Contents lists available at Thomson Reuters

The American Journal of Science and Medical Research

Journal homepage: http://globalsciencepg.org/ajsmr.html

Research Article

Prevention of Child Sexual Abuse: Parents' Knowledge and Attitudes

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http://dx.doi.org/10.17812/ajsmr436
Received :13 July, 2018
Accepted; 21 August, 2018
Available online : 31 September 2018

ISSN: 2377-6196© 2018 The Authors.
Published by Global Science Publishing Group. USA

Keywords: Sexual abuse; knowledge; attitude; parents; under 18 years age children; Nepal

ABSTRACT

Child abuse refers to any act that violates the rights of the child that endangers his or her optimum health, survival and development. Child Sexual abuse is the involvement of the child in any activity meant to provide sexual gratification to others. Children can be sexually abused by both adults and other children who are- by the virtue of their age or stage of development-in a position of responsibility , trust or power over the victim''. Twenty percent and five to ten percent of girls and boys, respectively, had experienced sexual abuse universally (WHO, 2014).The aim of this study was to identify the knowledge and attitude of parents regarding prevention of child sexual abuse (CSA). This was a cross-sectional survey in which parents of under 18 year children were selected through purposive sampling technique. This study was based on semi-structured questionnaire developed by Chen and Chen (2005), which was used being modified and face-to-face interview technique, was used for data collection. Among 137 respondents, most of the respondents (73.8%) had poor knowledge regarding child sexual abuse whereas minority of the respondents (.7%) had good knowledge regarding CSA. Around half of the respondents (49.6%) had good knowledge regarding prevention of CSA and maximum respondents (93.4%) had positive attitude towards prevention of CSA. This study concluded that the most of the parents had poor knowledge regarding CSA and only half of the respondents had good knowledge on CSA prevention. So, awareness program is needed for parents, with the aim of protecting children from preventable harm and consequences of sexual abuse. Therefore various interventional studies on this topic are needed to conduct for improvement of knowledge regarding child sexual abuse and its prevention.

1. Introduction

Child abuse refers to any act that violates the rights of the child that endangers his or her optimum health, survival and development.(1) Child abuse has serious physical and psychological consequences which adversely affect health.(1) Child abuse includes Physical abuse, Sexual abuse, Psychological abuse/ Emotional Abuse and Child neglect.(1).

Child Sexual abuse, also called 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.(2) WHO estimated that 73 million boys and 150 million girls under the age of 18 years had experienced various forms of sexual violence in their lifetime.(3) Prevalence of child sexual abuse was examined in the context of a global systematic review and meta-analysis of 55 studies from 24 countries worldwide that found for child sexual abuse, "prevalence estimates ranged from 8 to 31 % for girls and 3 to 17 % for boys.(4)

Children throughout the Nepal are at risk of child abuse and exploitation and recorded data illustrates that children are at the greatest risk of a wide range of forms of child abuse and exploitation. These forms of abuse and exploitation include, but are not limited to, child prostitution, child trafficking, domestic violence, and the absence of a juvenile justice system. Children in emergency situations are especially susceptible to abuse and exploitation when they become part of a displaced or traumatized population.(5)

In one of a national Study conducted in US, prevalence of child sexual abuse was 10.14 % out of which 24.8 % males and 75.2 % females were found.(6) Child physical abuse, maltreatment, and neglect were more prevalent among the individuals with child sexual abuse than among those without it. Similarly, a systematic review regarding the child sexual abuse in Japan revealed that the prevalence of child sexual abuse was categorized as contact child sexual abuse in which 10.4 % to 60.7 % females and 4.1 % males, penetrative child sexual abuse in which 1.3 to 8.3 % females and 0.5 to 1.3 % males was found.(7)

A nationally representative data on female adolescents (15-17 years) from 13 countries in sub-Saharan Africa were used to test an association between the dependent variables (orphan hood and parental absence) and sexual violence, both within countries and pooled across all countries. Approximately 10 % of adolescent girls reported past experiences of sexual violence; a third of those victimized were 14 years or younger at the time of their first forced encounter.(1,6,8)

A study on Prevalence of child sexual abuse among the high school children in a selected high public school in Kathmandu valley, Nepal in which 150 students including 76 boys and 74 girls participated. Of these, 41.3 % had experienced some sort of sexual abuse-verbal, exhibitionism, or body contact. The abuse was more prevalent among the boys which were 44.7 % than the girls which was 37.8 %, between the ages of 13-15 years. Majority (42.8%) of verbal abusers were strangers while indecent exposure (38.7%) and contact form (44.8%) of sexual offenders were their friends. They were abused not only on the way home but also at their own homes and by their own relatives. The study provides the general picture on the prevalence and type of sexual abuse among the adolescents of Kathmandu, Nepal.(3,6,9)

2. Material and Methods

The research design selected for the study was cross-sectional descriptive survey design to assess the knowledge and attitude among parents of under 18 years of children regarding prevention of child sexual abuse in a selected community of Inaruwa municipality, Sunsari and to provide information on the prevention of child sexual abuse. Population comprised of parents of a selected community of Sunsari.

