



Impact of teacher training program concerning recognition of child abuse and neglect in schools of Rishikesh

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Abstract

Background: Children in 5-12 age group are most at risk of different kinds of abuse and exploitation. Street children, children at work, children in institutional care and school children were found to be particularly vulnerable. Teachers are key professionals who are particularly well-placed to identify, respond and report CAN, also to teach prevention strategies to children.

Aim & Design: The study was conducted on sample of 400 teachers. A written consent was taken from the school principal and teachers participating in the study. First, a pre-test was conducted on teachers using a validated questionnaire of regarding CAN. A TTP was conducted by principal investigator using a power-point presentation on CAN, followed by post-test evaluation using same questionnaire and follow-up questionnaire after 6 months.

Results: A significant difference was seen between levels of KAP regarding CAN among school teachers in both pre and post-test questionnaire assessment. We also found a significant difference between levels of KAP regarding CAN after six months follow-up.

Conclusion: School personnel, educators and psychologists, are first line of defence in protecting children from abuse. Teachers are an important contribution in early detection and prevention by reporting suspected cases of CAN, educating teachers regarding CAN is extremely important.

Keywords: Child abuse, street children, CAN, Rishikesh

Introduction

Children are vulnerable and need love, care, shelter, and protection from their caretakers for appropriate growth and development. Abuses against these beings often ruin their childhood, leading to inability in reaching their full potential—both physically and mentally. India houses 1.39 billion people with 164.5 million of the total children and 73.1 million among them are below 18 years ^[1]. A total of 1,49,404 cases of crime against children were registered during 2021, showing an increase of 16.2% over 2020 (1,28,531 cases). A total of 19,055 cases of crime against children were registered during 2021, showing an increase in registration by 26.7% over 2020 (15,043 cases) ^[2]. Human Trafficking (Sec.370 & 370A IPC) (Children only) in Uttarakhand state 2021 was 0.2% whereas Selling of Minors for Prostitution was 0.1 % per lakh population. While, the attempt to Commit Rape (Sec. 376 r/w 511 IPC) in Uttarakhand state 2021 was 0.1 % per lakh population. State wise analysis shows Madhya Pradesh (13.2%), Uttar Pradesh (11.8%), Maharashtra (11.1%), West Bengal (7.9%), Bihar (5.1%) crime rate. Among the nine Himalayan states, Uttarakhand recorded the maximum number of rape and child sexual abuse cases in 2020, reported the National Crime Records Bureau (NCRB). The state reported 487 cases of sexual assault, the highest among the nine states, including Arunachal Pradesh, Himachal Pradesh, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim and Tripura. India being a country with huge population, and birth registration of just 62%. Every second child in

India is underweight. Every third malnourished child in the world lives in India ^[3]. According to the American Association of Pediatric Dentistry, child neglect is defined as “willful failure of parent or guardian to seek and follow through with treatment necessary to ensure a level of oral health essential for adequate function and freedom from pain and infection” ^[3]. Child abuse and neglect is all of the actions and inactions that prevent or limit a child’s development which are directed at the child by an adult such as mother, father, or the caregiver and which are described as inappropriate or destructive by societal rules and professionals. It has often been said that children who have been abused often grow up to abuse their own children, their spouse, and even their parents, a situation referred to as “RETRIBUTION ABUSE” ^[4].

Child abuse and neglect constitutes a Pediatric, public health problem of enormous magnitude. In India, it is often a hidden phenomenon, especially when it happens in the home or by family members. Most of these crimes go unreported as numbers of cases of Child abuse are hard to attain ^[5]. Various kinds of abuse are physical abuse, emotional abuse, sexual abuse, neglect and societal abuse ^[6]. The first published report in contemporary medical literature was in 1946, and the term “battered-child syndrome” was coined in 1962. Unexplained injuries to protected parts of the body such as the buttocks, thighs, torso, frenulum, ears and neck are suggestive of child abuse ^[7]. The awareness of CAN is must among school teachers as most of the time a child spend in the school other than the home ^[8].

Objectives of the Study

1. To assess the pretest levels of Knowledge, Attitude and Expressed Practices regarding Child Abuse and Neglect among school teachers.
2. To assess the effectiveness of the Teacher Training Program on levels of Knowledge, Attitude and Expressed Practices regarding prevention of CAN.
3. To assess the post-test levels of Knowledge, Attitude and Expressed Practices regarding detection of Child Abuse and Neglect among school teachers.

Hence, to induce all these in teachers and educational workers in Rishikesh, this study aims to assess the impact of teacher training program concerning recognition of child abuse and neglect in schools of Rishikesh.

