

THE UNIVERSITY OF ZAMBIA
SCHOOL OF MEDICINE
DEPARTMENT OF POST BASIC NURSING

A STUDY TO DETERMINE THE KNOWLEDGE AND ATTITUDE OF
SCHOOL GOING CHILDREN ON CHILD SEXUAL ABUSE IN
LUSAKA URBAN

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LIST OF ABBREVIATIONS

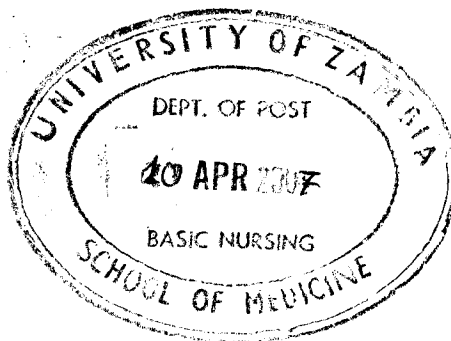
AIDS	—	Acquired Immune Deficiency Syndrome
ANPPCAN	—	African Network for Prevention and Protection against Child Abuse and Neglect
CSEC	—	Commercial Sexual Exploitation of Children
CHIN	—	Children in Need
CRC	—	Convention on the Rights of Children
CSO	—	Central Statistics Office
ECPAT	—	the organization, Child Prostitution, Pornography and Trafficking in Children for Sexual Purposes.
HIV	—	Human Immunodeficiency Virus
ILO	—	International Labour Organisation
IPEC	—	International Programme on the Elimination of Child Labour
NGO	—	Non-Governmental Organisation
SAP	—	Structural Adjustment Programme
TV	—	Television
UN	—	United Nations
UNICEF	—	United Nations Children's Fund
USA	—	United States of America
UTH	—	University Teaching Hospital
VSU	—	Victim Support Unit
WHO	—	World Health Organisation
YWCA	—	Young Women Christian Association

DECLARATION

I declare that with the exception of the assistance acknowledged, this work is the result of my own studies. This work has not already been accepted in substance for any degree and is not being currently submitted for any other degree.


Signed  Date 10th April 2007
Candidate

Signed  Date 10th April 2007
Supervising Lecturer



STATEMENT

I Naomi Bweupe, hereby certify that this study is entirely the result of my own independent investigations. The various people and sources that I am indebted to are clearly mentioned in the document and references.

Signed 

Candidate

DEDICATION

I would like to dedicate this study to my family, friend Evelyn Nkoya for the moral support they gave me as I was carrying out the project and Mr. Mwewa who assisted me to purchase the computer and printer thus making the work manageable.

ABSTRACT

The nature of the problem of sexual abuse of children is intertwined with the issue of victim's secrecy and brings forth feelings of revulsion or disbelief. These have caused professionals to shy away from the problem of sexual abuse and underestimate its severity and extent. To make matters worse cultural beliefs perpetuate the vice as most parents and guardians fail to expose cases of child sexual abuse occurring within their families.

The purpose of this study was to determine the knowledge and attitude of school going children on child sexual abuse, find out the occurrence of child sexual abuse in Lusaka in the last five years, to examine school going children's attitude towards reporting cases of child sexual abuse in Lusaka urban to relevant authorities, to verify the influence of socio-cultural factors on knowledge and attitude on child sexual abuse, assess the effects on victims, examine the nature of support systems for victims of child sexual abuse, stimulate interest for further research and come up with recommendations for organizations involved in child welfare.

The Zambian children face a silent crisis that the majority of adults are aware of but have been slow or unwilling to respond to with the urgency it deserves. The reported number of sexual abuse cases among children of school going age group is increasing at an alarming rate. In the past three years 2003 to 2005 a total of 4119 children reported to be sexually abused in Zambia, 1,890 (46%) cases involved children aged between 5 to 16 years in Lusaka. The school going children spend more than 4 hours at school without the supervision of parents or guardians.

Literature review shows that the problem of child sexual abuse is global and most studies done do not involve children.

This study used a descriptive cross-section, non-experimental, explorative design. It involved collection of data at one particular point in time.

The study was carried out in Lusaka urban district. Lusaka is the capital city of Zambia situated in Lusaka province. It has the projected 2006 population of

1,676,321. This study was carried out at Kabwata Basic School because it is centrally located and is near the University Teaching Hospital, town center and many key government institutions like the Ministry of Education and Police Headquarters. The school has pupils from a number of townships near Kabwata making it convenient for the study since the problem is widespread in Lusaka urban.

The sampling frame were pupils in grades 5 to 9 during school year 2006 aged 8 to 18 years. Fifty pupils, 25 males and 25 females were randomly selected 10 from each grade (5 males and 5 females).

Data were collected using structured interview, interview schedules concerning the children's knowledge and attitude on sexual abuse were developed and used to interview the pupils.

Data were analyzed using quantitative and content analysis. It was entered manually on the data master-sheet and the calculator was used for statistical calculations in percentages. A checklist was used to categorize common responses so as to add meaning to data. Frequency tables were used to present the variables that are key in explaining the findings related to the problem of child sexual abuse.

The study demonstrated that most of the children are aware of child sexual abuse, through the information they get from the media, while schools and families are not doing much to teach them. Children of both sexes are victims of abuse though the girl child abuse is more pronounced in public. The children want perpetrators or abusers to be imprisoned to save them, as parents/guardians have not been very helpful in protecting them even after reporting to them.

Involving the children in most discussions dealing with child sexual abuse may prove to be very helpful to solving this problem. The legal authorities, schools and health workers should work together to help the children from the problem of sexual abuse. The findings support the need for child sexual abuse prevention programs wherever the children are found. Parents/ guardians who hide or do

not report abusers to the authorities should be punished so that people know the seriousness of the problem.

CHAPTER ONE

1.0 INTRODUCTION

The development and health of children is very important, hence protection and care should be rendered adequately. This implies that the government, community and guardians of the children should partner in making them feel secure and cared for as someone important.

The health of the children through out the world should be improved giving them the opportunity to grow and develop to their full physical, mental and social potential.

Children make up a substantial part of each country's population in Europe on average; they constitute 20% of the total population (Health for all target 1991). However they are a vulnerable group in society often deprived of their rights.

The United Nation convention on the right of the child, Article 1 defines a child as every human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier (The first call for children 1990).

In view of the vulnerability of the children, the United Nations General Assembly adopted the convention, on the rights of the child. These rights ensure that children enjoy rights which will enable them to contribute to the welfare of their nations with the adoption of the convention, some head-way have been made in that most children throughout the world are being provided with a number of services such as education and medical care.

However, the most acute problems facing children in most countries are those of exploitation and inhuman abuse in work places, on streets and in homes. Among these abuses is child sexual abuse (Grant, 1994).

Child sexual abuse is said to be an international problems to prove, a number of researches, in the last century have been carried out with an aim of

bringing this issue to light. Child sexual abuse is currently said to be a common and serious problem which affects children regardless of their age, sex, socio-economic status and geographical location (Muram 1993) and (Finkelhor 1994) also confirms that child sexual abuse is an international problem.

Apart from researchers and surveys indicating the presence of child sexual abuse, other researches have been carried out to determine its effects on the abused child. A child who has been sexually abused will present with a number of symptoms but the major ones will include fear, guilt and anxiety. If these symptoms are not resolved many children compensate by acting out with resulting delinquency, drug taking and prostitution. These effects occur over a period of time (window 1994)

Although the issue of child sexual abuse has been brought to light, its exact extent is not known. In U.S.A 44,700 cases of child sexual abuse were reported in one year. However it was estimated that the actual number of children being abused per year was six times the reported figure (Marlow 1988). 427,000 cases were reported in 1993.

Despite the fact that the actual figures of children who are sexually abused are not known research has shown that in most cases the people who abuse children are known to the abused child, in most instances 70% of cases involved the child's parents (Robinson, 1986).

In Africa, many cases of child sexual abuse have been reported. Some studies have been carried out to bring this issue to light. In Nigeria a study was done on 19 children between the age of four and eleven years reported at a police station of being sexually abused. The study findings indicated that the number of children under study did not reflect the true incidence of children being sexually abused in the area, as there was under-reporting of cases in this study. It was also found that the abuser was related to the abused child and it was found that in most Nigerian culture, the extended family tended to cover up cases of child sexual abuse "so it won't get to the outside world and spoil the family name" (mejiuni, 1991).

In Zimbabwe a study carried out by health workers who were alarmed at the problems as adolescence pregnancies, sexually transmitted diseases and at times HIV/AIDS. The study revealed that there was under-reporting of child sexual abuse cases. The cases only came to light when the abused child presented with any effects, which need medical care.

In South Africa, Cietafrika Research (2003) interviewed 283,000 learners across 9 provinces. Children in grades 6-11, from all language groups: The findings were that at age 10 one out of three children had sex, the educational programmes for youth are not succeeding, belief systems about sex support sexually violent and sexually irresponsible behaviour as seen by the number of children who presented with some effects of child sexual abuse (Joan Van Niekerk).

