

A PERSPECTIVE ON CHILD VULNERABILITY: POST-TRAUMATIC STRESS DISORDER IN CHILDREN WHO ARE VICTIMS OF SEXUAL ABUSE

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Abstract

Child sexual abuse constitutes a serious violation of human rights, with profound repercussions for children's physical, emotional, social, and cognitive development. Among the various consequences arising from this form of violence, Post-Traumatic Stress Disorder (PTSD) stands out as a psychopathology frequently diagnosed in victims who have experienced traumatic events, particularly in situations involving abuse. Within the school environment, where children spend a substantial portion of their time, PTSD manifestations may become evident through learning difficulties, social withdrawal, behavioral changes, and declining academic performance. This study aims to analyze the effects of child sexual abuse on the psychological development of school-aged children, with particular emphasis on the manifestation of PTSD and its implications for everyday school life. The methodology employed consisted of a bibliographic review based on scientific articles, specialized books, legislation, and institutional documents addressing child sexual abuse, PTSD symptoms in children, and the role of schools within the child protection network. Analysis of the selected sources demonstrated that PTSD, when not diagnosed and treated at an early stage, can seriously impair children's subjectivity, hindering their social integration and compromising their learning process.

Keywords: Child Sexual Abuse, Consequences, Psychology, Trauma.

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INTRODUCTION

Childhood is a fundamental stage in human physical, emotional, social, and cognitive development. However, when this period is marked by traumatic experiences, such as sexual abuse, this crucial stage of life may be significantly compromised. Sexual violence against children violates fundamental rights and triggers a series of psychological consequences, among which Post-Traumatic Stress Disorder (PTSD) stands out as one of the most frequent and devastating.

PTSD is characterized by symptoms such as persistent re-experiencing of the traumatic event, avoidance of situations associated with the trauma, negative alterations in mood, and heightened arousal, all of which compromise children's well-being and daily functioning. When this psychopathological condition is not properly identified and treated, it may produce long-lasting effects on children's academic and social lives, impairing learning, the development of interpersonal relationships, and self-esteem. Children with PTSD may exhibit dysfunctional behaviors, social withdrawal, aggression, or declining academic performance, requiring special attention from educational institutions.

In this context, schools represent a strategic setting for identifying signs of psychological distress and ensuring the appropriate referral of victims to the child protection network. As the second primary environment of children's socialization, schools are well positioned to detect behavioral and emotional changes that may indicate situations of abuse. Nevertheless, omission, insufficient training, or lack of awareness among educators continue to constitute barriers to the effective protection of children who are victims of sexual violence.

Accordingly, this study aims to analyze the relationship between child sexual abuse and the development of Post-Traumatic Stress Disorder in school-aged children, emphasizing its impact on school life and the role of education professionals in identifying and referring suspected cases. The choice of this topic is justified by the need to expand interdisciplinary discussion surrounding this phenomenon, raising awareness among educators, healthcare professionals, and legal practitioners regarding the importance of coordinated action in preventing and addressing sexual violence against children.

To achieve this objective, a bibliographic research methodology will be employed, drawing upon scientific studies and publications concerning child sexual abuse, PTSD, and the role of schools in protecting vulnerable children. The analysis seeks to contribute theoretical reflections capable of supporting more sensitive educational practices committed to children's rights and the proper care of victims, thereby promoting greater attention to the mental health and dignity of children exposed to situations of violence.

THEORETICAL FRAMEWORK

PHYSICAL AND EMOTIONAL CONSEQUENCES OF CHILD SEXUAL ABUSE

Sexual abuse began to be recognized as a political issue during the 1960s amid the critiques advanced by the second wave of the feminist movement. This movement challenged the patriarchal model of the family, which, according to its analysis, legitimized violence perpetrated by men against women and by adults against children. During the 1980s and 1990s, this critique was incorporated into emerging social movements dedicated to defending the rights of children and adolescents, which came to address child and adolescent sexual abuse as a distinct political issue requiring specific attention and targeted intervention (Lowenkron, 2010).