Material and methods

Key elements of study design

1. Selection of schools
2. Eight schools fulfilled the inclusion criteria
3. Base line data collection
4. Intervention in the form of can power point presentation
5. Post intervention data collection
6. Six month follow up data collection

After ethical committee approval, the study was conducted on the sample population of 400 teachers (both males and females) working in 8 different government and private schools in Rishikesh, Uttarakhand, India. A written consent was taken from the school principal as well as the teachers participating in the study. The inclusion criteria for selection of the schools was school authorities who gave the permission to conduct a teacher training program in school premises. First, a pre-test was conducted on the teachers using a validated questionnaire [20] with 16 questions divided into four categories depicting the General demographic information of the participant, their Knowledge, Attitude and Practices regarding child abuse and neglect. A teacher training program was then conducted by the calibrated principal investigator using a power-point presentation on CAN, followed by a post-test using the same questionnaire. A follow-up questionnaire was then taken 6 months later from the same teachers.

All the data was entered in the proforma, and result were calibrated using statistical analysis.

Data management & statistical analysis

Table 1: Comparison of Knowledge Scores before and After Intervention

Questions Related to Knowledge	Response						
	Pre		Post 1 month		Post 6 Months		p-value
	Mean	S.D.	Mean	S.D.	Mean	S.D.	
K1	0.80	0.40	1.25	0.362	1.60	0.49	0.001*
K2	0.87	0.34	1.02	0.27	1.12	0.84	0.0001*
K3	0.94	0.24	1.27	0.18	1.91	0.29	0.0001*
K4	0.94	0.24	1.17	0.17	1.46	0.72	0.0001*
K5	0.81	0.39	0.85	0.82	0.89	0.31	0.096
K6	0.80	0.82	0.94	0.24	0.96	0.21	0.0001*
K7	0.93	0.25	1.26	0.19	1.55	0.71	0.0001*
K8	0.98	0.13	1.10	0.10	1.43	0.66	0.001*

When comparison was done about the knowledge before and after the intervention, the change in knowledge scores

The data obtained was statistically analysed by the statistician. A master table was prepared on an excel sheet and the total data was subdivided and distributed meaningfully and presented as individual tables along with graphs.

Statistical procedures were carried out in 2 steps.

1. Data compilation and presentation - compiled on a MS Office Excel Sheet (4 2019, Microsoft Redmond Campus, Redmond. Washington, United States)
2. Statistical analysis

Statistical analysis was done using Statistical Package of Social Science (SPSS Version 21; Chicago Inc., USA). Data comparison was done by applying specific statistical tests to find out the statistical significance of the comparisons. Quantitative variables were compared using mean values and qualitative variables using proportions.

The following Statistical formulas were used:

Chi-square (χ^2) test and ANOVA

Results

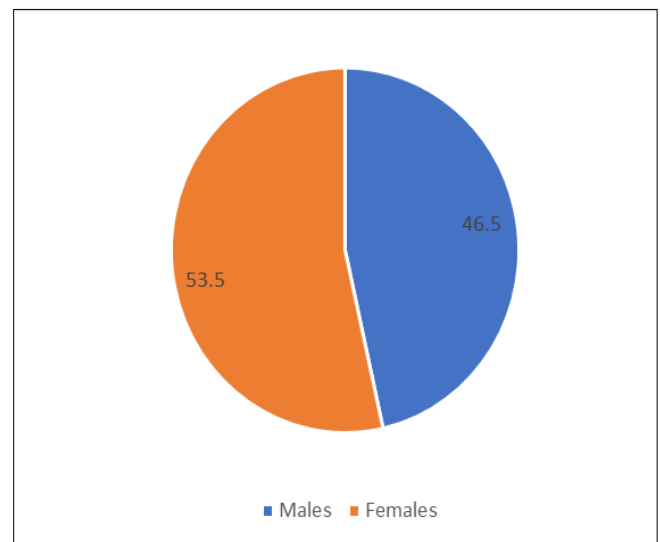


Fig 1: Mean Age and Gender Distribution of the Study Population

Out of 400 teachers taken up for the study, 215 teachers were females (53.5%) and 185 teachers were males (46.5%). [figure 1]

from baseline to after intervention was found to be statistically significant for K1, K2, K3, K4, K6, K7

(p=0.0001) after applying ANOVA except for question K5. Knowledge scores after 6 months of intervention were more

as compared to immediately after intervention. [Table 1]

