

# An Evaluation of the Impact of an In-forma-tional Booklet on Mothers' Knowledge and Attitudes Toward Preventing Child Sexual Abuse in Selected Villages of Gohana

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## ABSTRACT

**Background:** Child Sexual Abuse (CSA) is a pressing public health concern with long-lasting psychological, emotional, and developmental impacts on children. Studies reveal that lack of awareness, especially among parents, contributes significantly to the prevalence of CSA. This study aimed to evaluate the effectiveness of an information booklet on the knowledge and attitudes of rural mothers regarding CSA prevention in selected villages of Gohana, Haryana.

**Objectives:** The study assessed (1) the existing levels of knowledge and attitude among mothers regarding CSA prevention, (2) the effectiveness of the information booklet as an educational intervention, and (3) the association between demographic variables and knowledge/attitude scores pre- and post-intervention.

**Methods:** A quasi-experimental research design with a quantitative approach was adopted. A total of 60 mothers were selected from two villages—Baroda (experimental group) and Khanpur Khurd (control group). Data collection tools included a self-administered questionnaire for knowledge assessment and a Likert scale for attitude measurement. The intervention consisted of an information booklet covering CSA definitions, protective strategies, myths, roles of stakeholders, and frequently asked questions. Pre- and post-test assessments were conducted, and data were analyzed using descriptive and inferential statistics.

**Results:** Pre-intervention, 80% of mothers demonstrated inadequate knowledge and 36.7% had a negative attitude toward CSA prevention. Post-intervention, 51.7% achieved adequate knowledge scores and 40% showed a positive attitude. A statistically significant improvement was observed in both knowledge and attitude scores post-intervention. However, no significant association was found between knowledge/attitude levels and demographic variables.

**Conclusion:** The study concludes that structured educational tools such as information booklets are effective in enhancing the awareness and attitudes of mothers regarding child sexual abuse prevention. Community-level interventions targeting parents, particularly mothers, are essential in safeguarding children against CSA.

**Keywords:** Child Sexual Abuse, Prevention, Mothers, Rural Communities, Information Booklet, Knowledge, Attitude, Quasi-Experimental Study

## INTRODUCTION

Child sexual abuse (CSA) is a deeply disturbing and widespread issue that transcends geographic, cultural, and socioeconomic boundaries. It is broadly defined as any sexual activity with a child carried out by an adult, adolescent, or older child, where the child is unable to provide informed consent due to their developmental stage and age<sup>1</sup>. While adult involvement in such acts is unequivocally abusive, interactions involving other children or adolescents may exist in a legal and ethical grey area, often requiring careful assessment to distinguish between innocent exploration and exploitative behaviour.

CSA is not only a violation of a child's bodily autonomy but also a severe infringement on their psychological and emotional development. It encompasses a wide range of behaviors, including physical contact (e.g., fondling, oral, vaginal, or anal penetration) and non-contact acts (e.g., exposure to pornography, indecent exposure, or solicitation for sexual favors)<sup>1,2,3</sup> such forms of abuse can also include voyeurism and exhibitionism, often executed by individuals within the child's social circle or even immediate family.

Research has consistently demonstrated the devastating consequences of CSA. Survivors frequently suffer from a host of mental health issues, including depression, anxiety disorders, post-traumatic stress disorder (PTSD), self-harming behaviours, sexual dysfunction, and academic difficulties<sup>2</sup>. The psychological trauma is often long-lasting, especially in cases of incest, where the perpetrator is a close family member such as a parent or sibling.

Risk factors associated with CSA include physical and cognitive disabilities in children, lack of parental awareness, and socio-environmental vulnerabilities. Alarming, in about 90% of reported CSA cases, the perpetrator is known to the child—often a relative, family friend, neighbour, or someone in a position of trust<sup>1,3</sup>. Furthermore, research by Swapna MK<sup>4</sup> highlights that the lack of awareness among parents—particularly mothers—significantly increases a child's risk of becoming a victim of sexual abuse. This gap in knowledge and vigilance within the family unit contributes to the persistent underreporting and delayed identification of such incidents.

