

Prevalence of Post-traumatic Stress Disorder among Child Survivors of Incest ages 9-15 years at Mama Lucy Kibaki Hospital in Nairobi City County, Kenya

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Abstract: - Incest is a global vice that affects children regardless of their age, class, residence or religion. It has debilitating psychological, social and physical effects on children who experience it. Such negative effects easily lead to post-traumatic stress disorder (PTSD), a psychological disorder that develops after exposure to traumatic events such as incest. This study examined the prevalence of (PTSD) among child survivors of incest aged between 9-15 years seen at Mama Lucy Kibaki Hospital (MLKH) in Nairobi City County. The study adopted a descriptive research design and the target population included caregivers/parents and children. The objectives of the study were as follows; to determine the prevalence of PTSD among survivors of incest, establish the social demographic characteristics of survivors, to determine the effects of PTSD on survivors and to explore parental perceptions towards child survivors of incest aged between 9-15 years at MLKH. The study adopted the descriptive design. The population included caregivers/parents, survivors, key informants and focus group discussions at MLKH. The target population was drawn from MLKH. The study used purposive sampling to select the site and utilized random sampling to select survivors, parents and key informants. The sample size of the population was 20 survivors, 20 parents and 2 key informants. Data was collected through questionnaires, focus group discussions and observation. The study established that PTSD was prevalent among children survivors of incest and the effects were varied. However, the caregivers were unaware of the existence of PTSD and therefore could not pursue a treatment plan. There was lack of follow up on survivors treated at MLKH for possible manifestations of PTSD. Based on the findings of the study, the researcher recommended that psychosocial education was necessary to build the capacity of caregivers and survivors to cope with the PTSD trauma

Key terms: Prevalence, Post-trauma stress disorder (PTSD), Child survivors, incest, Trauma, Prevalence, Child abuse, and psychological disorder

I. BACKGROUND OF THE STUDY

Incest is defined as having sexual relations with close family members for example a father and a daughter (Oxford Dictionary 2015). Courtois (1998) distinguishes consanguineous incest, or sexual contact that happens amongst blood relatives; from sexual contact between a child and individuals who are involved with the child either legally or contractually (marriage to a child's parent, adoption of a

child, or serving as a foster parent). He further coined the term quasi-relative incest to refer to sexual contact between a child and individuals bound to the child by neither relation nor contract, but who are involved with the child's family and assume a family role associated with care giving functions and responsibilities. To put this in perspective, the UNICEF (2009) categorizes three main forms of child sexual abuse namely, incest and step-father abuse; non-family abuse (abuse that takes place outside of the family setting) and transactional sexual abuse. Most studies fail to delineate the various forms of sexual abuse, hence, study all forms of Child Sexual Abuse (CSA) together. A study by the American Psychological Association, 2014; Centers for Disease Control and Prevention (2005) revealed that approximately one in four girls and one in six boys are sexually abused through incest and other forms CSA before age 18. The highest prevalence rate for child sexual abuse including incest was found to be in Africa (34.4 percent), Europe (9.2 percent) and America (10.1 percent) and Asia 23.9 percent (clinical psychology review, 2009).

Childhood sexual abuse that also includes incest has been found to be a devastating global problem associated with numerous adverse outcomes (Wherry, Corson, & Hunsaker 2013). Child Sexual Abuse is a significant predictor for the development of posttraumatic stress (Copeland, Keeler, Angold, & Costello, 2007). For a person to be diagnosed with PTSD using DSV-V the person must have "experienced, witnessed or been confronted with an event or series of events that involved actual or threatened death or serious injury, or danger to the physical integrity of self or others" (APA, 2000, p427). Other Post Trauma Stress Disorder manifestations entail withdrawal, frightening thoughts and memories or flashbacks of the ordeal (DSM-V).

Krueger R. F., et al (2012) argued that childhood abuse or maltreatment disrupts the smooth growth of mental health and predisposes the child to a myriad of psychological disorders that range from - mood, anxiety, disruptive behavior disorders, antisocial behavior, and psychosis. Therefore, the study focused on child survivors aged 9-15 years based on their vulnerability. But when it comes to diagnosing post

