

# The Modeling of Optimizing the Role of Mothers as Prevention of Sexual Violence Against Pre-School Children in Batusangkar West Sumatra Indonesia 2017

Meri Neherta<sup>1</sup>, Yonrizal Nurdin<sup>1</sup>

<sup>1</sup>Faculty of Nursing Andalas University, Padang Indonesia

## ABSTRACT

**Introduction:** sexual abuse cases against pre-school children are increasing every year in Indonesia, including Batusangkar. There is no model intervention can be used as an effort to prevent sexual abuse against pre-school children yet.

**Objective:** The purpose of this study was to establish the preventing model of sexual abuse prevention in pre-school age children in western Sumatra.

**Method:** qualitative and quantitative combination with non-equivalent control group design. The sample in this study is 180 pre school's mother (4-6 years old). the data analysis by using GLM Repeated Measure.

**Results:** the trials show that models can improve mother's knowledge and attitude to prevent sexual abuse against pre-school children with Multivariate test value  $P = 0.00$  p-value at factor Klp is 0.00.

**Conclusion:** a preventing sexual abuse model against pre-school age children (4-6 years) with "ICAS" mother smart mother and child survived have made. It is recommended that this model can be used in other areas in Indonesia as an effort to prevent sexual abuse against pre-school children.

**Keywords:** *mother, primary prevention, pre-school age children, sexual abuse, intervention*

## INTRODUCTION

Parents need to suspect if there are changes in behavior different from the usual <sup>(1)</sup>. for instance, children who had not wet the bed now become often wet their bed, sucking his thumb, daydreaming, or the weird walk pattern, when they don't want to clean their genital while taking a bath, they don't want to wear panties or frightened to see strangers etc <sup>(2)</sup>. Based on the characteristics child should get the right explanation of sexual knowledge, especially from the mother as the closest to the child <sup>(3)</sup>. Therefore, mothers need to have knowledge about the correct children's parenting pattern. The researcher feels it is necessary to have study intervention to mothers with pre-school children (4-6 years). the purpose of this study is to make an intervention model given a mother with pre-school children.

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### Corresponding Author:

Meri Neherta

Faculty of Nursing, Andalas University, Padang Indonesia

Email: merineherta@nrs.unand.ac.id

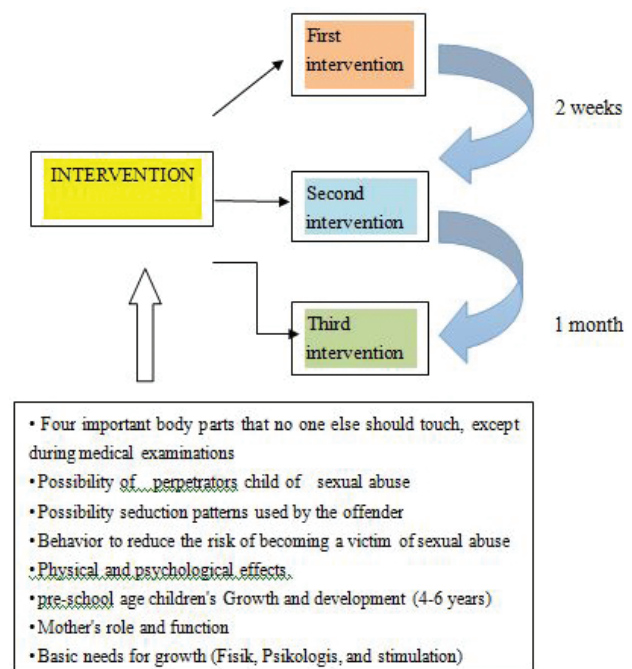
## METHOD

- This research was conducted using two approaches, qualitative and quantitative. The main research is quantitative with the quasi-experimental design of non-equivalent type control group design, which is a study using two subject groups. Measurements were performed before and after treatment using the control group.
- The population of this study is all pre-school females (4-6 years) in Batusangkar with 180 total sample. Sampling with multi-stage random sampling, based on the number of infants in Batusangkar. Starting from District to sub-District, Urban Village, and Village. After getting 2 locations that match the inclusion criteria. the intervention determination of groups and control groups is done by random allocation using coins. The distance between the control group and the intervention group is 15 km, so it will not interfere with the evaluation result. The study duration is 6 months, ie from June 2017 to December 2017.