1.1 Background

Child sexual abuse by adults has become vivid in recent times in Zambia, this abuse has manifested itself within and outside the home. Increasingly, cases of child sexual abuse have been reported time and again in the media, police stations, hospitals and some Non-Governmental Organizations. It is also clear that all children are vulnerable as the home, which is supposed to be a safe haven for all has become a dangerous place especially for children. Fathers, uncles, brothers and grandfathers sexually abuse children within the confines of the home. Thus children's rights are not only violated but their right to life is also threatened. According to the statistics by police, more than 4,400 cases of child sexual abuse have been reported in the last seven years. There is an increase in the number of cases reported e.g. 366 cases were reported in 2001 and in 2002 the reported cases were 865. The rapid assessment of the incidence of child abuse in Zambia conducted by CHIN and UNICEF generated useful information. The study revealed that street children and children working in homes provide good candidacy for sexual abuse. The street includes all public places such as squares, bus stops and stations, markets, bars and entertainment centers (ILO/IPEC 2002). Preliminary research-findings reported by the crime newspaper on 7-14 march 1995 showed that children selling merchandise on the streets of Lusaka urban are

being sexually abused. Of late cases of children as young as 6 months, 2 years, 3 years have been reported to be sexually abused by men as old as 20 to above 82 years. The most affected age group is that of 9 to 15 years. Approximately 3 children are attended to daily at the University teaching hospital for sexual abuse. On daily basis children who have been sexually abused are brought to U.T.H. With increasing awareness this number would rise as some children that are sexually abused never report to any health facility or victim support unit under police service and therefore pass un noticed. According to statistics, most of the cases seen at U.T.H come from within and the outskirts of Lusaka. Cases from other areas are seldom reported due to distance and many other reasons (U.T.H data). The number of children being abused is high throughout Zambia. The majority of cases remain concealed by the family for fear of stigmatization and arrest of the breadwinners.

Are the young children aware of the presence of child sexual abuse and how to avoid it because of its adverse short and long-term effects, which impede on the normal development of the child? On the other hand, do the children and their parents know the children's rights, where to report in case of abuse? This knowledge can help bring cases to light so that relevant authorities and organizations dealing or involved with child welfare can take up measures to prevent such practices. This is vital because parents and children feel shy to talk about the scourge.

Sexual abuse may occur as a variety of forms of activity. It may occur as rape, which is the attempted or successful penetration of the vagina or labia with the use of threat or force. Sexual exploitation includes such activities as child prostitution and child pornography. Sexual abuse has long and short-term physical and psychological effects on the abused child. The effects like sexually transmitted diseases, HIV/AIDS, fear, anxiety, anger, depression etc. In view of the fact that child sexual abuse cases are increasing and the risk of HIV/AIDS infection, children need to be sensitized on the dangers and how to avoid this. The Zambia police has established the victims support unit to help convict suspects, NGOs like YWCA are also trying to help address this problem.

1.2 Statement of the problem

Zambian children face a silent crisis that a majority of adults are aware of but have sometimes been slow or unwilling to respond to with the urgency it deserves. Reported cases of child sexual abuse are on the increase. On daily basis, children who have been sexually abused are brought to U.T.H. According to statistics, most of the cases seen at UTH are from within Lusaka urban. Cases from other areas are seldom reported due to distance.

The school going children spend more than four (4) hours at school without supervision of parents or guardians. The reported number of sexual abuse cases among the children of school going age group is increasing at an alarming rate. In the past three years 2003 to 2005 a total of 1,890 cases of sexual abuse have been in Lusaka district. These are children aged five to sixteen years. In 2003, 552 children were sexually abused, while in 2004 the reported cases were 636 and in 2005 the number of school going children abused sexually was 702 (victim support unit). The Young Women Christian Association (YWCA) reported 89 cases of child sexual abuse. Of these 4 were cases of sodomy, 2 sexual harassment and 2 resulted in pregnancy. The reported cases in 2003 to 2005 ranged from 22 to 81 the lowest being in April and the highest in September in 2003. In 2003 an average of 46 cases were reported, in 2004 the average was 53 and in 2005 the average was 58 per month. These cases were among those reported to authorities in Lusaka district.

It is evident from research findings and some reported cases that child sexual abuse cases should provoke some concern among individuals, families and communities at large. The major concern should be about the side-effects this kind of abuse has on the abused child. The other concern should be the fact that there could be under reporting there by creating a false picture that the problem is not rampant.

The problem of sexual abuse among children of school going age group is worrying as they are the majority of those sexually abused in Lusaka and the whole country. The number of child sexual abuse cases has kept on increasing despite the sensitization of communities and school going children in the country.

Table No. 1 Sexual defilements

YEAR	1999	2000	2001	2002
No. of Cases	263	306	366	865

Source: Victim Support Unit

In 2003 1,233 defilement cases were reported, in 2004 1,375 and 1,511 cases in 2005 (Victim Support Unit). Lusaka had the highest 832 (55%) number of reported cases in 2005 among all the Zambian provinces. Approximately 1,000 cases of sexual abuse were attended to at the U.T.H in 2005. By June 2006 more than 450 cases of child sexual abuse had been reported and attended to at the U.T.H child support unit.

Government established the Victim Support Unit in 1999. This was done to address the increasing cases of child sexual abuse and other forms of abuse. However the number of convictions is very small and this discourages some members of the community from reporting to the police.

The other organizations are; Zambia society for prevention of child abuse and neglect looking at child sexual and gender based violence, while organizations like YWCA, CARE Zambia, and the child support unit at UTH attend to defiled children by providing relevant care and treatment respectively. The Government of Zambia and judiciary has not fully enforced the act on protection and care of children's right. The lack of enforcement of children's rights by government and society not giving effective attention has contributed to the rise in child abuse cases.

The exploitation of children is not limited to the poor uneducated classes of the Zambian society. Interviews with teachers and girls from Munali Secondary School in Lusaka revealed that some of the children being exploited were enrolled in primary and secondary schools. They spoke of school going girls and boys under 18 years who come from middle-class homes, participating in commercial sex (ILO/IPEC 2002).

1.3 Factors contributing/influencing the problem

The causes of child sexual abuse are diverse. An array of factors responsible for sexual exploitation of children includes economic injustice, rapid social change and urbanization, and family disintegration. There are also historic and continuing cultural values that are oppressive to girls and women – westernization of society and the influx materialist values and goods perpetrated by the media and the subsequent deterioration of traditional and cultural support systems.

Poverty

It is estimated that 76-85% of Zambians live below the poverty line. According to UNICEF, the desperate destitution of children is created by the HIV/AIDS pandemic, which has decimated older members of the family. Overburdened family and community are no longer able to care for increasing numbers of orphaned children. Poverty stricken families send their children to town to look for employment but since they are illiterate, they are unable to secure well-paid employment, which leads to incidences of sexual abuse and exploitation. Consumerism is also a major factor in increasing incidences of commercial sexual exploitation of children. The pressure to own, buy and rent, reinforced through advertising, Television and video images, magazines and the entertainment media, encourages those who do not value their children and respect their rights to trade them for something they want. Children are also under pressure from peers to prostitute their bodies for money to buy items they cannot otherwise afford.

Structural Adjustment Program (SAP) has also contributed to the continuing spiral of poverty, child prostitution and continued poverty. In Zambia, for example, cutbacks in social services lead to an annual educational allocation of 25 cents per child per year. Apart from increases in school dropout rates, this leads to lack of skill development among children (African Network for the Prevention against Child and Neglect/ UNICEF 2001).

Lack of Education and Low Status of Women

Ignorant, poorly educated and marginalized sectors of society provide a steady source of children who can be easily coerced or enticed into sex trade. Lack of education prevents most girls from acquiring adequate knowledge or skills for productive employment as women. Lack of education renders most girls easy targets for sexual abuse.

HIV/AIDS

HIV/AIDS is a cause and a consequence of sexual exploitation of children. The spread of the disease and its deadly consequences has led to the dangerous myth that sex with a virgin or young girl will either cure or prevent AIDS, which in turn has stimulated an increase in child prostitution. The growing number of sexually exploited children has contributed to the spread of HIV/AIDS among the most vulnerable population.

Traditions, Cultural Beliefs and Practices

Traditional African culture allows for children to work within the family, the extended family and often the community. The region's current economic woes compounded by HIV/AIDS and natural and man-made disasters have disturbed traditional forms of child transforming them into exploitative practices. There is also a desire by some men to prove their masculinity and avoid the shame of their sexual inadequacies being discovered. The child is deemed not capable of judging the sexual competence of a man and is therefore an easy target.

Urbanization

In most countries the rate of urbanization is very high leading to congestion and poor living conditions in urban areas. This creates an environment where young children are likely to get in close contact with older people or other children who are likely to entice them into sexual acts.

Demographic Factors

The rate of population growth is high meaning the largest percentage of the population is generally young. This has increased the dependency ratio. With

the increasing poverty in the region young people are finding it difficult to make ends meet making them vulnerable to sexual exploitation.