Sexual abuse is characterized by the imposition of erotic or sexual practices upon children or adolescents through physical violence, intimidation, or manipulation of their will. These practices may range from behaviors that do not involve direct physical contact—such as voyeurism, exhibitionism, and the production of sexual images—to acts involving sexual contact, with or without penetration. It is a phenomenon with its own particular dynamics, often beginning in subtle ways. As the perpetrator gains the victim's trust, sexually motivated behaviors gradually become increasingly intimate and invasive (Santos & Dell'Aglio, 2010).

In this regard, it is important to note that sexual abuse is not limited to sexual intercourse itself but also includes behaviors such as inappropriate touching, manipulation of the child's genitals, the use of

obscene language, the unauthorized exposure of the child's image, exhibition of the perpetrator's genitalia, as well as oral, anal, or vaginal sexual acts (Amorim et al., 2021).

According to Lowenkron (2010), the definition of sexual abuse centers on the asymmetry of power between the parties involved—whether due to differences in age, level of experience, social status, or other forms of inequality—as well as on the psychological harm inflicted upon the victim. Abuse may occur through physical force, promises, threats, coercion, emotional manipulation, deception, or other forms of pressure. A fundamental aspect in characterizing sexual abuse is the invalidity of a child's sexual consent, since under no circumstances can a child be regarded as an autonomous individual capable of consenting to a sexual relationship with an adult and, in certain situations, not even with an older child or adolescent. In such contexts, the child is treated solely as an object for another person's sexual gratification.

The manifestation of sexual violence encompasses multiple dimensions, including the exercise of power within the family environment, social and cultural conditioning, and the very logic of abuse, characterized by domination and the demand for obedience, whereby the stronger individual subjects the weaker to their will (Faleiros, 2001).

Sexual violence has a profound impact on a child's life, as the child is subjected to acts against their will, resulting in physical pain, emotional distress, and intense internal confusion. In many cases, the child feels powerless in the face of the situation, uncertain of how to respond, and may even come to believe that they somehow consented to what occurred because of their inability to understand and confront the violence they have experienced (Brilhante, 2022).

Children exposed to psychological violence frequently experience long-term consequences, including growth disorders, impaired motor coordination, learning difficulties, and emotional and social maladjustment, which may manifest through aggressive or passive behaviors, hyperactivity, and alterations in sphincter control. Within their daily environment, children who are immersed in settings characterized by this type of violence—particularly when it is recurrent—tend to normalize such

experiences, perceiving them as ordinary. As an adaptive response, they begin to reproduce these behaviors automatically, which may ultimately contribute to the development of individuals predisposed to engaging in violent behavior (Brilhante, 2022).

Children who have been victims of sexual abuse may develop a broad range of psychopathological disorders, including Post-Traumatic Stress Disorder (PTSD), dissociative disorders, depressive disorders, Attention-Deficit/Hyperactivity Disorder (ADHD), eating disorders, psychosomatic symptoms, delinquent behavior, and substance abuse (Borges & Dell'Aglio, 2008).

Post-Traumatic Stress Disorder (PTSD) is the psychopathology most frequently associated with sexual abuse. It is an anxiety disorder that develops following exposure to a traumatic event. Its occurrence is linked to the victim's subjective appraisal of the experience, characterized by intense feelings of fear and terror, and is marked by symptoms such as intrusive re-experiencing of the trauma, avoidance behaviors, and heightened physiological arousal, all of which significantly impair the individual's daily functioning over time (Habigzang et al., 2010).

According to Inoue and Ristum (2008), manifestations of Post-Traumatic Stress Disorder during childhood and adolescence tend to be more severe and debilitating because the affective and cognitive functions of the central nervous system have not yet reached full development or regulation.

CONSEQUENCES OF CHILD SEXUAL ABUSE ON THE VICTIM'S ACADEMIC PERFORMANCE AND THE ROLE OF THE SCHOOL

Child sexual abuse is a highly complex phenomenon that requires a multidisciplinary approach. Throughout this process, several issues emerge as priorities, demanding coordinated action and collaboration among different fields of knowledge and sectors of practice (Fuks, 2006).