Despite the implementation of child protection laws and mandatory reporting protocols in many countries, underreporting remains a major challenge. Carrasco et al., emphasize that only a fraction of abuse cases are disclosed to professionals,

and even fewer are formally reported or substantiated. This discrepancy is often due to social stigma, fear of retaliation, and systemic failures within child protective services<sup>3</sup>.

Given the grave and lasting consequences of CSA, there is an urgent need to strengthen preventive measures, improve knowledge among caregivers, and ensure that children are educated about bodily autonomy and safe boundaries. Understanding the dynamics and risk factors of CSA is a critical step toward effective intervention and support for survivors.

## OBJECTIVES

To assess the baseline knowledge of rural mothers regarding the prevention of child sexual abuse.

To examine the association between the attitudes of rural mothers and their selected demographic variables.

To evaluate the association between pre- and post-test levels of knowledge and attitude of rural mothers regarding child sexual abuse and their demographic characteristics.

## HYPOTHESIS:

H1: There is a statistically significant difference between the pre-test and post-test knowledge and attitude scores of rural mothers regarding the prevention of child sexual abuse.

H2: There is a statistically significant association between post-test knowledge and attitude scores of rural mothers regarding the prevention of child sexual abuse and selected demographic variables (e.g., age, education level, occupation, number of children).

## Materials and Methods

The study aimed to assess the effectiveness of an information booklet on the knowledge and attitude of mothers regarding the prevention of child sexual abuse in selected villages of Gohana, Haryana. The conceptual framework adopted for this study was based on the Health Belief Model, encompassing individual perception, modifying factors, and likelihood of action<sup>5,6</sup>.

A quantitative research approach was utilized. The data collection tool was pre-tested with six mothers from the selected villages in Gohana (Sonipat) to ensure clarity and feasibility. The reliability of the knowledge assessment tool was determined using the test-retest method.

## LIMITATIONS:

The study was limited to mothers those who are having children between the age group of 3 to 12 years.

The sample of the study was limited to 60.

The study period was limited to six weeks.

A pilot study was conducted from February 26, 2022, to March 4, 2022, in the selected villages. This pilot helped the investigator refine the study design and assess its feasibility. Ethical clearance was obtained from the Institutional Ethics Committee. Prior permissions were secured from the heads of the local institutions, and informed consent was obtained from all participants. The confidentiality and anonymity of the subjects were maintained throughout the study.

The main study was conducted in March 2022. Data were analyzed using descriptive and inferential statistics to evaluate changes in knowledge and attitude among mothers regarding child sexual abuse prevention after the intervention.

## RESULTS

### Section I: Demographic Variables Of Mothers

The study included mothers from various age groups. A majority were above 35 years (43.3%), followed by 26.7% aged 31–35 years, 23.3% aged 26–30 years, and 6.7% aged 19–25 years. Regarding the gender of children, 58.3% (35) were male and 41.7% (25) were female.

In terms of family income, 30.0% of families earned Rs. 2001–5000 monthly, 28.3% earned more than Rs. 10,001, 25.0% earned Rs. 5001–10,000, and 16.7% earned less than Rs. 2000. Educational qualifications of mothers revealed that 35.0% had completed undergraduate studies, 28.3% had secondary education, another 28.3% had primary education, and 11.7% were illiterate.

Regarding family structure, 53.3% of mothers belonged to organized families, and 46.7% to disorganized families. Concerning employment status, 33.3% were government employees, 26.7% were employed in non-governmental roles, 26.7% were self-employed, and 13.3% were homemakers.

Religious affiliation showed that 53.3% were Hindu, 30.0% were Muslim, and 16.7% were Christian. As for family type, 58.3% of mothers belonged to nuclear families, 25.0% to joint families, and 16.7% to extended families.

