

Original Investigation

Effectiveness of Educational Intervention on Knowledge Regarding Child Abuse among School Students in a Sub-Metropolitan City

Reena Ishwar^{1*}, Dilip Kumar Ishwar², Punita Yadav³

¹Bagmati Welfare Society Nepal, Sarlahi, Nepal, ²Urban Health Promotion Center, Janakpurdham, Nepal ³Department of Nursing, Krishna Medical and Technical Research Centre, Janakpurdham, Nepal

ARTICLE INFO

Article history:

Received: 17 March 2021 Revised: 27 April 2021 Accepted: 11 June 2021

*Correspondence:

Reena Ishwar Bagmati Welfare Society Nepal, Sarlahi, Nepal E-mail:

ishwarreena321@gmail.com

Citation:

Ishwar R, Ishwar DK, Yadav P. Effectiveness of Educational Intervention on Knowledge Regarding Child Abuse among School Students in a Sub-Metropolitan City. MedS. J. Med. Sci. 2021;1(1):59-66

ABSTARCT

INTRODUCTION: Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment resulting in actual or potential harm to the child's health, survival, development. The objective was focused to measure the effectiveness of educational intervention on knowledge regarding child abuse among school students at Janakpurdham, submetropolitan city. MATERIALS AND METHODS: This study was conducted in Janaki higher secondary english school, at Janakpurdham, Dhanusha. One group pre-test and post-test design was used. A self- administered structured questionnaire was developed to assess the knowledge regarding child abuse among participants. Differential and inferential statistics were used to analyse data by SPSS package. RESULTS: Out of total 44 participants, 12 (27.3%) participants had poor level of knowledge in pre-test whereas none had poor knowledge in post-test. 25 (56.8%) participants had average level of knowledge in pre-test but only 15 (34.1%) had average level in post- test. 7 (15.9%) participants had good level of knowledge in pre-test, however 29 (65.9%) had good level of knowledge in post-test. The scores of pre-test 18.80 (3.87) and post-test 24.23 (2.78) were found to be statistically significant. There was no any association between level of knowledge in pre-test and post-test with their selected socio-demographic variables except sex, education status of mother and occupation of father in post-test. CONCLUSIONS: Majority of participants had average level of knowledge in pre-test that was increased to good knowledge in post-test. The scores of pre-test and post-test were found to be statistically significant which determined the effectiveness of educational intervention programme.

Keywords: Child abuse, educational intervention, knowledge.

INTRODUCTION

Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power [1]. maltreatment, physical, emotional abuse as well as neglect including child labor, is a widespread phenomenon in many societies in which 25% of all adults have experienced some form of physical abuse and 20% of women have experienced sexual abuse. Worldwide 22.6% people are physically abused children, 36.3% experience emotional abuse and

16.3% face physical neglect [2]. According to Millennium Development Goal (MDGs), goal 3 "promote gender equality and empower women" emphasized Nepal has made good progress between 1990 and 2015 in achieving gender parity for access to primary, secondary and tertiary education [3]. However, there is information available on child abuse in province 2 of Nepal. No concrete data is accessible in Janakpurdham till now. Therefore, the objective of this study was focused to measure the effectiveness of educational intervention programme on knowledge regarding child abuse among school students at Janakpurdham, Submetropolitan city.

MATERIALS AND METHODS

Study design and setting

A pre-experimental, one group pre-test and post-test research was designed. Study sample were selected based on non-probability, purposive sampling technique at Janaki Higher Secondary Boarding School, Janakpurdham, sub-metropolitan city. A total of 44 students were present at the time of data collection. As child abuse is increasing in Janakpur day-by-day resulting into physical, emotional and sexual neglect among adolescents. No research has been conducted in Janakpurdham in institutional area for child abuse.

Sample size and sampling

Students willing to participate and aged between 13–16 years who were available at the time of data collection were included in this study. Students who were sick, absent and not interested were excluded from this study.

Data collection

A self- administered structured questionnaire was developed to assess knowledge regarding child abuse among students. All the selected respondents were kept in a class and were explained about the objectives and informed

verbal consent was obtained before data collection. For pre-test, self-administered questionnaire was given to each student. Filled up questionnaire was collected and educational intervention on child abuse was given after pre-test on the same day. Post-test was done on the following day.