trauma stress, sexually abused children display a wide variety of outcomes, making it imperative for care providers to carefully assess the effects of the abuse in order to determine the best course of treatment (Kisielb & Lyons, 2001; Maniglio, 2009; Ullman, 2007). A study that takes an inventory of symptoms associated with incest Post Trauma Stress Disorder (PTSD) would be helpful to inform psychological assessments and treatment path of PTSD in children survivors of incest. PTSD is an anxiety disorder that can develop after exposure to one or more traumatic events that caused great physical and psychological harm. The condition develops following some stressful events and consequences of child sexual abuse that also includes incest in children may include psychiatric disorders, such as post-traumatic stress disorder (PTSD), dissociative disorders, major depressive disorder, and anxiety disorders (Ruggiero, McLeer, & Dixon, 2000). Sexual abuse by a family member is a form of incest, and can result in more serious and long-term psychological trauma, especially in the case of parental incest (Langevinet al.2000). Child sexual abuse can result in both short-term and long-term harm, including psychopathology in later life (Nelson, 2002 & Dinwiddie, 2000). According to Wisdom et al.,(2007) incest can lead to psychological, emotional, physical harm and social effects including depression, while in a study by Arnow (2004) post-traumatic stress disorder was found to be as a result of child sexual abuse.

Other findings by Levitanet al.(2003) showed that children who have experienced incest trauma develop anxiety eating disorders, poor self-esteem, dissociative and anxiety disorders; general psychological distress and disorders such as somatization, neurosis, and chronic pain. This negatively impacts on the child with other social challenges such as sexualized behavior, school/learning problems; and behavior problems including substance abuse. Additionally, psychiatric disorders, such as post-traumatic stress disorder (PTSD), dissociative disorders, major depressive disorder, and anxiety disorders (Ruggiero, McLeer, & Dixon, 2000), along with interpersonal problems and re-victimization (Finkelhor, Ormrod, & Turner, 2007) are commonly reported. Other stressors may include intrusive memories or re-experiencing the traumatic event as witnessed in children through repetitive themes of re-enactment of the trauma in play behaviors, hyper arousal, and avoidance of stimuli associated with the trauma (Hunter, 2006). Courtois (2010) posited that when it comes to incest, the assumption is that family is a safe place and that danger is most likely outside the family grouping. And for that reason, the author observed little attention is paid to what family members do to fellow members and argued that the most dangerous people to children are their intimate family members and parents. Research by Thompson (2009) described the sibling relationship in regards to incest and its effects on the victim and the family as a whole. The study noted that blaming plays a part in the reactions to incest disclosure by the family, and this affects the health and wellbeing of the victim. Johnson (2004) noted that child

sexual abuse affects 2-62 percent of females and 3-16 percent of males as victims in America. On the global scale, the US led the world in the reported number of sexual offences at 89,000 incidents in 2008 followed by the UK with 13,093 cases while Zimbabwe with 3,186 sexual abuse cases was the highest in Africa. Kenya led in East Africa with 935 cases reported in 2008 (UNODC, 2009).

In East Africa, Kenya leads in incest with 29.9 percent, followed by Uganda 24.6 percent, and at Tanzania 18 percent (UNICEF 2006). Therefore, incest is not just a Kenyan problem. The Constitution of Kenya (2010) is explicit about the protection of children against sexual exploitation. In Kenya, incest is disallowed and is punishable by five years in prison or life imprisonment for sex with a minor (Sexual Offences Act of 2006). CRADLE (2007) ascertained that incest accounts for 74.9 percent of abuse in girls from urban areas; whereby out of all the perpetrators, 40 percent are fathers and 23 percent are other relatives This is consistent with the findings of Courtois (2010) who argued that when it comes to incest, the assumption is that family is a safe place and that danger is most likely outside the family grouping. The Child line Kenya (2006-2016) report indicates that since the launch of a reporting line, the cases reported related to abuse has been as follows: Child neglect-13,878, sexual abuse-7,832, physical abuse 7,317, child labour-3,123, emotional Abuse-1,025 and Child Trafficking and Abduction-528. This indicates that child sexual abuse is most prevalent.

II. METHODOLOGY

The study adopted a descriptive research design. The target population comprised of children survivors of incest, parents, and caregivers at Mama Lucy Kibaki Hospital (MLKH). A sample of 42 participants were selected to participate in the study, comprising of 20 children survivors of incest, 20 parents of the survivors, and 2 caregivers at MLKH.

The sampled participants were screened for PTSD using the Trauma Symptoms Checklist for Young Children TSCYC before being picked to respond to the questionnaire. Purposive and simple random sampling, as described by Kombo and Tromp (2006), was applied to select children who were between 9-15 years and had undergone a child abuse of incest, the 20 parents of the selected survivors and the two caregivers of MLKH. The selected parents and the hospital caregivers signed consent on behalf of the children since they were all under 18 years.