With regard to previous sources of information about child sexual abuse, 40.0% of mothers reported learning through books and journals, 30.0% through radio, 23.3% through newspapers, and 6.7% through television.

**Table 1: Frequency distribution of demographic variables**

Variables	Opts	Percentage	Frequency
Age of mothers	19-25 years	6.7%	4
	26-30 years	23.3%	14
	31-35 years	26.7%	16
	Above 35 years	43.3%	26
Gender of Children	Male	58.3%	35
	Female	41.7%	25
Family Income	Below Rs. 2000 per month	16.7%	10
	Rs. 2001 – 5000 per month	30.0%	18
	Rs. 5001 – 10000 per month	25.0%	15
	Above Rs. 10000 per month	28.3%	17
Education	Illiterate 11.7%	11.7%	7
status	Primary education up to 10th std	25.0%	15
	Secondary education up to 2std 1	28.3%	17
	Post Graduate	35.0%	21
Family status	Organized family	53.3%	32
	Disorganized family	46.7%	28

Occupation	House maker	13.3%	8
	Government employee	33.3%	20
	Non – Government employee	26.7%	16
	Self-employee	26.7%	16
Religion	Hindu	53.3%	32
	Muslim	30.0%	18
	Christian	16.7%	10
Type of family	Nuclear	58.3%	35
	Joint family	25.0%	15
	Extended family	16.7%	10
Previous knowledge gain through	Television	6.7%	4
	Radio	30.0%	18
	News paper	23.3%	14
	Books and Journals	40.0%	24
Number of children in the Family	1 Children	13.3%	8
	2 Children's	33.3%	20
	3 Children's	21.7%	13
	4 Children's & above	31.7%	19
Birth order of child	First child	1.7%	1
	Second child	28.3%	17
	Third child	26.7%	16
	Fourth child and above	43.3%	26
Place of living	Urban	56.7%	34
	Rural	43.3%	26

In terms of number of children, 33.3% had two children, 31.7% had three children, 13.3% had more than four children, and another 13.3% had one child. Regarding birth order, 48.3% were the fourth child or later, 28.3% were the second child, 26.7% were third, and 1.7% were firstborns.

Geographically, 56.7% of mothers resided in urban areas, and 43.3% in rural areas.

A pilot study was conducted from 26 February to 4 March 2022 in selected villages of Gohana (Sonipat) to assess feasibility and refine study tools for evaluating mothers' knowledge of child sexual abuse prevention. Ethical approval was obtained from the institutional ethics committee. Permission was also secured from institutional authorities, and informed consent was collected from all participants. The study was conducted in February 2022. Data analysis involved both descriptive and inferential statistics to evaluate the knowledge levels among mothers regarding the prevention of child sexual abuse as shown in Table 1.

## Section-II: Description of knowledge and attitude score of mothers regarding child sexual abuse

### Pre-test knowledge score

**Table 2: Analysis of pre knowledge score of the mothers regarding prevention of child sexual abuse.**

Criteria measure of pre-test knowledge score	
Score level	Frequency Percentage
Inadequate (0-5)	48(80%)
Moderate (6-10)	12(20%)
Adequate (11-14)	0(0%)

*N=60*

The table 2 depicts that level of knowledge regarding prevention of child sexual abuse.

During the pre-test, 80% of the mothers demonstrated an inadequate level of knowledge, 20% showed a moderate level of knowledge, and none had an adequate level of knowledge.

**Table 3: Analysis of pretest attitude score of mothers regarding prevention of child sexual abuse.**

Criteria measure of pre-test attitude score	
Score level	Frequency percentage
Positive (27-40)	30%
Neutral (14-26)	30%
Negative (0-13)	40%

*N=60*

The table 3 shows that 30% of participants had a positive attitude, 30% had a neutral attitude, and 40% ( $n = 22$ ) had a negative attitude toward the prevention of child sexual abuse.