Scoring System: Correct response was scored as '1' and incorrect response as '0'. The level of knowledge was categorized on the basis of following: Good knowledge: 75% score; Average knowledge: 50-75% score; Poor knowledge: ≤ 50% score [24]. Work approval letter was taken from Krishna Medical and Technical Research Center, Janakpurdham (Ref-08/075/076). Additionally, work permission letter for data collection was also obtained from Janaki Higher Secondary Boarding School, Janakpurdham-2 (Ref-24/075/076).

Statistical considerations

The filled questionnaire was rechecked, organized, coded and entered in EpiData v3.1 and exported to SPSS 16.0 version for the analysis. Descriptive statistics and inferential statistics were used to analyze the data.

RESULTS

Socio-demographic characteristics

Table 1 shows socio-demographic characteristics of participants. Out of total 44 participants, one participant was of age 13 years, 8 (18.2%) participants were of age 14 years, 27 (61.4%) participants were of age 15 years and 8(18.2%) participants were of age 16 years. Similarly, minimum annual income of participants family was NRs. 20,000/-, maximum annual income of participants family was NRs. 9,60,000/- and the annual mean income of the participants family was NRs. 2,63,886/-.

Responses for the questions regarding knowledge on child abuse are presented in Table 2.

Table 3 shows that, out of total 44 participants in pre-test, 12 (27.3%) have poor level of knowledge,

25 (56.8%) have average level of knowledge and 7 (15.9%) have good level of knowledge in pre-test. Out of total 44 participants in post-test, 15 (34.1%) have average level of knowledge and 29 (65.9%) have good level of knowledge in post-test.

Table 4 shows that there was no any association between the level of knowledge in pre-test and post-test with their selected socio-demographic variables except sex, education status of mother and occupation of father in post-test.

Table 5 shows that there is a significant difference in the pre-test and post-test score. This suggests that educational intervention was effective to bring changes in the level of participants knowledge.

Father's education Illiterate Primary education Lower secondary education Secondary education Higher secondaryor above Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	2 8 5 13 16 6 14 11 5 8	4.5 18.2 11.4 29.4 36.4 13.6 31.8 25.0 11.4 18.2
Primary education Lower secondary education Secondary education Higher secondaryor above Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	8 5 13 16 6 14 11 5 8	18.2 11.4 29.4 36.4 13.6 31.8 25.0 11.4
Lower secondary education Secondary education Higher secondaryor above Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	5 13 16 6 14 11 5 8	11.4 29.4 36.4 13.6 31.8 25.0 11.4
Secondary education Higher secondaryor above Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	13 16 6 14 11 5 8	29.4 36.4 13.6 31.8 25.0 11.4
Higher secondaryor above Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	16 6 14 11 5 8	36.4 13.6 31.8 25.0 11.4
Mother's education Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	6 14 11 5 8	13.6 31.8 25.0 11.4
Illiterate Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	14 11 5 8	31.8 25.0 11.4
Primary education Lower secondary Secondary Higher secondary and above Father's occupation Government	14 11 5 8	31.8 25.0 11.4
Lower secondary Secondary Higher secondary and above Father's occupation Government	11 5 8	25.0 11.4
Secondary Higher secondary and above Father's occupation Government	5 8	11.4
Higher secondary and above Father's occupation Government	8	
Father's occupation Government		18.2
Government	_	
	5	11.4
Non-government	6	13.6
Self-employed	26	59.1
Non-paid	6	13.6
Retired	1	2.3
Mother's occupation		
Government	1	2.3
Non-government	2	4.5
Self-employed	6	13.6
Homemaker	35	79.5
	Government Non-government Self-employed	Government 1 Non-government 2 Self-employed 6 Homemaker