Sample size was obtained using p as 10% from study conducted by Kaushik et al (2017), using cross sectional sample size determination formula,(10)

$$n = \frac{z^2\, p(1-p)}{d^2}$$

Z 1-α/2 = standard normal variate. (1.96),
p = expected proportion in the population (0.1).
d =Absolute error of precision (0.05)

Hence the estimated sample is 139. Purposive sampling method was used to select the respondents in the study area. The tool used for data collection was structured knowledge questionnaire to assess knowledge regarding CSA, questionnaire developed by Chen and Chen (2005) was modified and used to assess knowledge regarding CSA prevention, and Attitude scale developed by Chen and Chen (2005) was used being modified to assess attitude regarding prevention of child sexual abuse. Section 1 comprised questions related to demographic profile, section 2 contained Questionnaire related to knowledge regarding CSA, Section 3 contained Questionnaire related to knowledge regarding prevention of CSA and Section 4 contained Questionnaire related to attitude regarding prevention of CSA.

The data collection was done after formal administrative approval 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 questionnaire was filled by face to face interview technique.

3. Results and Discussion

Analysis and interpretation of data was done in accordance with the objectives laid down for the study. Out of 139 respondents, 137 of them provided complete information, and the remaining 2 (1.43 %) were excluded. Thus, only 137 respondents were included for the final analysis.

Table 1: Socio-demographic information of the respondents (Age, sex, Educational status) (n=137)

Socio-demographic variables		Frequency (f)	Percent (%)
Age group	20-29	44	32.1
	30-39	59	43.1
	40-49	28	20.4
	50-59	6	4.4
Sex	Female	99	72.3
	Male	38	27.7
Educational Status	Illiterate	5	3.6
	Literate	132	96.4
Level of education n=132	Primary level	30	22.7
	Lower secondary level	32	24.2
	Secondary level	30	22.7
	Higher secondary level	28	21.2
	Bachelor level	11	8.3
	Masters level or above	1	.8

Table 1 illustrates almost half of the respondents (43.1%), were in the age group 30-39 years, whereas minority of the respondents (6.6%) were in the age group 50-59 years with the mean age of 33.35±7.691 years. Among the total respondents, most of the respondents (72.3%) were females. Almost all of the respondents (96.4%) were literate with around one-fourth (24.2%) of the respondents having a lower secondary level education, whereas only 1 respondent (.7%) had attained master level education.

Table 2 reveals that almost half (55.5%) of the respondents were homemaker, whereas only one of the respondent (7%) was labour. Less than half (43.8%) of the respondents had two children, whereas only a few (3.6%) of the respondents had four

or more children. Less than fifty percent (44.5%) of the respondents had main source of income that was enough for 6 months, whereas around one fourth (23.6%) of the respondents had the main source of income that was enough for about 6-11 months. Most of the respondents (67.9%) belonged to nuclear family, whereas 2.2% were from extended family. Most of the respondents (68.6%) received information regarding child abuse from radio/television, while only 13.1 % of the respondents had received information from an health personnel.

Table 2: Socio-demographic information of the respondents (Occupation, Number of children, Economic Status, Type of Family and Source of Information)

Socio-demographic variables		Frequency (f)	Percent (%)
Occupation	Agriculture	8	5.8
	Service	13	9.5
	Business	29	21.2
	Labour	1	.7
	Homemaker	76	55.5
	Others	10	7.3
No. of child/children	One	45	32.8
	Two	60	43.8
	Three	27	19.7
	Four or more	5	3.6
Economic status	Main source of income is enough for 6 months	61	44.5
	Main source of income is enough for 6-11 months	36	26.3
	Main source of income is enough for 12 months and surplus	40	29.2
Type of family	Nuclear	93	67.9
	Joint	41	29.9
	Extended	3	2.2
Source of information	Health personnel	18	13.1
	Newspaper	33	24.1
	Radio, television	94	68.6
	Others	39	28.5

Table 3 shows that most of the respondents (63.5%) answered that CSA as involvement of child in any sexual activity without his consent. Around fifty percent (47.8%) of the respondents stated physical abuse under the type of CSA. Almost half of the respondents stated school for the place of occurrence of CSA and one third of the respondents (34.3%) stated psychological effect under the effects of CSA.

