

Parental Perceptions of Outcomes of Child Sexual Abuse on Children in Early Childhood Education Ages 5-8 in Nairobi City County, Kenya

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Abstract: The topic for this research was Parental perceptions of outcomes of child sexual abuse on children in Early Childhood Education ages 5-8 in Nairobi City County Kenya. The first research question addressed the addressed parent's perception of outcomes of their child's sexual abuse ordeal. The second one examined parental perceptions of influence of CSA on early childhood education. The third addressed mitigations regarding child sexual abuse in early childhood education. A social demographic questionnaire and an interview schedule were used to collect significant data from parents/guardians. This study used a descriptive survey design and the sampling technique was purposive. It was located in Nairobi City County. The study site was the Gender Violence Recovery Centre GVRC of the Nairobi Women's Hospital. The target population comprised of sexually abused children and their parents/guardians. The independent variable for this study was CSA, while the dependent variable was parental perceptions of outcomes of CSA in early childhood education. The total sample size was ninety five (95) respondents. This included forty five children (45) who had experienced CSA and (45) of their parents/guardians. The research instruments were piloted on a randomly selected sample of five (5) sexually abused children aged 5-8 years, their parents/guardians and one key informant at Child line Kenya. Cross validity was determined through peer feedback and content validity through expert opinion. Reliability was established through pilot testing of the instruments to ensure clarity and adequacy of items. The study instruments included interview schedules for children and parents/guardians. The study yielded qualitative data which was analysed thematically guided by study objectives. Further, descriptive statistics were generated using percentages, frequencies and means. Results were presented in tables, figures and texts. Key findings showed that parents perceived CSA as having affected children through loss of precious learning time. There was also a lot of anxiety in children because perpetrators who were out on bail were present in the neighbourhoods. The study recommended protection and strengthening of the family unit, training of stakeholders on CSA prevention and inclusion of age appropriate life skills in school curriculums among others.

I. LITERATURE REVIEW

Parents have a key responsibility to protect their children from vices such as CSA. Their perception of the CSA vice may indicate the level of knowledge and the willingness to prevent it and even support their child's education. A study on preventing child sexual abuse: Parents' perceptions and practices in Urban Nigeria by (Ige and Fawole, 2011), results showed that many parents knew that CSA was a common

problem in the community. More than 90% of the parents reported having discussed stranger danger with their children. However, almost 47% said they felt their children could not be abused, while more than a quarter felt it was alright to leave their children alone and unsupervised. This study recommended that parents be educated on CSA risk perception. It was a case of the Nigerian context, my study sought to contextualize the Kenyan scenario.

A study on parent-involved prevention of child sexual abuse: A qualitative exploration of parents' perceptions and practices in Beijing by Xie, Qiao and Wang (2015), show that parental beliefs or practices do impede the actual occurrence of CSA by directly influencing their child's prevention knowledge and self-protection. The current study sought to find out how parental perceptions affected early learners.

In America, according to Stauffer (2015) research by Cross and Walsh on parental perceptions of CSA, data was collected from 10 communities in Alabama, Pennsylvania, South Carolina and Texas. It included cases that were reported to police, child protective services or children's advocacy centres over a two-year period. The sample comprised cases of sexual and serious physical abuse perpetrated by suspects aged 12 years or older upon victims who ranged from age 5-18 years old. Parental blame/doubt was measured using an eight-item questionnaire, completed during interviews with 161 parents. The study assessed the parent's emotional reaction to their child's disclosure of abuse. Possible parental responses ranged from believing the victim completely to wondering if the abuse really occurred, as well as feelings of anger, blame or resentment towards the victim. Parental blame and doubt were found to increase significantly in correlation with the victim's age, with those aged 13 to 15-year-old less likely to receive parental support than younger children of ages 5-9. The current study sought to explore parental perceptions of outcomes of child sexual abuse on children in early childhood education.

A retrospective quantitative and qualitative analysis of 73 court cases of CSA disclosed in Slovenia within a period of ten years showed that all the child victims included in the study were females and all the perpetrators were male adults. The children were aged between 4-15 years. Results showed when girls are victims of CSA, their mother's perception and

attitude regarding the CSA ordeal was very important especially where the mode of abuse was incest. Mother's positive attitude influenced the time the abuse was disclosed, it was also attributed to stopping of the on-going abuse as well as elimination of its negative immediate effects especially on education. It also meant a decrease in its likely negative long-term outcomes (Rakovec-Felser & Vidovič 2016). Parental perceptions of CSA outcomes therefore are a determining factor regarding the child's progress especially in education.