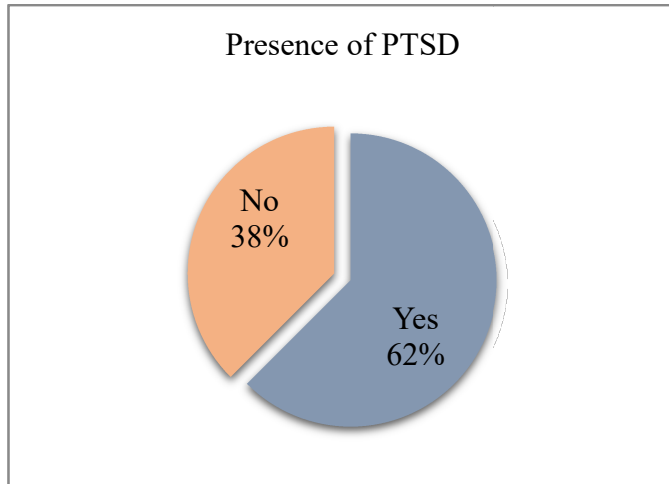
Data was collected using questionnaires, FGDs and observation. Demographic information obtained included; age, gender, composition of the home, level of school attended by the child, parental marital status, and social setting, which helped in establishing factors that determine the vulnerability of the child to developing PTSD. The PTSD severity frequency was computed using the various categories of prevalence of PSTD and severity were computed in frequency table. A binominal test was also applied in

estimating PTSD prevalence among the 42 screened respondents.

III. RESULTS

Prevalence levels of PTSD in child survivors of incest.

PTSD prevalence



Source : Author (2018)

The above figure shows that 62% of the incest survivors had symptoms that met the PTSD criteria whereas 38% of them did not have signs that they had developed PTSD. The research assistants (psychologists at MLKH) took the respondents through the TSCYC instrument. The responses were marked in the TSCYC answer sheet as required. After that the answers were entered in the TSCYC scoring work sheet. PTSD was diagnosed in those who met the full criteria outlined in the PTSD diagnosis work sheet. This is consistent with findings which established that the prevalence rates of PTSD among children who have been exposed to sexual trauma are highly variable, but the most frequent estimates range from 40 to 60% (Davis & Siegel, 2000). The 32% who did not develop PTSD possessed resiliency; which is the ability to return to prior functioning (Malchiodi, Steele, & Kuban, 2008). Some of the resilience factors include: good health, personality factors such as a positive disposition, active coping style, good social skills, internal locus of control, history of adequate development, hobbies and interests, and good peer relationships. (Davies, 2011).

IV. RECOMMENDATIONS

The study made the following recommendations:

- (i) Given the prevalence of PTSD children survivors of incest need to be examined for PTSD regardless of their social demographic profile.
- (ii) Health workers should also be sensitized on the need of screening ,treatment and management of PTSD cases as a result of incest
- (iii) There's need to create awareness regarding the high PTSD prevalence across the spectrum of health care professionals who care for child survivors of incest.
- (iv) Future studies on analysis of PTSD among sexually abused children need to be conducted. It should include resiliency factors among child survivors of incest as one of its objectives.

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Appendix I: Questionnaire for survivors

QUESTIONNAIRE FOR SURVIVORS

Code No:

SEMI STRUCTURED INTERVIEW SCHEDULES

INSTRUCTIONS:

- 1. Kindly respond to all questions
- 2. The interviews schedule consists of 4 sections
- 3. Mark with an ``X`` where relevant

NB: All information will be kept confidential

SECTION A: DEMOGRAPHICS

- 1. Gender a. Male () b. Female ()
- 2. Level of Education
 - a. Primary () b. Secondary () c. College () d. University ()
- 3. Length of stay in(*MukurukwaNjenga, Kwa Reuben, Kayole, Hurumaetc*)
 - (i) 1-2 years () (ii) 2-4 years ()
 - (iii) 1-2 years () (iv) Above 6years ()
- 4. Are your Parents / Caregiver? Married (), Separated (), Cohabiting (), Divorced ()

B. SEXUAL ASSAULT PROFILE

- 1. How old were you when the incest happened?
.....
- (a) Was the incident reported to the authority and what happened?
.....
- 2 a) Has any of your siblings / parents or caregiver gone through a similar experience and was disclosure made to anyone?
.....
- 3 On which date(s) did the assault happen to you? D:..... M:..... Y:.....
- 4 Where did the assault happen?
.....
- 5. Is the perpetrator known to you? i. Yes () ii. No. ()
If yes what is your relationship with the perpetrator
Stranger ()
Acquaintance (Neighbor, Boyfriend, Classmate ()
Non-parental caregiver in position of trust e.g. relative baby sitter ()
Biological parent ()
Non biological parent/caregiver (e.g. step or foster parent) ()
Other(s) Specify.....
- 6 What acts did the perpetrator do?

Vaginal /anal Penetration ()

Touching the genitals ()

Non genitals contact ()

d. Exhibitionism (removed all his cloths) ()

e. Other(s) specify

7 . How often did the abusive incidents happen?

