

A PSYCHOLOGICAL STUDY OF RELATIONSHIP BETWEEN CHILD HARASSMENT AND DEPRESSIVE SYMPTOMS IN TEENAGERS

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Abstract: Child harassment is a severe problem affecting many children in Sri Lankan society. Child abuse can have a significant impact on the mental and emotional health of the victim, with depression being one of the most common side effects. The aim of this study was to examine the impact of child harassment on depression and to identify the factors associated with depression among victims of child harassment between January 2023 and June 2023 a total of 80 patients attend Kalutara District Hospital psychiatric clinic a depressive symptoms were exhibited between the age of 14 – 18 years 22 children were used as the research sample exploratory findings on child abuse and depression were possible in those who reported child abuse, despite medical literature served as their primary source. Result indicated that the prevalence of depression was significantly higher among individuals who reported experience in child harassment compared to those who also reported harassment severity and frequency as factors the importance of depression in the victims. The study also found that social support played a protective role in reducing the negative impact of child harassment on depression. The findings of this study provide important insight into the long - term effects of child harassment on mental health and highlight the need for early victim identification and intervention emphasize. The study also highlights the importance of social support in preventing and reducing the negative impact of child harassment on mental health.

Keywords: child harassment, depression, mental health, teenagers, psychological study

Introduction

Child abuse is a common issue that continuous to recurrent societies around the world, including Sri Lanka. The negative consequences of child harassment of great concern to the psychological and emotional well-being of victims, especially Adolescence in terms of this ecological effect associated with child maltreatment trauma has been found to be prevalent and predisposing conditions one of the easiest experienced by affected individuals considerable research has emphasized the negative impact of child maltreatment on mental health outcomes particularly depression.

Children who experience various forms of harassment including physical emotional and sexual abuse frequently exhibits symptoms of trauma (Holt et al.,2021; Norman et al.,2020).Child abuse experiences

can interfere with normal adolescent development leading into negative psychological consequences that can persist into adulthood (Arseneault et al.,2019; Thornberry et al.,2021).

Consequently, examining the association between child harassment and depressive symptoms among adolescents is important to identify risk factors and potential vectors the aim of the present study was to examine the impact of child harassment and depressive symptoms in Sri Lanka. The researchers have 22 adolescents symptoms ranging from 14 - 18 attracting 80 patients at the psychiatric clinic from January 2023 to June.

Moreover, Child harassment can be identify several types. Child abuse is an issue of great concern that includes various forms such as physical, emotional and sexual abuse. A serious threat to a child will be thus requiring understanding and preventive measures. In the physical problems physical abuse is the use of force that causes harm or injury to a child an example highlighted in the article my illustrate a case where desperate caregiver resources to corporal punishment resulting in visible injury to their child this bullies can affect the child's physical health and lasting efforts on emotional development.

In the emotional problem emotional abuse targets a child's psychological will be leaving long lasting emotional scars the case may include situation they are stigma, rejection, constant isolation from a parent or caregiver or a child experience of anxiety, depression or low self esteem. Emotional abuse can has been a subtle but devastating story. In sexual problems sexual abuse is any inappropriate sexual behavior imposed on a child. The case can shed light on cases where a child receives unwanted advances or overt comments from an adult causing trauma and psychological distress sexual abuse can have serious consequences for the child's mental health and future relationships on preventing child abuse requires a multi programmed approach including education, awareness and legal initiatives. It is important to recognize the sign of abuse provide support for victims and work to create a safe environment for all children.

Particularly, in Sri Lankan society, child harassment is a widespread problem that has a significant impact on teenagers' mental health and general wellbeing. Victims of child abuse frequently experience depressive symptoms, but in addition to that the need for more study on the precise relationships between abuse and trauma in this demographic and child harassment, no studies have looked at the risk factors for depression in child harassment. However, To effectively support and safeguard impacted individuals, preventive intervention initiatives must take these variables into account.

The current body of research presents compelling evidence of the crucially harmful effects of child harassment on mental health, specifically with regards to depression. However, many of these studies have only utilized limited cross-sectional designs and have failed to investigate the lasting impact of child harassment on teenage depression. In order to gain a full understanding of the developmental

pathways and potential areas for intervention in addressing the mental health outcomes and repercussions of child harassment, longitudinal studies are imperative. Additionally, there is a significant lack of research concentrated specifically on the Sri Lankan diverse context, where cultural beliefs, norms, and societal attitudes, low of awareness may play a significant role in shaping the experiences and consequences of child harassment.