### Section III: Description post-test knowledge and attitude score of mothers regarding prevention of child sexual abuse

#### Post-test knowledge score

**Table 4: Analysis of post-test knowledge score of mothers regarding prevention of child sexual abuse**

Criteria measure of post-test knowledge score	
Score level	Frequency percentage
Inadequate (0-5)	0(0%)
Moderate (6-10))	29(48.3%)
Adequate (11-14)	31(51.7%)

*N=60*

The table 4 shows that 51.7% of participants demonstrated an adequate level of knowledge, while 48.3% exhibited a moderate level of knowledge. No participants were found to have an inadequate level of knowledge.

#### Post-test attitude score

**Table 5: Analysis of post-test attitude score of mothers regarding prevention of child sexual abuse.**

Criteria measure of pre-test attitude score	
Score level	Frequency percentage
Positive (27-40)	24(40%)
Neutral (14-26)	36(60%)
Negative (0-13)	0(0%)

*N=60*

The table 5 indicates that 40% of the participants exhibited a positive attitude, 60% displayed a neutral attitude, and none demonstrated a negative attitude toward the prevention of child sexual abuse.

### Section-IV: Comparison between pre and post-test of knowledge and attitude score regarding prevention of child sexual abuse.

Table 6 represents overall pre-test and post-test mean knowledge scores of respondents regarding the effectiveness of an information booklet on the prevention of child sexual abuse. The mean pre-test knowledge score among the selected mothers was 3.72 ( $SD \pm 1.795$ ), representing 26.50% of the total score. In contrast, the mean post-test score increased significantly to 10.22 ( $SD \pm 2.171$ ), corresponding to 73.00% of the total score. This indicates a substantial improvement in knowledge following the intervention.

The table 7 evaluated the overall pre-test and post-test mean attitude scores of respondents regarding the effectiveness of an information booklet on the prevention of child sexual abuse. The mean pre-test attitude score among selected mothers was 17 ( $SD \pm 4.836$ ), corresponding to 42.5%. Following the intervention, the post-test means attitude score increased to 26.42 ( $SD \pm 3.548$ ), represent-

**Table 6: Criteria measure of pre and post-test knowledge score**

Paired T-Test	Mean $\pm$ S.D.	Mean%	Range	Mean Diff.	Paired T Test	P value	Table Value at 0.05
Pre-test Knowledge	3.72 $\pm$ 1.795	26.5	01-Sep	6.5	22.908 *Sig	<0.001	2
Post-test Knowledge	10.22 $\pm$ 2.171	73	Jun-14				

\*\* Significance Level: 0.05

**Table 7: Criteria measure of pre and post-test attitude score**

Paired T Test	Mean $\pm$ S.D.	Mean%	Range	Mean Diff.	Paired T Test	P value	Table Value at 0.05
Pre-test Attitude	17 $\pm$ 4.836	42.5	9-28	9.42	13.892	<0.001	2
Post-test Attitude	26.42 $\pm$ 3.548	66	20-35				

\*\* Significance Level 0.05



ing 66.0%. This indicates a notable improvement in the respondents' attitudes after reading the information booklet.

#### Section IV: Association Between the Pre-test and Post-test Scores of Knowledges Regarding Prevention of Child Sexual Abuse

To evaluate the effectiveness of the educational intervention, the pre-test and post-test knowledge scores of the participants were compared. The analysis was conducted using paired statistical tests to determine if there was a significant improvement in knowledge after the intervention.

Table 8 presents the association between knowledge score levels and various sociodemographic variables. A Chi-square test was used to assess the relationship between participants' level of knowledge and selected demographic characteristics. The results indicate association between knowledge scores and several demographic variables, including age of the mother, gender of the child, family income, educational status, family type, occupation, religion, type of family, source of prior knowledge, number of children, birth order of the child, and place of residence. The calculated Chi-square values exceeded the critical value at the 0.05 level of significance, confirming these associations.