Table 3: Parents' knowledge regarding child sexual abuse (n=137)

Variables		Frequency (f)	Percent (%)
Definition of CSA	Involvement of child in physical abuse	16	11.7
	Forcing the child for sexual intercourse	34	24.8
	Involvement of child in pornography	6	4.4
	Involvement of child in any sexual activity without his consent	87	63.5
Types	Rape	24	17.6
	Physical punishment	33	24.3
	Child prostitution	28	20.6
	Physical abuse	65	47.8
Place of occurrence	Home	43	31.6
	School	67	49.3
	Workplace	55	40.4
	Others	69	50.7
Effects	Growth and development delay	32	23.40
	Poor school performance	45	32.8
	Physical effect	35	25.5
	Psychological effect	47	34.3

Table 4: Knowledge score of the respondents regarding child sexual abuse (n=137)

Knowledge score	Frequency (f)	Percent (%)
Poor	101	73.8
Average	35	25.5
Good	1	.7

Table 4 illustrates most of the respondents (73.8%) had poor knowledge regarding CSA, whereas only a single respondent (.7%) had good knowledge regarding CSA.

Table 5 highlights that majority of the respondents (89.8%) were aware that knew that the problem of CSA exists around the world. Maximum respondents (85.4%) knew that children are most likely to be sexually abused by familiar people. The majority of respondents (77.4%) knew that a person who has sexually abused a child will likely repeat the offense. Less than fifty percent of the respondents (44.5%) knew that if the child has been sexually abused, there will usually be no obvious physical evidence. One third of the respondents (33.6%) knew that females can sexually abuse the children. More than one

fourth of the respondents (27.7%) knew boys can be sexually abused. Almost all respondents (94.9%) knew that the child who was sexually abused will be held back from disclosing the episode by the abuser. Almost all of the respondents (94.2%) knew that CSA is the fault of molester. Majority of the respondents (76.6%) stated that children who report being sexually abused can be believed. Majority of the respondents (93.4%) knew that in most cases men sexually abuse the children.

Table 5: Parents' knowledge regarding prevention of child sexual abuse

Statements	Answered correctly	
	Frequency (f)	Percent (%)
The problem of child sexual abuse exits around the world. (True)	123	89.8
Children are most likely to be sexually abused by familiar people. (True)	117	85.4
A person who has sexually abused a child will likely repeat the offense. (True)	106	77.4
If a child has been sexually abused, there will usually be no obvious physical evidence. (True)	61	44.5
Females cannot sexually abuse the children. (False)	46	33.6
Boys cannot be sexually abused. (False)	38	27.7
The child who was sexually abused will be held back from disclosing the episode by the abuser. (True)	130	94.9
Child sexual abuse is the fault of molester. (True)	129	94.2
Children, who report being sexually abused, can be believed. (True)	105	76.6
Men sexually abuse the children in most cases. (True)	128	93.4

Table-6: Knowledge score of the respondents regarding prevention of child sexual abuse (n=137)

Knowledge Score	Frequency (f)	Percent (%)
Poor	5	3.6
Average	64	46.7
Good	68	49.6

Table 6 shows that nearly half of the respondents (49.6%) had good knowledge regarding CSA prevention whereas only a few of the respondents (3.6%) had poor knowledge regarding CSA prevention (2.4891 ±.51616).

Table 7: Parents' attitude regarding prevention of child sexual abuse (n=137)

Variables	Agree		Disagree	
	(f)	(%)	(f)	(%)
CSA prevention education is required for children in school	136	99.3	1	.7
Willing to let your child learn CSA prevention education in their school	136	99.3	1	.7
CSA prevention education may induce your child to know too much about sex	17	12.4	120	87.6
No need to conduct CSA prevention education because the child will acquire such knowledge as he/she grows up	91	66.4	46	33.6
CSA cases are very few so it is unnecessary for children to learn how to prevent CSA	132	96.4	5	3.6

f=Frequency, %=percentage

Table 7 illustrates that almost all of the respondents (99.3%) believed that CSA prevention education is required for children in school and were willing to let their child learn regarding CSA prevention in their school. Maximum of the respondents (87.6%) disagreed that CSA prevention education may induce their child to know too much about sex. Most of the respondents (66.4%) agreed that there is no need to conduct CSA prevention education because the child will acquire such knowledge as he/she grows up. Almost all of the respondents (96.4%) agreed that CSA cases are very few so it is unnecessary for children to learn how to prevent CSA.