Table 2 Univariate analysis of questionnaire regarding knowledge (N = 44)								
S.N	Variables	P	Pre-test		Post-test			
<i>3.</i> 1 V	variables	Response	n	%	n	%		
1.	Heard about child abuse	Yes	44	100.0	44	100.0		
2.	Sources of information							
2A	Talanisian (Dadia	Yes	24	54.5	35	79.5		
ZA	Television/Radio	No	20	45.5	9	20.5		
OD.	N	Yes	23	52.3	21	47.7		
2B	Newspaper/magazines	No	21	47.7	23	52.3		
200	C Books	Yes	33	75.0	39	88.6		
2C		No	11	25.0	5	11.4		
200	Internet	Yes	24	54.5	31	70.5		
2D		No	20	45.5	13	29.5		
O.F.	F: 1/10	Yes	27	61.4	28	63.6		
2E	Friends/relatives	No	17	38.6	16	36.4		
O.F.	m 1	Yes	40	90.9	44	100.0		
2F	Teachers	No	4	9.1	0	0.0		
3.	Child abuse is public health problem/social problem	True	44	100.0	44	100.0		
4.	Child abuse is physical, psychological and	True	39	88.6	44	100.0		
	sexual maltreatment of children	False	5	11.4	0	0.0		

Į	5.	Child abuse is also known as neglect	True False	36 8	81.8 18.2	44 0	100.0 0.0
			Neglect, physical, sexual and	22	50.0	37	84.1
			psychological Physical, psychological, mental,	22	30.0	37	04.1
(6.	Four forms of child abuse	Physical, psychological, mental, emotional	5	11.4	4	9.1
			Emotional, physical, mental,	9	20.5	3	6.8
			education Neglect, sexual, education, physical	8	18.2	0	0.0
			In their early 20s	3	6.8	4	9.1
:	7.	Average age that child molesters first attack a child	Middle-aged	10	22.7	1	2.3
		a Ciliu	In their teens	31	70.5	39	88.6
			10 seconds	3	6.8	44	100.0
	8.	Child abuse is reported in Nepal every	20 minutes	7	15.9	0	0.0
			Hour	33	75.0	0	0.0
			second	1	2.3	0	0.0
	9.	Chances of child abuse is higher in single	True	29	65.9	38	86.4
	· ·	parent families	False	15	34.1	6	13.6
			Drowning	1	2.3	1	2.3
		Cinale leading cause of shildren ages four or	Motor vehicle accident	5	11.4	1	2.3
	10.	Single leading cause of children ages four or younger	Child abuse and neglect	34	77.3	41	93.2
		younger	Choking on foods	3	6.8	0	0.0
			Falls	1	2.3	1	2.3
	11.	Neglect is when parents fail to meet various	True	29	65.9	43	97.7
		needs to the child.	False	15	34.1	1	2.3
	12.	Physical abuse involves striking, burning,	True	40	90.9	44	100.0
		choking and shaking of child.	False	4	9.1	0	0.0
		Psychological abuse involves shaming or	True	36	81.8	44	100.0
	13.	ignoring, extreme punishment, withholding					
affection to child.		affection to child.	False	8	18.2	0	0.0
	14.	Sexual abuse is incident of sexual contact involving a child.	True	44	100.0	43	97.7
		nivolving a clinu.	False	0	0.0	1	2.3
	15.	Strangers pose greatest risk of sexual abuse	True	43	97.7	43	97.7
		to children	False	1	2.3	1	2.3
	16.	Abuse greatly impacts on child's learning	True	40	90.9	44	100.0
	10.	ability	False	4	9.1	0	0.0
	17.	Abuse can impact a child's behaviour into	True	39	88.6	41	93.2
	17.	adulthood	False	5	11.4	3	6.8
			Parents	5	11.4	1	2.3
	18.	90% abusers are	Strangers	25	56.8	15	34.1
			Someone the victim knows	12	27.3	28	63.6
			Priests	2	4.5	0	0.0
			Lack of food No shelter	13 2	29.5 4.5	11 0	25.0 0.0
	19.	Examples of physical abuse	Bruises on legs	24	4.5 54.5	32	72.7
			Fear of adults	5	11.4	1	2.3