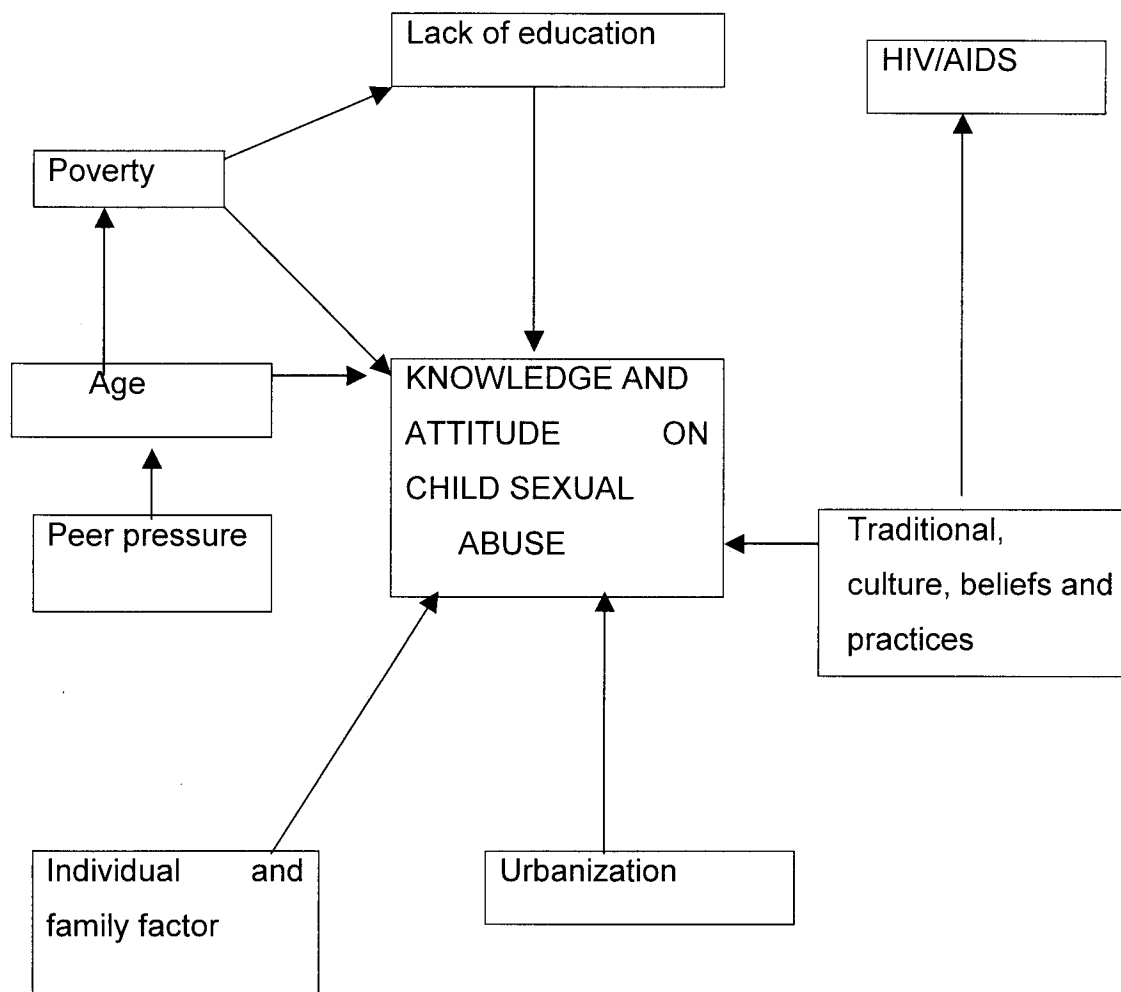
Legislation

Within certain countries in the region, there are weak, confusing, and contradictory legislation, which often render the sexually exploited child a criminal rather than a victim, or classify them outside of children for who protection is warranted. There is weak enforcement of legislation that protects the children from sexual abuse.

Individual and Family Factors

Modernization and urbanization have led to the break up of communities and disintegration of family structures leaving children vulnerable. Apart from contaminating children with immoral foreign culture, children are also exposed to the sex trade as a means of survival.

1.4 Problem Analysis Diagram of Factors Contributing To The Knowledge and Attitude of School Going Children Towards Child Sexual Abuse.



1.5 Justification

The problem of child sexual abuse is a silent crisis Zambia children face. The general public is aware of the sexual abuse but has been unwilling to respond with the urgency it deserves. Often they are unwilling to act because they may be the very conspirators in perpetuating this scourge. The victim is defenseless and has no voice, no power to hit back. She/he is an orphan, a street kid, a domestic servant or simply a child in difficult circumstances who is economically, socially and emotionally dependent on the same potential assailant for survival.

There is need for society to be sensitized on the ever increasing numbers of child sexual abuse, this will move some to speak and advocate for the rights of these children. Society should protect, prevent and rehabilitate the abused children. The perpetrators of the scourge must be pursued and prosecuted to help them become responsible adults for the survival of the human race, since children are the future adults. There are many others who are concerned and already doing something to help the abused children. The Young Women's Christian Association (YWCA) and the victim support unit of the Zambia police service have started sensitizing the communities on this vice. The incidence of sexual abuse among children has kept on increasing, thus requiring more effort to reduce the scourge. The children and adults need to know about this and change their attitudes. A study of the children's knowledge and attitude towards sexual abuse can help policy makers and other relevant authorities to put up measures to prevent the abuse of children. Sexual abuse affects victims socially, psychologically and medically. The effects of the child sexual abuse may have serious consequences on the life of a child, which might manifest during adulthood. The study will show that all in society must play a role in fighting child sexual abuse. The majority of the sexually abused are in the school going age group (5 to 16 years). The majority (55%) of abused children reported in 2005 were in Lusaka, raising questions on their attitude and knowledge. This vulnerable group has not been involved in most studies and the reports are not specific in relation to this group. It is vital to assess the knowledge and attitude of school going children on sexual abuse in Lusaka.

1.6 Research Objectives

1.6.1 General Objective

To determine knowledge and attitude of school going children towards Sexual abuse.

1.6.2 Specific Objectives

- I. To assess the school going children's knowledge on sexual abuse.
- II. To find out the occurrence of child sexual abuse in Lusaka in the last five years.

- III. To examine school children's attitude towards reporting cases of Child sexual abuse in Lusaka Urban to relevant authority.
- IV. To verify the influence of socio-cultural factor on knowledge, attitude of child sexual abuse in Lusaka Urban.
- V. To assess the effects of child sexual abuse on the victims.
- VI. To examine the nature of support systems for victims of child sexual abuse.
- VII. To stimulate interest for further research.
- VIII. To come up with recommendations and solutions for organizations involved in child welfare.

1.7 Hypotheses

The hypotheses for the study are:

- (1) Most cases of child sexual abuse are not reported to authorities because many children do not tell parents/guardians.
- (2) Most of the children report incidences of sexual abuse to parents/guardians.

1.8 Operational Definition of Terms

Attitudes

This is the way one thinks or feels about reporting cases of child sexual abuse if it occurred to them or someone they know.

Knowledge

This means one is aware or has information about child sexual abuse.

A Child

Under the new International Labour Organization (ILO) Convention on the worst forms of child labour, No. 182, a child is identified as anyone below the age of 18 years. The United Nations Convention on the rights of the child defined "a child" as "every human being below the age of 18 years, unless under the law applicable to the child, majority is attained earlier"

Child sexual abuse

This is where an adult person or a person older than the child has exploited the Child sexually. Usually the person that abuses the child has power over the child, or an adult having sexual affair with a child who is below 16 years in Zambia or 18 internationally

Middle-Basic School

This term refers to grades 5-7 classes at a Basic School, with classes from grade 1 to 9.

Upper Basic School

This is a term used to refer to the grade 8 and 9 classes at a Basic School.

1.9 Variables and Cut-off points

The two dependent variables are knowledge and attitude toward child sexual abuse.

Table 2: Variables, indicators and cut-off points

VARIABLES	INDICATORS	CUT OFF POINTS
a. Knowledge	High/very Adequate Moderate/Adequate Low/Inadequate	18-26 (75-100%) 12-17 (50-74%) 0-11 (0-49%)
b. Attitude	Positive Negative	11-22 (50-100%) 0-10 (below 50%)
c. Age	Teenager (older children) Below 13 years (younger)	13years and above 8 to 12 years
d. Occurrence	Present Not present	2 1

CHAPTER TWO

2.0 LITERATURE REVIEW

2.1 Introduction

The problem of child sexual abuse is not limited to a specific group of people. It is a common secret within all ethnic groups. It exists amongst the rich and the poor, the highly literate people and illiterates. The effects of child sexual abuse may have serious consequences on the life of a child, which might manifest during adulthood. The abuse of children has become common in recent times in Zambia. Children as young as under one year old are victims. Increasingly, newspaper reports show that there are many cases of defilement. The children are vulnerable at home and school, where they are expected to be safe. Thus children's rights are violated and right to life threatened. The problem of child sexual abuse has not been studied in relation to knowledge and attitudes of school going children. Most studies focus on the reported cases thus leaving children with little information on the vice. UNICEF is trying to promote education of the children.

Educating people on how to prevent or deal with their health problems is the most cost-effective means of improving a nation's health. The education system is the world's broadest channel disseminating knowledge on health and attitudes. This is enhanced by the fact that the majority of children in the world now enroll in primary school where they acquire basic child health knowledge and skills. Educating children on sexual abuse and where to report has led to an increase in the number of cases being reported. Literature search reveals that the number of children being abused sexually has increased globally. It also revealed that many cultures worldwide do not promote the discussion of sex matters with children. This has contributed to the perpetuation of child sexual abuse in its various forms.

2.2 Global Perspective

The Convention on the Rights of the Child (CRC) defines a child as a person under the age of 18 years. The CRC, which has been ratified by every country in the world except the USA and Somalia, provides for the right of the child against sexual exploitation. Article 34 states:

States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

- (a) The inducement or coercion of a child to engage in any unlawful sexual activity;
- (b) The exploitative use of children in prostitution or other unlawful sexual practices;
- (c) The exploitative use of children in pornographic performances and materials.

Article 19: also states that the child shall be protected against all kinds of physical or mental violence, including sexual abuse. Other relevant articles include Article 35, which says that children shall be protected from being abducted, sold, or in other ways treated as merchandise. Also Article 39 observes that children, who are exploited, exposed to abuse or cruel or degrading treatment should be helped with rehabilitation.

Sexual abuse of children entails economic, social and political aspects, and it takes place in most countries. The global sex sector is growing, with an accelerated demand for younger children due to inadequate government intervention and lax law enforcement particularly in terms of protective measures for children.

Globally, the major causes of commercial sexual exploitation of children include poverty, war and natural disasters, economic injustices, disputes between rich and poor and large-scale migration and urbanization. Other factors include lack of education, disintegration of family and social values,

social attitudes, lack of protection to children at risk and under-funding or failure of social services. Poor systems of governance and inadequate legal systems also fail to prevent injustices towards children or to protect them from criminal acts.

In general, it is the poor in society who are most vulnerable to sexual exploitation because they lack both resources and political power. In this hierarchy in both developed and developing countries, children are at the bottom. Sexual abuse of children results in serious and often life-threatening consequences for physical, psychological and social development, including threat of early pregnancy, maternal mortality, infancy, retarded development, physical disabilities and sexually transmitted disease including HIV/AIDS. Sexual abuse therefore constitutes a fundamental violation of children rights.