Table 2: Comparison of Attitude Scores before and after Intervention

Questions Related to Attitude	Response						p-value
	Pre		Post 1 month		Post 6 Months		
	Mean	S.D.	Mean	S.D.	Mean	S.D.	
A1	0.93	0.25	0.96	0.19	1.03	0.83	0.027*
A2	0.90	0.30	1.01	0.29	1.20	0.79	0.0001*
A3	0.92	0.26	1.02	0.24	1.12	0.82	0.0001*

When comparison was done about the attitude before and after the intervention, the change in attitude scores from baseline to after intervention was found to be statistically

significant for all the attitude questions (p=0.0001) after applying ANOVA. Also, the scores increased after 6 months of intervention. [Table 2]

Table 3: Comparison of Practice Scores before and after Intervention

Questions related to practices	Response						p-value
	Pre		Post 1 month		Post 6 Months		
	Mean	S.D.	Mean	S.D.	Mean	S.D.	
P1	0.73	0.72	1.00	0.78	1.00	0.78	0.0001*
P2	0.71	0.71	0.98	0.76	0.98	0.76	0.0001*
P3	0.81	0.39	0.84	0.80	0.87	0.34	0.250
P4	0.75	0.74	0.89	0.32	0.94	0.23	0.0001*
P5	0.91	0.75	0.96	0.21	0.98	0.14	0.090

When comparison was done about the practices before and after the intervention, the change in attitude scores from baseline to after intervention was also found to be statistically significant for P1, P2 and P4 practice questions (p=0.0001) after applying ANOVA except for P3 and P5. Also, the scores increased after 6 months of intervention. [Table 3]

These study findings are in support with the findings of a study conducted by Hynniewta B *et al.* [10] in 2017, also studied regarding teacher’s knowledge and attitude on child abuse and it was found that Majority of the school teachers (84%) had average knowledge and have favourable attitude towards identification and reporting of child abuse.

Discussion

In our study, we have assessed the effectiveness of teacher training program on levels of knowledge, attitude and practices regarding the prevalence on child abuse and neglect among school teachers in both private and government schools of Rishikesh.

Another study conducted by Shivashankarappa PG *et al.* [11] In 2022 on CAN using a video intervention concluding that the mean knowledge score of teachers before intervention was 9.13. After video intervention knowledge score was improved to 14.46 (p < 0.05). They concluded that video intervention was effective in improving the knowledge of school teachers.

The demographic variables were collected by a principal investigator using a likert scale and checklist for knowledge, attitude and expressed practice of the teachers.

In a gender based study conducted by Naregal PM *et al.* [12] in 2015 among primary school teachers regarding their knowledge on prevention of CAN on school teachers concluding that in pre-test majority 18 (60%) of teachers had poor, 6 (20%) had average and only 6 (20%) had good knowledge regarding CAN.

In our study on checking the Knowledge about CAN amongst the teachers, the results showed that about 60.3% of the teachers had knowledge about CAN, while only 42% of the teachers knew the difference between CAN. 90.8% teachers believed in children having rights and about 58.8% teachers agreed that if the child stated that an adult has caused harm, accusation must be addressed. Only 26.8% teachers have said yes to the fact that child who have been abused usually inform/tell someone soon after the abuse. And only 25.8% of teachers believed that dental neglect is also a kind of child neglect. Whereas 67.5% teachers agreed to the fact that not having a child’s vaccine done is a sign of child neglect. And only 52.5% teachers had knowledge regarding the child helpline number in India. The results were statistically non-significant for question K5 i.e, the ability of the school teachers to understand if an abused child would report the incidence to anyone or not. A probable reason for this could be that Rishikesh is a town in which there is lack of regular reinforcement about awareness of CAN followed by personal beliefs and biases in both students as well as educators.

We also studied the Attitude of the teachers towards CAN before intervention, consisting of three questions termed as A1, A2 and A3. In which only 36.5% of teachers were aware regarding the different types of CAN. While 43.5% of the teachers were aware of the child protection act (NCPCR ACT 2005). And only 41% of the teachers have heard regarding the UNICEF convention of the child’s rights.

Our findings were supported by a study conducted by Zellman and Bell [13] in 1990 on school teachers describing the attitude of teachers in reporting a case of CAN found that when deciding whether to report, teachers take into consideration the quality of their relationship with the child’s family, and their knowledge of relationship within the family.

The expressed practices of the participating teachers were also assessed before intervention by the answer’s answered by the teachers to five questions termed as P1, P2, P3, P4 and P5. Where only 15.5% of the teachers in their lifetime have come across cases of CAN and only 14.8% of the teachers have ever tried to help the victims of CAN. Only

25.3% of teachers agreed to report a case of CAN. 18% of teachers were able to inform the concerned people if the child is abused. And only 24% of the teachers were ready to take steps to find out the truth if the child is a victim of CAN. The results were statistically non-significant for questions P3 and P5 i.e, the ability of teachers to report a case of CAN. A prime reason for this could be the lack of education on how to address CAN.