A study by Chen, Dunne and Han (2008) on prevention of child sexual abuse in China: knowledge, attitudes and communication practices of parents of elementary school children showed that more than 95% of parents talked with their children about stranger danger and were unlikely to talk specifically about sexual abuse. Most parents lacked basic knowledge about characteristics of perpetrators, the sexual abuse of boys and nonphysical outcomes of CSA. About half (46.8%) were concerned that CSA preventive education could cause their children to know "too much about sex" hence never discussed CSA with their children.

In a study by Ige and Fawole (2011) in Nigeria, a sample consisting of 387 parents and caregivers of children younger than 15 years of age was selected. Results showed that CSA was a menace in the community. However, majority of the parents were opposed to common CSA myths. More than 90% communicated stranger danger to their child(ren), about 47% felt their children could not be abused while 27.1% often left their children alone without supervision. Variations in the perceptions of child sexual abuse and communication practices were insignificant. The current study sought to establish parental perceptions of CSA among parents whose children had been abused.

According to Mathoma, Maripe-Perera, Khumalo, Mbayi and Seloilwe (2006) in Botswana, parents of children affected by CSA placed major emphasis on community involvement in fighting against the problem. They also recommended appropriate education for children, parents; families and community members about child sexual abuse and improvement on the laws that protect children against sexual abuse in order to successfully curb the problem. This study sought to find out parental perceptions of CSA outcomes amongst early childhood learners.

A study by Mlekwa, Nyamhanga, Chalya and Urassa (2016) on knowledge, attitudes and practices of parents on child sexual abuse and its prevention in Shinyanga district, Tanzania showed that Parents in Shinyanga were aware and had positive attitude regarding their responsibility in protecting children from CSA. However, very few parents practised the said knowledge, hence there was need to bridge the gap between knowledge and practice. The study recommended more emphasis on community education programs, parents to educate their children on the need to guard themselves from anybody touching their private parts or being outdoors at night unaccompanied by an adult, children

be taught not to accept gifts from strangers, need for community involvement in fighting CSA and introduction of relevant educational programs. However, how parental perceptions of how CSA outcomes affected early learners remained unexplored.

Githinji (2005) study on sexual abuse of primary school pupils in Nakuru municipality Kenya, alluded that some parents of the sexually abused children feared reporting the abuse citing the possibility of reprisal from the offender and or reduced support related to the offender. The study also highlighted difficulties faced by sexually abused children and their parents in accessing medical and legal services, in addition to ensuring confidentiality. Due to dearth of empirical data on parental perceptions of CSA on early learners in Kenya is needed. This study filled this gap.

II. RESULTS

While a few parents felt that CSA outcomes did not affect early childhood education, most parents perceived CSA as a vice that affected early education as follows:

Table 1.1: Parental Perceptions of CSA Outcomes on Education

Parental Perceptions of Effects of CSA Outcomes on Education	Frequency	Percentage
After CSA, children experienced self-esteem and were withdrawn	7	16
Children felt insecure going to school	24	53
Children became fearful, were in distress and cried upon every mention of the ordeal	5	11
Made children to drop out of school	4	8
Child became truant after the CSA ordeal	21	47
Associates school with abuse	4	8
Loss of precious learning time through; hospital procedures, court processes, process of transfer to other schools, relocation to alternative housing in those cases where the perpetrator was the neighbour and destabilization of the family following arrest of the abusing parent.	40	89
Failed to sleep well, hence tired and sleepy in class	18	40
Had poor performance and had to repeat classes	2	4
CSA ordeal was as a result of the media exposing children to sexually suggestive materials. After CSA the child suffers all other consequences such as hospital and court routines	2	4
Is fearful (most likely due to threats from perpetrator) yet violent towards younger children and performs poorly in school	1	2
Stigmatization after CSA affected both the parent and the child	10	22
Child has resulted to watching movies in order to forget the CSA ordeal. This has affected his learning negatively	1	2
Child was too traumatized since the ordeal. She hadn't talked to outsiders and had stopped going to school altogether	1	2
Was defiled during war in South Sudan. She dropped out of school	1	2