**Table 8: Association of pretest knowledge scores of selected socio-demographic variables**

Variables	Opts	ADEQUATE KNOWLEDGE	MODERATE KNOWLEDGE	INADEQUATE KNOWLEDGE	Chi Test	P Value	df	Table Value	Result
Age of mothers	19-25 years	0	1	3	3.956	0.266	3	7.815	Not Significant
	26-30 years	0	1	13					
	30-35 years	0	2	14					
	Above 35 years	0	8	18					
Gender of Children	Male	0	8	27	0.429	0.513	1	3.841	Not Significant
	Female	0	4	21					
Family Income	Below Rs. 2000 per month	0	3	7	4.698	0.195	3	7.815	Not Significant
	Rs. 2001 – 5000 per month	0	1	17					
	Rs. 5001 – 10000 per month	0	5	10					
	Above Rs. 10000 per month	0	3	14					

Education status	Illiterate	0	2	5	0.987	0.804	3	7.815	Not Significant
	Primary education up to 10th std	0	2	13					
	Secondary education up to 12std	0	3	14					
	Post Graduate	0	5	16					
Family status	Organized family	0	7	25	0.151	0.698	1	3.841	Not Significant
	Disorganized family	0	5	23					
Occupation	House maker	0	3	5	8.906	0.031	3	7.815	Significant
	Government employee	0	7	13					
	Non – Government employee	0	0	16					
	Self-employee	0	2	14					
Religion	Hindu	0	6	26	1.337	0.513	2	5.991	Not Significant
	Muslim	0	5	13					
	Christian	0	1	9					
Type of family	Nuclear	0	7	28	1.042	0.594	2	5.991	Not Significant
	Joint family	0	4	11					
	Extended family	0	1	9					
Previous knowledge gain through	Television	0	1	3	1.344	0.719	3	7.815	Not Significant
	Radio	0	2	16					
	News paper	0	3	11					
	Books and Journals	0	6	18					

Number of children in the Family	1 Children	0	4	4	8.334	0.04	3	7.815	Significant
	2 Children's	0	3	17					
	3 Children's	0	4	9					
	4 Children's & above	0	1	18					
Birth order of child	First child	0	0	1	3.236	0.357	3	7.815	Not Significant
	Second child	0	5	12					
	Third child	0	1	15					
	Fourth child and above	0	6	20					
Place of living	Urban	0	8	26	0.611	0.434	1	3.841	Not Significant
	Rural	0	4	22					

## DISCUSSION

The data illustrate the overall pre-test and post-test mean knowledge and attitude scores of respondents regarding the effectiveness of an information booklet on the prevention of child sexual abuse. The pre-test mean knowledge score of the selected mothers was 3.72 (SD  $\pm$  1.795), corresponding to 26.50%. After the intervention, the post-test mean knowledge score increased to 10.22 (SD  $\pm$  2.171), representing 73.00%. Similarly, the pre-test mean attitude score was 17 (SD  $\pm$  4.836), equivalent to 42.50%, while the post-test mean attitude score rose to 26.42 (SD  $\pm$  3.548), accounting for 66.00%. These results indicate a significant improvement in both knowledge and attitude following the use of the information booklet.

## CONCLUSION

The present study aimed to evaluate the effectiveness of an information booklet on the knowledge and attitude of mothers regarding the prevention of child sexual abuse. The findings indicate that the intervention positively influenced the participants' awareness and perceptions, underscoring the potential of educational tools in empowering mothers to protect their children. This quasi-experimental study involved a sample of 60 mothers selected through simple random

sampling. The outcomes have meaningful implications for the nursing profession, particularly in community health education and preventive care. Despite its limitations, the study offers valuable recommendations for future research and program development in the area of child protection and maternal education.

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**Competing interests:** None declared

**Ethics approval:** Ethical clearance was obtained from the Institutional Ethics Committee. Prior permissions were secured from the heads of the local institutions, and informed consent was obtained from all participants. The confidentiality and anonymity of the subjects were maintained throughout the study.



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