Table 8: Attitude score of the respondents regarding prevention of child sexual abuse (n=137)

Attitude score	Frequency (f)	Percent (%)
Positive	128	93.4
Negative	9	6.6

Table 8 illustrates that maximum respondents (93.4%) had positive attitude towards prevention of child sexual abuse.

Table 9 reveals that there was no significant association between the socio-demographic variables of the respondents and knowledge regarding prevention of CSA.

Table 9: Association of Knowledge regarding prevention of CSA with selected Demographic Variables (Age, Sex, and Educational Status) of the respondents (n=137)

Variables		Good knowledge	Average knowledge	Poor knowledge	P value	Chi-square
Age	20-29	17	27	0	.333	6.868
	30-39	31	27	1		
	40-49	18	10	0		
	50-59	2	4	0		
Sex	Female	44	50	5	.084	4.594
	Male	24	14	0		
Educational status	Illiterate	1	4	0	.311	2.338
	Literate	67	60	5		
Level of education	Primary level	16	13	1	0.553	8.777
	Lower secondary level	19	13	0		
	Secondary level	16	13	1		
	Higher secondary level	12	13	3		
	Bachelor level	4	7	0		
	Master level or above	0	1	0		

Table 10: Association of Knowledge regarding Prevention of CSA with Selected demographic variables (Occupation, Number of Children, Economic Status, Type of Family, and Source of information) of the respondents (n=137)

Variables		Good knowledge	Average knowledge	Poor knowledge	P value	Chi-square
Occupation	Agriculture	3	5	0	.730	6.947
	Service	7	5	0		
	Business	17	12	0		
	Labour	0	1	0		
	Homemaker	36	35	5		
	Others	5	6	0		
No. of child/children	One	22	21	2	.190	8.723
	Two	31	27	2		
	Three	15	12	0		
	Four or more	0	4	1		
Economic status	Main source of income is enough for 6 months.	32	28	1	.493	3.402
	Main source of income is enough for 6-11 months.	20	14	2		
	Main source of income is enough for 12 months and surplus.	16	22	2		
Type of family	Nuclear	49	40	4	.205	5.921
	Joint	16	24	1		
	Extended	3	0	0		
Source of information	Health personnel	11	7	0	.454	1.578
	Newspaper	16	17	0	.404	1.813
	Radio, television	47	43	4	.831	.369

Table 10 illustrates the chi-square significance test of p value> 0.05 which represents no significant association between the selected socio-demographic variables and knowledge regarding prevention of child sexual abuse.

Table 11 illustrates the chi-square significance test of p value > 0.05. The findings of the study represents that there was no significant association between the age, sex, educational status, and level of education of the respondents and attitude regarding prevention of CSA.

Table 11: Association of attitude regarding prevention of CSA with selected demographic variables (age, sex, educational status) of the respondents (n=137)

Variables		Positive attitude	Negative attitude	P value	Chi-square
Age	20-29	40	4	.362	3.195
	30-39	54	5		
	40-49	28	0		
	50-59	6	0		
Sex	Female	91	8	.249	1.328
	Male	37	1		
Educational status	Illiterate	5	0	.546	.365
	Literate	123	9		
Level of education	Primary level	30	0	.308	5.980
	Lower secondary level	31	1		
	Secondary level	27	3		
	Higher secondary level	24	4		
	Bachelor level	10	1		
	Master level or above	1	0		

Table 12: Association of attitude regarding prevention of CSA with selected demographic variables (Occupation, number of children, economic status, type of family, source of information) of the respondents (n=137)

Variables		Positive attitude	Negative attitude	P value	Chi-square
Occupation	Agriculture	8	0	.915	1.485
	Service	11	1		
	Business	28	1		
	Labour	1	0		
	Homemaker	70	6		
	Others	10	1		
No. of child/children	One	41	4	.775	1.108
	Two	56	4		
	Three	26	1		
	Four or more	5	0		
Economic status	Main source of income is enough for 6 months.	56	5	.785	.484
	Main source of income is enough for 6-11 months.	34	2		
	Main source of income is enough for 12 months and surplus.	38	2		
Type of family	Nuclear	87	6	.158	3.694
	Joint	39	2		
	Extended	2	1		
Source of information	Health personnel	18	0	.227	1.457
	Newspaper	31	2	.892	.018
	Radio, television	85	9	.036	4.406

Table 12 illustrates that there was significant association between the source of information (radio, television) and attitude regarding prevention of CSA (p value 0.036).