Defecated on themselves in school. This led to ridicule by others. This made them hate school	2	4
Had poor concentration in class	15	33
Not affected because the teacher was emotionally supportive to the child	8	18
Affected because the teacher failed to listen to the child and openly discussed the child with others, this made the child to drop out of school	1	2
Child demanded to be enrolled in a girls' school only, after having been abused by a boy in school, hence became truant	1	2
CSA didn't affect learning because the hospital offered the children comprehensive psychosocial services hence the children coped well	6	13
Child's usually in shock. Gets panic attacks when with others and is unable to walk	1	2
Was left behind in learning because of the days she was absent on medication after the ordeal and the court routines	4	8
CSA effects are a ripple effect of parents failure to take up parenting as their primary responsibility	1	2
Fears abusing gender whose presence causes anxiety to the child	11	24

The study found that most parents perceived sexual abuse of their child as shocking and emotionally painful. This affected parents making them unable to successfully offer the support children needed in early childhood education.

When my child was abused, colleagues in the office started avoiding me when they learnt what had happened to my daughter. The emotional pain was too much. I took my annual leave so as to attend to my child. I felt isolated from the community and almost sunk into depression. We parents of CSA survivors need help from the community if we are to offer comprehensive support to our children's academic work (Mother C).

In table 4.1, some 4.7% parents perceived CSA as a by-product of immorality inclined mind sets.

I blame CSA on the media which exposes children to sexually suggestive materials. Children end up experimenting because they learn through imitation, hence there is need to eliminate such CSA suggestive content from the media. Further, mainstream media usually has pornographic features which glorify child sexual abuse in that the adverts portray men and women looking successful and very happy when involved in drug abuse and alcoholism. CSA has severally been perpetrated by people under the influence of such substances. The moment CSA has occurred it will definitely affect the child's learning (Father, A).

According to Table 1.1, 89%, parents perceived CSA as having affected learning of their children through absenteeism from school. This was as a result of some of the children being admitted to hospital others were on strong medications, while others had doctor's appointment. Others lost learning

time through process of transfer to other schools, relocation to alternative housing in those cases where the perpetrator was the neighbour and destabilization of the family following arrest of the abusing parent. Parents also said the legal process was both traumatizing and tedious for both the parents and the children, hence parents preferred that children don't go to school but should take time to rest at home.

Forty seven percent parents perceived the CSA ordeal as having made children fearful, truant and some had dropped out of school altogether. This was especially for children whose CSA ordeal had to do with school.

My son was sodomized in school and he refused to go back there, after the ordeal because he associated school with abuse. He also tried to talk to the teacher about it, but the teacher did not cooperate, instead she would discuss with others about it in my child's hearing (Mother, C).

Majority of the parents (89%) felt that CSA destabilized the family, after the ordeal, two of the parents said the families moved houses and children had to be transferred to other schools. The children had to take time in coping with the CSA trauma as well as transit to the new school environment. This disruption affected their learning.

Twenty two percent parents perceived as having affected learning through stigmatization of children.

My child suffered much loneliness and teasing the moment peers in school learnt of the ordeal. It was so bad, I had to go to school and talk to the class teacher who understood the pain my child was experiencing and gave the child emotional support. Since that time my child is performing well in her class work (Mother D).

My child was sodomized in school, now he associates school with sexual abuse. He tried to explain this to the teacher who refused to listen to him and talked about him to others in my child's hearing, since then my child has stopped going to school (Mother E).

CSA was also perceived as having caused poor concentration in 33% of the children; leading to poor performance. Consequently 4% of the children repeated grades which led to wastage of resources.

She has very poor concentration in class; she has had to repeat classes because of her failure to concentrate on class work (Mother F).

Parents also perceived CSA as having made children to fear the offending gender. Twenty four percent (24%) of the children were affected by this.

The CSA affected her in that she is not comfortable staying with other children especially boys now that she was abused by one; she keeps getting shocked (startled response) and it affects her concentration in class (Mother G).

Some 4% parents perceived preventing children from interacting with the offending gender as a suitable strategy for protecting children from CSA.

I normally ask my daughter not venture outdoors alone while at home. This is to help her not to be victimized again. Instead she stays indoors either watching TV or crocheting (Mother H).

This is in tandem with the findings by Xie, Qiao and Wang (2015), which reveal that parental beliefs or practices can influence the child's prevention knowledge and self-protection. In the current study when some parents advised daughters not to mingle with the offending gender, it means that this contempt is likely to be carried over to school. Every school has both genders, hence, such a child will not be at ease in school and their learning will be at stake.