In the early and mid 1990's, reports of sexual exploitation of children became more pervasive. There was a public outcry that something had to be done to address the problem. Initially attention concentrated almost exclusively on Southeast Asian countries, where cases of child abuse and exploitation were seen as more pervasive. However, attention quickly shifted to Africa, Eastern Europe and Latin America. The organization, Child Prostitution, Pornography and Trafficking in Children for Sexual Purposes (ECPAT), an active force in the international battle against the sex trade, was formed in Thailand in 1991. In order to put the issue of sexual exploitation of children on to the political agenda, ECPAT helped in the organization of the first world congress Against Commercial Sexual Exploitation held in Stockholm, Sweden in 1996 (ANPPCAN/UNICEF 2001;4-5).

The World report on violence and health by WHO states that estimates of the prevalence of sexual abuse vary greatly depending on definitions used and the way in which information is collected. Some studies are conducted with children, others with adolescents and adults reporting on their childhood, while others question parents about what their children may have experienced. The report stated that for many young women, the most common place where sexual coercion and harassment are experienced is in school. In 1991, 71 teenage girls were raped by their classmates at a

boarding school in Meru Kenya. In Canada, for example, 23% of girls had experienced sexual harassment while attending school. In Nepal, the average age at first marriage is 19 years. Seven per cent of girls though, are married before the age of 10 years, and 40% by the age of 15 years. In India, the median age at first marriage for women is 16.4 years. A survey of 5000 women in the Indian state of Rajasthan found that 56% of the women had married before the age of 15 years, and of these 17% were married before they were 10 years old. Another survey, conducted in the state of Pradesh, found that 14% of girls were married between the ages of 10 and 14 years.

Young women are usually found to be more at risk of rape than older women. According to data from justice systems and rape crisis centers in Chile, Malaysia, Mexico, Papua New Guinea, Peru and the United States, between one-third and two-thirds of all victims of sexual assault are aged 15 years or less. Certain forms of sexual violence, for instance, are very associated with a young age, in particular violence taking place in schools and colleges, and trafficking in women for sexual exploitation.

According to Waechter Eugenia H. The true incidence of sexual abuse of children is largely unknown. One report estimates that there are 360,000 cases a year. The overwhelming majority of the perpetrators of sexual abuse are men. In 70 to 80 percent of cases, the parents either perpetrated the offence or condoned it. Girls constitute the majority of the victims, where as boys account for about 11 percent of the victims. The mean age of victims is 10 years. A consistent finding in the examination of child sexual abuse is that the adult offender is most likely to be a member of the child's family, a relative, or the friend of the child or family (Waechter E.H. ,Phillips .J., Holaday.B.1985:632)

2.3 Regional Perspective

The research done in Africa has highlighted the role of teachers in facilitating or perpetrating sexual coercion. A report by Africa Rights found cases of schoolteachers attempting to gain sex, in return for good grades or for not failing pupils, in the Democratic Republic of the Congo, Ghana, Nigeria, Somalia, South Africa, Sudan, Zambia and Zimbabwe. A national survey in South Africa that included questions about experience of rape before the age

of 15 years found that schoolteachers were responsible for 32% of disclosed child rapes. In Zimbabwe, a retrospective study of reported cases of child sexual abuse over an 8-year period (1990-1997) found high rates of sexual abuse committed by teachers in rural primary schools. Many of the victims were girls between 11 and 13 years of age and penetrative sex was the most prevalent type of sexual abuse. The custom of marrying off young children particularly girls is a form of sexual violence, since the children involved are unable to give or withhold their consent.

Early marriage is most common in Africa. In Ethiopia and parts of West Africa, for instance, marriage at the age of 7 or 8 years is not uncommon. In Nigeria kebbi state, the average age at first marriage is just over 11 years. High rates of child marriage have also been reported in the Democratic Republic of Congo, Mali, Niger and Uganda.

A Situational Analysis of Sexual Exploitation of children in the Eastern and Southern African Region by UNICEF and ANPPCAN, reports that child sexual exploitation in the region exists in many forms, but the main forms are child prostitution, child pornography, sale and trafficking in children. Other forms include incest, early child marriages, rape, sodomy and defilement, kidnapping with intent to marry or indecent assault. In this region it is becoming clear that child prostitution, pornography, sex tourism and trafficking are very intertwined. Usually a child begins in one and is caught up in the process.

2.4 National

According to the International Labor Organization (ILO/IPEC) report by Chileshe Julius, information on the nature and extent of child sexual abuse is very scanty and not much research has been undertaken. Establishing the extent and nature of the problem has been difficult due to the illegal and hidden nature of the practice although child sexual abuse cases are apparent in both rural and urban centers.

The number of children are abused include those working in homes and streets. Organizations involved in withdrawing and rehabilitation of children involved in prostitution have cited significant numbers of children being exploited in nightclubs, pubs, hotels, beauty saloons, guesthouses, parties,

homes (for live-in maids), restaurants, trucks and brothels. Children working and living on the street are vulnerable to sexual and physical abuse and are at risk for child trafficking. A direct link exists between sexual exploitation of children and the type of work that children are involved in. For example, it has been observed that street girls working as vendors during the day, at night provide sexual services to male clients in exchange for money and material goods.

The exploitation of children is not limited to the poor and uneducated classes of the Zambian society. Interviews with teachers and girls from Munali Secondary School in Lusaka revealed that some of the children being exploited were enrolled in primary and secondary schools. They spoke of school going girls and boys under 18 years who come from middle-class homes, participating in commercial sex.

The US group Human Rights watch concluded its 121-page report, 'suffering in silence: Human Rights Abuses and HIV Transmission to Girls in Zambia'. The report details sexual abuse and other human rights abuses of Zambian girls, especially girls themselves orphaned by AIDS. The report also documents many incidents of abuse of orphaned girls at the hands of their guardians. Some of the abused girls were as young as 11 years. It is no accident that HIV prevalence is five times higher among girls than boys under the age of 18 years in Zambia, said Janet Fleischman, of the human rights group, who is also author of the report. "Young girls are preyed upon by older men including those who dare call themselves guardians or caretakers of these girls, and the government fail to protect them".

In addition, sexual violence and coercion of girls are fueled by men's targeting for sex younger girls who are assumed to be HIV-negative or seeking them out based on the myth that sex with virgins will cure AIDS; the phenomenon of "sugar daddies", unscrupulous older men who entice girls into sex with offers of gifts of money has been a particular focus of media in Zambia and elsewhere in Africa. "The subordinate social and legal status of women and girls make it difficult for them to negotiate safer sex and to take steps to protect themselves", the study notes.

The United Nations' annual assessment of the HIV/AIDS epidemic, emphasized that in Africa "the face of AIDS is clearly a female face", and

noted the much higher rate of HIV transmission among girls than boys all over the continent. The new Human Rights Watch report tells the human story behind this disparity, detailing many ways in which girls in Zambia are vulnerable to the disease through sexual abuse and subordination. Girls orphaned by AIDS face stigma and poverty and too often are unable to stay in school, ms Fleischman said, "they may have no recourse but to trade sex for survival-their own survival and sometimes that of their siblings and they are rarely able to negotiate safer sex."

Human Rights Watch today urged the government of Zambia to intensify training on addressing sexual abuse for police and court officials to strengthen victim support units of police and to ensure rigorous prosecution of perpetrators of these crimes. The improvement need to enforce existing laws against sexual abuse are not very costly compared to many other elements of AIDS programs, said Ms Fleischman. "The government and donors have a chance to make a dent in the hyper-epidemic of HIV transmission among girls by making their protection a priority". (Based on Human Rights Watch and afrol archives-afrol News, 28 January 2003).

Reported cases of children sexually abused have been increasingly reported in the media. As documented by victim support unit a total of 4,408 cases of defilement were reported since 1999 to 2004, in 2005 1,511 cases were reported and 832 of these cases were in Lusaka. In January 2004, the Zambia police introduced a sexual crimes unit in response to the increase in sexually related cases in the country. In the Lusaka district, 152 recorded cases of defilement involving children ages 6 to 11 and 322 cases involving children ages 12 to 15.

The Young Women Christian Association (YWCA) operates a crisis center for victims of sexual abuse. The Alliance against Human Trafficking for commercial sexual exploitation, labor and crime in Zambia was formed in July 2003. The alliance was set up to conduct prevention and protection programs, to raise awareness, and to lobby for legislation to deal with trafficking in persons for commercial sexual exploitation.

ANPPCAN Zambia reports that child sexual abuse is a major problem facing the child in Zambia. ANPPCAN Zambia plans to address defilement and commercial sexual exploitation. Together with this is the issue of child

trafficking, which is emerging as a serious challenge to protection efforts and has direct linkage with sexual exploitation. This project will have interventions of withdrawal, rehabilitation and reintegration, counseling, medical and legal assistance. It will also support education and vocational training for victims and a strong component of enforcement agencies. It will also establish local structures, focal points or strengthen already existing ones for sustainability, undertakes advocacy and lobbying for legal and policy review.

Among the interventions will be awareness raising, education and information dissemination, training youths and establishing services to meet their sexual reproductive needs, addressing culture and practices such as early marriage and initiation ceremonies, inheritance and succession and promoting the right of the child to participate in decision making. Orphans and vulnerable children, their survival, rights and risks they face particularly sexual abuse and sexually transmitted diseases including HIV/AIDS will be addressed.

Conclusion

The problem of child sexual abuse is reported in a number of reports but there is no specific report addressing school going children. They are the majority of those affected and thus need to be helped by highlighting the vice to the policy makers and teachers. The reported cases of child sexual abuse seem to group children together. There is need to assess the knowledge of these children and attitude toward sexual abuse.

CHAPTER THREE

3.0 RESEARCH METHODOLOGY

The methodology describes the way that pertinent information was gathered to answer the research question or describe the phenomena related to the research problem.

