

## **Primary Sexual Abuse Prevention in School Age Children: A Systematic Review**

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### **ABSTRACT**

**Introduction:** Sexual Abuse is a condition that needs to be considered in recent years. Sexual abuse has become a public health issue because of the various health effects it causes. So it is necessary to make primary prevention efforts on behavior sexual abuse, specifically for school age children. The purpose of this study is to find out how effective health education as a primary prevention effort for sexual abuse in school-age children.

**Method:** This paper uses a systematic review design. Data was taken from the ProQuest, Scopus, and ScienceDirect databases with the period 2000-2018. Search was carried out for journals, articles and literature review using keywords of sexual abuse, prevention and psychoeducation.

**Result:** The results of the analysis looked for articles, analysis of 19 articles appropriate and assessed. namely health education as a form of preventive efforts to prevent sexual abuse in the form of games. The results of the study show that health education was effort to prevent sexual abuse that occurs a lot in the school and family, health education provided to school-age children can reduce the occurrence of sexual abuse.

**Conclusion:** Health education is provided in the form of games so that it is easily understood by school-age children.

**Keyword:** *Sexual Abuse; Preventive; Education*

## Introduction

Sexual abuse is a condition that needs to be considered in recent years. Sexual harassment has become a public health issue because of the various health effects it causes (Ogunfowokan and Fajemilehin, 2012). Sexual abuse does not only occur in adults and even occurs in children. Various research evidence states that child sexual abuse (KSA) negatively impacts both short and long term on physical and emotional health, cognitive abilities and educational attainment, as well as social and behavioral development (Kenny and Wurtele, 2012). Sexual abuse of children and adolescents can cause physical and psychological vulnerability in children (Olinda *et al.*, 2017) the child who is abused cannot react or oppose the authority carried out by the perpetrator, and although he does not agree, he feels he cannot prevent this occurrence, in the face of threats, children often keep the fact that they have been abused (Olinda *et al.*, 2017).

Sexual abuse is a serious problem that affects the lives of children and adults throughout the world. In the United States, 1 in 5 women (18.3%) and 1 in 71 men (1.4%) report having experienced rape in their lives (Black, Basile, Breiding, Smither, Walters, Merrick *et al.*, 2011). In addition, 44.6% of women and 22.2% of men reported experiencing some form of other sexual harassment in their lives (Black *et al.*, 2011). Given the prevalence of sexual violence, as well as increased public attention to sex crimes against children, there is strong support for federal, state and local governments to develop policies to protect people from sexual acts.

Sexual abuse is the child's involvement in sexual activity but the child does not understand what is happening (Tanaka *et al.*, 2017). Sexual activity is like touching the sensual part, showing pornographic videos, until sexual intercourse, and showing genitals (Gokten and Duman, 2016). Sexual abuse is a serious problem because it is not handled, children who are victims of sexual abuse will experience depression, post traumatic stress disorder (Bhaskaran T S *et al.*, 2016).

Epidemiological data show that the global average prevalence of sexual abuse in children is 11.8-13.8% with higher rates among girls (18-19.7%) Africa showing the highest rate of child sexual abuse (around 34 %), while the lowest appears in Asia (around 10%) and Europe (Lesmana, Suryani and Tiliopoulos, 2015), Data CSA (Child Sexual Abuse) in Southeast Asia it varies greatly, with 40 cases of child abuse in 14

countries in the region concluding that around 10% of boys and 15% of girls have experienced at least one form of sexual abuse (Rumble *et al.*, 2018).

This complex public health problem requires prevention strategies at various ecological levels (Kenny and Wurtele, 2012). One ecological level including school. Primary Prevention: A broader approach that occurs before sexual abuse has occurred to prevent initial action (for example, educating parents and health education in schools). Secondary Prevention: A targeted approach to the population "at risk, Tertiary Prevention: An immediate response after Sexual harassment occurs to deal with the immediate consequences of violence (for example, targeting offenders detected through treatment groups) (Mccartan *et al.*, 2018). School-based sexual harassment prevention programs have positive results; However, little is known about how these programs are disseminated. The development model of trainers uses the main trainer to equip others to implement the program, allowing more adults to teach and then more children to receive the program (Weingarten *et al.*, 2018).

School-based programs are created to help children avoid sexual abuse (Wurtele,S.K.,&Miller-Perrin, 2017). Schools evolve as a clear choice for teaching children about people's safety, because the school's main goal is to educate and easily educate children. The objectives of the school-based KSA prevention program include five things: (a) helping children recognize the potential abusive situation or potential offender, (b) encouraging children to reject sexual requests by saying "No", (c) teaching children to refuse to try to get it away from the perpetrator, (d) encourage children to report in advance or ongoing abuse, and (e) explain that contact with others is not granted (Tunc *et al.*, 2018).

