Knowledge and Attitude of Mothers regarding Prevention of Child Sexual Abuse

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Abstract

Introduction: Child sexual abuse is a form of child abuse in which an adult or older adolescent uses a child for sexual stimulation. Child sexual abuse can occur in a variety of settings, including home, school, or work (in places where child labor is common). The present study aims to assess the knowledge and attitude of mothers regarding prevention of child sexual abuse in a selected community of New Delhi, and to prepare and disseminate an information booklet on the prevention of child sexual abuse. The objectives of the study were: to assess the knowledge of mothers regarding prevention of child sexual abuse; to assess the attitude of mothers regarding prevention of child sexual abuse; and to prepare and disseminate an information booklet on the prevention of child sexual abuse.

Method: A quantitative approach with a descriptive survey design was adopted for the study to collect data from 50 mothers selected by purposive sampling technique. The study was conducted in an urban community of New Delhi. The tools used for data collection was structured knowledge questionnaire to assess knowledge and attitude scale to assess attitude of mothers regarding prevention of child sexual abuse.

Result: The analysis revealed that 90% of subjects had inadequate knowledge regarding child sexual abuse. However, 90% subjects had positive attitude regarding prevention of child sexual abuse.

Conclusion: Through this study, we conclude that majority of mothers had inadequate knowledge. Therefore, a public education program is needed for parents, with the ultimate aim of protecting children from preventable harm and trauma of sexual abuse. In order to create awareness, an information booklet was disseminated to mothers regarding prevention of child sexual abuse.

Keywords: Child sexual abuse, Knowledge, Attitude, Mothers

Introduction

“Child sexual abuse casts a shadow the length of a life time”

Herbert Ward

Child abuse is any action by another person – adult or child – that causes significant harm to a child. It can be physical, sexual or emotional, but can just as often be about lack of love, care and attention. We know that neglect, whatever form it takes, can be just as damaging to a child as physical abuse.

An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. It often

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happens over a period of time, rather than being a one-off event. And it can increasingly happen online.¹

There are four different types of child abuse:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect

**Physical Abuse**

Physical abuse occurs when a child has suffered, or is at risk of suffering, non-accidental physical trauma or injury.

**Sexual Abuse**

Sexual abuse occurs when an adult, stronger child or adolescent uses their power or authority to involve a child in sexual activity.

**Emotional Abuse**

Emotional abuse occurs when a child's social, emotional, cognitive or intellectual development is impaired or threatened. It can include emotional deprivation due to persistent:

**Neglect**

Neglect occurs when a child’s basic necessities of life are not met, and their health and development are affected.²

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. Forms of child sexual abuse include engaging in sexual activities with a child (whether by asking or pressuring, or by other means), indecent exposure (of the genitals, female nipples, etc.), child grooming, or using a child to produce child pornography.³

1999 WHO Consultation on Child Abuse Prevention stated that: “Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. This may include but is not limited to: the inducement or coercion of a child to engage in any unlawful sexual activity; — the exploitative use of a child in prostitution or other unlawful sexual practices; — the exploitative use of children in pornographic performance and materials”.⁴

**Child Sexual Abuse in India**

19% of the world’s children live in India. 42% of India’s total population is aged below 18 years.

Child protection has remained largely unaddressed.

- 53.22% children reported having faced one or more forms of sexual abuse.
- Andhra Pradesh, Assam, Bihar and Delhi reported the highest percentage of sexual abuse among both boys and girls.
- 21.90% child respondents were facing severe forms of sexual abuse and 50.76% other forms of sexual abuse.
- Out of the children respondents, 5.69% reported being sexually assaulted.
- Children in Assam, Andhra Pradesh, Bihar and Delhi reported the highest incidence of sexual assault.
- Children on street, children at work and children in institutional care reported the highest incidence of sexual assault.
- 50% abusers are persons known to the child or in a position of trust and responsibility.
- Most Children did not report the matter to anyone.⁵

In 2009,⁶ a metastudy from the University of Barcelona published in *Clinical Psychology Review*, “Prevalence of child sexual abuse in community and student samples: A meta-analysis,” analyzed 65 research studies across 22 countries to estimate an “overall international figure” for sexual abuse. It projected the highest prevalence rate of child sexual abuse geographically in Africa (34.4%). Europe showed the lowest prevalence rate (9.2%). America and Asia had prevalence rates between 10.1% and 23.9%.