On the other hand, analysing the correlation between depressive symptoms and child harassment, it is imperative to pinpoint the precise reasons behind depression in the affected teenagers. The degree and regularity of harassment have been emphasized as significant variables, but additional research is required to explore other plausible risk factors. Finding evidence-based treatments and programs that successfully address child harassment and its effects on mental health depends on filling in these research gaps. Through a thorough investigation that looks at how child abuse affects depression and pinpoints the causes of depressive symptoms in victims in the Sri Lankan cultural context, this review seeks to improve and expand our knowledge of the long-term repercussions of child harassment.

The objective of this study is to investigate the relationship between child harassment and depressive symptoms in teenagers in Sri Lanka. Then to examine the prevalence of depressive symptoms among teenagers who have experienced child harassment in Sri Lanka. Explore the specific risk factors associated with depression among victims of child harassment and investigate the protective role of social support in mitigating the negative effects of child harassment on depressive symptoms among teenagers are also the objectives of this research. Other objectives are to provide insights into the long-term effects of child harassment on mental health outcomes and generate evidence-based recommendations for early identification and intervention strategies to support and protect teenagers who have experienced child harassment.

By addressing these research objectives, this study hopes to further readers understanding of the connection between teen depression symptoms and child harassment, significantly, according to the setting of Sri Lankan cultural context. The results of this study will offer practitioners, policymakers, and professionals involved in the prevention to priority and intervention of child harassment useful outcomes, which will ultimately enhance and implement the support system and mental health outcomes for those who are impacted.

The current study's addition to our understanding of the connection between teenage depression symptoms in Sri Lanka and abuse of children makes it extremely significant. This study tackles a

significant social issue with broad ramifications for policymakers, mental health practitioners, educators, and families, among other stakeholders.

First, the study's conclusions emphasize how common child abuse is and how it affects the mental health of teenagers. This study highlights the long-term effects of child maltreatment by demonstrating a direct correlation between the former and depressive symptoms. The evidence that is presented can be a very effective tool for politicians and organizations who fight to protect the weak and stop child abuse.

Moreover, mental health professionals will find great benefit in identifying specific risk factors associated with depressive symptoms in individuals who have been harassed as children. Understanding these elements likely parental mental illness, disruption in the family, and financial hardships to allow for the effective customization of targeted interventions and psychotherapy approaches. For mental health practitioners, this information can be a vital resource for identifying high-risk patients and providing targeted support and treatment.

This study clarifies the critical function that social support plays in reducing the negative effects that child harassment has on an individual's mental health. This study provides families, schools, and community organizations with useful information by highlighting the importance of social ties. It emphasizes how important it is to create loving settings and solid relationships in order to shield people from the negative consequences of child harassment and help them become resilient.

Moreover, this study contributes to the growing body of information about child harassment in Sri Lanka. The prevalence of cultural beliefs, societal norms, and attitudes in this specific cultural context may have a significant impact on the incidence and consequences of child harassment. Through an exploration of these particular cultural and contextual variables, this research advances our understanding of the intricate relationship between culture, child harassment, and mental health. It also provides insightful viewpoints for creating culturally sensitive treatments and support systems that meet the requirements of people in Sri Lanka.

In addition to that, this study adds to the expanding corpus of knowledge regarding child harassment in Sri Lanka. The presence of cultural norms, attitudes, and beliefs in this particular cultural setting may have a major influence on the frequency and repercussions of child harassment. This study contributes to our understanding of the complex interaction between culture, child harassment, and mental health by examining these specific cultural and environmental factors. It also offers perceptive perspectives for developing culturally aware therapies and support networks that satisfy Sri Lankans' needs.

When we identify this study how we importance of international readers, Sri Lanka is a multicultural country. Various nations live there. There are several rural areas there. There is no electricity, there is no

facilities. They have some beliefs systems. There is no infrastructure. There are some uneducated people live in. Therefore, children must face such child harassment. Therefore, as we human beings we should know about that unfortunate situations. We have to implement significant awareness programs according to that severe problem.

Literature Review

Child harassment is the one of the forms of abuse. It is a major situation in societies as well as worldwide. There are significant impact on the psychological and emotional well-being of victims. On the other hand adolescence always considerable research has examined the relationship with child harassment and depressive symptoms between teenagers. Actually, the purpose of this literature review to provide on overview of existing studies examine the relationship between child harassment and depression depressive symptoms in teenagers and focus on the relevant assumptions protective factors and risk factors as Sri Lankan cultural aspects.