- The research workflow is as follows
- Control group: only take 1 evaluation, this group gets nothing.
- Intervention Group: Pre test (first Evaluation ) -> first Training -> (second evaluation ) second Training -> (third evaluation) third Training -> Evaluation (fourth Evaluation ).
- Pre-test, the first Intervention (first evaluation )
- The distance between the first intervention and the second intervention is one week (the first evaluation)
- the distance between the second intervention and the third intervention is 2 weeks (second evaluation)
- The distance between the third intervention with evaluation is 4 months
- Interventions given to mothers of preschool children are:
  - Sexual abuse against children
  - Mother's role and function in child development
  - Children's Basic needs for growth and development
  - Communication and sex education for children
  - The Learning media are: videos, presentations, group discussions, leaflets, intervention control sheets for the home contain things that need to communicate with their children. in this control sheet, there is also information about when and how many times mother need to have communication with her child.
- Assignment: mothers that participated in this training were given the task to conduct counseling to other mothers around the neighborhood. To find out whether there is a mother's activity, then the mother must fill the control sheet.
- The questionnaire is the measuring tool used to determine the knowledge and attitude of the mother for each evaluation.
- The pre-intervention questionnaire and post-intervention are same.
- The evaluation done for 4 times.
- The data Analyze by GLM Repeated Measure.
- This research is funded by DIPA Fund nursing faculty of Andalas University.
- This research has received permission from the local government of West Sumatra and Tanah Datar district.

## RESULTS

The method of experimental model testing is using quantitative with the quasi-experimental design of Pretest-posttest control group design. the Intervention given to the respondent trials for 3 times, with 4 times the measurement. The interval of the first intervention with the second one is 2 weeks, then the second with the third is one month. In a simple illustration, the model "ICAS" the optimization of mother role as the primary prevention of sexual violence against pre-school children (4-6 Years) is as follows:



**Figure 1: Model of "ICAS"**

The trial of "ICAS" model for Optimizing the Role of mother with Under-five (4-6 years) as Prevention of Child Sexual abuse was followed by 180 respondents, consistof 90 respondents and 90 control subjects. All respondents were mothers of children aged 4-6 years. This intervention was conducted for 2 months. the Intervention given three times with four times the measurement. the Data analys by using GLM Reveated Measure. One of the requirements of this test is the data should be normally distributed.

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**Training Implementation will be conducted from 10:00 to 12:00 WIB, with this following activity details**

Activities	Time (minute)
The Introduction between facilitator and participants	10
Questionnaire/Pre Test	20
Explain the purpose of the training	5
TheScreening of si komal movie	10
Discussion based on Komal’s Movie’s content	15
Power Point Presentation	10
Group discussion	75
Results discussion	30
Closing	5
Amount of time	180 minutes

Based on the normality results data by using Kolmogorov-Smirnov Tests showed that the data on the variables of knowledge and attitude are normally distributed, so GLM repeated measure analysis can be done.

**Table 1: the statistic test result on the increased of mother’s knowledge and attitude after getting 3 interventions and 4 times of measurement**

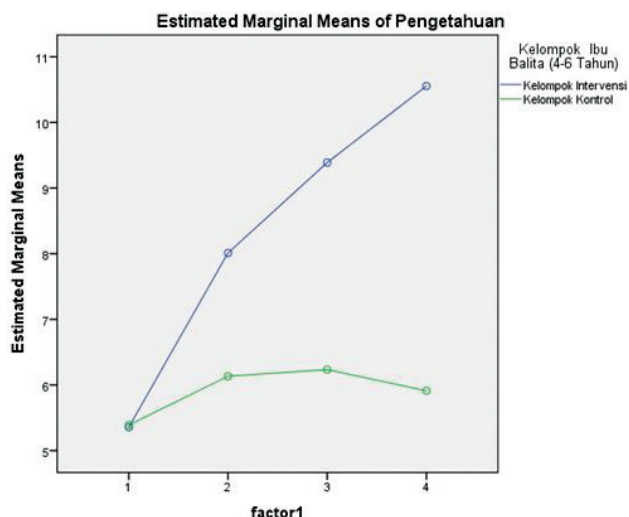
Multivariate Tests <sup>a</sup>						
Effect		Value	F	Hypothesis df	Error df	Sig.
factor1	Pillai’s Trace	.914	307.316 <sup>b</sup>	6.000	173.000	.000
	Wilks’ Lambda	.086	307.316 <sup>b</sup>	6.000	173.000	.000
	Hotelling’s Trace	10.658	307.316 <sup>b</sup>	6.000	173.000	.000
	Roy’s Largest Root	10.658	307.316 <sup>b</sup>	6.000	173.000	.000
factor1 * KLP	Pillai’s Trace	.875	202.069 <sup>b</sup>	6.000	173.000	.000
	Wilks’ Lambda	.125	202.069 <sup>b</sup>	6.000	173.000	.000
	Hotelling’s Trace	7.008	202.069 <sup>b</sup>	6.000	173.000	.000
	Roy’s Largest Root	7.008	202.069 <sup>b</sup>	6.000	173.000	.000

