitation of our study was its reliance on data from sexual abuse cases reported to Police stations in Ampara District. This excludes all unreported sexual abuse and as a result it is likely that we have significantly underestimated the actual burden of sexual abuse in the district. Further research should be conducted in order to determine the countrywide significance of sexual abuse among the female population and establish a baseline from which to develop and implement effective strategies to prevent this serious human rights violation.

## Acknowledgements

We would like to acknowledge Mr Ajith Rohana, Senior Superintendent of Police for his guidance.

## References

- 1. Freeman DH, Temple JR. Social factors associated with history of sexual assault among ethnically diverse adolescents. *Journal of Family Violence* 2010; **25**: 349-56.
- 2. Jayasuriya V, Wijewardena K and Axemo P. Intimate partner violence against women in the capital province of Sri Lanka: prevalence, risk factors, and help seeking. Violence against *Women* 2011; **17**: 1086.
- Advancement of women: Intensification of efforts to eliminate all forms of violence against women. UN General Assembly provisional agenda 2010; 56th session, item 28.
- Indicators, crime and violence against women. Supporting paper. Expert group meeting on Indicators to measure violence against women. United Nations Office on Drugs and Crime. (2007). United Nations Statistical Commission and Economic Commission for Europe, Geneva.
- 5. Sri Lanka. Penal Code. Accessed on 24 February 2014. Available at: www1.umn.edu/humanrts/research/srilanka/ statutes/Penal\_Code.pdf?
- 6. Department of Census and Statistics. Sri Lanka Census of Population and Housing, 2012. Accessed on 18 February 2014. Available at http://www.statistics.gov.lk/PopHouSat/ CPH2011/index.php?fileName=pop42&gp=Acti vities&tpl=3
- 7. Littleton HL, Grills-Taquechel A E, Buck KS, Rosman L and Dodd JC. Health risk behavior and sexual assault among ethnically diverse women. *Psychology of Women Quarterly* 2012; **37**: 21.
- British and Irish Legal Information Institute (BAILII). Gillick v West Norfolk and Wisbech Area Health Authority [1985] UKHL 7 (17 October 1985).