When we identify unique cultural background of the Sri Lanka. Actually, we all know about Sri Lanka is a multicultural society in the world. Therefore, Sri Lankan people have to follow multicultural society items. such as Sinhala Buddhist culture, Muslim culture, Hindu culture, Catholic culture. Therefore, believes systems of these cultures are different. On the other hand, Sri Lankan law system made by according to these cultures. Therefore, when we identify these study as a cultural aspect it is different to study culture by culture. As a Sri Lankan human being we know that several types of child harassments happens in Sri Lankan society. But a lot of cases not report to criminal justice system. This is the severe problem in Sri Lankan society. Thereby victims face physical, emotional, sexual difficulties. Finally overall these difficulties depend on psychological symptoms.

Several theoretical frameworks have guided research investigating the connection between depression and child harassment. The ecological systems theory, put forth by Bronfenbrenner in 1979, is one well-known hypothesis. This idea emphasises how a person's social environment and themselves interact dynamically. The aforementioned viewpoint posits that child harassment emerges from the interplay of various ecological systems, namely the family and peers, schools and communities, and cultural and societal norms, as well as the macrosystem. Furthermore, the cumulative risk model, which was promoted by Rutter in 1996, asserts that being exposed to a variety of risk factors, such as child harassment, increases the probability of adverse outcomes, such as depression.

These theoretical perspectives provide a framework for understanding the complex interplay of factors contributing to the relationship between child harassment and depression.

Several theoretical frameworks have been applied in studies investigating the relationship between child harassment and depression. The ecological systems theory, first presented by Bronfenbrenner in (1979), is a well-known concept that emphasizes the dynamic relationship that exists between an individual and their social environment. According to this viewpoint, peer pressure, the family, communities, schools, and wider cultural and societal norms all interact to create the conditions that lead to child harassment. The cumulative risk model, created by Rutter in (1996), is another significant viewpoint. It suggests that being exposed to multiple risk factors, such as child harassment, increases the probability of unfavorable outcomes.

It's critical to understand that child harassment can seriously harm a child's mental health as we handle this complex subject. Fortunately, these harmful consequences can be mitigated by protective factors. Numerous studies have demonstrated the critical role that social support, in particular, plays in reducing the negative effects of harassment (Cohen & Wills, 1985; Regehr et al., 2013). Teens experiencing harassment can benefit from having a strong support system, which can be provided by ties with family, friends, or other significant individuals. This can act as a buffer and foster resilience in the face of harassment.

Furthermore, access to mental health services and interventions that address the psychological consequences of child harassment has been associated with better mental health outcomes (Holt et al., 2021). Understanding and strengthening these protective factors is vital for intervention strategies aimed at reducing the impact of child harassment on depression.

Although there is still much to learn about the relationship between melancholy and child harassment, current research has yielded significant insights. One significant drawback is that a large number of research studies have only employed cross-sectional methodologies, which limits our capacity to establish causal relationships and look at long-term consequences. We can learn more about how these experiences affect development and spot possible intervention opportunities by carrying out longitudinal studies that examine the long-term effects of child harassment on depression.

In particular, more research is necessary to comprehend the unique cultural and environmental factors that influence the relationship between child harassment and depression in the Sri Lankan context. Cultural norms, conventions, and societal perspectives on child harassment are just a few examples of the factors that may considerably influence the impact on victims. Furthermore, evidence-based

protocols and regulations are shaped by intervention research that focus on effective tactics for treating and preventing child harassment victims.

In summary, the examined literature emphasizes the strong correlation between teenage depression symptoms and child harassment. A thorough understanding of this relationship is provided by theoretical frameworks, risk factors, and protective factors. Victims' development of depression is influenced by a number of environmental factors, including the intensity and frequency of abuse. Social support is shown to be an essential protective factor that lessens the harmful effects of child harassment.

To fill up the gaps in the literature, more study is required. Longitudinal studies as well as analyses of contextual and cultural aspects are needed. In the end, this survey of the literature advances knowledge about the psychological effects of child harassment and lays the groundwork for the empirical inquiry that follows in this thesis.

Methods

Research Method

According to research method will be selected semi structured interview method of interviewing.

Population:

The population of interest for this study consists of teenagers in Sri Lanka who have experienced child harassment. The study aims to investigate the relationship between child harassment and depressive symptoms in this population. The population of research 80 patients who came to the mental health clinic of Kalutara District Hospital between January 2023 to June 2023. The study focus on child depression patients.