.....

8. What injuries did you experienced (if any)?

.....

9. Do you blame yourself for this abuse? No (), Partly (), Fully (), Not Sure ()

10. Did you report the incidence to your parent/caregiver and how did she/he react?

.....

11. Did you visit a medical facility? Please explain the kind of services provided

.....

12. Which are some of the emotional, psychological or physical challenges that made you visit the hospital?

.....

13. Are you receiving any kind of support?

.....

Appendix II: Questionnaire for parents /Caregivers

QUESTIONNAIRE FOR PARENTS/CAREGIVERS: INTERVIEW SCHEDULES

INSTRUCTIONS:

Code No:

1. Kindly respond to all questions

2. The interviews schedule consists of 2 sections

3. Mark with an ``X`` where relevant

NB: All information will be kept confidential

SECTION A: DEMOGRAPHICS

1. Gender: a. Male () b. Female ()

2. Marital Status a. Single () b. Married () c. Separated () d. Divorced ()

3. Level of Education a . Primary b. Secondary c. College d. University

SECTION B: OBJECTIVE QUESTIONS

1. INCEST PREVALENCE

1. Do you know of father/ daughter relationships that go beyond normal parent –child bond ?

.....

2. Who do you think is to blame for the incest?

a. Father () b. Mother () c. Victim/survivor () b. Law enforcers () Others

3. In your view, what do you think are the causes of incest?
.....

2.IMPACT OF INCEST

1. What is your relationship to the survivor?
.....

2. How did you know of the incident?.....

3. Since the incident have you observed unusual behavior? Please explain
.....

4. In your view, has the child overcome the incest trauma?.....

5. What are your own views on incest and its effect on abused children?.....

Appendix III: Questionnaire for Informants

QUESTIONNAIRE FOR INFORMANTS: INTERVIEW SCHEDULES

INSTRUCTIONS:

Code No:

- 1. Kindly respond to all questions
- 2. The interviews schedule consists of 2 sections
- 3. Mark with an ``X`` where relevant

NB: All information will be kept confidential

SECTION A: DEMOGRAPHICS

- 1. Gender a. Male () b. Female ()
- 2. Level of Education a. Primary () b. Secondary () c. College () d. University ()
- 3. Length of stay in (*Mukuru Kwa Njenga, Kwa Reuben, Kayole, Hurumaetc*)
(i) 1-2 years () (ii) 2-4 years () (iii) 1-2 years () (iv) Above 6 years ()
- 4. What is your role and how does it applies to children rights and protection ?
.....

SECTION B: OBJECTIVE QUESTIONS

1. INCEST PREVALENCE

- 1.(a) In your opinion, what causes incest
- (b) Is incest reported in your area?
- 2. How has incest affected survivors of incest aged 9-15 years?.....
- 3. Which solutions do you think of that can reduce incest?
.....
- 4. Who do you think is to blame for the incest?
a. Father b. Mother c. Victim d. Law enforcers

Clarify

- 5. In which age bracket are perpetrators most common ?
Under 30 (), In between 30 to 45 (), In between 45 and above ()

- 6. What is the impact of incest on the physical wellbeing of the survivors?
.....
- 7. Are perpetrators brought to you or the Police?
.....
- 8. In your opinion, what is needed to provide psycho social support to the survivors?
.....

Appendix IV: Questionnaire for Focus Group Discussions

QUESTIONNAIRE FOR FOCUS GROUP DISCUSSION: INTERVIEW SCHEDULES

INSTRUCTIONS:

- 1. Kindly respond to all questions
- 2. The interviews schedule consists of 2 sections
- 3. Mark with an ``X`` where relevant

NB: All information will be kept confidential

SECTION A: DEMOGRAPHICS

- 1. Gender a. Male () b. Female ()
- 2. Level of Education a. Primary () b. Secondary () c. College () d. University ()
- 3. Length of stay in(*MukurukwaNjenga, Kwa Reuben, Kayole, Hurumaetc*)
(i) 1-2 years () (ii) 2-4 years () (iii) 1-2 years () (iv) Above 6 years ()

SECTION B: OBJECTIVE QUESTIONS

1. INCEST PREVALENCE

1.(a) In your opinion, what causes incest?
.....

(b) How often is incest reported in your area?
.....