From Table 1, the multivariate test results indicating that the interventions that have been given to the mother in order to optimize the role of the mother as primary prevention of violence abuse against children aged 4-6 years increase the average value of knowledge and attitude of the mother. This is evidenced by the value of p at factor Klp is 0.0The following will be described on the results of knowledge hypothesis testing and mother’s attitude average, both in the control group and the intervention group according to the measurement of 1 week, 2 weeks and 1 month after getting the invention.

Analysis results show that from one week, two weeks and one month’s measurements showed that the increased of knowledge and attitude on each group, both

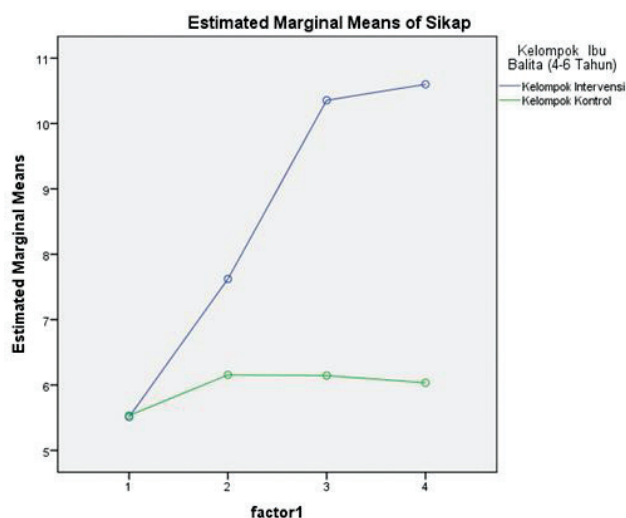
in the control group and in the intervention group. The increase has started in the intervention group after getting the first intervention. it means that there’s an increasing after getting in the intervention on the first week (p = 0.00). so does on the next two weeks and one month later (p = 0.00).The following will describe the average hypothesis test of knowledge and attitude, both in the intervention group and control group according to group differences within 2 months with three interventions.

Analysis results show that it is clear that the increase of average in knowledge and attitudes between the intervention group and the control group, the p-value for knowledge of 0.680 and the p-value in the attitude of 0.759. It can be seen in the picture profile plots below.



**Figure 2: Graph of the average increase respondent’s knowledge in the beginning and after getting 3 interventions**

### ATTITUDE



**Figure 3: Graph of the increase of respondent’s attitude average in the beginning and after getting 3 times of intervention.**

From figure 2 and figure 3 it is clear that there is an increase in average knowledge and attitude of respondent during 1.5-month intervention with 4 times measurement.

### DISCUSSION

Research conducted by Neherta in 2015 provides the intervention by using: Movies, presentations, sketch stories, role play, videos, leaflets and songs as the media conducted in Padang, can improve the knowledge and assertiveness of children. However, this intervention

study is not enough if only given to children without supporting by various parties or professions, especially from families.

The data result by using GLM Repeated Measure was obtained there was an increase in the average knowledge and assertiveness of the intervention group compared with the control group. The increase of mother’s knowledge and attitude has been seen from the first week. It is proved by multivariate test result with p-value on factor Klp is 0.0

From field studies and literature reviews related to mother’s optimization, the appropriate interventions to solve this current issue of child sexual abuse are increasing mother’s knowledge to optimize the role and function of them.<sup>(25)</sup> the learning method is not only by using presentations but also given by using videos that contents sexual abuse occurs on children, perpetrators, modes used by offenders. Later on, the learning method was followed by giving materials about: the role and function of a mother, children’s basic need for growth and development<sup>(6)</sup>.