Sample:

A judgmental sampling technique will be employed to select participants for this study. The sample will include teenagers between the ages of 14 and 16 who have exhibited symptoms of depression and have sought treatment at the mental health clinic of Kalutara District Hospital between January 2023 and June 2023. From the larger group of 80 patients meeting these criteria, a sample of 22 participants will

be selected to participate in the study. This sample size is considered appropriate for a qualitative investigation that focuses on in-depth understanding and exploration of the research topic.

Instrumentation:

Primary sources will be selected. Identify the cases of child harassment on depression who reported experiencing child harassment during their childhood by using the clinic books.

Additionally, a semi structured questionnaire will be developed for data collection, incorporating items that address the various aspects of child harassment. This questionnaire will gather information on the types of child harassment experienced (e.g., physical abuse, emotional abuse, sexual abuse), the severity and frequency of abuse, and other potential risk factors such as parental psychopathology, family dysfunction, and socioeconomic disadvantage.

Data Collection Procedure:

The data collection procedure will involve two main steps. First, the participants' mental health clinic records will be reviewed to identify individuals who have reported experiencing child harassment during their childhood.

In order to find cases of child harassment, clinic records will be consulted and semi-structured interviews will be conducted to obtain the relevant data. Subsequently, interested parties will receive an invitation to participate in the research and a thorough explanation of its objectives. Informed consent, highlighting the participants' voluntary participation, will be obtained from parents/guardians and participants before any further action is taken. In addition, participants can be sure that their answers will be kept private and anonymous when they fill out self-report forms, which include a structured questionnaire on incidents of child harassment and related factors, as well as a validated assessment for depressive symptoms.

Data Analysis:

In order to produce significant insights, the self-report measures and semi-structured interview data will be carefully examined using appropriate statistical techniques. Descriptive statistics, such as frequencies and percentages, will be used to describe the prevalence of depressive symptoms and the types, severity, and frequency of child harassment experienced by the participants.

Statistical analyses, such as correlation analysis and regression analysis, will be conducted to examine the relationship between child harassment and depressive symptoms, as well as the potential influence of risk factors and protective factors. Qualitative data obtained from the open-ended questions in the

structured questionnaire will be analyzed thematically to provide a deeper understanding of the participants' experiences and perceptions related to child harassment and depression.

Results and Discussion

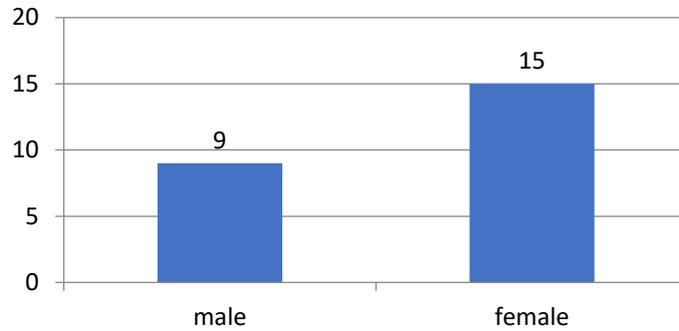


Figure 1- Number of Depressive Patients

When it comes to study findings the first chart indicates number of depressive patients who participated this study. In here 09 male patients and 15 female patients participated in this study. Total number of patients who participated 24.

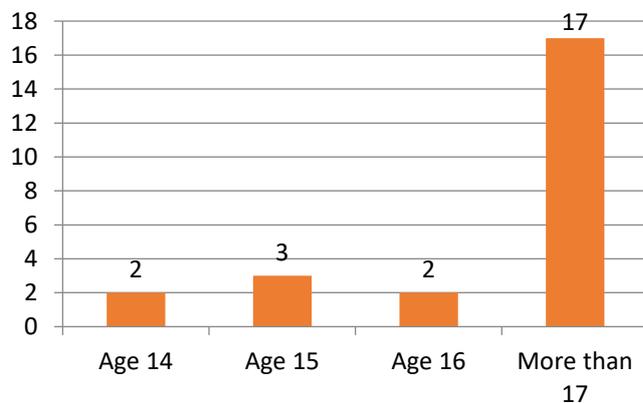


Figure 2 - Age Level of Depressive Patients

Next chart indicates age level of depressive patients.2 patients is in age 14. 3 patients is in age 15. 2 patients are in age 16. 17 patients are between the ages of 17 – 18.