These findings also agree with the study by Chen, Dunne and Han (2008) whose findings showed that parents lack knowledge regarding characteristics of perpetrators, the sexual abuse of boys and nonphysical consequences of CSA.

Some parents perceived CSA as an evil that is proliferating causing learning disturbances because most parents fail to understand their role as primary care givers who should make the home safe for the children. Ruto (2009) argues that home is the most insecure place for children. One parent also pointed out that child protection role is primarily for parents. It therefore should not be delegated to either the community or neighbours. This is because whereas some neighbours and community members can be helpful there are others who are paedophiles. However, some parents still felt that sexually abused children tend to be truant and neighbours can help the parent know the whereabouts of the child in case they were seen hanging around the neighbourhood during school time. Such information would help the parent know how to help the child.

Parental Perceptions of Child Sexual Abuse

The study found that most parents perceived sexual abuse of their child as shocking, unbelievable and emotionally painful.

Some parents understood CSA as a byproduct of immorality inclined mindsets. They blamed this on the media and explained that children are getting more exposed to sexually suggestive materials through the media and will experiment because they learn through imitation, hence there is need to eliminate such CSA suggestive content from the media. Further social media usually has pornographic features which glorify child sexual abuse in that mainstream media advertises portray men and women looking successful and very happy when involved in drug abuse and alcoholism. CSA has severally been perpetrated by people under the influence of drugs including alcohol.

Parents also said that the girl child should never be left under the care of a man and that girls tend to be very close to their fathers yet some fathers fail to see these girls as daughters and

choose to abuse them. On the other hand some male parents opined that step fathers are known to abuse children who are not biologically theirs.

Others said CSA is about parents not being close to their children. When the parent is a friend to the child, the child can explain to the parent any issues related to CSA and together they can plan the way forward.

Some parents said CSA is an evil that's proliferating because most parents fail to understand their role as primary care givers. This would facilitate safety of children at home. According to Ruto (2009), most homes are insecure places for children. This is because most CSA cases happen there. Parents also pointed out that Child protection role is primarily for parents. It therefore should not be delegated to either the community or neighbors. This is because whereas some neighbors and community members can be helpful there are others who are potential child rapists. However, some parents still felt that CSA survivors tend to be truant and neighbors can help the parent know whenever the child is seen hanging around the neighborhood during school time. Such information would help the parent know how to help the child.

Parents also lack skills to protect children especially girls. There is also need for age appropriate life skills that should include how to avoid dangerous interaction with strangers and that children should not wonder away from home alone, play alone or go to neighborhoods alone therefore there is need for parents to be trained by experts on how to protect children from CSA. This is reiterated by the Kenya Basic Education Curriculum Framework in GoK (2017) who's learning outcome 6 advocates for practice of various safety skills to promote health and wellbeing during the early years.

To ensure mothers have child protection skills early enough, there should be child protection lessons during post-natal clinics and child immunization sessions. Some well-articulated information on child protection should also be factored in the immunization clinic cards. The community needs to be taught how to respond when children are in danger and how to support parents whose children fall victim of this vice.

Parents whose children were abused by strangers said that they perceived CSA as a byproduct of how children responded to strangers and that parents should provide for the needs of their children and teach them life skills such as not accepting gifts from strangers.

Parental Remedial Strategies

During data collection, it was noted that mothers who completed school were committed to strategies which could help their child cope with the CSA ordeal. Another graduate mother said she had taught her daughter who is a CSA survivor life skills such as not taking things from strangers. This mother also ensured her early CSA survivor socializes in a healthy way with the male gender though it was the abusing

gender. She does so by taking her daughter to places like Uhuru Park where the child gets a chance to play with children of different genders and stops fearing the offending male gender. Therapy sessions at GVRC Adams Arcade have also been useful in this regard because this opportunity gives children a chance to play with others.

Fathers who completed school knew interventional strategies which could help their child to avoid being abused in future. One father said parents should talk to their children about avoiding strangers and should dangerous person especially strangers try to come close to them - they should scream for help. This respondent's child was abused by a drug addict in the neighborhood. Another graduate parent said children need guidance on the right social media. This is because these days the media has a lot of pornography and this has contributed to incest because when children view scenes of immorality on TV, they may attempt to experiment. Such experimenting may turn to be incest if it involves close relatives. He also stated that parents shouldn't leave children to wonder away from home alone neither should they go to neighborhoods alone.

