Identifying Sexual Abuse in Children and Teens in Schools

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Sexual abuse has become a major and recurring issue in children throughout the United States, especially in the state of Ohio. In the United States, Ohio ranks fourth out of the 50 states for highest rates of sexual abuse. Sexual abuse is traumatizing to children and leads to PTSD, depression, anxiety, altered sexual development and other symptoms later in life (Rheingold et al., 2015). In order to prevent this abuse and further complications, all professionals and adults involved in children’s lives need to be advocates for their voice. But how can you advocate for an abused child who you are unaware is being abused? This was the purpose of our project. We created an educational session along with a handout that includes information on identifying and reporting sexual abuse. We aimed to educate on the signs of sexual abuse, factors that put children at risk for abuse and different ways to report abuse if suspected.

For our educational session, the original plan was to present to a class of students at the College of Nursing or on a clinical floor at UCMC or CCHMC. After discussing this with our project advisor, we changed our plan to present to a group of teachers. This group of professionals was more fitting to our target audience and in helping us achieve our goal. Teachers see their students almost every day, sometimes even more than their own caregivers. Teacher’s relationships with their students may be stronger than any other relationship they have with an adult or guardian at home. Because of the relationships teachers and students share, we decided it was important for teachers to recognize when there is something causing stress in their students’ lives, specifically stress from sexual abuse. Although the abuse is most likely not occurring at school, children usually show these signs of distress throughout their daily life. We chose to present our educational session to early childhood teachers because at this age, children
are not always able to stand up for themselves and recognize the way this abuser is treating them is wrong. Because of these reasons, we decided elementary teachers are the most appropriate and receptive audience for our topic. Specifically, our chosen group was composed of 19 teachers at Creekside Early Childhood Center. We presented our educational session and had the teachers complete a post-assessment survey. Our three primary goals of our session included: 1) Learners will be able to identify signs of sexual abuse, 2) Learners will be able to state at least three risk factors for sexual abuse, and 3) Learners will be able to describe the process on how to report sexual abuse if they identify it.

**Method**

**Literature search**

When conducting our research, we began by searching databases such as CINAHL, PubMed, and UC Libraries. We used keywords such as sexual abuse, pediatrics, elementary schools, signs, risk factors, sexual trauma, and abuse. These searches provided us with many useful articles, including extensive information on abuse education provided in schools currently and how children being abused will present to outsiders. We used peer-reviewed articles that had been written in the past five years. After compiling a list of about 20 articles, we then sorted through and eliminated those with the least appropriate evidence. With 16 articles in total, each group member selected four articles and used them to complete an evidence evaluation table. These tables broke each article down into purpose, study design, study group, independent and dependent variables, findings, recommendations, implications, and level of evidence. After breaking down our individual articles with the evidence evaluation table, we compiled all useful
Evidence to our project and educational session into one document to reference as we completed our Google Slide presentation, brochure, and essay.

Evidence for practice change

One major theme that we found in our research was the idea that there is not enough training and/or education provided to teachers on recognizing and reporting abuse, primarily sexual abuse. One fact that we wanted to convey in our presentation was that 34.7% of teachers say they have received sexual abuse training, versus 65.3% who have never received training (Márquez-Flores et al., 2016). This is an alarming rate of teachers who are not receiving sexual and physical abuse education. Teachers who received prior training demonstrated that they possessed greater knowledge about the age at which sexual abuse begins, their knowledge of evaluation methods in cases of child sexual abuse, knowledge of the legal implications of child sexual abuse, and acquaintance with someone who had suffered sexual abuse in their childhood (Márquez-Flores et al., 2016).

Another common theme shown in our research was the idea that the prevention of child sexual abuse should be strategic, planned, and needs an organized procedure. This means that there needs to be a common procedure in handling abuse between schools and other platforms. However, this would first require schools to adapt to the training and educational provision. A meta-analysis research article showed that 100% of the studies analyzed gave evidence that violence and prevention measures were identified as important in reducing and avoiding sexual abuse (Ogunjimi et al., 2017). It is important that there is a uniform way of detecting and reporting sexual abuse across states in order to have the highest level of effectiveness.
A third theme identified throughout literature search was the concept that children who are sexually abused most often show emotional and social signs more than physical signs. Some of these signs may include withdrawal, regression, changes in eating habits, reluctance to be alone with certain people, unusual fears, and unexplained “health problems” (Vrolijk-Boschchaart et al., 2018). One article showed that, “children in the Children Sexually Abused (CSA) group were reported by their teachers as displaying significantly greater social difficulties” (Blanchard-Dallaire & Hébert, 2014). These children must trust the people in which they would be willing to report to. Due to the developmental changes in their brains from trauma, they may not be able to display their emotions or true needs to others. We have found in our research, it is important for teachers to make themselves approachable, trusted and honest with their students, especially at younger ages in order to protect them from sexual abuse.