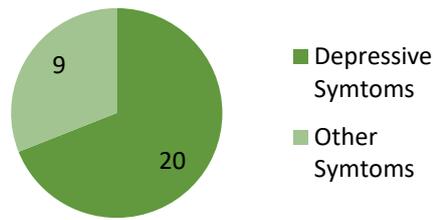


Figure 3 - Number of Depressive Symptoms and Other Symptoms

Chart 03 shows the number of depressive symptoms and other symptoms. 20 patients responded who they have depressive symptoms and 09 patients responded who they have depressive symptoms with other symptoms.

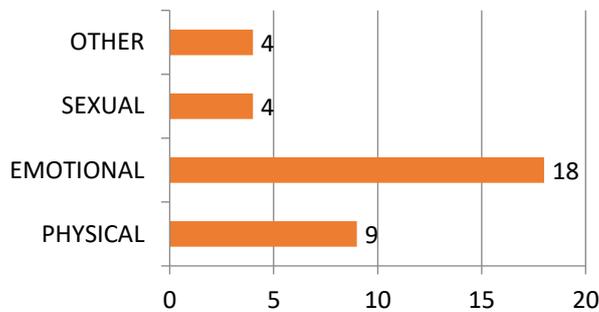


Figure 4 - Type of Child Harassment

Chart 04 indicates types of child harassment. We can see 4 types of child harassment. There are physical, emotional, sexual and others. The child who they most faced harassment is emotional harassment.

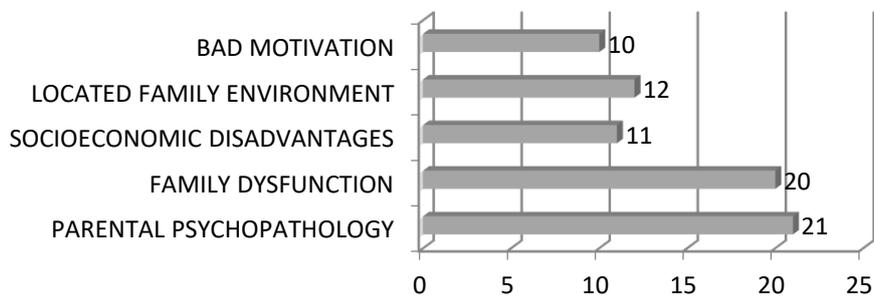


Figure 5 - Risk Factors of Between Child Harassment and Depressive Symptoms in Teenagers

This chart indicates risk factors of between child harassment and depressive symptoms in teenagers here we can see several types of risk factors. Such as parental psychopathology, family dysfunction, socioeconomic disadvantages, located family environment and bad motivation. Most patients responded to emotional harassment they have faced.

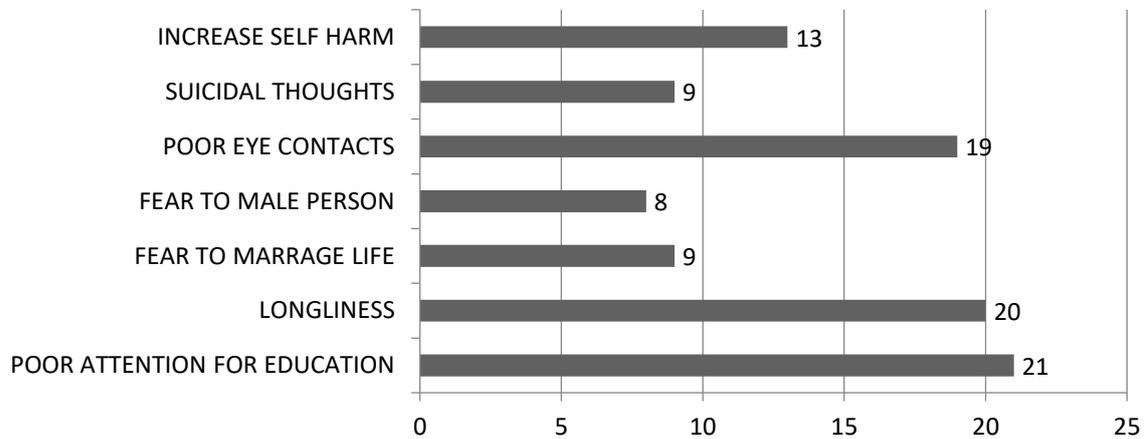


Figure 6 - Long-Term Effects of Between Child Harassment and Depressive Symptoms in Teenagers

This chart indicates long term effects of child harassment and depressive symptoms in teenagers. In here we can see several types of long-term effects. Such as poor attention for education, longlines, fear to marriage life. Fear to male person, poor eye contacts, suicidal thoughts and increase self-harm like that.

