

Prevention Of Sexual Abuse In Children: What Do Parents Know

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Abstract - Every child is a divine appointment. Maltreatment of children has been with mankind always, from the beginning of recorded history. Child sexual abuse or child molestation is a form of child abuse in which an adult or older adolescent uses a child for sexual stimulation. Parents need to play an active role in teaching their children what appropriate sexual behaviour is and when to say “no” if someone tries to touch sexual parts of their bodies or touch them in any way that makes them feel uncomfortable. Parents should therefore have enough knowledge regarding the prevention of child sexual abuse.

Objectives of study was to assess the knowledge regarding prevention of child sexual abuse among parents and to determine the association between the level of knowledge and selected socio-demographic variables.

Methods: A descriptive survey approach and non-experimental descriptive research design was used for the study.

Result: Overall assessment of knowledge indicated that 58% of parents had moderately adequate knowledge, and 35% had inadequate knowledge. The mean knowledge score of parents regarding prevention of child sexual abuse was 12.87 at 0.05 level of significance. No significant association was found between level of knowledge and demographic variables, except for gender of children, relation with the child and occupation.

Interpretation and conclusion: The Study concludes that majority of the parents had moderately adequate knowledge regarding prevention of child sexual abuse.

Keywords - Child Abuse, Knowledge, Parents, Caretakers,

I. INTRODUCTION

God created human beings with many dimensions, one of which is their unique sexual nature. Sexuality is diverse, and deeply personal. Understanding sexuality is about the sexual feeling and feeling attraction towards other people.¹

Child sexual abuse can be defined as any behaviour perceived to be of a sexual nature which is unwanted and takes place without consent or understanding. The legal definition of sexual abuse is an act of a person—adult or child—who forces, coerces or threatens a child to have any form of sexual contact or to engage in any type of sexual activity at the perpetrator’s direction. Yet all offences that involve sexually touching a child, as well as non-touching offenses and sexual exploitation, are just as harmful and devastating to a child’s well-being.²

World Health Organization (WHO) report in 2011 study estimates that 18% of girls, and 8% of boys worldwide have experienced sexual abuse have experienced forced sexual intercourse or other forms of sexual abuse involving physical contact. But many statistics say that in 85 to 90 per cent of child sexual abuse cases, the child knows and trusts the abuser.³

Touching sexual abuse include fondling, making a child touch an adult’s sexual organs, penetrating a child’s vagina or anus no matter how slight with a penis or any object that doesn’t have a valid medical purpose. Non-touching sexual offenses include engaging in indecent exposure or exhibitionism, exposing children to pornographic material, deliberately exposing a child to the act of sexual intercourse, masturbating in front of a child. Sexual exploitation can include engaging a child or soliciting a child for the purposes of prostitution, and using a child to film, photograph or model pornography.⁴

The effects of child sexual abuse extend far beyond adolescent period. Sexual abuse robs children of their childhood and creates a loss of trust, feelings of guilt and self-abusive behaviour. It can lead to antisocial behaviour, depression, identity confusion, loss of self-esteem and other serious emotional problems. It can also

lead to difficulty with intimate relationships later in life. The sexual victimization of children is ethically and morally wrong.⁵

The first indicators of sexual abuse may not be physical, but rather behavioural changes or abnormalities. Unfortunately, because it can be so difficult to accept that sexual assault may be occurring, the adult may misinterpret the signals and feel that the child is merely being disobedient or insolent. Children who are sexually assaulted may exhibit behavioural changes, based on their age.⁴

More generalized psychological impacts of sexual abuse include withdrawal, depression, sleeping and eating disorders, self-mutilation, phobias, and psychosomatic symptoms such as stomach aches. The child may develop school problems such as frequent absence or a sudden drop in grades. Parents have to be encouraged to contact the local sexual assault intervention program or an experienced professional counsellor to discuss child's abuse and the symptoms which are seeing. They can decide if child will need counselling especially child that has experienced long-term sexual abuse will need counselling.⁶

A recent study showed that 95% of children with sexual behaviour problems were also victims of sexual abuse. Some of the most common danger signals include: a child showing sexual material to younger children, making obscene telephone calls, sharing alcohol or other drugs with younger children, exposing his or her genitals to younger children, forcing sex on another adolescent or child. It is important to remember, however, that some sexual behaviours and/or exploration is a part of a child's healthy sexual development.⁷

Parents should teach their children what appropriate sexual behaviour is and when to say "no" if someone tries to touch sexual parts of their bodies or touch them in any way that makes them feel uncomfortable. Also, observe children when they interact with others to see if they are hesitant or particularly uncomfortable around certain adults. It is critical to provide adequate supervision for children and only leave them in the care of individuals whom you consider safe.⁸

Healing from child sexual assault is possible. Impact of child sexual assault on each child may vary. A timely, proactive and appropriate response that is based on the strengths and resilience of each child in conjunction with the innate ability of the human spirit to prevail, does eventually lead to an optimally lived life.⁹

Parents have important roles that involve child rearing and long term care of children until they reach adulthood. If parents are having knowledge regarding child sexual abuse, they can detect the signs of child sexual abuse and can prevent its occurrence by educating the child. Based on the available facts, researcher has realized the increasing incidence of child sexual abuse, its serious long term effects in life and importance of knowledge among parents regarding prevention of child sexual abuse. Keeping this in view the researcher justified the need to assess the knowledge of parents regarding prevention of child sexual abuse.¹⁰

II. METHODOLOGY

In view of nature of the problem selected and objectives to be accomplished, **descriptive survey approach** was considered appropriate for the present study. Non experimental descriptive research design was selected for this study. Knowledge regarding prevention of child sexual abuse among parents was identified as study variable whereas Age in years, Number of children, Gender of child, Relation with child, Education status, Occupation, Monthly family income, Type of family and Any previous knowledge regarding prevention of child sexual abuse were considered as attribute variables. Data was collected from accessible population residing under Urban Primary Health centre. 100 Parents with children in the age group of 8-16 were selected as samples using non probability convenient sampling technique. Knowledge regarding child sexual abuse was assessed by pre validated structured knowledge questionnaire.

