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Spring 2-1-2021

A study on Child Abuse, and its relationship with the attitude of adults and Socio – Demographic variables in Udupi Dist.

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ABSTRACT

A cross-sectional survey study on child abuse, and its relationship with the attitude of adults and Socio-demographic variables, in Udupi district, Karnataka, was carried out in different settings, a tertiary care hospital, selected schools, orphanages, and the community of Udupi district to identify the prevalence of different forms of abuse among children and to find the association between abuse and the socio-demographic factors. Further, the study aimed to provide professional assistance to those severely abused children in the form of counseling. The study further assessed the young adults' attitudes towards child abuse.

The study had two phases that went on side by side, wherein the first phase aimed to find the prevalence of abuse, of any form either physical, behavioural, sexual, and parental neglect and the second phase aimed to evaluate the abused children who needed intervention and provide professional counseling.

The record based retrospective study of five years (January 2008 to December 2012) was done on 148 children below 18 years of age admitted with burns to the burns unit of the hospital. Whereas in the hospital-based prospective study, 384 children admitted with burns, poisoning, abuse, any suspicious cases, and attempted suicide during the three years was (January 2013 to December 2015) included. Further 720 school children were taken using a multi-stage cluster sampling technique. Furthermore, the study was done among 141 orphanages children selected using purposive sampling from three randomly selected orphanages. Two hundred adults were selected from the community of school children to determine their attitudes on child abuse using a systematic sampling technique. The study used the following tools, developed by the investigator and validated by experts. The tools were: Form A-Background proforma of children, Form B-Socioeconomic status scale by O P Aggarwal (standardized tool), Form

C-Checklist for hospitalized children, Form D- Interview schedule for school children, Form E- Interview schedule for institutionalized children, Form F- Attitudes on Child Abuse Scale (ACAS) and Form G – Parent form. The reliability of the tools was established by appropriate methods and all the tools were pretested. A pilot study was carried out and the methodology was found feasible.

Overall 1393 children and 200 adults were studied from different settings. Most of the school children (51.2%) in the study were 14 to 18 years old and were males (52.4 %). It was also found that 21.9% of the fathers were alcoholics. Further, 7.6 % of the children reported being hurt by their father, mainly as a punishment at home, and it also included an alcoholic father beating their children. Among the total of 132 abused children, abuse was mainly due to an argument (31.8%) and punishment at home (28.78%). Behavioral abuse included mainly shouting (18.3), teasing (11.5) as well as the use of abusive language (10.8), by the father (10.4), and also by friends (9.4) in the last six months. Among the 183 behaviorally abused children, the reason for abuse was mainly argument (45.35%), punishment at home (21.31%), and abuse by an alcoholic father (22.4%). Sexual abuse included touching the body inappropriately (2.7%) and fondling (2.1%). Among the 28 sexually abused children, most of the abuse (42.85%) happened in their neighbourhood. (50%). Parental form of negligence included mainly being dominated (19.4%) and teased (16.6%) by the family as well as the people around them. Among the 110 children affected by parental neglect, 61.81% of the children were living in an unsafe house and hailed from a disturbing family background.

The significant sociodemographic variables of physical abuse identified were, age of the child less than 13 years (OR 0.419; CI 0.256, 0.685; $p = .001$), violence in the family (OR 0.178; CI 0.072, 0.436; $p = <.001$), young mothers aged 20-30 years (OR 3.334; CI 1.607, 6.920; $p = .001$), alcoholic father (OR 0.587; CI 0.351, 0.982; $p = .043$).

The significant sociodemographic variables of behavioral abuse identified were age of the child between 14 -18 years (OR 1.887; CI 1.228, 2.901; $p = .004$), violence in the family (OR 0.068; CI 0.019, 0.242; $p = <.001$), young mothers aged 20-30 years (OR 2.758; CI 1.488, 5.113; $p =.001$), and alcoholic fathers (OR 0.580; CI 0.366, 0.920; $p =.021$). The significant sociodemographic variables of sexual abuse identified were female gender (OR 0.305; CI 0.126, 0.738; $p = .009$). The significant sociodemographic variables of parental neglect identified were the age of the child less than 13 years (OR 0.363; CI 0.190, 0.691; $p =.002$), violence in the family (OR 0.109; CI 0.037, 0.327; $p = <.001$), working mother (OR 0.526; CI 0.279, 0.992; $p =.047$), low education of mothers either primary education or illiterate (OR 0.390; CI 0.157, 0.969; $p =.043$), and poor socio-economic status (OR 0.394; CI 0.213, 0.732; $p =.003$).

Most of the children from orphanages (58.9%) were 13 to 18 years old. About 55.3% of the children were from single-parent families and hailed from low family income backgrounds (43.3%). Domestic violence was reported by 30.5% of the children. Further, 37.6 % of them had alcoholic fathers. Further, 6.4 % of the children were hurt by their father and by their roommates as well as the seniors (8.4%) in the orphanages in the past six months, mainly by beating with sticks (8.4%), slapping (11.6%), and pushing (15.6%). The behavioral abuse included mainly speaking harshly (41.2 %), shouting (39.7%), use of abusive language (20.5%), by father, by friends and their seniors in the school and orphanage (15.6%) as well as by the stepmother (2.1%) in the past six months. These children were also dominated (37.6%) and teased (29.1%) by the family as well as people around. They were also deprived of the care and love from their parents (83.6%). Parenteral negligence was found higher as parents were not around to take care of the children, as most of them were from a single-family.