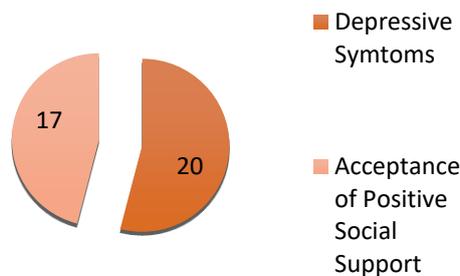


Figure 7 - How is the depressive patient's acceptance of positive social support

This chart indicates how is the depressive patient's acceptance of positive social support. In here, 17 patients who they have faced depressive symptoms and only 20 patients accepted positive social support.

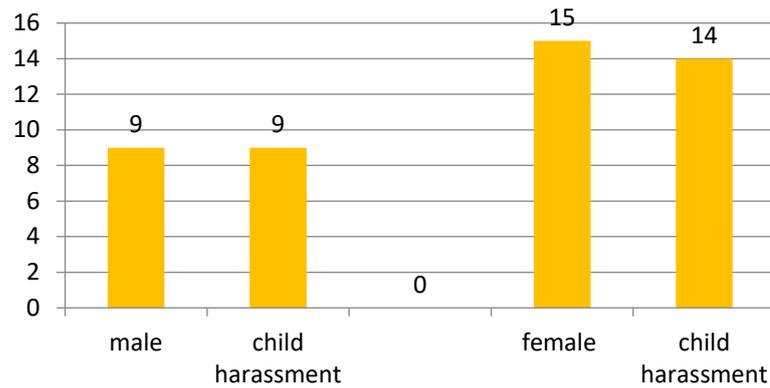


Figure 8 - Contrast of Child Harassment based on Gender

Recommendation

- According to this study, we should explore the Open Communication with between parents and their teenagers and create a safe space where teenagers can talk about their experiences and feelings.
- As the responsible adults should raise awareness by educating parents, teachers, and students about the insights of child harassment, its impact on mental health, and how to recognize depressive symptoms.
- As a country we should expand psychological resilience by teaching teenagers coping skills and resilience-building techniques to help them better manage stress and harassment. This can reduce the impact of harassment on their mental health.
- We should develop mental health facilities and establish schools should have on-site counselors or access to mental health professionals who can provide support and guidance to students experiencing depressive symptoms. And Encourage students to seek help when needed.

Conclusion

This study aimed to explore the relationship between child harassment and depressive symptoms among teenagers in Sri Lanka. Through an examination of the prevalence, severity, and associated

risk and protective factors, important insights were gained into the psychological consequences of child harassment and the potential implications for mental health outcomes.

The findings of this study provide substantial evidence supporting the association between child harassment and depressive symptoms in teenagers. The prevalence of depressive symptoms was significantly higher among individuals who reported experiencing child harassment during their childhood.

The results of our study highlighted the negative consequences of severe and ongoing harassment by demonstrating how important it is to consider the frequency and degree of abuse when forecasting depressed symptoms. Nonetheless, one must take into account more than simply the immediate effects of child harassment. Our study demonstrated the important impact of additional contextual factors, including family dynamics, parental mental health, and socioeconomic position, on the emergence of depressive symptoms in children who had experienced harassment. These results emphasize the significance of tackling the mental health effects of child harassment holistically, taking into consideration the larger societal environment in which it occurs.

This study highlights how important social support is in reducing the negative effects of child harassment on an individual's mental health. People who have excellent relationships with their family, friends, and significant others are more resilient and able to tolerate the negative impacts of harassment. It is evident that individuals impacted by child harassment can significantly benefit from developing social support networks and putting interventions in place that emphasise fostering social relationships.

This study provides important new information about the long-term effects of child harassment on Sri Lankan teenagers' mental health. It highlights how critical it is to identify affected individuals as soon as possible and provide early identification and response. It pays close attention to the severity and frequency of abuse as well as any associated risk factors. The results also highlight the value of providing social support as a defence against the negative consequences of child harassment.

However, while this work contributes to the existing literature, it is imperative to recognise certain limitations. The study was conducted in a specific location and had a small sample size, which limited the findings' application. Furthermore, biases and inconsistent recall are possible when self-reported data is used. Future research should use bigger and more varied samples, employ

longitudinal designs to capture long-term impacts, and combine objective and self-report measures in order to reduce these constraints.

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