These findings are supported with the findings of a study conducted in a recent Australian survey, only 49% of teachers who had detected a likely case of CAN indicated that they have ever reported a their suspicions. To facilitate teachers, Australian states and territories have made mandatory legal reporting cases obligations for teachers and provide training about CAN ^[14].

Another study conducted in USA where 84% of cases of CAN suspected in schools were not reported ^[15].

We also assessed the Knowledge, Attitude and Practices of participating teachers after six months follow-up after the intervention. The post intervention results showed significant difference in the knowledge of the participating teachers with increase in the knowledge of the teachers in relation to CAN.

These findings are supported with the findings of a study conducted by Kanak M and Avci N ^[16] in 2018 to analyze the effect of the training program to promote preservice preschool teachers' knowledge and awareness of emotional neglect and abuse finding the following results: There was a significant difference in the mean pre-test scores of the training group and non-training group. There was a significant difference in the mean post-test scores of the training group and non-training group.

Another study conducted by Walsh *et al.* ^[17] in 2005 reporting that 93% of teachers received training in child abuse and after this training they assumed teachers gained responsibility to report suspicions of child abuse.

In our study, the post intervention results showed significant difference in the expressed practices of the participating teachers with increase in the attitude of the teachers in awareness, and practicing reporting of case of CAN.

These findings were also supported with the findings of a study conducted by Sari ^[18] in 2010 concluding that there was a significant decrease in the potential abuse scores of the experimental group after the training. The results advocated the effectiveness of the implemented training program.

Another study conducted by Çeçen-Eroğul and Kaf-Hasırcı ^[19] in 2013 supported our study by stating that the arising change was retained by the follow-up study conducted eight weeks after the experimental program.

Child abuse and neglect is all of the actions and inactions that prevent or limit a child's development which are directed at the child by an adult such as mother, father, or the caregiver. Every child deserves a loving environment where they are not afraid of parental or elderly figures. In India, it is often a hidden phenomenon, especially when it happens in the home or by family members. In recent years, the community has become increasingly aware of the problem of child abuse in our society. As teachers play a crucial role to identify, respond and report child abuse and neglect and to teach prevention strategies to children, they have the potential to intervene with children at risk of or experiencing abuse and neglect. Internationally, studies have found that teachers lack skills and confidence to

accurately detect CAN due to lack of knowledge about child protection processes as a barrier to reporting. Hence, the awareness of CAN is a must among school teachers which has been reiterated by the results of our study.

Limitations: Any questionnaire pertaining to KAP of CAN should be customised and validated as per the acceptable social practices of the region. The pre-validated questionnaire that we administered in our study was customized as per regions of Southern India. Since India is a very diverse country where social practices and languages change at every kilometer, the questionnaire should have been customised as per acceptable social practices of the Northern hilly region. Therefore in depth research is needed to determine and evaluate the significance of teacher training program and its awareness to increase the knowledge in teachers regarding CAN in the Hilly regions of Norther India.

There are fewer studies on the teacher training program regarding CAN and there is a dearth of longitudinal data pertaining to the intervention provided to teachers, our pilot study is first of its kind in the entire Norther Hilly regions of India that provides the effect of the fourth dimension viz Time on the KAP about Child Abuse and Neglect amongst school teachers of Uttarakhand State of India.

To conclude, School personnel, particularly educators and school psychologists, are a first line of defence in protecting children from abuse. Teachers can be an important contribution in early detection and prevention by reporting suspected cases of Child Abuse and Neglect. Hence, educating teachers regarding CAN is extremely important.

Why This Paper is Important to Paediatric Dentists

1. Pediatric dentists frequently see children for regular dental check-ups, making them key figures in early detection of abuse or neglect. Teachers, after being educated on child abuse and neglect, can provide critical information about a child's well-being, revealing signs of abuse or neglect that may not be apparent during a dental examination.
2. Interdisciplinary Collaboration and enhanced referral system in tandem with schools to identify, intercept and provide holistic care to children of Child Abuse and Neglect.
3. Integration into the Dental Home Model: Incorporating insights from teachers into the dental home model ensures that paediatric dentists can offer a more integrated and supportive environment for children. This collaboration aids in creating a safe, nurturing space where children's overall health needs, including psychosocial factors, are addressed.

Conflict of Interest: Nil

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