		Lack of confidence	7	15.9	0	0.0
20.	20. Examples of emotional abuse	Lack of social skills	4	9.1	0	0.0
20.		Isolated from parents	11	25.0	16	36.4
		All of above	22	50.0	28	63.6
		Trauma	0	0.0	2	4.5
21.	Examples of sexual abuse	Pregnancy	3	6.8	4	9.1
21.	Examples of sexual abuse	The use of sexual languages	17	38.6	20	45.5
		All of above	24	54.5	18	40.9
		Less than \$20000	28	63.6	44	100.0
22.	Child abuse normally found in households	\$20000-\$35000	2	4.5	0	0.0
	with incomes of	All of above	14	31.8	0	0.0
		UNICEF and WHO	9	20.5	3	6.8
	Organizations would together to referred	International Society for Prevention				
23.	Organizations work together to safeguard children	of Child Abuse and Neglect	9	20.5	0	0.0
	children	(ISPCAN)				
		Both 1 and 2	26	59.1	41	93.2
		Tell to someone about your	2	4.5	0	0.0
	If you have concern about child, actions to	concerns	_	4.5	U	0.0
24.	be done:	Tell the child's parents	12	27.3	41	93.2
	be done.	Ask the child what's going on	2	4.5	0	0.0
		Ring the police immediately	28	63.6	3	6.8
		Helping a stressed-out parent by				
		baby-sitting, making a meal for	2	4.5	0	0.0
		their family				
		Learning the signs and symptoms				
25.	Actions help to stop child abuse and neglect	of child abuse so you can recognize	3	6.8	10	22.7
	Actions help to stop child abuse and neglect	them when you see the "red flags"				
		Reporting known or suspected				
		child abuse to the police or local	9	20.5	3	6.8
		child protective services agency				
		All of above	30	68.2	31	70.5
24	Preventing child abuse is the	The government	1	2.3	0	0.0
26.	responsibility of:	Parents	11	25.0	0	0.0
						,,,

Table 3 | Knowledge level in pre-test and post-test (N = 44)

		P	Pre-test Pos		t-test
S.N	Level of knowledge	Frequency	Percent	Frequency	Percent
J.1N	Level of knowledge	(n)	(%)	(n)	(%)
1.	Poor knowledge	12	27.3	0	0.0
2.	Average knowledge	25	56.8	15	34.1
3.	Good knowledge	7	15.9	29	65.9
	Total	44	100.0	44	100.0