**Materials and Methods**

The research approach selected for the study was quantitative approach with a descriptive survey design to assess the knowledge and attitude of mothers regarding prevention of child sexual abuse in a selected community of New Delhi, and to prepare and disseminate an information booklet on the prevention of child sexual abuse. Population comprised of mothers of a selected urban community of New Delhi.

50 mothers were determined by convenient sampling technique. The tool used for data collection was structured knowledge questionnaire to assess knowledge and rating scale to assess attitude regarding prevention of child sexual abuse. Structured knowledge questionnaire consisted of two sections. Section 1 comprised questions related to demographic profile and Section 2 contained knowledge related to child sexual abuse. Rating scale comprised of 10 items on attitude related to prevention of child sexual abuse. The data collection was done after formal administrative approval was obtained from the concerned
authority. The purpose of the study was explained to the samples and consent was taken. The participants were ensured confidentiality of information and the tool was administered and subjects were asked to fill the tool.

**Results**

Analysis and interpretation of data was done in accordance with the objectives laid down for the study.

**Table 1. Frequency and Percentage Distribution of Mothers as per Their Demographic Characteristics**

| S. No. | Demographic Variable                      | Frequency | Percentage |
|--------|------------------------------------------|-----------|------------|
| 1      | Age of Mother (in years)                 |           |            |
| 1      | 20−25                                    | 4         | 8          |
| 1      | 25−30                                    | 20        | 40         |
| 1      | 30−35                                    | 16        | 32         |
| 1      | 35−40                                    | 6         | 12         |
| 1      | >40                                      | 4         | 8          |
| 2      | Education                                |           |            |
| 2      | Primary                                  | 28        | 56         |
| 2      | Secondary                                | 13        | 26         |
| 2      | Graduate/Diploma                         | 5         | 10         |
| 2      | Postgraduate and above                   | 4         | 8          |
| 3      | Occupation                               |           |            |
| 3      | Housewife                                | 41        | 82         |
| 3      | Private job                              | 8         | 16         |
| 3      | Government job                           | 1         | 2          |
| 3      | Any other                                | 0         | 0          |
| 4      | Type of the Family                       |           |            |
| 4      | Joint family                             | 23        | 46         |
| 4      | Nuclear family                           | 26        | 52         |
| 4      | Extended family                          | 1         | 2          |
| 5      | Type of Community in which Residing      |           |            |
| 5      | Urban                                    | 33        | 66         |
| 5      | Rural                                    | 17        | 34         |
| 6      | Religion                                 |           |            |
| 6      | Hindus                                   | 12        | 24         |
| 6      | Muslims                                  | 38        | 76         |
| 6      | Sikhs                                    | -         | -          |
| 6      | Christians                               | -         | -          |
| 6      | Any Other                                | -         | -          |
| 7      | Source of Information                    |           |            |
| 7      | Family/Friends                           | 4         | 8          |
| 7      | Television/Newspaper/Magazines           | 27        | 54         |
| 7      | Health professional                      | 4         | 8          |
| 7      | Internet/Social media                    | 10        | 20         |
| 7      | Others                                   | 5         | 10         |

The data given in Table 1 encapsulates the demographic characteristics, i.e., age, education, occupation, type of family, type of community, religion, income, and source of information regarding child sexual abuse of mothers in the selected community.

Frequency and percentage was assessed for demographic characteristics of mothers which are as follows:

- Regarding the age of mothers, data revealed that out of 50 mothers 4 (8%) belonged to age group 20–25 years, 20 (40%) belonged to the age group 25–30 years, 16 (32%) belonged to age group 30–35 years, 6 (12%) belonged to age group 35–40 years, 4 (8%) were >40 years.
- Looking at their education, it was found that majority of subjects, i.e., 28 (56%) had primary education, 13 (26%) had secondary education, 5 (10%) were graduates and 4 (8%) were postgraduate and above.
When we look at the occupation, majority of the mothers (82%) were housewives, 16% of mothers were working in private sector while only 2% were working in government sector.

26 (52%) belonged to nuclear family, 23 (46%) lived in joint family and 1 (2%) belonged to extended family.