2. How has incest affected survivors of incest aged 9-15 years?
.....

3. Who do you think is to blame for the incest?
a. Father () b. Mother () c. Victim () b. Law enforcers ()

Clarify

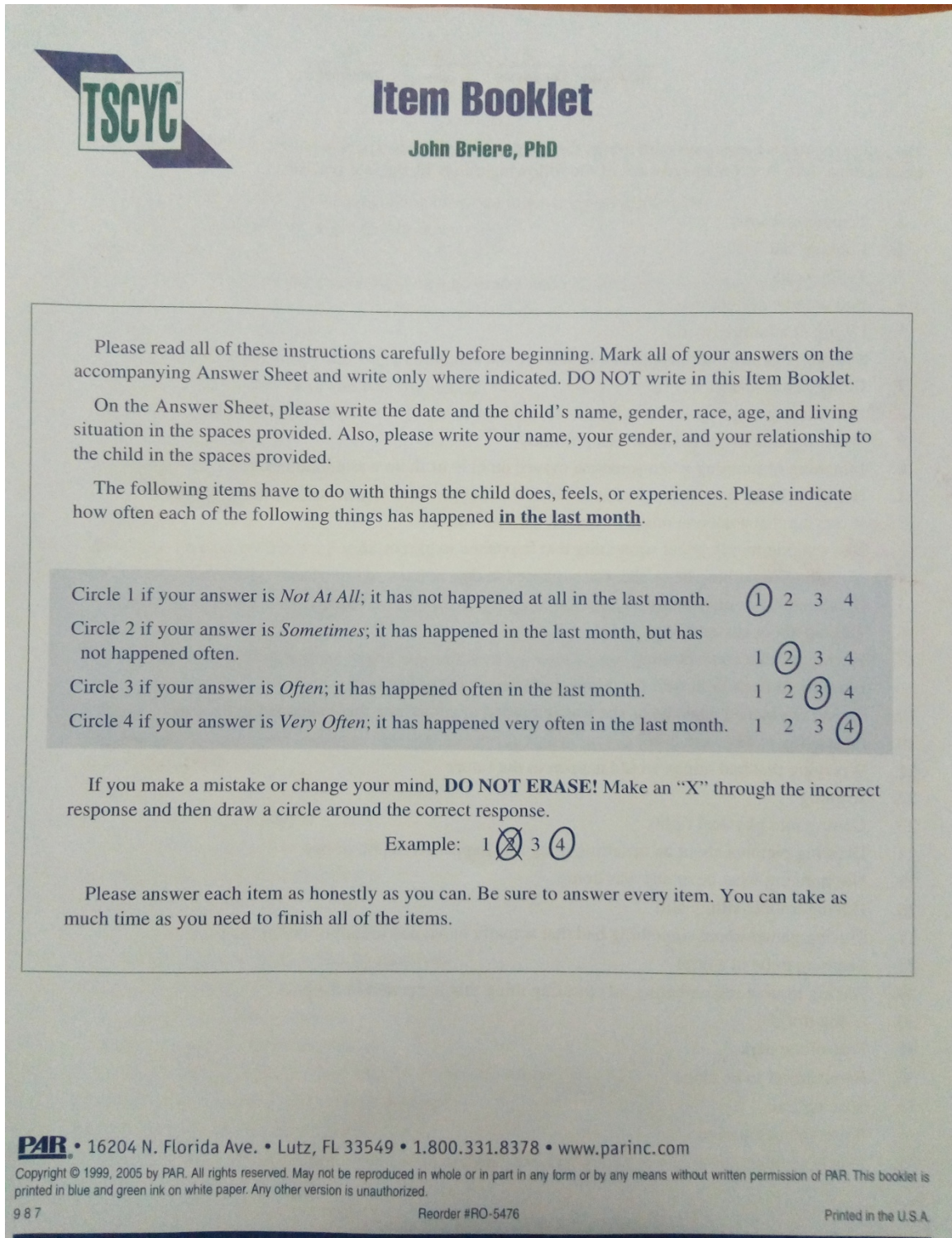
4. In which age bracket are perpetrators common ? Under 30 () ; 30 to 45 () ; 45 and above ()

5. What would you say is the impact of incest on the physical wellbeing of the survivors?.....

6. In your opinion, what is needed to encourage survivors and caregivers to come forward?.....

7. In your view how can the wider society eradicate the problem of incest?.....

Appendix V: TSCYC TOOL
Trauma Symptom Checklist for Young Children



TSCYC

Item Booklet

John Briere, PhD

Please read all of these instructions carefully before beginning. Mark all of your answers on the accompanying Answer Sheet and write only where indicated. **DO NOT** write in this Item Booklet.

On the Answer Sheet, please write the date and the child's name, gender, race, age, and living situation in the spaces provided. Also, please write your name, your gender, and your relationship to the child in the spaces provided.

The following items have to do with things the child does, feels, or experiences. Please indicate how often each of the following things has happened **in the last month**.