According to Amorim et al. (2021), child sexual abuse often occurs without the child being fully aware that they are the victim of violence. As children grow older and begin to understand the seriousness of the situation, perpetrators frequently resort to strategies such as coercive agreements, blackmail, and

threats to silence them and prevent disclosure. Consequently, many children remain silent for extended periods, overwhelmed by fear and shame and effectively held captive by their abusers. The consequences of this form of violence can be severe, including damage to both physical and mental health, profound psychological trauma, long-term sequelae, and limitations that may be either temporary or permanent.

The authors further state that when sexual abuse is not identified and addressed at an early stage, it can seriously undermine a child's self-esteem, generate deep-seated fears, and lead to numerous other consequences that often extend into adulthood. Among its potential effects are impairments in overall development, particularly with regard to personality formation and the functioning of various cognitive processes (Amorim et al., 2021).

Similarly, Pereira and Williams (2008) argue that children who experience violence within the family environment exhibit impairments in their development. The adverse effects of intrafamilial violence are reflected in cognitive and emotional functioning, as well as in academic and social domains. Declining academic performance among child victims has been consistently documented as a consequence of abuse in both international research and studies conducted in Brazil.

The effects of child sexual abuse on cognitive abilities may vary from one individual to another, depending on the quality of each person's psychological resources, which are shaped by social interaction, personal experiences, emotional relationships, identification processes, and family dynamics. Nevertheless, there is broad consensus in the literature that sexual abuse during childhood has a significant impact, disrupting the child's typical developmental trajectory. Frequently observed cognitive and intellectual impairments include declining academic performance, attention and concentration difficulties, impairments in language and learning, as well as reduced motivation toward both school activities and life in general (Amorim et al., 2021).

Addressing violence therefore requires the effective integration of multiple sectors, including healthcare, public safety, the justice system, and education, in addition to the active participation of organized civil society. Besides parents or legal guardians, educators are likely the individuals who spend

the greatest amount of time with children and adolescents, given the number of hours they attend school within the Brazilian educational system. However, current practices may result in the loss of this crucial opportunity to identify and intervene in situations of violence affecting this population (Inoue & Ristum, 2008).

Within this context, schools must commit themselves to promoting and safeguarding the rights of children and adolescents, while educators' engagement reinforces efforts to protect these rights. Teachers play an essential role in identifying and reporting cases of sexual violence, particularly during the early years of elementary education, when they interact with students on a daily basis for approximately four hours each day (Inoue & Ristum, 2008).

During childhood, one of the clearest indicators of exposure to stressful experiences is a change in the child's behavior, particularly when significant alterations occur in the environment in which they live and interact. From this perspective, psychology and education work in an integrated manner to recognize these behavioral changes in order to detect possible traumatic experiences. Since children spend a substantial portion of their time at school, this setting becomes essential for the early identification of signs of emotional distress and for timely intervention (Brilhante, 2022).

REFRAMING THROUGH PSYCHOLOGY

According to research, various stressful experiences during childhood can be characterized as traumatic. These traumas are not confined to the moment in which they occur but tend to have lasting effects, particularly in adulthood, where they are associated with psychological distress, mental disorders, and mood disturbances. In this context, psychological support plays a fundamental role in shaping how children interpret such stressors, contributing to the development of a healthier understanding of these experiences. Child psychology, in turn, helps children recognize and manage the feelings and emotions associated with these events, fostering more adaptive coping strategies (Brilhante, 2022).

Trauma is characterized by an excessive influx of stimuli that exceeds the individual's capacity for

tolerance, compromising their ability to regulate and psychologically process these experiences. Such situations involve overwhelming levels of stimulation that the child is unable to discharge, making it necessary to defend against them or mentally integrate them in order to avoid a psychological rupture that would result in significant mental disorganization. The consequence of this intense effort is the creation of a kind of psychological capsule that immobilizes these elements, whose quantity and intensity would otherwise be devastating to the individual's psychic structure (Fuks, 2006).