Table 13 illustrates the chi-square significance test with p value > 0.05 which represents no significant relationship between the knowledge and attitude of the respondents regarding prevention of CSA.

In this study, the age of the respondents ranged from 20-59 years and nearly half of the respondents (43.1%) were of the age group 30-39 years whereas minority of the respondents (6.6%) were of the age group 50-59 years with the mean age of 33.35 years and SD±7.69. Among the total respondents, most of the respondents (72.3%) were females. Almost all of the respondents (96.4%) were literate with around one-fourth (24.2%) of the respondents had lower secondary level education

whereas only 1 respondent (.7%) had master level education. Likewise, almost half (55.5%) of the respondents had the occupation of homemaker whereas only 1 (7%) respondent was labour. Less than half (43.8%) of the respondents had two children whereas minority (3.6%) of the respondents had four or more children. Less than fifty (44.5%) of the respondents had main source of income that is enough for 6 months whereas around one fourth (23.6%) of the respondents had the main source of income that is enough for 6-11 months. Most of the respondents (67.9%) had nuclear family whereas 2.2% were of extended family. Most of the respondents (68.6%) had the source of information from radio; television. 13.1 % of the respondents had the source of information from health personnel.

Table 13: Association between the knowledge and attitude of the respondents regarding prevention of child sexual abuse. (n=137)

Knowledge score	Attitude score		P value	Chi-square
	Positive attitude	Negative attitude		
Good	65	3		
Average	59	5	.342	2.146
Poor	4	1		

According to the study, most of the respondents (73.8%) had poor knowledge regarding child sexual abuse whereas minority of the respondents (.7%) had good knowledge regarding CSA which is corresponding to the research conducted by Al-Refai (2011), found that 68 % of the mothers did not know about CSA.(6) This finding is contrary to the result of the study conducted by Thangavelu (2016) which revealed majority of the respondents (85%) had moderately adequate knowledge on CSA, and to the findings of the study conducted by Gurung and Bhattarai (2015), which found that one third of the parents (35.8 %) had good knowledge on CSA.(7)

Among total respondents, around half of the respondents (49.6 %) had good knowledge regarding CSA prevention which is contradictory to the study conducted by Mlekwa et.al. (2016), found that 95.6% of the parents had high level of knowledge about CSA prevention. Maximum respondents (89.8%) knew that the problem of CSA exists around the world.(11) Maximum respondents (85.4%) knew that children are most likely to be sexually abused by familiar people. Majority of the respondents (77.4%) knew that a person who has sexually abused a child will likely repeat the offense. Less than fifty of the respondents (44.5%) knew that if the child has been sexually abused, there will usually be no obvious physical evidence. One third of the respondents (33.6%) knew that female can sexually abuse the children. More than one fourth of the respondents (27.7%) knew boys can be sexually abused. Almost all respondents (94.9%) knew that the child who was sexually abused will be held back from disclosing the episode by the abuser. Maximum of the respondents (94.2%) knew that CSA is the fault of molester. Majority of the respondents (76.6%) stated that children who report being sexually abused can be believed. Maximum of the respondents knew that men sexually abuse the children in most cases.(9)

Maximum respondents (93.4 %) had positive attitude towards prevention of CSA, which is nearly equivalent to the study conducted by Mlekwa et.al. (2016), concluded that almost all of the parents (98.7%) had positive attitude towards prevention of CSA.(11) The findings of the study revealed that there was no significant association between the age, sex, number of child/children and economic status of the respondents and knowledge regarding CSA prevention as the chi-square significance test of p value is greater than 0.05. In this study there was non-significant relationship between the knowledge level regarding CSA prevention with their education, occupation and type of family, which is corresponding to the study conducted by Mlekwa et.al. (2016).(11) Likewise, no significant association between age, sex, education, occupation, no. of child/children, economic status and type of family and attitude regarding CSA prevention which is similar to the findings of the study.(11) However, significant association was found between the source of information (radio, television) of the respondents and attitude regarding CSA prevention as p value was < 0.05 (p value 0.036).(12) Also, no significant association was found between the knowledge and attitude of the respondents regarding prevention of child sexual abuse.(3, 5)