Poor n=12, (%) 1 (11.1) 11 (31.4) 3 (30.8) 4 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	Average n=25, (%) 8 (88.9) 17 (48.6) 15 (57.7) 10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	Good n=7 (%) 0 (0.0) 7 (20.0) 3 (11.5) 4 (22.2) 7(17.5) 0 (0.0) 6 (15.8) 1 (16.7)	p-value* 0.085 0.590 0.456	Level of Kr Average n=15 (%) 2 (22.2) 13 (37.1) 6 (23.1) 9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2) 2 (33.3)	Good n=29 (%) 7 (77.8) 22 (62.9) 9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8) 4 (66.7)	0.400 0.064 0.966	
1 (11.1) 11 (31.4) 3 (30.8) 4 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	n=25, (%) 8 (88.9) 17 (48.6) 15 (57.7) 10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	n=7 (%) 0 (0.0) 7 (20.0) 3 (11.5) 4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.085	n=15 (%) 2 (22.2) 13 (37.1) 6 (23.1) 9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	n=29 (%) 7 (77.8) 22 (62.9) 20 (76.9) 9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.400	
3 (30.8) 4 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	17 (48.6) 15 (57.7) 10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	7 (20.0) 3 (11.5) 4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.590	13 (37.1) 6 (23.1) 9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	22 (62.9) 20 (76.9) 9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.064	
3 (30.8) 4 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	17 (48.6) 15 (57.7) 10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	7 (20.0) 3 (11.5) 4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.590	13 (37.1) 6 (23.1) 9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	22 (62.9) 20 (76.9) 9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.064	
3 (30.8) 4 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	15 (57.7) 10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	3 (11.5) 4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.456	6 (23.1) 9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	20 (76.9) 9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.687	
1 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.456	9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.687	
1 (22.2) 0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	10 (55.6) 23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	4 (22.2) 7(17.5) 0 (0.0) 6 (15.8)	0.456	9 (50.0) 14 (35.0) 1 (25.0) 13 (34.2)	9 (50.0) 26 (65.0) 3 (75.0) 25 (65.8)	0.687	
0 (25.0) 2 (50.0) 0 (26.3) 2 (33.3)	23 (57.5) 2 (50.0) 22 (57.9) 3 (50.0)	7(17.5) 0 (0.0) 6 (15.8)	0.456	14 (35.0) 1 (25.0) 13 (34.2)	26 (65.0) 3 (75.0) 25 (65.8)		
2 (50.0) 0 (26.3) 2 (33.3)	2 (50.0) 22 (57.9) 3 (50.0)	0 (0.0) 6 (15.8)		1 (25.0) 13 (34.2)	3 (75.0) 25 (65.8)		
2 (50.0) 0 (26.3) 2 (33.3)	2 (50.0) 22 (57.9) 3 (50.0)	0 (0.0) 6 (15.8)		1 (25.0) 13 (34.2)	3 (75.0) 25 (65.8)		
0 (26.3)	22 (57.9) 3 (50.0)	6 (15.8)		13 (34.2)	25 (65.8)	0.966	
2 (33.3)	3 (50.0)	` '	0.926		`	0.966	
2 (33.3)	3 (50.0)	` '	0.926		`	0.966	
	,	1 (16.7)	0.926	2 (33.3)	4 (66.7)		
3 (26.7)				` ,	, ,		
3 (26.7)							
3 (26.7)						0.226	
	17 (56.7)	5 (16.7)	0.977	12 (40.0) 18(6	18(60.0)		
1 (28.6)	8 (57.1)	2 (14.3)		3 (21.4)	11 (78.6)		
3 (30.0)	5 (50.0)	2 (20.0)	0.071	6 (60.0)	4 (40.0)	0.049*	
9 (26.5)	20 (58.8)	5 (14.7)	0.871	9 (26.5)	25 (73.5)		
6 (30.0)	14 (70.0)	0 (0.0)	0.020	7 (35.0)	13 (65.0)	0.908	
5 (25.0)	11 (45.8)	7 (29.2)	0.029	8 (33.3)	16 (66.7)		
5 (23.1)	15 (57.7)	5 (19.2)	0.651	9 (34.6)	17 (65.4)	0.930	
5 (33.3)	10 (55.6)	2 (11.1)	0.651	6 (33.3)	12 (66.7)		
9 (25.7)	19 (54.3)	7 (20.0)		13 (37.1)	22 (62.9)	0.400	
3 (33.3)	6 (66.7)	0 (0.0)	0.342	2 (22.2)	7 (77.8)		
0 (33.3)	15 (50.0)	5 (16.7)	0.254	12 (40.0)	18 (60.0)	0.226	
2 (14.3)	10 (71.4)	2 (14.3)	0.334	3 (21.4)	11 (78.6)		
9	(23.1) (33.3) (25.7) (33.3) (33.3) (14.3)	(23.1) 15 (57.7) (33.3) 10 (55.6) (25.7) 19 (54.3) (33.3) 6 (66.7) (0 (33.3) 15 (50.0) (14.3) 10 (71.4)	(23.1) 15 (57.7) 5 (19.2) (33.3) 10 (55.6) 2 (11.1) (25.7) 19 (54.3) 7 (20.0) (33.3) 6 (66.7) 0 (0.0) (33.3) 15 (50.0) 5 (16.7) (14.3) 10 (71.4) 2 (14.3)	(23.1) 15 (57.7) 5 (19.2) (33.3) 10 (55.6) 2 (11.1) (25.7) 19 (54.3) 7 (20.0) (33.3) 6 (66.7) 0 (0.0) (33.3) 15 (50.0) 5 (16.7) (14.3) 10 (71.4) 2 (14.3)	(23.1) 15 (57.7) 5 (19.2) 0.651 9 (34.6) (33.3) 10 (55.6) 2 (11.1) 6 (33.3) (25.7) 19 (54.3) 7 (20.0) 13 (37.1) (33.3) 6 (66.7) 0 (0.0) 0.342 2 (22.2) 0 (33.3) 15 (50.0) 5 (16.7) 0.354 12 (40.0)	(23.1) 15 (57.7) 5 (19.2) (33.3) 10 (55.6) 2 (11.1) (25.7) 19 (54.3) 7 (20.0) (33.3) 6 (66.7) 0 (0.0) (33.3) 15 (50.0) 5 (16.7) (14.3) 10 (71.4) 2 (14.3) 0.651 9 (34.6) 17 (65.4) 6 (33.3) 12 (66.7) 13 (37.1) 22 (62.9) 13 (37.1) 22 (62.9) 12 (40.0) 18 (60.0) 3 (21.4) 11 (78.6)	