Trauma originates from potentially traumatic experiences that have not been adequately processed at the psychological level by those who have experienced them. Trauma may manifest in various ways, depending on factors such as the frequency of exposure to the event, its duration, the context in which it occurred, the individual's ability to assign meaning to the experience, and, above all, age—a factor that encompasses and intensifies all the others. With regard to psychological development, childhood represents a particularly critical period, especially up to approximately seven years of age, when personality is still being formed. Even after this stage, mental and emotional maturation continues to develop gradually, requiring considerable time before individuals are able to assign immediate meaning to their lived experiences (Brilhante, 2022).

For human development to occur fully, both developmental processes—the mental and the emotional—must be properly consolidated, which is not yet the case during childhood. Consequently, children rely on their parents or caregivers as references for interpreting the events they experience. However, in many situations, particularly when exposed to risky or potentially traumatic contexts, children depend solely on the very individuals involved in those events to make sense of their experiences. This may lead to the distorted internalization of adverse situations, causing children to perceive harmful or abusive experiences as "normal" or acceptable because of the influence and manipulation exerted by the responsible adults (Brilhante, 2022).

As a public health issue, sexual abuse must be understood, studied, and discussed within the health sciences. However, its scope extends far beyond this field. Education, the justice system, and social

assistance are also directly involved in intervention efforts, making the phenomenon inherently interdisciplinary (Pelisoli & Dell'Aglio, 2014).

Working in collaboration with the child protection network, psychologists play a fundamental role in welcoming, intervening, reporting, and protecting children who are victims of abuse. Through therapeutic intervention, psychologists seek to help children reframe the experiences they have endured, facilitating the processing of trauma and enabling them to understand that, although abuse constitutes a deeply painful chapter in their lives, it is one that can ultimately be overcome (Silva, 2018).

METHODOLOGY

This study is characterized as a qualitative bibliographic research project whose objective is to gather, analyze, and discuss knowledge produced regarding Post-Traumatic Stress Disorder (PTSD) in children who are victims of sexual abuse, particularly within the school context. The bibliographic approach enables a critical understanding of the topic through the collection and analysis of previously published materials, thereby providing a solid theoretical and scientific foundation for the proposed discussion.

The selection of materials was carried out through searches in widely recognized academic databases, including SciELO (Scientific Electronic Library Online), the Virtual Health Library (BVS), Google Scholar, the CAPES Journal Portal, and the UNESP Journal Portal. The following descriptors were used: “child sexual abuse,” “post-traumatic stress disorder,” “sexual abuse in childhood,” “child vulnerability,” and “educational impacts of sexual abuse,” among others. Combinations of these terms were refined through the use of Boolean operators such as AND and OR.

The inclusion criteria comprised articles published between 2005 and 2025, available in Portuguese, and specifically addressing the impacts of child sexual abuse on children's mental health, with emphasis on the development of PTSD and its repercussions on academic performance and social

relationships. Exclusion criteria included duplicate materials, opinion articles lacking an empirical basis, and studies that did not focus on childhood or that addressed the topic only tangentially.

Following the initial screening process, the texts that contributed most significantly to the objectives of the research were selected. The review process was conducted in two stages: an exploratory reading focused on abstracts and keywords, followed by a selective and critical reading aimed at an in-depth analysis of the content of the selected texts. The data obtained were organized into thematic categories, facilitating the systematization of the main findings regarding the psychosocial effects of child sexual abuse, with particular emphasis on the manifestation of PTSD and the role of schools in identifying and supporting victims.

This methodology made it possible to establish a solid theoretical foundation that supported a critical analysis of the phenomenon of sexual violence against children from the perspective of psychological and educational vulnerability. Based on this review, it was possible to construct an overview of the emotional consequences of abuse and to highlight the importance of interdisciplinary action in addressing this issue.

RESULTS AND DISCUSSION

This section presents the findings obtained from the analysis of the scientific articles selected through the bibliographic review and discusses the principal results in light of the theoretical framework underpinning this study. A total of six (6) articles met the methodological inclusion criteria and are presented in Table 1, organized according to author(s), year, title, and objective.