The lessons given to mothers need to be applied in their daily lives. Therefore, the mother is also given the task to spread the information they learned to their neighbors around her and filling out the check sheet about the work that mother need to do when their children are already going to bed, get up early, prepare to go to kindergarten. Then communicate between mother and child after returning from school and at rest <sup>(9)</sup>. This check sheet was filled by all mothers in the intervention group for 30 days. during filling out the check sheets, it’s expecting they fill it out honestly.

Mother’s honesty is very necessary to educate their children becoming qualify person and useful for the nation. The filling of the sheet requires mother’s honesty, as the effort to improve her role and function as a mother. The result of filling the check sheet by mothers in the intervention group showed that 90% of mothers in the intervention group filled it up. Only 10% fill it with less than 75% of the questions on the check sheet.

The best nursing interventions to solve the problems in Batusangkar nowadays is to do primary prevention. One of them is to provide knowledge about sex to children. one of the necessary knowledge is to keep children away from sexual abuse and to reduce the risk

of children becoming a victim of sexual abuse. This sexual knowledge is necessary and important <sup>(26)</sup>. This sexual knowledge is necessary and important <sup>(27)</sup> because knowledge is the most important domain that influences someone's action. Providing a checklist to mother on the intervention group for a month (30 days) is one of the advantages of the "ICAS" model that does not exist in other intervention models. a model does not always have advantages, but also a weakness.

## CONCLUSION

There has been a model of "ICAS" mother's smart, children survived, a model of intervention given to mothers with preschool children as primary prevention to avoid pre-school children from sexual abuse. As an effort intervention by nurses against sexual abuse.

**Conflict of Interest:** No conflict of interest arose in this study.

**Source of Finding:** This study was conducted using a source of funds derived from the researcher himself

**Ethical Clearance:** This study has passed of the medical research ethics of the Dr. M. Djamil Hospital Padang Indonesian.

## REFERANCES

1. Canton-Cortes D, Cortes MR, Canton J. Child sexual abuse, attachment style, and depression: the role of the characteristics of abuse. *J Interpers Violence*. 2015;30(3):420-36.
2. Cavanaugh CE, Harper B, Classen CC, Paesh O, Koopman C, Spiegel D. Experiences of Mothers Who Are Child Sexual Abuse Survivors: A Qualitative Exploration. *Journal of child sexual abuse*. 2015;24(5):506-25.
3. Connolly DA, Chong K, Coburn PI, Lutgens D. Factors Associated with Delays of Days to Decades to Criminal Prosecutions of Child Sexual Abuse. *Behavioral sciences & the law*. 2015;33(4):546-60.
4. Castelli B, Festa F, Di Sanzo MA, Guala A, Pellai A. Prevalence of child sexual abuse: a comparison among 4 Italian epidemiological studies. *La Pediatria medica e chirurgica : Medical and surgical pediatrics*. 2015;37(2):pmc 2015 114.