Table 5 Effectiveness of intervention as per score in the pre-test and post-test by paired t-test (N = 44)									
Pre-test	Post-test	T	df	p-value	Remarks				
Mean (SD)	Mean (SD)			Ť					
10.00 (0.070)	24.22 (2.72()	0.510	40	.0.0001	TT: 11 C: 'C' .				
18.80 (3.879)	24.23 (2.786)	8.510	43	< 0.0001	Highly Significant				

DISCUSSION

The findings of the study showed that, 27.3% of the participants had poor level of knowledge in pretest and none of participants had poor knowledge in post-test. 56.8% of the participants had average level of knowledge in pre-test and 34.1% of the participants had average level in post-test. 15.9% of the participants had good level of knowledge in pre-test and 65.9% of the participants had good level of knowledge in post-test. However in a study carried in Vellore, India out of total 30 schoolers, experimental group nearly half of the schoolers 47% had inadequate knowledge, 30% had moderately adequate knowledge, 23% had adequate knowledge during pre-test. In the control group 47% of the schoolers had inadequate knowledge, 33% had moderately adequate knowledge and 20% had adequate knowledge [4].

Out of total 44 participants, the average level of knowledge among participants was 25 (56.8) in pretest which decreased to 15 (34.1) in post-test and the good level of knowledge of participants was 7 (15.9) in pre-test which increased to 29 (65.9) in post-test. None of participants had poor level of knowledge in post-test. In a similar study, out of total 44 caregivers, only one participant has poor level of awareness about child abuse. 61.4% participants had average awareness on child abuse and 36.4% participants had good awareness about child abuse. Also, out of 44 teachers, 59% had average awareness, 41% had good awareness and none of teachers had poor awareness about child abuse [5]. Similarly, out of total 20 mothers, 15% mothers had inadequate knowledge and 85% have moderately adequate knowledge about child abuse while none of the mothers have adequate knowledge [6]. Likewise, out of total 100 mothers, 57% of the mothers had moderate knowledge and 43% of the mothers had inadequate knowledge regarding prevention and management of child abuse [7]. In this study, average level of knowledge among participants had decreased in post-test and good level of knowledge among participants had increased in post-test. Which was similar to the study conducted by Thenmozhi P et al. where, out of 30 school age children, 66.7% had inadequate knowledge, 33.3% had moderate knowledge and 0% had adequate knowledge in the pretest. The level of knowledge was improved after intervention and in the post-test 43.3% had moderate knowledge and 56.7% had adequate knowledge [8]. The results of Gincy, Jose, 2018 showed that, 47 % had poor knowledge, 30 % had average knowledge and 23 % had good knowledge in pre-test. After an educational program, 40 % had average knowledge and 60% had good knowledge in post-test [9].

In this study, there was no relationship between level of knowledge with their selected sociodemographic variables except sex, education status of mothers and occupation of father's occupation in post-test. In contrast to this, there was an association between awareness and education status at 5% level of significance but, all the selected demographic variables were not associated with awareness of caregivers [5]. Similarly, there was no any association between scores when compared to age, sex, occupation, religion, socio-economic status, parental status, previous source knowledge except education status and also maximum demographic variables of parents do not affect the level of knowledge except education status [10]. In this study, the respondents belonged to 15-16 years (51%), 17-18 years (33 %), 13- 14 years (10%) and 19 years (5%). There was no significant association found between the level of knowledge related to adolescents with their age in pre and post-test. Regarding gender of adolescents, 50% were females and 50% were males. There was no significant association found between the level of knowledge to adolescents with their gender in pre and post-test. There is no significant association found between the level of knowledge related to adolescent with class in pre-interventional and post-interventional which is similar to the findings of study done by Kaur S. [11]. Likewise, pre-test level of knowledge regarding prevention of sexual abuse, showed that 80% of the female students had inadequate knowledge, 20% had moderately adequate and none of them had adequate knowledge. However, during the post-test 43.3% had adequate knowledge, 56.7% had moderately adequate knowledge and none of them had inadequate knowledge regarding sexual abuse. Highly significant difference was found between pre and post test scores of level of knowledge in all the areas and in the overall level of knowledge at $p \le 0.001$ level (t = 15.8). Similar findings were also observed in study conducted by Maneesha Kaur et al. where there was no significant association between knowledge regarding prevention of sexual abuse among female children with their selected demographic variables at p≤0.05 level [12].