III. CONCLUSIONS

Parents need guidance on how to protect children from sexual abuse. This is especially the case regarding the girl child who is the most vulnerable.

Recommendations for Parents

According to the findings of this study, CSA is a vice with high prevalence rate in Nairobi and its outcomes on children in Early Childhood Education are evident. Parents therefore need to take care of the following areas so as to mitigate the effects of CSA on learning;

To begin with, home is insecure because most abuses happen there. Programs that support the family unit ought to be put in place. Further parents should seek to preserve the family unit and prevent divorce as much as possible because when marriages break children are left vulnerable to CSA.

Moreover, parents need to be educated on factors that precipitate CSA, preventive measures, signs of sexual abuse and reporting procedures. Such training would be most effective if done in good time through prenatal and postnatal clinics and that such information should be included in the clinic card, so that as health care providers guide parents through issues such as immunizations, they will also guide them through child protection from CSA.

Parents also need to be trained on life skills so that they can teach children how to protect themselves. Such life skills should include how to interact with strangers. Children should also be taught the right time for sex, hence learn to deal with encroachments.

Parents will therefore be in a position to teach girls how to interact with the opposite gender. This is because even fathers

can be child abusers, whereby they may fail to see daughters as their own children and choose to abuse them.

Parents should provide for the needs of their children. So children don't have to accept gifts from strangers. Additionally, parents need to be close to their children. When the parent is a friend to the child, both can demystify CSA.

Mothers should have a good rapport with their daughters, so that they can have courage to confide in them, without having to hide their personal feelings when confronted with issues which have potential for CSA.

Parents /guardians need to embrace their role as primary care givers. They should not delegate this role. They ought to always be in charge of their children's protection. Some community members are haters and can abuse children. Perpetrators of CSA look for loopholes in care, so as to abuse children.

Parents should also get to know their children's friends. Knowing who their children associate with helps the parent to guide the child so they are not caught up associating with bad company such as those that abuse drugs or are drug addicts. Parents also need to be aware of their children whereabouts all the time when not in school. They shouldn't leave children to wonder away from home alone, nor go to neighbourhoods alone.

Another reason why parents should take care of children is that when something like the CSA ordeal happens, they will be able to take quick action. Lack of immediate response may mean loss of forensic evidence.

Parents should try to be at home by the time children are coming from school; this denies perpetrators opportunities to defile children. Children should play near home. Not far from the gate or homestead.

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APPENDIX III

Instruction

This questionnaire will be filled by the parent/guardian

INTERVIEW SCHEDULE FOR PARENTS/GUARDIANS

Section A: Social Demographic Characteristics

1. Study No
2. What is your child's age.....
3. What is your child's gender a) Male: () b) Female () c) I don't know ()
4. Current residence: Informal settlement () Estate () Rural/urban () I don't know ()
6. What's your marital status?
 - a) Married () b) Single () c) Divorced () d) Separated () e) Widowed ()
 - f) Cohabiting () g) I don't know ()
7. Religion
 - a) Catholic () b) Protestant () c) Muslim () d) Others (specify).....
- 8 What is your level of education?
 - a) Never went school ()
 - b) Reached primary school but never completed ()
 - c) Completed primary school but never went to secondary school ()
 - d) Went to secondary school but never completed ()
 - e) Completed secondary school ()
 - f) Went to college but did not complete college ()
 - g) Completed college ()
 - h) Went to university but did not complete ()
 - i) Graduated from university ()
 - j) I do not know ()
9. Are you employed? Yes () No ()
10. If yes what type of work do you do?
11. If no, what do you do for a living?
12. Who sexually abused your child?
 - a) Stranger () b) Step-father () c) Uncle () d) Father () e) Family friend ()
 - f) Teacher () g) Elder sibling () h) Younger sibling ()
 - i) Others (specify).....
13. Where was your child sexually abused from?
 - a) Your home () b) Rapist's home () c) Other homes- specify.....
 - d) School () e) Bush () iv) Roadside () v) Toilet ()
 - vii) Others (specify).....

Section B: Effects of CSA on Education

1. Do you think CSA has affected your child's education?

If yes how?

2. If no give reasons why you think CSA did not affect your child's education?

3. Do you have any other comments on how CSA has affected your child?

4. Are there measures that can cushion children against CSA and its consequences? If yes which ones?

5. What measures do you think would eliminate CSA from the community?

Thank you for your participation