**Project Plan and Implementation**

Using the literature search we conducted, we compiled our evidence into an evidence-based education session. On March 9, our group presented this evidence-based education session in a classroom at Creekside Early Childhood Center. In attendance was a group of 19 members of the school staff, including teachers, counselors, a secretary and a principal. We presented during after-school hours, so there were no children present in the building. For our visual component, we created a Google Slides presentation with the information we wanted to educate on. We discussed the prevalence of sexual abuse in children in Ohio and the United States. We educated on the signs, symptoms, and risk factors to identify in the child and signs to identify in the abuser. We explained that certain professions are required by law to report abuse if it is suspected, including teachers and nurses, and we provided the
resources and tips necessary to report the abuse. At the end of the presentation, we answered questions the teachers had and handed out pamphlets with the information covered in the education session. A visual of this pamphlet can be viewed in Appendix B on page 13 of this paper. Our intent with handing out these pamphlets was that if the teacher was in a situation where they suspected sexual abuse, they would have this pamphlet in their desk or somewhere where they could reference the pamphlet, in order to help the child in need. After answering questions and handing out the pamphlets, we passed out the post-assessment survey.

Results

Evaluation

We conducted a post-assessment survey to evaluate the outcomes of the educational session. The survey had five questions based on how the individual perceived the effectiveness of our presentation. A visual of this survey can be viewed in Appendix C on page 13 of this paper. Our first question was a yes or no question, asking, “Prior to this session, have you ever received training on identifying sexual abuse?” All 19 of our participants answered yes to having received training on identifying sexual abuse prior to this presentation. The next four questions were based on the opinion of the individual and how much they perceived they learned from the presentation. We used our three goals to determine how well the participants benefited from this. The participant was to choose one of the following options for each question: strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree. The second question was, “I can identify signs of sexual abuse.” 12 participants answered, “strongly agree,” and the other 7 participants answered, “agree.” The third question was, “I can identify at least 3 risk factors for sexual abuse.” 15 participants answered, “strongly agree,” and 4 participants answered, “agree.”
The fourth question was, “If I identify sexual abuse, I know how to properly report the situation.” 16 participants answered, “strongly agree,” and 3 participants answered, “agree.” Our final question asked was, “This educational session was a good use of my time.” 16 participants answered, “strongly agree,” and 3 participants answered, “agree.”

We discovered during our review of the results that all of our participants were trained for sexual abuse prior to this presentation. This result was different compared to our research we conducted before our implementation. Our research showed that about only one third of teachers received training, but at our specific site, all 19 the teachers had received training prior to our presentation. Although they were trained prior, 16 participants strongly agreed that this was a good use of their time, and the other 3 participants agreed that this presentation was a good use of their time. Questions two through four, were aimed at meeting the goals we aimed to achieve. These three goals were, learners will be able to identify signs of sexual abuse, learners will be able to state at least three risk factors for sexual abuse, and learners will be able to describe the process on how to report sexual abuse if they identify it. Based on our results, 100% of the participants either strongly agreed or agreed to meeting all of our three goals we attempted to meet.

**Discussion**

**Recommendation for future work needed**

Through our research, we determined that it is important and beneficial to teach individuals involved in the lives of children on what to look for and when to intervene in sexual abuse situations. By teaching about sexual abuse, more professionals will be able to identify and be knowledgeable on how to report sexual abuse, and this will hopefully help children who are
suffering through these situations. Additional research does need to be conducted in order to determine if our project was beneficial. Although our participants either strongly agreed or agreed that they were educated on our goals and are able to identify and report sexual abuse, it is hard to know whether or not they would be able to do so in a real-life sexual abuse situation. This research would be hard to measure in a real sexual abuse case. However, one idea that could be helpful, if we had more time and funds to conduct it, would be to conduct a simulation. If we created a simulation of a child who acts out the signs of sexual abuse to their teacher, we could determine if a participant from our educational session would be able to point out these specific signs and then follow the steps necessary to report this. With a simulation like this, we could determine if our education was beneficial to the participant in a real situation.