Majority 33 (66%) resided in urban community.

When we look at the religion, a vast majority (76%) of mothers were Muslims and rest were Hindus.

Major source of information regarding child sexual abuse was through television/newspapers/magazines.

| Total Score | Possible Range of Score | Obtained Range of Score | Mean | Median | Mode | Standard Deviation |
|-------------|-------------------------|-------------------------|------|--------|------|-------------------|
| 19          | 0-19                    | 10-19                   | 7.18 | 7      | 6    | 1.88              |

The data in Table 2 represents the mean, median, mode and standard deviation of knowledge scores.

### Table 3. Frequency and Percentage Distribution of Knowledge Scores of Mothers regarding Child Sexual Abuse

| Category of Knowledge | Frequency | Percentage |
|-----------------------|-----------|------------|
| Adequate              | 5         | 10         |
| Inadequate            | 45        | 90         |

![Figure 1. Pie Diagram Representing the Percentage Distribution of Knowledge Scores of Mothers regarding Child Sexual Abuse](image)

Data in Table 2 represents the mean, median, mode and standard deviation of attitude score of mothers regarding child sexual abuse.

### Table 5. Frequency and Percentage Distribution of Attitude Score of Mothers regarding Child Sexual Abuse

| Category of Attitude | Frequency | Percentage |
|----------------------|-----------|------------|
| Unfavorable          | 5         | 10         |
| Favorable            | 45        | 90         |
Discussion

The present study revealed that most of the mothers (90%) had inadequate knowledge regarding child sexual abuse. However, majority of them, i.e., 90% showed favorable attitude towards prevention of child sexual abuse. Moreover, none of the study subjects had knowledge score more than 50%.

The present study is similar to a study conducted by Fredrick et al. on the role of parents in preventing child sexual abuse in the community in low- and middle-income countries has not been adequately emphasized. The objective of this study was to assess parents' knowledge, attitudes and practices on child sexual abuse and its prevention in Shinyanga district, Tanzania, in order to strengthen child protection. This was a cross-sectional study conducted during July 2015. Multistage cluster sampling technique was employed to obtain study participants from a list of sampling frame. Parents with children below 18 years of age were randomly selected to form a study population. A quantitative technique using structured questions was used to assess parents' knowledge, attitude and practices about preventing child sexual abuse. Results: A total of 384 respondents were included in the study. The majority (95.6%) of respondents had high knowledge regarding prevention of child sexual abuse. Majority (98.7%) of the respondents had positive attitudes on preventing child sexual abuse. However, only about a quarter (27.3%) of respondents had good practices on protection and prevention of child sexual abuse. Knowledge and attitudes of parents on child sexual abuse prevention were poor. Therefore, a public education program is needed for parents, with the ultimate aim of protecting children from the preventable harm and trauma of sexual abuse in rural communities of Tanzania. Keywords: Child sexual abuse, knowledge, attitudes, practice, parents, Tanzania.

According to a study conducted by Mathoma et al. on knowledge and perceptions of parents regarding child sexual abuse in Botswana and Swaziland, it was found that in Botswana in 1998, there were 300 cases of child abuse reported, of which 33 were sexual abuse cases. The same year in Swaziland, >50% of child abuse cases were sexual abuse-related cases. In addition, the same year in Swaziland, >50% of sexual abuse case patients reporting for counseling were children younger than 21 years. Respondents of the study included 8 men (1 from Swaziland and 7 from Botswana) and 10 women (3 from Swaziland and 7 from Botswana) who were parents aged between 26 and 70 years; they were determined by way of purposive sampling. A focused interview guide with open-ended questions was used to collect data, and measures to ensure trustworthiness and ethical considerations were adhered to. Analysis of data was facilitated by categorization of themes and concepts and coding systems. The results of the study showed that the respondents acknowledged the prevalence of child sexual abuse in Botswana and Swaziland and further demonstrated their knowledge of the predisposing factors, perpetrators of the problem, and effects of sexual abuse on children. They placed major emphases on community involvement in fighting against the problem; appropriate education of children, parents, families, and community members about child sexual abuse; and improvement on the laws that protect children against sexual abuse to successfully curb the problem.