The family also has an important role in preventing sexual abuse of children. In principle the family has great potential to provide instruction in how to deal with violence against children (Babatsikos and Miles, 2015). So parents need to be involved in prevention of sexual abuse because the education done by parents to children in the effort of self-safety programs, shows a better improvement compared to the education that is only done by teachers in schools. In the program of providing education in schools, it is not running optimally without the contribution of parents in it, so that in this study the researchers involved in participating parents in preventing sexual abuse behavior in children (Miller *et al.*, 2016).

This from several efforts to prevent sexual harassment in children that are carried out in schools in the form of health education in the form of games so that children are able to understand easily about what is meant by sexual harassment. Health education is very important as a primary effort for sexual abuse of children.

## **Method**

### *1. Data Sources and Search*

The journal search strategy begins by asking research questions, namely "does psychoeducation have an influence on behavior change as one of the primary prevention efforts of sexual abuse in school-age children?". This writing uses a systematic review design. The database used for journal searches is the Database at ProQuest, Science Direct, and Scopus. The keywords used are sexual violence, preventive and psychoeducation. The journal is limited to the 2011-2018 publication year, with areas of nursing, medicine, and psychology journals, as well as journals in English.

### *2. Study options and criteria*

Inclusion criteria specified in this criterion 1) Design of quantitative and qualitative studies both observation and experimentation; 2) maximum time span of 10 years ago; 3) Subjects in this SR are children at school age; 4) Interventions provided in the form of primary prevention Sexual abuse in school-age children in the form of games. The journal is selected using the PRISMA method.

## **Result**

### *1. Study Results and Selection*

In the selection of journals to be used in systematic reviews of journals must have the same characteristics and feasibility of the study, this was assessed using the PICOT approach so that it was easier and easier to understand in writing and was selected using a systematic review PRISMA method. Population: the population used in this study is school-age children who are at risk of sexual abuse so that primary prevention of sexual abuse needs to be given. Interventions: interventions carried out by providing education and health education. Good at school. Health education is provided in the form of games so that it is easily accepted by school-age children because it uses the Comparisson game method: Some journals that have been carried out by the PICOT

process are divided into 2 groups, namely control groups and treatment groups, and several journals conduct structured interviews to obtain desired results. Interventions are carried out in the form of primary prevention Sexual harassment of school-age children by conducting health education by playing games Output: Output: data before and after the intervention for intervention and control for one or more results related to change. And the results are measured using a questionnaire sheet [15] Study design: The research design uses qualitative, quantitative.

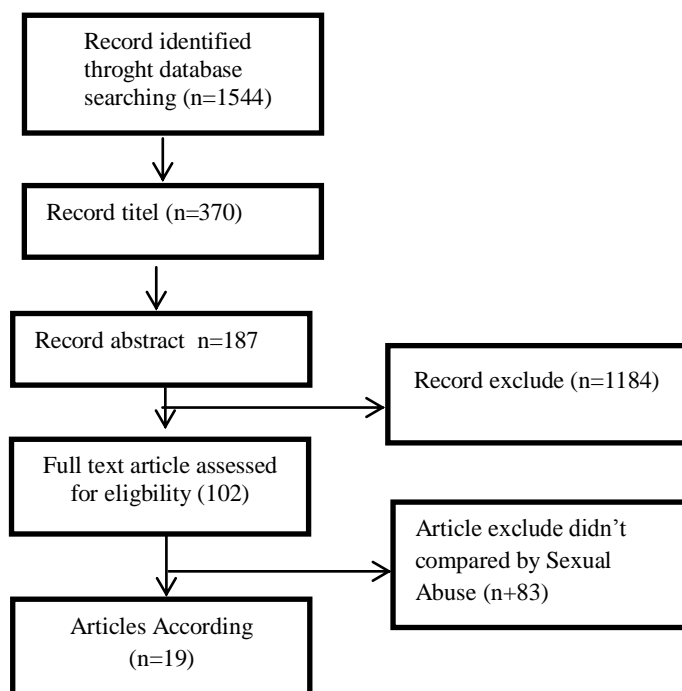


Figure 1. PRISMA Flow Diagram Primary Sexual Abuse Prevention In School Age Children: A Systematic Review

## 2. Study characteristics

The characteristics of the study are explained in the PRISMA chart. All journals obtained from the results of the study have interventions that are carried out as an effort to prevent sexual abuse of school-age children with the method of health education through games, this is an approach taken by the school.

## 3. Results of the Review Study

The results of scientific studies conducted by the authors were obtained from the searches of ProQuest, Medline, and Science Direct, and Scopus. The total number of participants from all studies was 940 with the theme of violent behavior and had the risk of violent behavior both in the school family and community. So in the current SR

writing the author uses 19 journals that are appropriate and have different interventions, interventions that are given multi-component including education, and cognitive techniques as well as educational games that are expected to be able to change behavior and can be prevention of sexual abuse in children school age. With different duration averages From all the studies most of them used the same measurement tools, namely: Psychoeducation using Child Sexual Abuse Prevention Education (C-SAPE) (Kim and Kang, 2016), the questionnaire contains items designed to measure CSA knowledge (Tang, 2018), Using a questionnaire (WITS), and the “Body Safety Training Program” (BST) (Weingarten *et al.*, 2018), In depth same struktur Interview dan questionnaire.