The significant sociodemographic variables of physical abuse identified were single parent/step-parent families (OR 0.088; CI 0.010, 0.744; $p = .026$), violence in the family (OR -1.104; CI 0.332, 0.976; $p = .045$), The significant sociodemographic variables of behavioral abuse identified were single parent/step parent families (OR 0.135; CI 0.028, 0.641; $p = .012$), and violence in the family (OR 0.047; CI 0.010, 0.219; $p = < .001$). The significant sociodemographic variables of parental neglect identified were single parent/step parent families (OR 0.095; CI 0.020, 0.458; $p = .003$), and violence in the family (OR 0.079; CI 0.020, 0.307; $p = < .001$).

Most of the hospitalized children in the prospective study (52.3%) were less than six years of age, among them 55.5 % were males. Further 54.2% of the children were diagnosed with poisoning, including 34.1% with thermal burns. The non-accidental injury was found among 56.8% of the children, and the causes were poisoning (54.2%), scalding and hot liquid spillage (24.5%), as well as flame burns (9.9%). The majority of the injuries occurred at home (90.6%).

The significant sociodemographic variables of physical abuse identified were age of children below 12 years (OR 0.057; CI 0.005, 0.665; $p = .022$), children from single-parent families (OR 0.046; CI 0.008, 0.273; $p = .001$), and home as the place occurrence of injury (OR 9.607; CI 2.191, 42.134; $p = .003$). The significant sociodemographic variables of behavioral abuse identified were age of the children between 13-18 years (OR 0.002; CI 0.000, 0.008; $p = < .001$), alcoholic father (OR 0.291; CI 0.088, 0.967; $p = .044$), and type of injury non-accidental/parent induced/ neglect/ suicidal (OR 0.002; CI 0.000, 0.010; $p = < .001$). The significant sociodemographic variables of parental neglect identified were children aged less than 12 years (OR 0.003; CI 0.001, 0.011; $p = < .001$), non-accidental/parent induced/ neglect/ suicidal type of injuries (OR 0.018; CI

0.004, 0.092; $p = <.001$), and home as the place of occurrence of injury (OR 0.050; CI 0.009, 0.271; $p = <.001$).

Most hospitalized children in the retrospective review (59.5%) were less than six years old, and (54.7 %) were males. Majority of the children (86.5%) were diagnosed to have thermal burns. Among these children, 68.2% of them experienced non-accidental injury mainly due to scalding and hot liquid spillage on the child (45.9%). About 82.4% of the injuries occurred at home.

The significant sociodemographic variables of physical abuse identified were the condition of the child that includes a child who was discharged against the advice or expired (OR 0.078; CI 0.007, 0.828; $p = .034$). The significant sociodemographic variables of behavioral abuse identified were the age of the child between 13 to 18 years (OR 0.032; CI 0.003, 0.315; $p = .003$). The significant sociodemographic variables of parental neglect identified were age of the child below 12 years (OR 0.014; CI 0.001, 0.157; $p = .001$) and non-accidental/parent induced/ neglect/ suicidal type of injuries (OR 0.002; CI 0 .000, 0 .029; $p = <.001$).

Nearly half of the young adults in the attitudinal study (50.5%) were females and majority (71.0%) were aged 22 to 24 years. Forty percent of the respondents completed graduation and reported belonging to lower-middle socioeconomic status families (46.5%). A negative attitude towards child abuse was reported by 98.0% of the participants. A significant relationship was found between the adult's attitude and education of adults ($\chi^2 (2) = 5.520, p = .036$), similarly their socio-economic status ($\chi^2 (2) = 7.628, p = .029$).

In the prospective study of hospitalized children, majority were identified to have parental neglect (57.81%), whereas behavioral abuse was found in 28.38%, physical abuse in 2.86%, and sexual abuse in 1.04% of the children. The retrospective review

identified parental neglect in 69.59% of the children with burns. Behavioral abuse was found in 5.40 % of the children. At the same time, physical abuse was recognized in 2.7% of the children.

Data from school children identified 25.4 % of the children with behavioral abuse, followed by physical abuse in 18.33 %, parental neglect in 15.27%, and sexual abuse in 3.9 % of the children. Among the children living in orphanages, emotional abuse was reported by 44.6%, and parental neglect was found in 41.8% of the children. Further, 15.60 % of the children experienced physical abuse, mainly at home. A limited number (202) of children were provided counseling by experts.

The study concluded that children were subjected to various forms of abuse, which are preventable if identified early and if appropriate measures were taken to counsel those children and their families at the earliest since most of the abuse identified were behavioural abuse and parental neglect, followed by physical and sexual abuse. Irrespective of the children being in school, orphanages, or being admitted to the hospital with burns, poisoning, or suicidal cases. Nurse specialists or counselors equipped to assess child abuse and neglect were not evident in the study's locations, so the severely affected children were counseled by a clinical psychologist. Therefore, the study findings strongly envisage providing accessible counseling centers for affected children as well as having a platform for creating mass awareness towards child abuse and neglect to reduce its impact on the children who are pillars for a better society tomorrow.

Though the study result cannot be generalized, as it was conducted in different settings, that included hospitals, schools, and orphanages, and also the communities of the Udupi district., the study provided an insight into the type of abuse faced by these children.