Chapter VI:
SUMMARY AND CONCLUSION

6.0. INTRODUCTION

In this chapter, the summary of the results of the research will be given along with its consistency with the literature review. Then it will be shown how the therapeutic interventions bring healing to the victims of child sexual abuse. This will be followed by the application of the research findings to child sexual abuse in India and practical steps (including preventive and remedial strategies) that need to be taken to reduce and eliminate child sexual abuse. The chapter will conclude with limitations of the study, future recommendation and scope for future research.

6.1. RESULTS OBTAINED SHOW CONSISTENCY WITH SIMILAR RESEARCH ALREADY UNDERTAKEN AS SEEN IN LITERATURE REVIEW

In this research study entitled ‘Repercussions of Child Abuse and Therapeutic Interventions in Childhood and Adolescent Behavior,’ the child sexual abuse as a parameter and the four repercussions of child sexual abuse (low self-esteem, optimism/pessimism, anxiety and aggression) throws substantial light on the effectiveness of dance movement therapy as the therapeutic intervention for child sexual abuse of children and adolescents.

6.1.1. Literature Review Supports Research Findings on Child Sexual Abuse Leading to Low Self-Esteem

As stated earlier in the literature review the child sexual abuse leads to various repercussions Bagley and Ramsay (1985–1986) have indicated negative effects on the self-esteem of children who are sexually abused -some children having short term-effects while other children having long term effects. For Beitchman et al (1992), studies have shown that child sexual abuse has lowered the self esteem in adolescents. A study done by Romans et. al (1996) show that child sexual abuse particularly who were raped forcefully suffer tremendously from low self-esteem. They say that the horrible
events and the their powerlessness and inferiority complex to deal with the issues and the pressurizing forces in the surrounding lowers the self-esteem of the children.

In Chapter 4, section 4.1.2., the Mean Value with table 2 and figure 1 clearly shows that the results of the pre-test in experimental group indicate children and adolescents of child sexual abuse had low self-esteem. This result is in concurrence with earlier research done and indicated as above. In section 4.2.2., the Mean Value with table 12 and figure 6 clearly shows that the results of the control group indicate children and adolescents of child sexual abuse also had low self-esteem.

6.1.2. Literature Review Supports Research Findings on Child Sexual Abuse Leading to Low Optimism /Pessimism

According to Wasco, S. (2003), for some female victims of abuse, particularly those from marginalized communities, sexual attacks could reiterate assumptions about their poor self image and their state of helplessness and pessimism as a result of menacing trauma and about their world being unsafe and dangerous. The study investigated by Lunderberg-Love (1999) shows that children who are sexually abused by the family members have two main medical noteworthy attitudes. They are dejection and a moody pessimistic attitude. Due to the pessimistic approach the abused children showed a total hopelessness and defenseless. He also showed that the child abuse victims suffered from social alienation and distrust in others.

In Chapter 4, section 4.1.4., 4.1.6., the Mean Value with tables 4 and 6 and figures 2 and 3 clearly show that the results of the pre-test in experimental group indicate children and adolescents of child sexual abuse had low optimism and increased pessimism. This result is in concurrence with earlier research done and indicated as above. In sections 4.2.4.,4.2.6., the Mean Value with tables 14 and 16 and figures 7 and 8 clearly show that the results of the control group indicate children and adolescents of child sexual abuse also had low optimism and increased pessimism.
6.1.3. Literature Review Supports Research Findings on Child Sexual Abuse Leading to Increased Anxiety

In a careful study by Ratican (1992) who cites (Briere and Runtz, 1988), show that the long lasting effects of child sexual abuse is constant worry and apprehension. Relieving and the memories of the sexual abuse makes the person more miserable and depressed. Many times the victims developed chronic anxiety, tension, anxiety attacks, and phobias. Some interesting research conducted by Peterson, Olasov and Foa (1987), cited in Petrak, (2002) has shown that grave fear and anxiety reaches a climax at about three weeks after the rape. However, these negative emotions can last for more than a year for a considerable number of victims.

In Chapter 4, section 4.1.8., the Mean Value with table 8 and figure 4 clearly shows that the results of the pre-test in experimental group indicate children and adolescents of child sexual abuse had increased anxiety. This result is in concurrence with earlier research done and indicated as above. In section 4.2.8., the Mean Value with table 18 and figure 9 clearly shows that the results of the control group indicate children and adolescents of child sexual abuse also had increased anxiety.