4. Conclusion:

This study concluded that the most of the parents had poor knowledge regarding CSA whereas minority of the respondents had good knowledge regarding CSA. Among total respondents, around half of the respondents had good knowledge regarding CSA prevention, however only half of the respondents had good knowledge on CSA prevention. Maximum respondents had positive attitude towards prevention of CSA. He study revealed that knowledge and attitude of the parents regarding CSA prevention was good, but significant proportion of the parents still had poor knowledge in the context of overall child sexual abuse. Likewise the current study illustrates significant association between the source of information (radio, television) and the attitude of the parents regarding CSA prevention Awareness raising activities by using media sources as a prime source on these lagging segments can aid to increase their knowledge. This study provided a new perspective to the unexplored area of CSA and unlocked the door for a large scale study to get the actual scenario of its knowledge as well as its occurrence throughout the nation. Information regarding the consequences of child sexual abuse and its preventive measures should be disseminated to parents, teachers and children too (13,13).

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Acknowledgment

Our sincere thanks goes to Asian College for Advance Studies, and Inaruwa municipality, Sunsari for the opportunity and the help rendered to carry out the investigations. We would also like to thank to the people who gave valuable contribution with enormous support in ideal discussion. We are thankful to all the participants who took part in this study.

Competing Interests

The authors have declared that no competing interests exist.

References

[1]. Subedi S. A complete text book of Child Health Nursing. 1st ed. Kathmandu, Nepal: Divya Deurali Prakashan Pvt. Ltd; 2007.

[2]. Tanaka M, Suzuki YE, Aoyama I, Takaoka K, MacMillan HL. Child sexual abuse in Japan: A systematic review and future directions. Child Abuse Negl. 2017 Apr;66:31–40.
[3]. Singh MM, Parsekar SS, Nair SN. An Epidemiological Overview of Child Sexual Abuse. J Fam Med Prim Care. 2014;3(4):430–5.
[4]. Pérez-Fuentes G, Olfson M, Villegas L, Morcillo C, Wang S, Blanco C. Prevalence and Correlates of Child Sexual Abuse: A National Study. Compr Psychiatry. 2013 Jan;54(1):16–27.
[5]. Gurung LB, Bahattarai S. Knowledge Of Child Abuse Among Parents Of Under 5 Years Children In Kathmandu, Nepal. J Manmohan Meml Inst Health Sci. 2015 Jan 31;1(4):9–13.
[6]. Rajbanshi L. Prevalence of sexual abuse among school children. J Chitwan Med Coll. 2012;1(2):69–71.
[7]. Thangavelu SN. Assess the Level of Knowledge Regarding Child Abuse among the Mothers in Selected Areas at Latur. J Child Adolesc Behav [Internet]. 2016 Jan 28 [cited 2018 Jul 1];4(1). regarding-child-abuse-among-themothers-in-selected-areas-at-latur-2375-4494-1000271.php?aid=67358
[8]. Barth J, Bermetz L, Heim E, Trelle S, Tonia T. The current prevalence of child sexual abuse worldwide: a systematic review and meta-analysis. Int J Public Health. 2013 Jun;58(3):469–83.
[9]. Kidman R, Palermo T. The relationship between parental presence and child sexual violence: Evidence from thirteen countries in sub-Saharan Africa. Child Abuse Negl. 2016 Jan;51:172–80.
[10]. Kaushik A, Daniel S. Knowledge and Attitude of Mothers regarding Prevention of Child Sexual Abuse. Int J Nurs Midwifery Res ISSN 2455-9318. 2018 Feb 2;4(4):42–8.
[11]. Mlekwa FM, Nyamhanga T, Chalya PL, Urassa D. Knowledge, attitudes and practices of parents on child sexual abuse and its prevention in Shinyanga district, Tanzania. Tanzan J Health Res [Internet]. 2016 Jan 1 [cited 2018 Jul 1];18(4).
[12]. Sanjeev Kumar Shah* (first). Prevalence of Undernutrition among Musahar Children Aged Between 12 To 59 Months in Urban Siraha District, Nepal. MOJ Public Health. 2016 Jun 21;4(5):1–7.
[13]. Mlekwa FM, Nyamhanga T, Chalya PL, Urassa D. Knowledge, attitudes and practices of parents on child sexual abuse and its prevention in Shinyanga district, Tanzania. Tanzan J Health Res [Internet]. 2016 Jan 1 [cited 2018 Jul 1];18(4).