Table 1*Selected Articles*

Author(s)/Year	Title	Objective
Rover et al. (2020)	<i>Violência contra a criança: indicadores clínicos na odontologia</i> [Violence Against Children: Clinical Indicators in Dentistry]	To report the orofacial manifestations of different types of child maltreatment and the role of dentists in assessing these conditions.
Brilhante (2022)	<i>A atuação da psicologia infantil na ressignificação de traumas</i> [The Role of Child Psychology in the Reframing of Trauma]	To understand which stressful situations are most likely to intensify trauma and how psychologists can intervene preventively to prevent these experiences from becoming lasting trauma in adulthood.
Macari et al. (2024)	<i>Influência do trauma na infância sobre a saúde mental</i> [The Influence of Childhood Trauma on Mental Health]	To analyze and synthesize the available information on the influence of childhood trauma on mental health, focusing on the Brazilian context and public health policies related to the topic.
Inoue e Ristum (2008)	<i>Violência sexual: caracterização e análise de casos revelados na escola</i> [Sexual Violence: Characterization and Analysis of Cases Disclosed at School]	To analyze cases of sexual violence identified or disclosed within the educational context, describing their forms, incidence, the profiles of victims and perpetrators, those responsible for identifying the cases, and the circumstances surrounding their disclosure.
Fuks (2006)	<i>Consequências do abuso sexual infantil</i> [Consequences of Child Sexual Abuse]	To analyze the manifestations of child sexual abuse.
Amorim et al. (2021)	<i>Desempenho intelectual e crenças disfuncionais em crianças vítimas de abuso sexual</i> [Intellectual Performance and Dysfunctional Beliefs in Children Who Are Victims of Sexual Abuse]	To assess the intelligence of a group of children who experienced sexual abuse and examine its relationship with dysfunctional beliefs.

Source: Prepared by the author.

The analysis of the selected studies made it possible to identify a wide range of emotional, cognitive, and behavioral consequences resulting from child sexual abuse. The findings also demonstrated that these impacts are multidimensional, affecting children's academic performance, self-esteem, capacity for social interaction, and overall development.

In their literature review, Rover et al. (2020) observed that, in addition to physical signs, children who have experienced sexual abuse may exhibit a variety of psychological disorders, including fear, anger, anxiety, emotional distress, depression, and social isolation. Behaviors such as compulsive lying, distrust of adults, frequent crying without an apparent reason, reluctance to return home, and declining

academic performance are also important indicators. Other possible signs include fecal retention, difficulties related to sexuality, excessive masturbation, and sexualized behaviors. Furthermore, poor oral and personal hygiene may indicate neglect or emotional suffering.

The abuse itself may cause children to blame themselves for what occurred and to perceive themselves as negatively different from other children, leading to feelings of inferiority and inadequacy. These children frequently exhibit symptoms of anxiety and are at greater risk of developing depressive disorders. In addition, they demonstrate a high prevalence of psychiatric disorders, which hinders their social adjustment and results in psychological responses that differ significantly from those observed in other children (Almeida et al., 2021).

According to Fuks (2006), discussing the effects of abuse—whether immediate or long-term—necessarily involves addressing the risk of profound disruption in the child's processes of subject formation. Without the support of others, victims encounter considerable difficulty in symbolizing the trauma they have experienced. Consequently, the traumatic experience tends to persist in its psychological effects, hindering the reconstruction of the self and compromising personal identity. It is essential to recognize that child sexual abuse constitutes a tragic and concrete rupture in a child's life and that, for a variety of reasons, children often find it extremely difficult to express what they have experienced. In this regard, one of the principal challenges faced by professionals, as in other highly complex situations, is to create conditions that enable the traumatic experience to be symbolized and, ultimately, psychologically processed.

According to Amorim et al. (2021), children who are victims of sexual abuse and exhibit dysfunctional characteristics tend to develop a negative perception of themselves and of the world around them, expressing distrust in both their own abilities and in other people. These children frequently struggle to trust others, experience profound feelings of shame, and may develop a strong sense of hopelessness and a diminished desire to live. Consequently, suicide has become one of the leading causes of death among adolescents who have experienced such abuse.