6.1.4. Literature Review Supports Research Findings on Child Sexual Abuse Leading to Increased Aggression

The American Psychological Association (2014) affirmed that some important signs of child sexual abuse include angry outbursts and destructive behavior. It stated that children who have undergone physical, emotional, neglect and sexual abuse find it difficult to control and deal with their anger. Alister Lamont (2013) claimed that the earlier the children are exposed to maltreatment, the more likely they are to show behavioral problems in adolescence. Emotional effects of child sexual are hostility, despair and constant fears. But according to Kelly and Ben-Meir’s (1993) the sexual abuse which happens due to the customs, children have very extreme negative behavior problems. According to studies undertaken by Gidycz et. al (1995) in their research have clearly shown that children who are sexually abused and have not dealt with their issues when they grow up will victimize others.
In Chapter 4, section 4.1.10., the Mean Value with table 10 and figure 5 clearly shows that the results of the pre-test in experimental group indicate children and adolescents of child sexual abuse had increased aggression. This result is in concurrence with earlier research done and indicated as above. In section 4.2.10., the Mean Value with table 20 and figure 10 clearly shows that the results of the control group indicate children and adolescents of child sexual abuse also had increased aggression.

6.1.5. Literature Review Supports Research Findings on Dance Movement Therapy leading to Improved Self-Esteem

According to the American Dance Therapy Association (2006) dance movement therapy helps the clients to raise their lowered self-esteem, accept the body figure which ones hated due to the abuse and build skills to communicate with others successfully. Choi and Lee (2008) claim that music can develop children’s self-esteem, reduce aggression and help them to be in control of their feelings and emotions. Schutte et. al (2002) investigated dance and movement enhances the emotional well-being of the person. The two chief components of emotional well-being are mood and self-esteem. Low self-esteem leads to poor body image, impulsivity, anger, hostility, aggression and poor eye contact.

Diener and Lucas (1999) and Katz, Joiner and Kwon (2002) assert that self-esteem has a relationship with the individual’s emotional well-being. If there is a positive change in the emotional well-being of a person, then the self-esteem of the person improves for the better. Milliken (2002) reports that those who are actively involve themselves in the dance movement therapy can build their self-esteem. Bojner-Horwitz et al. (2003) examined that creative therapy like dance movement therapy is used to develop the self-esteem, emotional well-being, and self-control of the person. It is an effective tool in treating mental disorders of adolescents.

In Chapter 4, section 4.1.2., the Mean Value with table 2 and figure 1 clearly shows that the results of the post-test in experimental group indicate children and adolescents of child sexual abuse had improved self-esteem. This result is in concurrence with earlier
research done and indicated as above. In section 4.2.2., the Mean Value with table 12 and figure 6 shows that the self-esteem levels of the children and adolescents in the post-test group of the experimental group is much higher than that of the self-esteem levels of children in post-test group of control group. This result shows that the post test control group which was not given the dance movement therapy did not show any change in their self esteem levels. This proves that dance movement therapy increased the levels of self –esteem of children and adolescents which is in concurrence with earlier research done.

6.1.6. Literature Review Supports Research Findings on Dance Movement Therapy leading to Increased Optimism/ Decreased Pessimism

Marcus and Arbeiter, (1994) showed how dance movement therapy helped sexually abused children to identify, bring about a change and accept and respect one's body in a meaningful way. Through the creative and authentic movements of the dance gives a person a deeper awareness of the body and helps to release the past hurts and trauma. The person experiences freedom and healing. Espenak,(1981) found in Dance Movement Therapy, the damaged and abused body becomes the medium for change and helps the victim to recover oneself as a support in times of struggle to health.

In Chapter 4, section 4.1.4., 4.1.6., the Mean Value with tables 4 and 6 and figures 2 and 3 clearly show that the results of the post-test in experimental group indicate children and adolescents of child sexual abuse had increased optimism and decreased pessimism. This result is in concurrence with earlier research done and indicated as above. In sections 4.2.4., 4.2.6., the Mean Value with tables 14 and 16 and figures 7 and 8 show that the optimism levels of the children and adolescents in the post-test group of the experimental group is much higher and the pessimism level is much lower than that of the optimism / pessimism levels of children in post-test group of control group. This result shows that the post test control group which was not given the dance movement therapy did not show any change in their optimism / pessimism levels. This proves that dance movement therapy increased the levels of optimism and decreased
pessimism of children and adolescents which is in concurrence with earlier research done.