5. Aydin B, Akbas S, Turla A, Dundar C, Yuce M, Karabekiroglu K. Child sexual abuse in Turkey: an analysis of 1002 cases. *J Forensic Sci*. 2015;60(1):61-5.
6. Barron IG, Miller DJ, Kelly TB. School-based child sexual abuse prevention programs: moving toward resiliency-informed evaluation. *Journal of child sexual abuse*. 2015;24(1):77-96.
7. C MP, M CJ, Elias A, I OO, Awoere CT. Child sexual abuse among adolescents in southeast Nigeria: A concealed public health behavioral issue. *Pakistan journal of medical sciences*. 2015;31(4):827-32.
8. Mansbach-Kleinfeld I, Ifrah A, Apter A, Farbstein I. Child sexual abuse as reported by Israeli adolescents: social and health related correlates. *Child Abuse Negl*. 2015;40:68-80.
9. Bigras N, Godbout N, Briere J. Child Sexual Abuse, Sexual Anxiety, and Sexual Satisfaction: The Role of Self-Capacities. *Journal of child sexual abuse*. 2015;24(5):464-83.
10. Franco A, Ramirez L. [Child sexual abuse: clinical perspectives and ethico-legal dilemmas]. *Revista colombiana de psiquiatria*. 2016;45(1):51-8.
11. Harris LS, Block SD, Ogle CM, Goodman GS, Augusti EM, Larson RP, et al. Coping style and memory specificity in adolescents and adults with histories of child sexual abuse. *Memory*. 2016;24(8):1078-90.
12. Jennings WG, Richards TN, Tomsich E, Gover AR. Investigating the Role of Child Sexual Abuse in Intimate Partner Violence Victimization and Perpetration in Young Adulthood From a Propensity Score Matching Approach. *Journal of child sexual abuse*. 2015;24(6):659-81.
13. Killough E, Spector L, Moffatt M, Wiebe J, Nielsen-Parker M, Anderst J. Diagnostic agreement when comparing still and video imaging for the medical evaluation of child sexual abuse. *Child abuse & neglect*. 2016;52:102-9.
14. Leclerc B, Wortley R. Predictors of victim disclosure in child sexual abuse: Additional evidence from a sample of incarcerated adult sex offenders. *Child abuse & neglect*. 2015;43:104-11.

15. Meinck F, Cluver LD, Boyes ME. Longitudinal Predictors of Child Sexual Abuse in a Large Community-Based Sample of South African Youth. *Journal of interpersonal violence*. 2015.
16. Moirangthem S, Kumar NC, Math SB. Child sexual abuse: Issues & concerns. *The Indian journal of medical research*. 2015;142(1):1-3.
17. O'Leary P, Easton SD, Gould N. The Effect of Child Sexual Abuse on Men: Toward a Male Sensitive Measure. *Journal of interpersonal violence*. 2015.
18. Yuce M, Karabekiroglu K, Yildirim Z, Sahin S, Sapmaz D, Babadagi Z, et al. The Psychiatric Consequences of Child and Adolescent Sexual Abuse. *Noro psikiyatri arsivi*. 2015;52(4):393-9.
19. Vermeulen T, Greeff AP. Family Resilience Resources in Coping With Child Sexual Abuse in South Africa. *Journal of child sexual abuse*. 2015;24(5):555-71.
20. Thomas SP, Phillips KD, Blaine SK. Psychotherapy Experiences of Perpetrators of Child Sexual Abuse. *Archives of psychiatric nursing*. 2015;29(5):309-15.
21. Tener D, Eisikovits Z. Torn: Social Expectations Concerning Forgiveness Among Women Who Have Experienced Intrafamilial Child Sexual Abuse. *Journal of interpersonal violence*. 2015.
22. Guerra C, Pereda N. Research With Adolescent Victims of Child Sexual Abuse: Evaluation of Emotional Impact on Participants. *Journal of child sexual abuse*. 2015;24(8):943-58.
23. Kenny MC, Abreu RL. Training Mental Health Professionals in Child Sexual Abuse: Curricular Guidelines. *Journal of child sexual abuse*. 2015;24(5):572-91.
24. Kraye A, Seddon D, Robinson CA, Gwilym H. The influence of child sexual abuse on the self from adult narrative perspectives. *Journal of child sexual abuse*. 2015;24(2):135-51.
25. Abeid M, Muganyizi P, Massawe S, Mpembeni R, Darj E, Axemo P. Knowledge and attitude towards rape and child sexual abuse--a community-based cross-sectional study in rural Tanzania. *BMC public health*. 2015;15:428.
26. Ogunfowokan AA, Fajemilehin RB. Impact of a school-based sexual abuse prevention education program on the knowledge and attitude of high school girls. *J Sch Nurs*. 2012;28(6):459-68.
27. Walsh K, Zwi K, Woolfenden S, Shlonsky A. School-based education programmes for the prevention of child sexual abuse. *Cochrane Database Syst Rev*. 2015;4:CD004380.
28. Neherta M, Machmud R, Damayanti R, \* A. Development and Testing of Intervention Model for Child Sexual Abuse Prevention on Primary School Children in Padang City, 2014. *Indian Journal of Community Health*. 2015(4):472-7%V 27.