It includes the description of what was used and done to collect data. A description of the study participants and how the sample was selected is made. It also describes the ethical considerations made. (Dempsey and Dempsey, 2000).

3.1 RESEARCH DESIGN

The research design refers to the overall plan for addressing a research question including the specifications for enhancing the integrity of the study. It stipulates the fundamental form that the study took. (Polit and Hungler, 1999).

This study used a descriptive cross-section, non-experimental, explorative design (Dempsey and Dempsey, 2000).

The design was cross sectional and involved collection of data at one particular point in time.

3.2 RESEARCH SETTING

Research setting is the physical location and conditions in which data collection takes place in a study.

This study was carried out in Lusaka urban district. Lusaka district, which is the capital city of Zambia, is situated in the Lusaka Province in the central part of Zambia. It has the projected 2006 population of 1,676,321 (CSO, 2000).

This study was carried out at Kabwata Basic School because it is centrally located. There are a number of schools both government and private. The area is centrally located near the University Teaching Hospital, town center and many key government institutions like

Ministry of Education and Police Headquarters. Kabwata Basic School has pupils from a number of townships near Kabwata. This made it convenient for the study since the problem of child sexual abuse is widespread in Lusaka urban.

3.3 STUDY POPULATION

Study population refers to the aggregate of cases that conform to the designated criteria (Polit and Hungler, 1999). Study population consists of the target population and the accessible population.

The target population for this study was school going children 8 - 18 years old who go to Kabwata Basic School. These pupils are males and females in grade 5-9 who learn at Kabwata Basic School.

3.4 SAMPLE SELECTION

Sample selection is the process of selecting a portion of the population to represent the entire population (Polit and Hungler, 2001)

The sampling frame were the pupils at Kabwata Basic School in grades 5 to 9.

They were picked randomly from all the grades. Systematic sampling was then used to choose the individual pupils who were interviewed. The first pupil was randomly selected by having a list of numbers for the particular study grade, then pointing to one of them randomly.

From the pupils randomly picked, the subsequent pupils were systematically counted the equal interval of pupils of the same sex in between, e.g. picking every third female pupil in a class with 15 females or male pupil using the same principle, classes had an average of 30 pupils.

Then pupils were picked from each of the grades 10(5 of each sex), simple random sampling was used to select one class to interview. This was done with the help of the deputy headmistress and class teachers, with only one paper having the class. The pupil whose class was picked was interviewed.

The advantage of this method was that it allowed equal representation from the grades. Systematic sampling helped in having equal access

and representation in the chosen school. All the pupils 8 and above years of age had an equal chance of being included in the study.

3.5 SAMPLE SIZE

Sample size is a smaller part of the population selected in such a way that the individuals in the sample represent the characteristics of the population typically shown as 'n' (Dempsey and Dempsey, 2000). A sample of 50 pupils were included in the study. A small sample was considered due to limited time in which to conduct the study. The findings of the sample are generalized to represent the entire population of school going children in Kabwata area.

3.6 DATA COLLECTION TOOL

A data collection tool is an instrument that is used to measure variables and gather information. It is the formal written document used to collect and record information, such as a questionnaire (Polit and Hungler, 1999).

An interview schedule was used to collect data. An interview schedule is an instrument of gathering self-reports information, which is formally written. The interview schedule consisted of questions in which the wording of both the questions and in most cases the response alternatives were predetermined. The interview schedule contained questions on all the variables under study. It had three (3) sections. The first section was for demographic data, the second section measured the knowledge of school going children on sexual abuse and the third section determined their attitude on sexual abuse.

Advantages of Interview schedule:

- (i) It was used on both the literate and illiterate.
- (ii) Responses were obtained from a wide range of subjects
- (iii) Non-verbal behaviour and mannerisms were observed
- (iv) Questions were clarified when they were misunderstood
- (v) In depth responses were obtained.
- (vi) The interviewer had an opportunity to observe the environment during the interview.

Disadvantages to the method included:

- (i) Training programs were needed for interviewers
- (ii) Interviews were time consuming and expensive
- (iii) Arrangements for interviews were difficult to make
- (iv) Subjects may have provided socially acceptable responses
- (v) Interviewer could have misinterpreted non-verbal behaviour

3.7 DATA COLLECTION TECHNIQUE

Data collection technique is the process of gathering information needed to address a research problem (Polit and Hungler, 1999). In this study, subjects answered the questions about the study variables directly. Data was collected over a period of five days.

Interviews were conducted at the subjects' schools. Ten to Twenty respondents were interviewed per day for a period of about 20 minutes each. Interviews were conducted between 08:00 hours and 17:00 hours. The interviewer interviewed the respondents personally. Each interview schedule was checked for completeness immediately and data has been analyzed manually and by computer. For confidentiality, serial numbers were used on the interview schedule instead of names.

3.8 PILOT STUDY

A pilot study is a small-scale version or trial run of the main study (Brink, M. 1996). It is done in order to identify any problems in the methodology and make revisions. When unforeseen problems are recognized early, the feasibility of the study can be assessed and the project can be improved.

The pilot study was conducted in Libala at Mkandawire Basic School that had the similar characteristics like Kabwata. The pilot study was conducted before the actual study to test the instrument for validity and reliability. It helped to come up with additional questions and make some adjustments to the interview schedule. The initial instrument had 24 questions but the final included 6 more, like the part for sex and effects of child sexual abuse.

3.9 VALIDITY

Validity is the ability of an instrument to measure that variable it is intended to measure, given the context in which it is applied (Brink, H., 1996). In this study, validity was measured by ensuring that the same questions were asked to each respondent in the same sequence. Questions were clearly constructed to avoid ambiguity. Simple terms, translated in vernacular language when necessary were used instead of medical language so that respondents understood the questions.

3.10 RELIABILITY

Reliability is the stability and consistency of a measuring instrument over time. It is how well it will produce the same information each time it is used (Dempsey and Dempsey, 2000). It has also been defined as being concerned with the consistency, stability and repeatability of the informant's accounts as well as the researcher's ability to collect and record information accurately (Brink, H. 1996).

Reliability was ensured by standardizing the instrument by testing the research tools before the main study was conducted using a pilot study in a similar environment with similar characteristics. This ensured stability of the tool.

3.11 ETHICAL AND CULTURAL CONSIDERATIONS

Ethical considerations refers to ethics which are a system of moral values that is concerned with the degree to which research procedures adhere to professional, legal and social obligations to the study participants (Dempsey and Dempsey, 2000).

In this regard, permission was obtained through a written consent to conduct the pilot study and the actual study from the Ministry Of Education's District Education Board Secretary's Office and the respective Headmasters at Kabwata and Mkandawire Basic schools in Lusaka.

Verbal permission was sought from the research subjects. The nature and purpose of the study was explained to the subjects before administering the

interview. The subjects were reassured that their information would be kept confidential and their names would not appear on the interview schedule. The respondents were not forced to take part in the study. It was on voluntary basis. Verbal permission from the Headmasters of the respective schools where the study was carried out was obtained.

CONCLUSION

Knowledge on child sexual abuse is vital if problem is to be controlled in Zambia. In Zambia, children are not the decision makers in their families and without their active involvement, the fight against child sexual abuse programs will fail to achieve their goals. The findings from this study on views of school going children towards child sexual abuse as a big problem facing children will hopefully be used to encourage school going children to be involved in fighting the scourge by reporting cases to the relevant authorities.

CHAPTER FOUR

4.0 DATA ANALYSIS AND PRESENTATION OF FINDINGS

Data analysis is the systematic organization and synthesis of research data and the testing of research hypotheses using those data (Polit and Hungler, 1999). After data were collected, it was sorted according to schools and grades, including sex male or female. Data were edited and checked for completeness and consistency before leaving the schools and prior to entering it on the data master sheet.

4.1 Data Analysis.

Data were analyzed using quantitative method: "quantitative analysis is the manipulation of numerical data through statistical procedures for the purpose of describing phenomena or assessing the magnitude and reliability of relationships among them" (Polit and Hungler). The data was entered manually on the data master sheet using pencil and computer. The calculator was used for statistical calculation in percentages.

Content analysis method was used to categorize the qualitative data. Content analysis is a procedure for analyzing written or verbal communications in a systematic and objective fashion, typically with a goal of quantitatively measuring variables. Qualitative content analysis involves an analysis of the content of narrative data to identify prominent themes and patterns among the themes (Polit and Hungler). A checklist is used to categorize common responses so as to add meaning to collected data.

Frequency tables were used to present the variables that are key in explaining the findings related to the problem of child sexual abuse.

The study evaluated knowledge and attitude of 50 school going children, 25 males and 25 females, 5 of each sex from grade 5-9. The findings of the study administered at Kabwata Basic School are presented in the tables below.

4.2 Presentation of Findings

Table 3: Demographic Data

Age on Last Birthday	Frequency	Percentage (%)
9-11 Years	4	8
12-14 Years	33	66
15-17 Years	11	22
18 Years	2	4
Total	50	100
Grade		
5	10	20
6	10	20
7	10	20
8-9	20	40
Total	50	100
Residential Area		
Kabwata (medium density)	23	46
Libala (medium density)	1	2
Sikanze (medium density)	1	2
Misisi (high density)	8	16
Other (mixed)	17	34
Total	50	100
Guardian		
Parent/s	26	52
Aunt	9	18
Uncle	6	12
Brother	3	6
Sister	2	4
Other	4	8
Total	50	100

The majority 33(66%) of the children interviewed were aged between 12-14years , 11 (22%) 15-17 years, 4 (8%) 9-11 years while 2 (4%) 18 years.

The respondents were from middle basic (grade 5-7) and upper basic school (grade 8-9), 10 (20%) from each grade.