6.1.7. Literature Review Supports Research Findings on Dance Movement Therapy leading to Reduced Anxiety

Dusso (2000) states dance is an outstanding form of exercise and extremely favored by adolescents. It improves the mental health of the individuals who take part in it. The psychological benefits are improvement in morale, decreased depression, and better sleep, reduces anxiety, a lesser amount of substance use, strengthening of the mind, reduced neuroticism and an enhancement in emotional happiness. (S. Loman, 2005) claims that dance movement therapy is a creative and action-oriented method that motivates individuals to have a change of negative to positive attitudes. It help the person to put across the underlying thoughts and get free of the worries and tensions. It helps to bring total relaxation of brain, body and soul.

In Chapter 4, section 4.1.2., the Mean Value with table 2 and figure 1 clearly shows that the results of the post-test in experimental group indicate children and adolescents of child sexual abuse had reduced anxiety. This result is in concurrence with earlier research done and indicated as above. In section 4.2.8., the Mean Value with table 18 and figure 9 shows that the anxiety level of the children and adolescents in the post-test group of the experimental group is much lesser than that of the anxiety levels of children in post-test group of control group. This result shows that the post test control group which was not given the dance movement therapy did not show any change in their anxiety levels. This proves that dance movement therapy reduced the levels of anxiety of children and adolescents which is in concurrence with earlier research done.

6.1.8. Literature Review Supports Research Findings on Dance Movement Therapy leading to Reduced Aggression

Choi and Lee (2008) claim that music can develop children’s self esteem reduce aggression and help them to be in control of their feelings and emotions. A pilot research conducted by Lynn Koshland and J Wilson B Wittake (2004) states that dance
movement therapy can reduce aggressive and hostile behavior. They assessed this in the twelve weeks dance therapy sessions which was conducted for the primary school children. The focal point of the dance movement therapy in the group setting was very creative to help children to mingle with others and also resolve their personal issues. Teachers as well as other observers noticed a significant decrease of the aggressive and violent behaviors in their students. Children themselves felt and reported significant decrease in their aggressive tendencies and negative behaviour patterns.

In Chapter 4, section 4.1.2., the Mean Value with table 2 and figure 1 clearly shows that the results of the post-test in experimental group indicate children and adolescents of child sexual abuse had reduced aggression. This result is in concurrence with earlier research done and indicated as above. In section 4.2.10., the Mean Value with table 20 and figure 10 shows that the aggression levels of the children and adolescents in the post-test group of the experimental group is much lesser than that of the aggression levels of children in post-test group of control group. This result shows that the post test control group which was not given the dance movement therapy did not show any change in their aggression levels. This proves that dance movement therapy reduced the levels of aggression of children and adolescents which is in concurrence with earlier research done.

6.2. CONCLUSION AND PRACTICAL APPLICATION: THERAPEUTIC INTERVENTION THE DANCE MOVEMENT THERAPY CAN BRING HEALING TO THE CHILDREN AND ADOLESCENTS OF CHILD SEXUAL ABUSE

Therapeutic interventions are necessary for anyone who has to go through a process of healing. This is all the more necessary for the child and adolescent victim of abuse, whether the abuse is physical, psychological or sexual. The research study has proved that dance movement therapy can bring healing. Dance movement processes provide an opportunity by using dance as a source of full body health and wellness and for body re-integration. It helps in healing the imbalances in the body. Milliken (2002) examined that the creative method of dance and movement allows an individual to express his or
her deepest feelings in a new way. This leads to the individual with a totally healing experience. Yalom (2005) found that a group therapy in the dance movement therapy is a source of a therapeutic opportunity to share experiences with others. It provides healing and remedial factors.

Movement therapy facilitates the mind and the body to work in tandem harmoniously as it is intended to do. The person is able to build his/her confidence and have a positive attitude towards self-image. Assertiveness is increased and one's personal charisma has been developed. It helps the people who are involved in the arts to let go the mental blocks and promotes improvement of their innovation.