Circle 1 if your answer is <i>Not At All</i> ; it has not happened at all in the last month.	① 2 3 4
Circle 2 if your answer is <i>Sometimes</i> ; it has happened in the last month, but has not happened often.	1 ② 3 4
Circle 3 if your answer is <i>Often</i> ; it has happened often in the last month.	1 2 ③ 4
Circle 4 if your answer is <i>Very Often</i> ; it has happened very often in the last month.	1 2 3 ④

If you make a mistake or change your mind, **DO NOT ERASE!** Make an "X" through the incorrect response and then draw a circle around the correct response.

Example: 1 ~~2~~ 3 ④

Please answer each item as honestly as you can. Be sure to answer every item. You can take as much time as you need to finish all of the items.

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1 2 3 4
Not At All Sometimes Often Very Often

The following items have to do with things the child does, feels, or experiences. Please indicate how often he or she has done, felt, or experienced each of the following things **in the last month**.

1. Temper tantrums
2. Looking sad
3. Telling a lie
4. Bad dreams or nightmares
5. Living in a fantasy world
6. Seeming to know more about sex than he or she should
7. Being easily scared
8. Not wanting to go somewhere that reminded him or her of a bad thing from the past
9. Worrying that his or her food was poisoned
10. Flinching or jumping when someone moved quickly or there was a loud noise
11. Being bothered by memories of something that happened to him or her
12. Worrying that someone might be sexual with him or her
13. Not wanting to talk about something that happened to him or her
14. Not doing something he or she was supposed to do
15. Breaking things on purpose
16. Talking about sexual things
17. Having trouble concentrating
18. Blaming himself or herself for things that weren't his or her fault
19. Acting frightened when he or she was reminded of something that happened in the past
20. Pretending to have sex
21. Worrying that bad things would happen in the future
22. Arguing
23. Getting into physical fights
24. Drawing pictures about an upsetting thing that happened to him or her
25. Not noticing what he or she was doing
26. Having trouble sitting still
27. Playing games about something bad that actually happened to him or her in the past
28. Seeming to be in a daze
29. Having trouble remembering an upsetting thing that happened in the past
30. Using drugs
31. Fear of the dark
32. Being afraid to be alone
33. Spacing out
34. Being too aggressive
35. Touching other children's or adults' private parts (under or over clothes)

1 2 3 4
Not At All Sometimes Often Very Often

Please indicate how often the child has done, felt, or experienced each of the following things **in the last month**.

36. Suddenly seeing, feeling, or hearing something bad that happened in the past
37. Hearing voices telling him or her to hurt someone
38. Staring off into space
39. Changing the subject or not answering when he or she was asked about a bad thing that happened to him or her
40. Having a nervous breakdown
41. Not laughing or being happy like other children
42. Crying at night because he or she was frightened
43. Hitting adults (including parents)
44. Being frightened of men
45. Not being able to pay attention
46. Seeming to be a million miles away
47. Being easily startled
48. Watching out everywhere for possible danger
49. No longer doing things that he or she used to enjoy
50. Becoming frightened or disturbed when something sexual was mentioned or seen
51. Not sleeping for two or more days
52. Not paying attention because he or she was in his or her own world
53. Making mistakes
54. Crying for no obvious reason
55. Not wanting to be around someone who did something bad to him or her or reminded him or her of something bad
56. Being tense
57. Worrying about other people's safety
58. Becoming very angry over a little thing
59. Drawing pictures about sexual things
60. Pulling his or her hair out
61. Calling himself or herself bad, stupid, or ugly
62. Throwing things at friends or family members
63. Getting upset about something in the past
64. Temporary blindness or paralysis
65. Getting upset about something sexual
66. Not going to bed at night the first time he or she was asked
67. Fear that he or she would be killed by someone
68. Saying that nobody liked him or her
69. Crying when he or she was reminded of something from the past

<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Not At All	Sometimes	Often	Very Often

Please indicate how often the child has done, felt, or experienced each of the following things in the last month.

70. Saying that something bad didn't happen to him or her even though it did happen
71. Saying he or she wanted to die or be killed
72. Acting as if he or she didn't have any feelings about something bad that happened to him or her
73. Whining
74. Not sleeping well
75. Worrying about sexual things
76. Being frightened by things that didn't used to scare him or her
77. Hallucinating
78. Acting like he or she was in a trance
79. Forgetting his or her own name
80. Getting upset when he or she was reminded of something bad that happened
81. Avoiding things that reminded him or her of a bad thing that had happened in the past
82. Acting jumpy
83. Making a mess
84. Acting sad or depressed
85. Being so absent-minded that he or she didn't notice what was going on around him or her
86. Not wanting to eat certain foods
87. Yelling at family, friends, or teachers
88. Not playing because he or she was depressed
89. Being disobedient
90. Intentionally hurting other children or family members