Brilhante (2022) examines the role of child psychology in the reframing of trauma, highlighting how psychological intervention contributes to addressing the traumatic consequences of child sexual abuse. According to the author, the identification of possible cases of violence requires attention to physical indicators, such as unexplained injuries or bruises, as well as signs including inappropriate clothing for weather conditions, irritability, and aggressive behavior toward others. In cases of sexual violence, however, manifestations tend to be more emotional than physical. Children may exhibit social withdrawal, excessive embarrassment in ordinary situations, frequent crying, avoidance of physical contact with adults, and intense fear.

Macari et al. (2024), through a literature review, found that a considerable number of adults who seek psychological treatment for current psychological difficulties are often dealing, directly or indirectly, with unresolved childhood trauma. This finding underscores the importance of investigating early adverse experiences. The studies reviewed emphasize the relationship between childhood trauma and mental disorders in adulthood, highlighting the profound and long-lasting influence of experiences during early childhood.

Furthermore, the authors concluded that among the mental disorders most commonly associated with traumatic childhood experiences are Generalized Anxiety Disorder, Major Depressive Disorder, and Binge Eating Disorder, all of which exhibit high prevalence rates. These findings reinforce the importance of carefully considering children's lived experiences, since accumulated emotional burdens—whether consciously recognized or not—may contribute to the development of these disorders later in life (Macari et al., 2024).

Inoue and Ristum (2008) found that the family is the child's primary environment for development and socialization, with the school representing the second most significant setting in this process. When the family itself is responsible for perpetrating violence against the child or adolescent, or when it fails in its duties of care, guidance, and protection, the school often becomes the only institution capable of safeguarding the well-being of its students. This does not imply that schools should assume

responsibilities that properly belong to families; rather, schools should work collaboratively by helping families recognize and fulfill their responsibilities. Possible strategies include promoting citizenship education, providing information and guidance to caregivers, and, whenever necessary, reporting cases of violence to the appropriate authorities.

The authors conducted their study using records from the User Care Protocol of the Viver Program, located in Salvador, Bahia, which contained information provided by victims or their legal representatives. Between December 21, 2001, and August 31, 2004, a total of 2,522 service records were analyzed. Of these, only 22 cases of violence were identified and referred by educators, meaning that, following disclosure, the victims received medical, legal, social, and psychological assistance. This finding highlights an alarming problem: either educators are unaware of the rights of the children and adolescents under their responsibility or, despite being aware of those rights, they choose to remain silent when confronted with suspected or confirmed cases of sexual violence, thereby failing to fulfill their legal and ethical duty to report and protect victims (Inoue & Ristum, 2008).

In light of these findings, the results underscore the urgent need to strengthen child protection networks through increased investment in public policies, professional training, and expanded access to mental health services. When left untreated, trauma can severely compromise children's psychological and social development, perpetuating a cycle of suffering and exclusion. Accordingly, addressing child sexual abuse and its consequences must be understood as a collective responsibility that extends across the fields of healthcare, education, social assistance, and the justice system.

CONCLUSION

The present study sought to examine the vulnerability of children who are victims of sexual abuse and the psychological consequences resulting from this form of violence, with particular emphasis on the development of Post-Traumatic Stress Disorder (PTSD). Based on the analysis of scientific literature, it was found that PTSD is one of the principal psychopathological manifestations among victims,

significantly affecting their ability to process and symbolize traumatic experiences, as well as impairing their cognitive and emotional development and their social and academic functioning.

The evidence reviewed demonstrates that child sexual abuse disrupts the child's psychological structure, creating obstacles to the processes of subject formation and frequently resulting in severe symptoms such as anxiety, depression, dissociation, suicidal behavior, and learning difficulties. These findings underscore the importance of coordinated action among child protection networks—including the healthcare, education, justice, and social assistance sectors—to ensure appropriate support for victims and to develop strategies that promote active listening, comprehensive care, and the reframing of traumatic experiences.

Finally, it is important to emphasize that addressing child sexual abuse requires not only the strengthening of public policies but also the continuous training and awareness of professionals who work with children. Active listening, trauma-informed care, and therapeutic intervention are essential to enable children to overcome trauma and resume healthy development. Combating sexual violence against children must be understood as a continuous and collective responsibility, grounded in the protection of human rights and the promotion of children's dignity.

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