The bottled up emotions come to the surface and body allows to express them freely and non-verbally. The skilled movement therapists are proficient in reading in between the lines these external signs of the mind and devise relevant treatments. In this way, the movement therapy not only assists to treat disturbing and mental troubles but also allows the client's body to get back its synchronization with the mind.

Following are some of the ways in which therapeutic interventions can bring about healing.

- Dance movement therapy can build trust and confidence in self and give identity through body actions and non verbal empathy.

- It improves body image and physical well being.

- It helps to connect with inner self, know oneself better and forget the painful past.

- It can stimulate and release the trapped body emotions such as anger, fears, anxiety, distrust, aggression, and pessimism, to bring healing and mental peace.

- It can help to verbalize through the body all the unconscious aggressive feelings and thoughts.
• It can change aggressive tendencies to become more assertive.

• It helps the child and adolescent to talk about out whatever he/she has experienced- leading to a catharsis effect which is therapeutic.

• It helps to increase awareness of abuse, worry, emotional fatigue and trauma.

• It can identify areas of personal change or improvement and create a reassuring and non-threatening environment.

• It gathers information about the child’s life and concerns of his/her past.

• It expands therapeutic dialogue about issues that matter most to the child and adolescent.

• It enhances self-esteem and increase a grounded sense of self.

• It achieves full body rejuvenation and health and body mind integration.

• It decreases body and emotional blockages through self expression and symbolic communication.

• It releases the levels of suppression, remorse, fear, self-consciousness and helps support the body, soul, mind and spirit.

Touch has a remedial effect on the person in the dance movement session as well as in the areas of client’ s life. A pat on a shoulder, or even a hug can provide a reassurance, warmth and acceptance for the client from the therapist and those who are involved in the child's life. Touch can really work wonders if it is done with the interest of the client. Some children are unfortunate and have never received love from their parents. A
warm touch and a loving embrace can make the child happy, accepted and loved. Touch could be a safe and unsafe touch. If it is a malicious touch, it could worsen the client's behavior. This touch will trigger the negative event happened to her/him in the past and make the person more vulnerable. If the client does not like to be touched, it should be avoided. It takes time for the person to overcome the trauma of that terrible incident occurred in her/his life and for this he/she needs to be respected. Once the trauma is resolved slowly and steadily, the client will able to receive the healing touch from others.

The deeper awareness is first experienced through our bodies. The victim of child sexual abuse will find it very difficult to be fully present within their bodies. When the child becomes aware and gets connected to the body, he/she may experience an excruciating pain and could result in a sense of total separation from the body. However, the movements of dance will gradually and meticulously will help the individual to build this body awareness and be in touch with their feelings. Consequently, the flowing movements will bring transformation to the victim of child sexual abuse.

There are numerous techniques of dance movement therapy. Some lay emphasis on awareness and attention to inner sensations. There are others use movements as a form psychoanalysis as it helps in to deal with emotional issues. Some apply guided movements and others encourage spontaneous movements. It is progressively been recognized and applied by the practitioners in social supports. Those suffering from dejection and constant worry use movements as it assists them to alleviate thoughts of isolation and sadness.

In the dance movement therapy the creation is considered as the mixture of dance method and improvisation. There are accurate movements which help in to discover right feelings. The client is able to express feelings, dispositions and emotions which are the controlled movements to the beat of a music style. The client is free to choose the feelings he/she would like to signify. Moreover, he/she chooses, controls and switches.
This creates a distance to both the client as he/she does not feel his/her inner world and that he/she gets lost in it. And so clients suffering from depression are able to fight against it through this technique of creation.

The dance movement therapy helps to lessen the tensions and trauma as well as develop his/her identity. The repressed emotions obstruct the physical and emotional growth of the person. And so the movement allows the person to become aware and deal with the issues and emotions that are deeply buried in the self. The body weakens as a result of the abuse and so the movements aid the client to understand the potentials and boundaries of her/his body.

As the hurtful memories of the sexual trauma begin to surface, the victim goes through an agonizing pain. Through the therapy these episodes steadily get reduced in frequency. The healing sessions has the positive outcome and eventually takes the edge off of things. The person feels very relaxed and a more normal human being. He/she is very much at ease and finds fully present in their bodies and a result the interactions with others are improved and problems of well being are lessened.