Twenty three (23) 46% of the respondents said they stay in Kabwata, 8 (16%) in Misisi compound, 1 (2%) Libala and Sikanze each while 17 (34%) from other areas such as Long Acres, John Laing and Kamwala.

Twenty-six (26) 52% of the respondents said they stay with their parents, 9 (18%) with their aunt, 6 (12%) uncle, 3 (6%) brothers, 2 (4%) sisters, while 4 (8%) live with other relatives like grandmother.

Knowledge And Occurrence of Child Sexual Abuse

Table 4: Have heard about Sexual Abuse

Head about it	Frequency	Percentage (%)
Yes	46	92
No	4	8
Total	50	100

The majority of respondents 46 (92%) said they had heard about child sexual abuse, while 4 (8%) said they have not heard about it.

Table 5:Source of information

Source	Frequency	Percentage (%)
Health worker	0	0
Mass media	27	54
Family member	3	6
Friend	3	6
School Teacher	7	14
Others	7	14
Total	46	92

Most of the respondents 27 (54%) said they heard about sexual abuse from the mass media, 7 (14%) from teachers and other sources each, while 3(6%) of the respondents' sources were family members and friends each.

Table 6: Sexual Abuse Cases on increase in the community

Increase in cases	Frequency	Percentage (%)
Yes	23	46
No	27	54
Total	50	100

The majority 27(54%) of the respondents said there was no increase in the number of cases while 23(46%) said there was an increase in the number of cases in their community.

Table 7: Handling of Abused cases

Handling of cases	Frequency	Percentage (%)
Reported to police	10	20
Taken to Hospital	2	4
Kept at home	3	6
Others	8	16
Total	23	46

Ten (10) 20% said that the cases were reported to police, 8 (16%) gave other responses like victim paid money to parents, ran away, 3(6%) said the child was just kept at home and while 2(4%) said the children were taken to the hospital.

Table 8: Type of Sexual Abuse

Type	Frequency	Percentage (%)
Non contact	2	4
Contact (non genital)	2	4
Contact (genital)	11	22
Penetration	7	14
Other	1	2
Total	23	46

On the type of sexual abuse, 11(22%) of the respondents mentioned genital (contact), 7(14%) said penetration, 2(4%) no contact and contact (non genital) each, 1 (2%) talked about another type (language).

Table 9: The abuser

Abuser	Frequency	Percentage (%)
Father	5	10
Mother	0	0
Uncle	16	32
Aunt	0	0
Sibling	1	2
Other	4	8
Total	26	52

The majority 16 (32%) of the respondents said the uncles were the abusers, 5(10%) were fathers, 4(8%) other people or strangers, 1(2%) were siblings (brothers), while none of the respondents mentioned the mother or aunt.

Table10: Respondent having been abused before

Abused	Frequency	Percentage (%)
Yes	4	8
No	46	92
Total	50	100

Only 4(8%) of the respondents said they had been sexually abused before, while 46(92%) denied having been sexually abused.

Table 11:Type of Sexual Abuse for Respondents

Type	Frequency	Percentage (%)
Penetration	1	2 (25%)
Abusive language	2	6 (50%)
Pornography	1	2 (25%)
Others	0	0
Total	4	8 (100%)

Two (2) 50% of the sexually abused respondents said it was through abusive language, 1 (25%) mentioned penetrative sex and the other 1 (25%) through pornography.

Table 12: Respondents knowledge of abuser

Know Abuser	Frequency	Percentage (%)
Yes	4	8 (100)
No	0	0
Total	4	8 (100)

All 4 (100%) of those who said they had been sexually abused before said they knew their abusers.

Table 13: Respondents` Level of knowledge about Sexual Abuse

Level of Knowledge	Frequency	Percentage (%)
High knowledge	3	6
Moderate knowledge	18	36
Low knowledge	29	58
Total	50	100

The majority of respondents 29 (58%) had low knowledge/less than 50% knowledge about sexual abuse, 18 (36%) had moderate knowledge 12-17 (50-74%), while 3(6%) had high level of knowledge18-26 (75-100%).

Attitude Towards Sexual Abuse

Table 14: If victims of sexual abuse among respondents told anyone

Told someone	Frequency	Percentage (%)
Yes	3	75
No	1	25
Total	4	100

Three (3) 75% of respondents who were sexually abused told somebody about the incidence while 1 (25%) did not tell anyone.

Table 15: The Response of the informed person

Response	Frequency	Percentage (%)
Do not report it is normal	1	33.3%
Talked to abuser	1	33.3%
Nothing, promised to talk to abuser	1	33.3%
Total	3	100

Each of the of the victims guardians responded differently, 1(33.3%) talked to the abuser, another 1(33.3%) said the informed person told her it was normal and not to report, the other 1 (33.3%) the guardian did nothing and promised to talk to the abuser.

Table 16: Reasons for not telling other people

Reasons	Frequency	Percentage (%)
Told it was normal	1	25
Wanted to see if he would continue	1	25
Was scared	2	50
Total	4	100

Two (2) 50% of the abused respondents were scared to tell other people about the incidence, 1 (25%) was told it normal to be abused sexually, while 1(25%) wanted to see if the abuser would continue before reporting.

Table 17: What should be done to those who abuse children sexually

Action to Abuser	Frequency	Percentage (%)
Imprisonment	48	96
Counsel them	1	2
They should stop	1	2
Total	50	100

Forty-eight (48) 96% of the respondents said the abusers should be arrested or imprisoned, 1(2%) said they should also be counseled, while 1 (2%) said they should stop.

Table 18: How children can protect themselves

Protection	Frequency	Percentage (%)
Descent dressing	6	12
Avoid adult males	13	26
Abstain from sex	5	10
Scream/report	21	42
Education from parents	3	6
Do not know	2	4
Total	50	100

Twenty-one (21) 42% of respondents said children should scream or report, 13 (26%) said they should avoid male adults, while 2 (4%) did not know.

Table 19: Respondents Attitude on Sexual Abuse

Attitude	Frequency	Percentage (%)
Positive	28	56
Negative	22	44
Total	50	100

The majority of the respondents 28(56%) had positive attitude compared to 22(44%) who had negative attitude.

Table 20: Respondents` Level of Knowledge about sexual abuse in relation to their Sex

Sex	Level of Knowledge				
	Low	Moderate	High	Total	Percent
Male	17 (68%)	7 (28%)	1 (4%)	25	100%
Female	12 (48%)	11(44%)	2 (8%)	25	100%

The majority of female respondents 2/11(8/44%) had higher level of knowledge on child sexual abuse more males 17(68%) had low knowledge on child sexual abuse.

Table 21: Level of Knowledge in Relation to Level of Education

	Level Of Knowledge			
Grades	Low	Moderate	High	Total
Grade 5	9 (18%)	1 (2%)	0	10(20%)
Grade 6	6(12%)	4 (8%)	0	10(20%)
Grade 7	4 (8%)	5 (10%)	1 (2%)	10(20%)
Grade 8-9	10 (20%)	8(16%)	2 (4%)	20(40%)
Total	29(58%)	18 (36%)	3 (6%)	50(100)

Respondents in higher grades (7-9) were more knowledgeable than those in lower grades respectively; on average grade the 7 were more knowledgeable, while those in grade 5 were least.

Table 22: Respondents` Level of Knowledge in Relation to Age

	Level Of Knowledge			
Age Group	Low (0-11)	Moderate(12-17)	High (18-26)	Total (%)
6-8 years	0	0	0	0
9-11 years	3 (75%)	1 (25%)	0	4(100%)
12-14 years	17 (52%)	14 (42%)	2 (6%)	33 (100%)
15 years and above	7 (54%)	5 (38%)	1 (8%)	13 (100%)

The majority of respondents 7 (54%) aged 15 years and above had low, 1(8%) of them had high knowledge on sexual abuse. 3(75%) of the respondents aged between 9-11 years had low knowledge, while 1(25%) had moderate knowledge. 17(52%) of those aged 12-14years had low knowledge, 2(6%) of the them had high knowledge on child sexual abuse.

Table 23: Respondents` Attitude in Relation to sex

Sex	Attitude		Total
	Positive	Negative	
Male	16(57%)	9(41%)	25
Female	12(43%)	13 (59%)	25
Total	28(100)	22(100)	50

More male respondents 16(57%) had positive attitude on child sexual abuse.

Table 24: Attitude in Relation to Education Level

Grade	Attitude			
	Positive	Negative	Total	Percentage
5	5(17.8%)	5(22.7%)	10	20
6	4(14.3%)	6(27.3%)	10	20
7	4(14.3%)	6(27.3%)	10	20
8-9	15(53.4%)	5(22.7%)	20	40
Total	28(99.8%)	22(100%)	50	100

Table 26 shows that respondents in grades 8-9 showed a more positive attitude 15(53.4%) than those in other grades, followed by grade 5 respondents 5(17.8%), while grade 6 and 7 respondents had higher 6(27.3%) negative attitude.

CHAPTER FIVE

DISCUSSION OF FINDINGS

5.1 Introduction

The findings of the research are discussed in this chapter. The results are based on responses given by 50 pupils who were selected from 5 grades (5-9) at Kabwata basic school in Lusaka. The sample comprised 25 males and 25 females, 10 from each grade (5 of each sex).

The general objective of the study was to determine the knowledge and attitude of school going toward child sexual abuse. The study reveals who the abusers are in relationship to victims. The assumptions before the study were that cultural beliefs and practices, HIV/AIDS contribute to the increase in the number of child sexual abuse cases and that most cases occur within families.

5.2 Demographic Data

The study involved pupil from middle and upper basic school (grade 5-9) during school year 2006. Both sexes were equally represented. The most of the children were aged between 12-14 years, followed by those aged 15-17 years, as shown by table 3 and reside in Kabwata township (medium density area), with parents, few with other relatives like aunties, uncles or siblings. These democratic factors, show that the children's knowledge and attitude on child sexual abuse are not only dependent on who stay with them and area. The data also showed that most of the children abused were in the age groups that were the majority of respondents as also shown by reports at VSU Lusaka district. A similar study was done in Milan's (Italy) but it involved children at elementary schools (10 of 4th, 43 of 5th grade) during school year 2000-2001 by Pellai A, et al (2003).