In this study, significant difference in pre-test and post-test score of knowledge on child abuse was found through paired t-test. Hence the educational intervention was effective. The scores in pre-test and post-test were found to be statistically significant which determined the effectiveness of

educational intervention programme. In contrast to this, a study done by Deshpande A et al. found that medical and dental residents sere not sufficiently prepared to endure their roles in protection of child from being abused. A significant gap existed between recognizing signs of physical child abuse and responding effectively. Improvements in child abuse education and continuing education courses were advised to provide adequate knowledge [13].

CONCLUSION

Majority of participants have average level of knowledge in pre-test. The average knowledge of participants was decreased in post-test and good knowledge of participants was increased in posttest. The scores in pre-test and post-test were found to be statistically significant which determined the effectiveness of educational intervention program for prevention and control of child abuse.

ADDITIONAL INFORMATION AND DECLARATIONS

Acknowledgements: Authors deep gratitude goes to the Principal of Janaki Higher Secondary Boarding School, Janakpur-2, Nepal, for granting permission to carry out this study and special thanks goes to the teachers and staffs for their kind cooperation and help to carry out this research.

Funding: The authors received no funding for this work.

Competing Interests: The author declare that they have no competing interests.

Data Availability: Data will be available up on request to

corresponding authors after valid region.

REFERENCES

- 1. WHO. Child maltreatment: World Health Organization; 2016 [March 15, 2018].
- 2. Atteraya MS, Ebrahim NB, Gnawali S. Determinants of child 7. maltreatment in Nepal: Results from the 2014 Nepal multiple indicator cluster survey (the 2014 NMICS). Child abuse & neglect. 2018;76:400-7.
- Nepal Go. Nepal and the Millennium Development Goals, Final Status Report, 2000-2015. 8. Kathmandu: National Planning Commission. 2016.
- 4. Dhanalakshmi N, "Effectiveness of School based Educationon levels of knowledge, attitude and expressed practices regarding prevention of sexual abuse among schoolers at selected schools, Vellore", Indian Journal of Youth and Adolescent 9. Health. 2018;5(3):12-16.
- 5. Savitha A, Nalini M, Shetty R, Aruni G, Sukesh P. Awareness about Child Abuse among Care Givers and Teachers in Selected Rural Schools at Mangalore. Asian 10. Journal of Nursing Education and Research. 2016;6(4):476.
- **6.** Thangavelu SN. Assess the level of knowledge regarding child abuse

among the mothers in selected **11.** Kaur S. A Pre-experimental Study areas at Latur. Journal of child and dolescent behavior. Structured Teaching Programme 2016;4(1):e1000271-e. Structured Teaching Programme on Knowledge regarding

Malla, C., Rai, D., Poudel, P., & Hodlur, S. (2018). Effectiveness of Video Assisted Teaching Programme (VATP) on Prevention and Management of Child Abuse Among Mothers of Children in 12. Selected Rural Area, Mangalore. *Med Phoenix*. 3(1),66-70..

Prof. Mrs. Thenmozhi. P, Mrs. J. Uma, "A study to evaluate the Effectiveness of video assisted teaching on the knowledge regarding child abuse among school age children in selected 13. school, Coimbatore, International Journal of Scientific Research. 2019; 8(1).

Gincy, Jose, "Effectiveness of structured teaching programme on knowledge regarding prevention of sexual abuse among the female children in a selected school, Salem". 2018.

. Devi AM, Yadav R. Knowledge Regarding Child Abuse among Parents. International Journal of Advances in Nursing Management. 2016;4(3):191-193.

- Kaur S. A Pre-experimental Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge regarding Awareness about Sexual Abuse among the Adolescents studying in selected School of District Gurdaspur, Punjab. International Journal of Nursing.
- Maneesha Kaur, Lingaraju Ar,
 "The Effectiveness of Structured
 Teaching Programme on
 Knowledge Regarding Child
 Sexual Abuse among School Age
 Children". International Journal
 ofScienceandResearch(IJSR).
 2020;9(6):362 64.
- Deshpande A, Macwan C, Poonacha K, Bargale S, Dhillon S, Porwal P. Knowledge and attitude in regards to physical child abuse amongst medical and dental residents of central Gujarat: A cross-sectional survey. Journal of Indian Society of pedodontics and preventive dentistry. 2015;33(3):177.