Dance-movement therapy is an educational discipline related to body movement therapy dance. It is an innovative practice that bonds camps, dance and psychology. It seeks to make the person obtain self-knowledge and enhance creativity, supporting to integrate physically, socially and spiritually.

Our simple movements such as gestures, small games and turns are the simple motion and they also belong to the dance therapy and oral recreation of the lived experience. One feels very shy and has the fear that he/she cannot make the right move and please others. Here the art of dance comes to the aid and protects the person. Hence, the dance is specially designed to reproduce the movements in amalgamating our interior world and understand better the feelings of the body. The main goal of the therapist is to focus on the movement behavior as it appears in the therapeutic relationship. The expression, communication and adaptive behaviors are used for group and individual treatment.
Diagnosis in the dance movement therapy is an important factor. The analysis of the movements, body posture, gestures, the imitation, rhythm, swiftness and the relationship with space, the therapist tries to learn more about the problems of the client.

- To conclude the dance movement therapy aspires to incorporate the past experiences of language and the memories of the body.
- It seeks to arouse body awareness and help to grow in real body image.
- It encourages personal and genuine movements.
- It motivates to have a personal approach to self and others.
- It analyzes the emotions experienced by the person.
- It helps to deal with the struggles that are deep within.
- It encourages to build healthy relationships.
- It motivates the person to handle difficult situations and learn to express them freely.
- It allows to reflect on the movement, become aware and integrate the experience.

### 6.3. LIMITATIONS OF THE STUDY

This research study, like any other research activity has a few limitations:-

1. **Child Abuse** is by itself a vast domain. There is an absence of a universal definition of child abuse in the Indian context and also there is a limited understanding of the extent of the different forms of abuse. Further, the study has difficulty in defining some of the psychological terms such as self-esteem, optimism, pessimism, anxiety and aggression due to the lack of well defined indicators for such emotional concepts.

2. The research study in particular focuses on the complex issue of child sexual abuse. Not only is the subject matter very intricate and challenging, but understanding, discussing and interpreting child sexual abusive behavior is difficult.
3. As a sample for the study, the data of the research study is collected from children and adolescents of child sexual abuse only the city of Mumbai Central. Child sexual abuse goes on all over Mumbai, all over India and the world but for the study purpose only one area of Mumbai has been selected. The problems faced in this area may not be applicable in other areas of the city of Mumbai. Therefore the results of the study will portray more the mindset and attitudes of children and adolescents in this particular challenging environment.

4. Even though the questionnaires were simplified and personal guides were provided to the children and adolescents, it was a very challenging to get complete and perfectly clear responses from them on such a sensitive subject. The respondents to the questionnaires, namely, the children and adolescents are too young to fully grasp the different dimensions of child sexual abuse and also they found it difficult and problematic to disclose their painful experiences.

5. The sample of students and adolescents who participated in the survey represented only the low socio-economic status and is not representative of the population at large which also includes the low and high middle class and also the upper class population.

6. The design of the survey (the four psychological questionnaires) itself has some limitations. The questions asked to the respondents do not allow scope for probing into details of various forms of abuse within the specific evidence group such as street and working children.

6.4. RECOMMENDATIONS SUGGESTED ARE:

1. There is an urgent and paramount need to safeguard and promote the welfare of vulnerable children who could be sexually abused and also those who are sexually abused. Public awareness programmes should be conducted for people in civil society in order to educate them on the need to protect and care for children who are the future
of the nation. Community policing strategies should be implemented by various NGO’s to help children in distress and to detect cases where ever they are taken advantage of or subject to violence, torture, abuse and the like.

2. Awareness programmes are necessary to make the public (including the parents and guardians of the children and adolescents) aware of respecting the dignity of children and adolescents. Parental role in protecting their children can sufficiently be stressed.

3. The children themselves should be educated on the gift of their own human body and be taught to defend it at all times. They too should be given education so that they can protect themselves when any one tries to take advantage of them or lure them in a trap. For example, the Muppet Video on good touch and bad touch can be regularly shown to children.

See the following You Tube. Web: https://www.youtube.com/watch?v=bCgtNSU4kg4

Hence, in this regard touch should never become a problem for any child.

4. A larger sample study of sexually abused children can be undertaken to strengthen this research study.

5. Institutions where the children and adolescents are frequenting and all those in contact with them such as maids, domestic servants and peer groups should be carefully monitored.