5.3 Level of Knowledge of School Going Children on Child Sexual Abuse

The study revealed that most of the school going children had heard about child sexual abuse as shown by table 4. Most of the respondents heard about

child sexual abuse from the mass media, few from the school teachers and other sources and very few heard about child sexual abuse from family members as shown in table 5 but majority of respondents stay with their parents as shown in the demographic data.

The fact that most respondents heard about child sexual abuse from the media shows that sexual matters are not openly discussed in families. A number of parents shy away from discussing the problem of child sexual abuse with their own children. Health workers and teachers who are supposed to play an active role of teaching do not seem to be teaching the children about this common problem affecting the young ones. The little that the privileged youths know are mainly gained from the discussions the adults have on the media as shown in table 5. This reveals that even if people blame the media to be contributing to the increase in cases of sexual abuse like a study done by YWCA in 2005 where many respondents said songs and television programs are responsible (Chileshe P, et al 2005).

Few of the respondents were aware of cases in their areas and most of these cases were reported to the police, others were kept at home and parents just got money from the abusers as shown in tables 6 and 7. The common type of child sexual abuse known by the respondents was contact (genital) and penetration; the other types included non-contact. The location of the abuse was outside the family and within the family as shown in table 9. The majority of the respondents identified the uncles to the victims as the abusers in their communities followed by the fathers, this information is also reflected in the number of respondents who were sexually abused by people they live with whom they are related to. The revelations showed that; the females were sexually abused by uncles, males by aunties and maids. The respondents who were even mentioned friends in similar circumstances. This study showed intra-familial abuse (incest) is very prevalent as also shown by Kempe et al (1984). Even if most of the respondents heard about child sexual abuse as shown in table 4, generally the majority 29 (58%) of them had low knowledge. Most of the studies dealing with child sexual abuse involve adults leaving the victims whose role could help in equipping other children with knowledge on child sexual abuse. One of the respondents who were among those very knowledgeable about child sexual abuse said, *"I do not know what type of a*

counselor my mother is, because she does not discuss such matters with me". The comment shows that regardless of parental educational level many do not tell children about sex matters. However, a study carried out in U.S.A. revealed that parents were willing to discuss the issue of child sexual abuse with their children but they lacked knowledge on the matter.

The study also showed that despite the low knowledge most of the school going children above 9 years in grade 5 and above at least have an idea of what child sexual abuse but it is not adequate to avoid the risk of child sexual abuse.

5.4 Occurrence of Child Sexual Abuse

The study revealed that 23 (46%) of the respondents acknowledged that child abuse cases were increasing in their communities as shown in table 7. 21(42%) of them said they knew the abused child and most of them said the cases were reported to the police. The victim support unit in Lusaka recorded a total of 1,890 cases of child sexual abuse cases for school going age group (5-16 years) in the 3 years 2003-2005. 552 cases were reported in 2003; while 636 were abused in 2004 and the number of school going children reported to have been sexually abused in 2005 were 702 (victim support unit). The figures show that the cases reported have been increasing yearly. Though the reports at the police at hospital do not categorize the age groups of those defiled statistics showed that the majority of sexual abuse cases affected the children of school going age.

According to Waechter 1985 the true incidence of child sexual abuse cases is largely unknown. In 70-80% of cases parents/guardians either perpetrated the offence or condone it. The mean age of victims is 10 years. A consistent finding in the examination of child sexual abuse cases is that the adult offender is most likely to be a member of the child's family, a relative or the child or family (Waechter E.H. et al.1985: 632). In this study the mean age was 14 years.

The study revealed that uncles were the majority among the abusers identified by the respondents. The most outstanding result of the research was of those students who responded they had been sexually abused, 75% said they had disclosed the abuse to an adult; this is contrary to a study by

Faulkner (2006). The abused respondents who reported the victim to parents/guardians, no action was taken and their close relatives abused them. The study revealed that male children are equally affected as girls though their cases are not usually reported.

However Kempe et al (1984), reports that studies have usually indicated that the vast majority if not all, during the early teenage years of sexual assaults are against girl victims. However, there is now reason to believe that older boys are assaulted as well, but that they do not report the attack to anyone. As many boys as girls may be vulnerable to sexual abuse. Incest is identified as the common form of child sexual perpetrated by nuclear family member (Henry Kempe, et al 1984).

5.5 Attitude of School Going Children Toward Child Sexual Abuse

Attitude has been operationally defined in this study as one's way of thinking or feeling about someone or something in this case on the issue of child sexual abuse.

The majority of abused respondents who were sexually abused informed their parents/guardians about the incidence and expected them to take further action since they are children. Almost all respondents 49 (98%) said the abuser should be imprisoned, others said they should be taken to the doctor for counseling, as shown in table 17. Some of the respondents said the prison sentence should be 15, 24 years, for life or death sentence. Their response and emotion showed that children are not happy with the act of being abused. The study thus revealed children want abusers to receive stiffer punishment for them to stop.

The study revealed that respondents had various ideas on how children can protect themselves against being sexually abused; most of them talked about screaming and reporting, being careful with/avoiding male adults, isolation and descent dressing as shown in table 18. Some respondents even said they would fight back or bite the abuser.

The study revealed that children are willing to report the cases of abuse, ready to learn on measures to take.

More than half of the respondents started that the effects of child sexual abuse are sexually transmitted infections/HIV, others mentioned pregnancy

and psychological effects like stigma, fail to concentrate on things/ affects education, having bad memories when grown up, they end up blaming themselves and carry the burden forever, drop out of school and prostitution, being scared. Others included injury, loss of virginity and being barren. Only 9 (18%) of the respondents failed to mention the side effects. The effects mentioned by the respondents are what many authors have written.

Generally, most of the respondents from this study were willing to report the cases of child sexual abuse, how to protect themselves and were aware of the effects. The sex of children had no influence on the attitude of children.

According Wurtele SK, et al (1992) the attitude of school going children and children in general can be strengthened by teaching parents and teachers to educate children on sexual abuse prevention as reported in studies on sexual abuse prevention by Wurtele SK, Kast LC, Melzer AM/ Pellai A, et al/ Binder RL. (www.pubmed.gov January 2007)

5.6 The Implications on Health System:

The study revealed that there is need to inform, educate and communicate with children on child sexual abuse to adequately equip them. The studies dealing with sexual abuse should not be generalized but be specific so as to help children. Excluding children from discussions that deal with this problem will perpetuate the problem.

The study revealed that children main source of information is the media; parents and health workers do not discuss sex related issues with school going children.

There is need for the for health workers to educate children and parents about child sexual abuse in schools and communities. The school going children are the most affected and educating them can help to spread the information to the other youths. Health workers need to focus at preventing the vice and not wait to treat the after effects of child sexual abuse.

To reduce the problem of child sexual abuse the role of the health worker is key or central as they need to collaborate with other stakeholders in reducing the vice.

5.7 Conclusion

The study was aimed at assessing the level of knowledge and attitude of school going children towards child sexual abuse. The study revealed that most children are aware of the presence of sexual abuse through the media and parents do not usually take action when children report to them. This has contributed to cases not being reported to the police.

5.8 Recommendations

The following recommendations are made following the findings of the study:

1. Children should be taught about sexual abuse in schools as part of the syllabus, since both boys and girls are victims of sexual abuse.
2. Health workers should actively participate in educating children in schools, teachers and community members on the need to report to relevant authorities cases of child sexual abuse.
3. Counseling services should be provided at school to counsel abused children.
4. The police and hospitals should record cases of child sexual abuse separately from adult cases to emphasize the gravity of the problem.
5. The health, education, police and legal systems should work together with communities and non-governmental organizations to fight the scourge including the children. Involving children in the fight against child sexual abuse, will contribute to overcoming the problem, as they are central in this issue.
6. Parents/guardians who hide or do not report to the authorities should be punished so that others should learn from them.

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APPENDIX 1

THE UNIVERSITY OF ZAMBIA SCHOOL OF MEDICINE

DEPARTMENT OF POST BASIC NURSING

INTERVIEW SCHEDULE

TOPIC:

A STUDY TO DETERMINE THE KNOWLEDGE AND ATTITUDE OF
SCHOOL GOING CHILDREN ON SEXUAL ABUSE IN LUSAKA'S
KABWATA AREA.

Date of Interview: _____

Place of Interview: _____

Name of Interviewer: _____

Serial Number of Respondent: _____

INSTRUCTIONS TO THE INTERVIEWER

1. Introduce yourself to the respondent
2. Explain the purpose of the interview
3. Obtain verbal consent to interview him
4. Assure respondent of confidentiality and anonymity
5. Do not write name of respondent on interview schedule
6. Tick in the box corresponding to the correct answer or write responses in spaces provided.