A survey was carried out by Trute et al. to assess professional attitudes regarding the sexual abuse of children: comparing police, child welfare and community mental health. They completed attitudinal items relating to professional response to child sexual abuse. An empirical scale was created which was comprised of three orthogonal factors, each with acceptable levels of internal consistency: 1) Beliefs in regard to the extensiveness and seriousness of the issue; 2) treatment versus punishment priority; and 3) view regarding identity of those who perpetrate...
child sexual abuse. Important gender differences were found across professional groupings in attitude toward sexual abuse. Greatest difference in attitude between service sectors was tied to emphasis placed on treatment versus punishment as a primary aspect of professional intervention. Significant differences were found between child welfare and police, the two service sectors most needing a coordinated approach during the “investigative phase” of professional intervention.

Hurtado et al.\textsuperscript{10} conducted a study to evaluate the effectiveness of a child sexual abuse (CSA) prevention exhibit at a children’s museum. The aim of this study was to evaluate the effectiveness of a child sexual abuse (CSA) prevention exhibit at a children’s museum. They asked 189 children to answer a questionnaire about CSA prevention before entering a museum exhibit on the subject and then asked 59 different children to answer the questionnaire after visiting the exhibit. Children’s knowledge scores on CSA prevention significantly improved after visiting the exhibit (P < .012). A museum exhibit that addresses CSA prevention is an effective way of communicating CSA prevention to children.

Buyi et al.\textsuperscript{11} conducted a school-based survey examining the CSA prevention, knowledge and self-protection skills in Chinese children with hearing loss. Fifty-one students (30 boys, 21 girls) from 10 to 16 years participated in the study. Children’s CSA prevention knowledge and self-protection skills were tested by using an anonymous self-administered questionnaire which was mainly designed based on previous Chinese CSA research questionnaires, the Personal Safety Questionnaire, and the ‘What If’ Situations Test (WIST). There were 10 questions assessing the knowledge of CSA but none of the children could correctly answer all and 70% of the students could not answer more than five questions correctly. Only three students got the maximum skills score. If sexual abuse occurs, about 52% of the children would report it to trusted adults and most of them would report it to their relatives. Girls received significantly higher scores than boys. Chinese children with hearing loss lack knowledge regarding child sexual abuse and the way to protect themselves. There is an urgent need to develop CSA prevention programs in the school for children with hearing loss in China. Parental training and parent-child interaction on CSA prevention should be developed and promoted as well.

Cromer and Goldsmith\textsuperscript{12} through their survey found child sexual abuse myths comprised of incorrect beliefs regarding sexual abuse, victims, and perpetrators. Relations among myth acceptance, responses to disclosure, legal decisions, and victims’ subsequent psychological and health outcomes underscore the importance of understanding child sexual abuse myths. Despite accurate knowledge regarding child sexual abuse among many professional and other individuals, child sexual abuse myths persist. A Google search produced 119 child sexual abuse myths, some with overlapping themes. Coders grouped myths into four categories: (a) minimizations or exaggerations of the extent of harm child sexual abuse poses, (b) denials of the extent of child sexual abuse, (c) diffusions of perpetrator blame, and (d) perpetrator stereotypes. This review provides available data regarding the prevalence for these myths, empirical research that refutes or confirms myth categories, and considerations of cultural contexts and implications.

**Conclusion**

Increased concern about high rates of child sexual abuse has led to the demand for more prevention programs, particularly those aimed at parents. Research on how parents manage and reduce the risk of child sexual abuse can help plan programs. Parents’ knowledge, attitudes and practices about preventing child sexual abuse should be assessed at a larger level and the result should be published on large scale. People need to be made aware of this prevailing evil in the society but not much is talked about it. The result of the present study shows that though the mothers had inadequate knowledge regarding child sexual abuse, but they had a positive attitude regarding prevention of child sexual abuse. Hence, their knowledge needs to be improved for which an information booklet was prepared to be given to mothers in the community. More and more awareness programs should be started at all levels so that we can prevent this evil completely. As children spend much of their time in school, teachers need to talk about appropriate and inappropriate touch, whether from an adult or another child. Individuals should accept personal responsibility for reducing acts of child abuse and neglect by providing support to each other and offering protection to all children within their family and their community.

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**Conflict of Interest:** None

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