6. If there is a doubt that child is being sexually abused, a list of recommended steps and help lines should be made easily available to the children and parents as well.

7. Visiting homes of the children especially by teachers and social workers will help to observe and evaluate the situation at home.

8. Children could be made aware of the 'safe' and 'unsafe' touch of others. Parents and teachers could make the children aware of their private organs of the body. Children
need to be taught that their body belongs to them and no one has a right to touch them without their consent. Open and direct communication about sexuality at an early age will help them understand what is not acceptable. If anyone touches them inappropriately, they need to be taught to say no firmly and run away from that unsafe situation and inform their parents about it. Prevention can begin at home. If parents educate themselves, make themselves aware about child sexual abuse and take strong steps to protect their child, it can really help a lot.

9. Pediatricians can play a very important role in children’s lives. With the help of the social workers, they could direct the disturbed children and adolescents to undertake therapy sessions.

10. A conducive environment of trust, secrecy and openness to listen and discuss sexual concerns will help to prevent further child sexual abuse. Also the family and community support will bring therapeutic healing to the child sexual victims.

11. Schools could conduct prevention programmes to teach children the skills to defend and protect oneself at the time of attack and also to reduce the stigma of shame and self-blame of the sexual abuse.

12. School staff could be trained in counseling techniques to help children to disclose child sexual abuse, to avoid further damage and provide treatment at the earliest.

13. There is a need to train parents and also teachers to educate children about the appropriate names to their reproductive organs. This will motivate the children to refuse sexual molestation and not give in to their trusted friends or adults.

14. There is a need to plan proper policies to reshape sex offenders by dealing with their thoughts and actions which lead them to abuse children. This approach will modify their behavior patterns and reestablish them in the society.

15. Children and adolescents are constantly establishing their self-identity. While they look for the approval from parents they fear disclosing facts that may pose as an
obstacle to their relationship with them. Training parents to keep an open communication channel with their children and emphasizing unconditional love is extremely important so that children feel free to discuss delicate topics like sexual abuse.

16. Music is used for entertainment purposes by many and is hardly thought of as a rich source of therapeutic benefits. However, music is known to affect many areas of the brain primarily the frontal cortex. It is known to bring on a calming effect on the mind and consequently bring about physiological changes in the body. Low self esteem, pessimism, anxiety, depression, aggression that is brought due to sexual abuse could largely be reduced through effective music therapy. Both listening to music as well as playing an instrument could be used effectively as a therapeutic intervention.

17. Talking to individuals with similar struggles often brings on a calming effect. Establishing supervised support groups for children and adolescents could help victims of abuse find solace and comfort from knowing that their struggle is shared by others. These groups could serve as a catharsis for them as well as would have a healing effect on others in the group. However, such a group should be carefully monitored.

18. Sexual abuse is sometimes the result of sexual curiosity and lack of guidance from knowledgeable sources. Appropriate education on sexual matters and related areas would lead to giving correct facts and information to individuals at an early age. This could decrease inappropriate ways of dealing with curiosity which sometimes leads to inappropriate sexual behavior.

19. Overall this study provides the fundamental understanding of repercussions of child sexual abuse in childhood and adolescent behavior and therapeutic interventions for the same. However, the study has raised many questions that can be explored in future studies.
20. Children who are sexually abused should actively get involved in role plays or watch others being acting in role plays. Rehearsing appropriate behaviors and teaching certain concepts in the role plays have been very effective and encouraging and could be the preventive skills of future abuse.

21. All types of abuse of children and its consequences are of great concern to humanity but sexual abuse is predominantly devastating issue. It is an alarming subject when a sexually transmitted disease becomes a part of the tragic legacy of violation. Sexual abuse is an inhuman act and it affects children of all ages even the infants have become the targets of sexual abuse. Sometimes children may not express physical complaints and signs of infection and pain in their private organs. As they remain in isolation a sexually transmitted organism could be the initial signal that abuse has taken place against the child.

22. At times children may tell their concerns openly and others indirectly through non-verbal communication. When one listens to such painful incidents may feel very sad, upset and angry. A child can notice these reactions and may feel more guilty and humiliated. And so as counselors, teachers and psychologists we need to stay calm and not convey these feelings to the child as this may prevent her/him from making further disclosures.