#### 4. Post-treatment effect

From a number of literature journals that have been carried out PICOT there are significant effects found statistically from various interventions given such as providing education, educational games about prevention of sexual abuse, parental support related to prevention of sexual violence behavior, as well as correct ways of care related to education health regarding prevention of sexual harassment behavior in school-age children. After a routine and scheduled treatment, the measurement is done using a standardized measuring instrument. The results obtained in the intervention given to the treatment group gave a significant impact on the provision of interventions in the form of related education about prevention of sexual harassment behavior both in the school family and community, as well as good forms of care, so that it was expected to increase the knowledge of school-aged children prevention of sexual abuse behavior.

### Discussion

In making this systematic review the author has selected 19 journals. The author chose to see effective sexual abuse prevention efforts in school-age children in the form of games (Ferguson *et al.*, no date). From the Review several studies show that the application of education carried out in schools has a very important role because it is sustainable between health education that is done at home and school (Walsh *et al.*, 2015) measuring instrument used in seeing changes in behavior and knowledge in children between uses Child Sexual Abuse Prevention Education (C-SAPE) (Kim and Kang, 2016), The questionnaire contains items designed to measure CSA knowledge (Tang, 2018), Using the questionnaire (WITS), and the “Body Safety Training Program

(BST) (Weingarten *et al.*, 2018), In depth semi structure Of all the results shown leading to better behavior change this is in line with various efforts made to improve primary prevention Sexual abuse in school-age children.

Child sexual abuse (CSA) is a serious public health problem. The recent approach to treating victims and punishing offenders is not enough to overcome this big problem; rigorous development and evaluation of CSA prevention strategies is very important. We purpose that CSA prevention efforts should target parents of young children. Parents have been ignored as the focus of prevention of CSA; they deserve attention because of their potential to improve children's safety through effective communication and monitoring (Mendelson and Letourneau, 2015). Childhood sexual abuse is a significant public health problem that negatively affects victims, families, organizations, and society (Kenny and Wurtele, 2012).

Sexual health education programs with a focus on postponing sexual debuts among children and adolescents should also consider handling ACE, such as neglect, physical, psychological and sexual violence, witnessing parent violence, and parental detention and psychopathology (Brown *et al.*, 2015). Knowledge about sex in children can prevent sexual deviations in children, this is because they are taught about the role of sex, how to behave as a boy or even a girl and how to get along with the opposite sex. Sex education in children can also prevent children from becoming victims of sexual abuse. Ideally, sex education for children is given first time by parents at home or family. However, not all parents want to behave openly with children in discussing sexual issues (Masilo, 2018). Active involvement by parents can contribute substantially to the success of school-based programs to prevent child sexual abuse (CSA). In China, little is known about parents' understanding of CSA (Chen, Dunne and Han, 2007).

Psychoeducation can increase the knowledge of sexual abuse in children because psychoeducation is a process to develop knowledge, teach, educate, and provide important information related to sexual harassment, forms, and methods of prevention in school children. Effective education in school-age children in the form of games that are filled about knowledge of sexual abuse (Wurtele, S.K., & Miller-Perrin, 2017) so that it can improve preventive efforts undertaken at school so that it is expected to improve behavior change in school-age children.

## Conclusion

In conclusion, this review shows that education in the form of games is a good prevention, and is done in a family and community school environment. Parents also have an important role in relation to primary prevention. Sexual abuse of school-age children. This can be used as a guideline and become a reference for further research that is tailored to the characteristics of the respondents. Sexual prevention training in children can increase knowledge of self-confidence and preventive behavior in children. So that it is expected to increase behavior change in children.

## Implication

The findings from the review of this article have implications for nursing and research practices. In nursing practice, the findings of this review will provide basic information for nurses in providing preventive nursing care so that it can be done by parents of teachers and children to make efforts to prevent sexual abuse, so providing appropriate interventions will improve abilities and behavior changes in children school age to defend themselves against and act in preventing sexual abuse (Nurse, 2018). effective intervention is done for school-age children, namely a game-based health education that is easily understood by children here were no significant differences in CSA levels between poor and non-poor families, poor CSA victims were significantly more likely to have a repeat report for abuse. Children with multiple reports are more likely to have negative results. Interventions for CSA survivors should focus on preventing recurrence of persecution in general and not ignoring the needs of male victim (Oshima *et al.*, 2015).

Further research, is expected to be able to find out other sources that can reduce the burden of care, such as the use of social support, especially in eastern countries that are still minimal related to social support.

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