Data analysis

Frequency and percentage distribution was used for describing socio-demographic variables and level of knowledge. Mean, mean percentage, and standard deviation was used to describe knowledge. Chi-square test was used for identifying association between the level of knowledge and selected socio-demographic variable.

III. RESULTS

The data collected were analyzed according to the plan for data analysis, which included both descriptive and inferential statistics. The findings are organized and presented as per study objectives.

Data is organized and presented under the following sections:

Section A: Socio demographic variables: 50% of the subjects belongs to the age group of 25-34 years of age and 11% subjects found to be in the age group of 45-54 years. While considering the number of children,

majority 87% were having 1-2 children, and remaining 13% were having 3-4 children. With regard to the gender of children, 45.5% were males and 54.5% were females. Regarding the occupation of the subjects, 56% of the subjects were homemakers where as 06% were government employees. maximum number of the subjects 69% were from nuclear family, 29% where as 02% belonged to extended family. In relation to the previous knowledge of parents 65% did not have any knowledge regarding prevention of child sexual abuse whereas remaining 35% had got information from mass Media and internet.

Section B: Level of knowledge regarding prevention of child sexual abuse. 58% of the samples exhibited moderately adequate knowledge on prevention of child sexual abuse, and 07% had adequate knowledge. Overall mean level of knowledge is 12.87 and mean % 53.62 with the standard deviation of ± 3.68 .

Section C: Association between level of knowledge with selected socio demographic variables. The calculated χ^2 values were less than table value at level of significance $P \leq 0.05$ in terms of age, number of children, gender of children, education of parents, family income, type of family and previous knowledge regarding child sexual abuse. Therefore, null hypothesis stated as there is no significant association between the level of knowledge and selected socio demographic variables, was accepted in these areas. The calculated χ^2 value was more than table value at level of significance $P \leq 0.05$ in terms of gender of children, relation with the child, and occupation, hence the hypothesis stated as there is no significant association with the knowledge and selected socio demographic was rejected and restated as there is significant association between the level of knowledge and these selected socio-demographic variables.

IV. DISCUSSION

Overall knowledge scores of parents revealed that majority of the subjects 58% had moderately adequate knowledge regarding prevention of child sexual abuse, only 7% had adequate knowledge while remaining 35% had inadequate knowledge regarding prevention of child sexual abuse. The mean scores obtained for overall level of knowledge was 12.87 with standard deviation of ± 3.68 . This study finding is supported by a descriptive study done on Parental knowledge on child sexual abuse and interest in educating themselves and their children for primary prevention. Fifty-one mothers and 50 fathers of preschool and day-care center children were interviewed. Parents wanted to be the primary educators of their child, but demonstrated a lack of knowledge about important sexual abuse issues and planned to discuss only the least threatening topics.¹¹

Mothers and fathers obtained most of their information about sexual abuse from the media. One dependent variable, sex of parent, showed significant differences on sources of sexual abuse information. There were no significant differences based upon the sex of the child and no significant interaction effects between sex of parent and sex of child. Chi square analysis showed that the computed χ^2 values were less than table value at level of significance $P \leq 0.05$ in terms of selected socio demographic variables except for variables as Gender of children, Relation with the child and Occupation. Since there is no significant association found between level of knowledge and socio demographic variables, the null hypotheses H_{01} stated as there is no significant association between the level of knowledge and selected socio demographic variables is accepted except for Gender of children, Relation with the child and Occupation.

This study finding is supported by a study conducted in United States to investigate parental knowledge of symptoms of child sexual abuse (CSA), and to determine the factors associated with that knowledge. A total of 150 parents listed symptoms of child sexual abuse in the following areas: physical/medical, emotional, sexual behaviour, and behaviour towards others. Results suggest that, although most parents are familiar with some of the symptoms of child sexual abuse they are more likely to know about emotional or behavioural reactions which could be suggestive of many other life stressors. Parents with higher socioeconomic status listed more symptoms, but race and parenting experience were not significant factors. Study concludes the need to inform parents of more indicative physical or sexual symptoms, and to target parents of lower socioeconomic status background in awareness efforts.¹²

V. CONCLUSION

Among the parents of children between the age group of 8-16yrs, residing at urban community, it was found that the overall knowledge of the subjects with regard to prevention of child sexual abuse was found to be moderately adequate with mean score of 12.87 and standard deviation of ± 3.68 . With regard to the association between level of knowledge and socio demographic variables, except for gender of children, relation with the

child and occupation, no association was found to exist between level of knowledge and the socio demographic variables at a level of significance of $P \leq 0.05$

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