23. Psychotherapy is the first model of a healthy relationship for many victims of child sexual abuse. It provides healing and a nurturing relationship through which the victim finds a groundwork to sense trust. When someone listens and offers unfailing support, show empathy and respect, it becomes a safe place for the abused child to experience the agonizing memories and emotions and obtain healing.

24. Support groups can play an important role in the lives of the survivors of the child sexual abuse. The victims to learn to care for themselves within the framework of a support group. The distortions in thinking and depressing self images are tackled in such a manner, it helps them to discern and change the views of self that are nurturing
and self accepting. The reassurance and encouragement of the support group allows the victim to identify the inner potentialities, resolve conflicts, receive feedback and make use of the survival strengths. Supports groups build a platform that assists the survivors of sexual abuse to meet and interact with other individuals who are faced with similar issues. Talking about the abuse in this environment helps them to reduce the underlying disgrace and guilt.

25. We need to help children who have been victims of child sexual abuse. If the child wants to disclose her/his personal issue sexual abuse one has to keep in mind the following:

- The child to be told that you believe and trust them.
- The child has to be given an understanding that what has taken place is not her/his fault.
- Encourage and support the child that he/she did the right thing of telling you about the issue.
- Tell the child that many exploiters frighten them to prevent disclosure. So they need not get scared about it.
- The child needs to be made aware by telling that many people do wrong deeds and that the abuser is accountable for the act done.
- In every possible way comfort and reassure the child. Have a positive regard, respect and unconditional love for the child.
- Tell what action you are going to do for them. In the case of a minor child do not promise confidentiality. The child has to be helped in order to prevent further abuse.
• As therapist and counselors we need to be aware of the signs and doubts of sexual abuse so that the child is helped at the earliest.

• Child sexual abuse has become an alarming issue in India. Parents, teachers counselors, and psychologists etc. need to take effective action for the child and report their concerns to the appropriate authorities.

At times it could be an awful experience for the therapist and counselor to study behavior of the child sexual abuse victims. As it is a sensitive issue and the child is not ready to disclose the problem to anyone, one needs to be extra cautious to handle such matters with much care and tenderness. With the empathetic attitude and respect for the client, the therapist can provide a means for major life transformation and healing for the survivor.

The words we utter can be an important part of the transformation for the victims of sexual abuse. The use of exact language could serve as tools of healing for individuals who have experienced sexual abuse.

The movements can bring sudden reactions and this could be helped to build some coping strategies for the client by the encouragement of others. To deal with sexual abuse, the therapists need to be certain that their clients are steady enough to expose the hidden emotions and thoughts of their past abuses.

Therapy is an indispensable element of healing for the victim of child sexual abuse. Extensive work is to be done in this area of sexual abuse. Some children respond better and speedily to therapy but there are some who take a long period of time as the ramification of the past sexual trauma continues to pervade every part of their lives.
6.5. SCOPE FOR FUTURE RESEARCH

1. The above research study can be used on a wider sample of child sexual abuse across the city of Mumbai and also in other states of India. More research is needed to identify and treat the offenders to reduce overall sexual abuse of children.

2. Research should examine the stigma and discrimination that children and adolescents face while seeking treatment and other impediments that hinder them from seeking help.

3. Dance movement therapy has now come to India but there is an urgent need of further research which will be effectively used to resolve the traumatic issues of the sexual abuse and also to bringing about healing to the victims.

4. It is important to state that even though this doctoral research study focuses on the child and adolescent victims of abuse, one must keep in mind the need to examine and treat the offenders who abuse children and adolescents in society. This can drastically reduce, if not eliminate, the curse of child sexual abuse in our society. This becomes part of preventive strategies and is vital to go to the root of the problem rather than focusing only on the therapeutic dimension which is curative.

5. In the last few years, sexual abuse of children and adolescents has become an alarming issue. Historically, women in India and in many other countries have not been treated on equal par with and are looked down upon in society. This is clearly evident in the high number of female feticide and the number of missing girls in the country. To save the girl child from death and abuse is the need of the hour.

6. Dance movement therapy can also be applied to all forms of behavior problems in children and adolescents. It can be used in hospitals, for cancer patients, dementia, autism, mental illness, for Parkinson’s disease and older people.