SECTION A:
DEMOGRAPHIC DATA

Official
use only

1. What was your age on your last birthday?
- (a) 6- 8 years
 - (b) 9- 11 years
 - (c) 12- 14 years
 - (d) 15 - 17 years
 - (e) 18 years and above

2. Sex:
- (a) Male.
 - (b) Female.

3. What is your grade?
- (a) 4
 - (b) 5
 - (c) 6
 - (d) 7
 - (e) 8-9

4. What is your religion?
- (a) Christian
 - (b) Moslem
 - (c) Hindu
 - (d) Other (specify) _____

5. If Christian, what is your religious denomination?
- (a) Roman Catholic
 - (b) Pilgrim Wesleyan
 - (c) Pentecostal
 - (d) Seventh Day Adventist
 - (e) Jehovah's Witness
 - (f) Other, (specify) _____

6. What is your tribe?

- (a) Tonga
- (b) Chewa
- (c) Lozi
- (d) Bemba
- (e) Other, (specify) _____

--

7. Where do you stay?

- (a) Kabwata
- (b) Misisi
- (c) libala
- (d) sikanze
- (e) Others, specify _____

--

8. Whom do you stay with?

- (a) Parents
- (b) Aunt
- (c) Uncle
- (d) Brother
- (e) Sister
- (f) Others, specify _____

--

9. What does your Parent/guardian do for a living?

- (a) Housework
- (b) Business
- (c) Formally employed
- (d) Other, (specify) _____

--

10. How many are you in your family?

(a) None

(b) 1 -3

(c) 4 -6

(d) 7 – 9

(e) 10 and above

SECTION B: KNOWLEDGE

11. Have you ever heard about sexual abuse?

(a) Yes

(b) No

12. If yes, what is sexual abuse?

13. Where did you get information about sexual abuse?

(a) Health worker

(b) Mass media

(c) Family members

(d) Friend

(e) School Teacher

(f) Other, specify _____

14. Are there sexual abuse cases in your area?

(a) Yes

(b) No

15. If yes, how were they handled?

- (a) Reported to police
- (b) Taken to the hospital for check up
- (c) Kept at home
- (d) Other, specify _____

--

16. What is the attitude of teachers on sexually abused children at the school?

- (a) Counsel the children
- (b) Encourage children to report to police
- (c) Educate school children not to be found in hidden areas
- (d) Do not know

--

17. Do you think that child sexual abuse is on the increase in your community?

- (a) Yes
- (b) No

--

18. If yes, please explain why _____

19. If the answer is yes what was the type of the abuse?

- (a). Non contact
- (b). Contact (non-genital)
- (c). Contact (genital)
- (d). Penetration
- (e). Any other (specify or give name) _____

--

20. What was the location of the abuse?

- (a). Outside the family
- (b). Within the family

--

21. Who was the abuser?

(a). Father

(b). Mother

(c). Uncle

(d). Aunt

(e). Sibling

(f). Any other (specify)-----
22. Have you ever been sexually abused?

(a). Yes.....> Go to the next question

(b). No.....> Go to question 24
23. How were you sexually abused?

24. Do you know who sexually abused you?

- (a). Yes

(b). No
-

SECTION C: ATTITUDE

25. Did you tell anyone about it?

(a). Yes

(b). No

26. If the answer to question 25 is yes, what did the person you told do about it?

27. If the answer to question 25 is no, why did you not tell anyone ?

28. What do you think should be done to those who abuse children sexually?

--

29. How can children protect themselves from being sexually abused?

30. What are the effects of child sexual abuse?

--

APPENDIX 2: RESEARCH WORK SCHEDULE

	TASK TO BE PERFORMED	DATES	WEEKS	PERSONNEL	PERSON DAYS REQUIRED
1.	Literature review	Continuous		Researcher	
2.	Finalize research proposal	April to August, 2006	2 – 8	Researcher	110 days
3.	Data collection tool	1 st August to 8 th August, 2005	8 – 9	Researcher	7 days
4.	Clearance from relevant authorities	8 th August to 2 nd September, 2005	10 -13	Researcher, PBN, Supervisor, Choma DHMT, Choma District Commissioner	28 days
5.	Training research assistant	29 th August to 2 nd September, 2005	12 th	Researcher	5 days
6.	Pilot study	5 th September to 9 th September, 2005	13 th	Researcher and research assistant	1 days
7.	Data collection	12 th September to 25 th September, 2005	15 -16	Researcher and research assistant	14 days
8.	Data analysis	26 th September to 30 th October, 2005	17 -21	Researcher	35 days
9.	Report writing	31 st October to 13 th November, 2005	22 -23	Researcher	14 days
10.	Submission of draft research report to PBN	14 th November to 20 th November, 2005	24 th	Researcher	7 days
11.	Finalizing research report and binding	21 st November to 18 th December, 2005	25 -28	Researcher	28 days
12.	Dissemination of findings	19 th December to 24 th December, 2005	29 th	Researcher	6 days
13.	Monitoring and evaluation	Continuous		Researcher	

APPENDIX 3: GANTT CHART

NO	TASK TO BE PERFORMED	RESPONSIBLE PERSON	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR
1	Literature review	Researcher	↓											↑
2	Finalize research proposal	Researcher		↓			↑							
3	Data collection tool	Researcher						↔						
4	Clearance from relevant authorities	Researcher, PBN Supervisor, Choma DHMT, Choma District Commissioner						↔		↑				
5	Training research assistant	Researcher					↓		↑					
	Pilot study	Research and research assistant					↔							
6	Data collection	Researcher and research assistant						↔	↑					
7	Data analysis	Researcher						↓	↑					
8	Report writing	Researcher							↓	↑				
9	Submission of draft research report to PBN	Researcher							↓	↑				
10	Finalizing research report and binding	Researcher						↔						
11	Dissemination of findings	Researcher												
12	Monitoring and evaluation	Researcher					↓			↑				↑

APPENDIX 4: BUDGET

BUDGET CATEGORY	QUANTITY	UNIT COST (K)	total (k)
Stationery			
• Bond paper	3 reams	35,000.00	105,000.00
• Pens	5	1,500.00	7,500.00
• Pencils	4	1,000.00	4,000.00
• Rubber	2	2,000.00	4,000.00
• Notebooks	2	4,000.00	8,000.00
• Diskettes	2	5,000.00	10,000.00
• Tippex	2	8,000.00	16,000.00
• Scientific calculator	1	60,000.00	60,000.00
• Research bag	1	50,000.00	50,000.00
• Stapler	1	25,000.00	25,000.00
• Staples	1	8,000.00	8,000.00
• Perforator	1	20,000.00	20,000.00
• Flip chart	1	40,000.00	40,000.00
• Markers	2	2,000.00	4,000.00
• Manila files	4	1,500.00	6,000.00
Subtotal			367,500.00
Typing Services			
• Research proposal	50 Pages	3,000.00	180,000.00
• Research report	100 pages	3,000.00	300,000.00
• Interview schedule	5 pages	3,000.00	15,000.00
Photocopying:			
• Research proposal	60 pages	500.00	30,000.00
• Research report	400 pages	500.00	200,000.00
• Interview schedule	5 x 60 pages	500.00	150,000.00
Binding			
• Research proposal	2	10,000.00	20,000.00
• Research report	4	60,000.00	240,000.00
Subtotal			1,135,000.00

BUDGET CATEGORY	QUANTITY	UNIT COST (K)	total (k)
Personnel			
Lunch allowance:			
• Researcher	1 x 14 days	30,000.00	420,000.00
• Research assistant	1 x 14 days	25,000.00	350,000.00
Transport:			
• Researcher	1 x 14 days	40,000.00	560,000.00
• Research Assistant	1 x 14 days	40,000.00	560,000.00
Handling fee:			
Research Assistant	1 x 14 days	30,000.00	420,000.00
Subtotal			2,572,000.00
Total			3,794,500.00

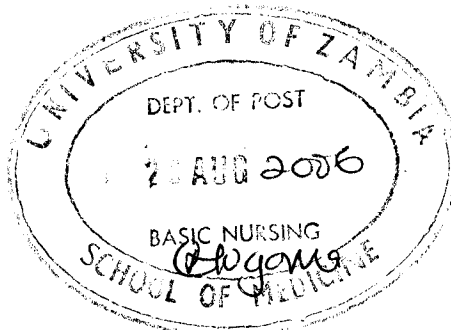
The University of Zambia,
School of Medicine
Department of Post Basic Nursing
P.O Box 50110
Ridgeway Campus
LUSAKA.

25th August, 2006

Ministry of Education
The District Education Officer
P.O Box 50093
LUSAKA.

U.f.s.

The Head of Department
Department of Post Basic Nursing
P.O Box 50110
LUSAKA.



Dear Sir/ Madam,

RE: PERMISSION TO COLLECT DATA FOR A PILOT AND RESEARCH STUDY

I am a fourth year student at the University of Zambia studying Bachelor of Science Degree in Nursing, writing to ask for permission to collect data from schools in Kabwata area.

In partial fulfillment of the degree requirement I am carrying out a research study. The topic of the study is "**KNOWLEDGE AND ATTITUDES OF SCHOOL GOING CHILDREN ON CHILD SEXUAL ABUSE.**"

I shall be very grateful if permission is granted to enable me carry out the pilot and research project. I need to collect information by interviewing pupils at Mkandawire Basic School for the pilot study and Kabwata Basic School for the project.

Yours faithfully,

A handwritten signature in dark ink, appearing to read "Naomi Bweupe".

NAOMI BWEUPE.



**THE UNIVERSITY OF ZAMBIA
SCHOOL OF MEDICINE
DEPARTMENT OF POST BASIC NURSING**

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Telex: UNZALUZA 44370

Fax: +260-1-250753

Email: pbn@coppernet.zm

25th August 2006

The Head of Department

**RE: SIGNING OF LETTERS OF PERMISSION FOR STUDENT NAOMI
BWEUPE**

I am referring the above-mentioned student to you requiring her letters of permission for the fieldwork to be signed. I have read the letters and endorse that they can be signed.

Thanking you for your continued support.

Yours sincerely,

Dr M.C Maimbolwa

Lecturer/Researcher

The University of Zambia,
School of Medicine
Department of Post Basic Nursing
P.O Box 50110
Ridgeway Campus
LUSAKA.

25th August, 2006

Ministry of Education
The District Education Officer
P.O Box 50093
LUSAKA.

30 AUG 2006

*Permission is
granted.
H. H. H. H.*

U.f.s.

The Head of Department
Department of Post Basic Nursing
P.O Box 50110
LUSAKA.



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Yours faithfully,

Naomi Bweupe

NAOMI BWEUPE.