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TSCYC
Answer Sheet
 John Briere, PhD

Date: ____/____/____

Child's name: _____ Child's gender: Male Female Child's race: _____

Child's age: _____ Child's living situation: Home Residential center Other (describe) _____

Rater's name: _____ Rater's gender: Male Female

Rater's relationship to child: Biological parent Adoptive parent Foster parent Other legal guardian
 Residential childcare worker Other (describe) _____

1. Does this child live with you? Yes No If yes, how long has he/she lived with you? _____ years _____ months

2. On average, how many hours do you spend in the same place (for example, at home) with him/her each week, not counting when he/she is asleep?
 0-1 hr. 2-5 hrs. 6-10 hrs. 11-20 hrs. 21-40 hrs. 41-60 hrs. Over 60 hrs.

Fill in the information above. Follow the instructions in the TSCYC Item Booklet and enter your ratings on this sheet. Indicate your ratings by circling the appropriate number for each item.

	1				2				3				4											
	Not At All				Sometimes				Often				Very Often											
1	1	2	3	4	19	1	2	3	4	37	1	2	3	4	55	1	2	3	4	73	1	2	3	4
2	1	2	3	4	20	1	2	3	4	38	1	2	3	4	56	1	2	3	4	74	1	2	3	4
3	1	2	3	4	21	1	2	3	4	39	1	2	3	4	57	1	2	3	4	75	1	2	3	4
4	1	2	3	4	22	1	2	3	4	40	1	2	3	4	58	1	2	3	4	76	1	2	3	4
5	1	2	3	4	23	1	2	3	4	41	1	2	3	4	59	1	2	3	4	77	1	2	3	4
6	1	2	3	4	24	1	2	3	4	42	1	2	3	4	60	1	2	3	4	78	1	2	3	4
7	1	2	3	4	25	1	2	3	4	43	1	2	3	4	61	1	2	3	4	79	1	2	3	4
8	1	2	3	4	26	1	2	3	4	44	1	2	3	4	62	1	2	3	4	80	1	2	3	4
9	1	2	3	4	27	1	2	3	4	45	1	2	3	4	63	1	2	3	4	81	1	2	3	4
10	1	2	3	4	28	1	2	3	4	46	1	2	3	4	64	1	2	3	4	82	1	2	3	4
11	1	2	3	4	29	1	2	3	4	47	1	2	3	4	65	1	2	3	4	83	1	2	3	4
12	1	2	3	4	30	1	2	3	4	48	1	2	3	4	66	1	2	3	4	84	1	2	3	4
13	1	2	3	4	31	1	2	3	4	49	1	2	3	4	67	1	2	3	4	85	1	2	3	4
14	1	2	3	4	32	1	2	3	4	50	1	2	3	4	68	1	2	3	4	86	1	2	3	4
15	1	2	3	4	33	1	2	3	4	51	1	2	3	4	69	1	2	3	4	87	1	2	3	4
16	1	2	3	4	34	1	2	3	4	52	1	2	3	4	70	1	2	3	4	88	1	2	3	4
17	1	2	3	4	35	1	2	3	4	53	1	2	3	4	71	1	2	3	4	89	1	2	3	4
18	1	2	3	4	36	1	2	3	4	54	1	2	3	4	72	1	2	3	4	90	1	2	3	4

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Appendix VI: TSYC Kiswahili Version

1. Kuna wakati unazusha.
2. Kuna wakati unaskia kuwa na huzuni
3. Kuna wakati unaskia kudanganya
4. Kuna wakati unaota ndoto Mbaya
5. Kuna wakati unajiskia uko kwa dunia ingine
6. Kuna wakati unajipata unajua mengi kuhusu ngono
7. Kuna wakati unajiskia kuogopa Kwa urahisi
8. Kuna wakati hutaki kwenda pahali penye patakukumbusha mambo mbaya ya zamani
9. Kuna wakati unaskia kwamba chakula Chako kimewekwa sumu
10. Kuna wakati unashituka mtu akipita haraka ama ukiskia Sauti kubwa
11. Kuna wakati unajiskia kusumbuliwa na fikra za vitu yaliyo kufanyikia
12. Kuna wakati unajiskia unaogopa Mtu anaeza fanya ngono na wewe
13. Kuna wakati unajiskia hutaki kuongea kuhusu mambo yaliyo kufanyikia
14. Kuna wakati unajipata hutaki kufanya kitu unapaswa ufanye
15. Kuna wakati unajipata unavunja vitu Kwa umaksudi
16. Kuna wakati unaongea kuhusu vitu vya ngono
17. Kuna wakati unashindwa kuwa makini
18. Kuna wakati unajilaumu kwa mambo yenye sio kupenda kwako
19. Kuna wakati unakuwa na uoga ukikumbushwa mambo yaliyo tendeka zamani
20. Kuna wakati unajifanya kufanya ngono
21. Kuna wakati unahofia mambo Mbaya yatafanyika miaka zijazo
22. Kuna wakati unajipata ukigombana
23. Kuna wakati unajipata ukipigana
24. Kuna wakati unajipata ukichora picha kuhusu kitu kibaya kilitendeka kwako
25. Kuna wakati unajikuta hajui Chenye unafanya
26. Kuna wakati huwezi kuketi ukatulia
27. Kuna wakati unacheza michezo yanayo husisha Chenye kilikufanyikia
28. Kuna wakati unajipata umezubaa
29. Kuna wakati unajipata unakumbuka mambo mabaya yaliyo kufanyikia
30. Kuna wakati unajipata unatumia madawa ya kulevya
31. Kuogopa Giza
32. Kuogopa kukuwa peke yako.
33. Kutotaka wengine wakukaribie.
34. Kupenda kupigana.
35. Kuguza dudu au susu ya watoto au watu wakubwa.
36. Gafla kuona, kuhisi au kusikia kitu kibaya chenye kilitendeka zamani.

37. Kusikia sauti zikikuambia uumize MTU mwingine.
38. Kuzubaa.
39. Kubadilisha vyenye umeulizwa ama kukosa kujibu wakati umeulizwa kuhusu kitu kibaya kilichotendeka.
40. Kutocheka au kutofurahia kama watoto wengine.
42. Kulia usiku kwa sababu ya kuogopa.
43. Kugonga/kuchapa watu wakubwa mpaka wazazi.
44. Kuogopa wanaume.
45. Kushindwa kuwa makini.
46. Kuona ni kama uko mbali.
47. Kushtuka kwa urahisi.
48. Kukuwa makini kila mahali kama kuna hatari.
49. Kutofanya vitu ulikuwa ukifurahia mbeleni.
50. Kuogopa ama kusumbuka mawazo kitu yenye inahusiana na dudu au susu ikitajwa ama kuonwa.
51. Kuna wakati unashindwa Kulala kwa Siku Mbili au zaidi
52. Kuna wakati unashindwa kuwa makini kwasababu uko Kwa dunia Yako
53. Kuna wakati unajipata ukifanya Makosa
54. Kuna wakati unalia bila Sababu
55. Kuna wakati hutaki kuwa karibu na mtu aliyekufanyia jambo baya ama anayekukumbusha mambo mbaya yaliyo kufanyikia
56. Kuna wakati unajiskia kuogopa na kutetemeka
57. Kuna wakati unajipata unahofia usalama wa wengine
58. Kuna wakati unajipata unakasirishwa na mambo Madogo
59. Kuna wakati unajipata ukichora picha za ngono
60. Kuna wakati unavuta nywele ovyo ovyo
61. Kujiita mbaya/mjinga/supra mbaya
62. Kutupa vitu Kwa jamii/marafiki
63. Kutokutulia Jul ya jambo
64. Kutokuona Kwa muda mfupi/ kufa ganzi
65. Kuogopa ukifikiria kuingiza dude kwa susu
66. kuogopa Kulala usiku baada ya kitendo kufanyika
67. kuogopa utauawa na mtu
68. Kusema haupendwi na watu
69. Kulia ukikumbushwa kitu kilichopita
70. kusema kitu mbaya hakikufanyika kumbe kilifanyika
71. Kusema unataka kujiua ama kuuawa
72. Kuhisi kwamba jambo mbaya haikutendeka
73. Kuna wakati unajipata ukilalamika ovyo ovyo
74. kuna wakati unapata taabu Kulala .

75. Kutopata usingizi vizuri
- 76 .Kua na mawaza kuhusiana na mambo ya ngono
77. Kuona au kuskia vitu visivyokua
78. Acting like he or she was in a trance-
79. Kusahau majina yako kamili
80. Kukasirika ovyo ovyo unapokumbushwa kitu kilichofanyika
81. Kulenga vitu vinavyokukumbusha vitu mbaya vilivyofanyika hapo awali
82. Kutokua mtulivu
83. Kutokua makini
84. Kuhuzunika
85. being so absent _minded that he or she didn't choice what was going on around him or her-
86. Kutotaka vyakula fulani
- 87 Kufokea familia,marafiki na walimu
88. Kutocheza kwa sababu ya manjonzi na huzuni
89. Kutoheshimu/kutofuata sheria
90. Kuumiza watoto na familia kwa kujua