An idea we could have implemented into our project differently would be to conduct a pre-assessment to go along with our post-assessment before presenting our education session. Having a pre-assessment could have allowed our group to gather more specific information on the knowledge that the group obtained from our education session and how beneficial our presentation was to the participants. Because all 19 of the participants received training on sexual abuse prior to this presentation, we are unable to determine whether they achieved the goals from the information we provided in our presentation, or if this was knowledge gained in a previous education training. We also could have chosen a crowd who have not been taught beforehand on sexual abuse. Although it is helpful to reteach and reinforce their education on the importance of identifying and reporting sexual abuse, a group of people who have never been taught on this information may have benefited more from this presentation.
Conclusion

In conclusion, we created an evidence-based education session aimed at training teachers in an early childhood school setting on how to identify and report sexual abuse in their students. We not only wanted them to be able to identify symptoms of sexual abuse, but we also educated on the risk factors for children going through this and signs to recognize in the abuser. We also provided the participants with a tool to keep, for reference if needed in a real-life sexual abuse situation. We decided that teachers have a great impact on this topic because of how close their relationship to their students can be, and how much time their students spend with them. After conducting the education session and receiving results from the post-assessment evaluation, we realized that all of these participants have previously been trained on the topic of sexual abuse. However, all 19 of the participants either strongly agreed or agreed that they found this education session beneficial. We also discovered with our post-assessment that all 19 of our participants met our three goals, including being able to identify signs of sexual abuse, being able to identify at least three risk factors for sexual abuse, and being educated properly on how to report sexual abuse if it is suspected. With the amount of positive results received from the post-assessment evaluation, we are able to determine that our project implementation is beneficial to meeting the desired goals.
References


Appendix A - Individual Self-reflections

Participating in evidence-based research projects are a beneficial part of nursing school. Throughout my four years of nursing school, we have been taught to create a few different evidence-based projects. With each attempt at creating an evidence-based project, I learn a little more about the process and gain a greater appreciation for those who are able to use this method for creating policies and new practices. Everything we are taught to do as a nurse was once discovered through a research process. Although our project is not as big as some of these important nursing tasks we will complete, it is important and enlightening to understand the process and effort it takes to adapt a policy or procedure this way. I find this research to be very interesting, especially when we used CINAHL and can see all the research conducted that was similar to our research. Although these projects are tedious and require me to use my nursing knowledge in a different way than I am used to, it is a good way to educate on the importance of having nursing researchers and all research workers in any career. - Abby Horning

Being involved in this project will prove beneficial to me, and my fellow group members, as we enter the nursing field in just a few short months. It is important to have some experience with evidence based projects before entering the field because they will play a crucial role in our development as a nurse. As we begin our careers, we will be faced with adopting many different evidenced based practices for implementation into our patient care. This project has allowed me to gain some experience with nursing research and how to acquire information on various healthcare related topics. When I become a nurse, research will be a part of my duties. I will need to research new policies and procedures that I am not familiar with in order to educate
myself before implementation. The research I did for this project will allow me to better navigate through databases in the future. This project also allowed me to gain experience working in a group with other future healthcare workers. Once I become a nurse, I will be working in various interdisciplinary teams composed of other healthcare workers. Through this project, I am more comfortable working in a group setting and sharing my ideas with other individuals. I feel more adequately prepared to do so in the hospital setting along with using evidence to further develop changes in practice. - Victoria Rooney

I feel like this project has benefited me in many ways, especially in the way of teaching me how to search for evidence and complete thorough research in nursing. I now know how to search many different databases and which key-words to use when searching. By completing the evidence evaluation table, it made it very easy to see which sources would be most beneficial to our project. As a nurse, I feel like these tools will be helpful to my practice and always using evidence-based actions. They will also be helpful in completing future research for continuing education and eventually in my Master’s program. Nursing is a field that is continually changing and evolving, therefore we need to be up to date on current evidence and policy changes. These databases will allow me to be able to do this and grow along with the field of nursing. After graduation, I will be working with researchers and interdisciplinary teams to create the best outcomes for my patients. This project has given me the tools and the knowledge I need to be successful in my practice as a nurse individually and working in teams with others.

- Jessica Winkle

I feel as if being able to work with others on a project that is evidenced based will help me be able to do so in my nursing future. There’s something extremely positive to be said about
working together with coworkers as an interprofessional team towards a common goal. Especially if that goal is one that is evidenced based and can help you and your unit create a better practice and improve care. New practices and policies will continue to develop and being able to learn about the information and educate yourself on it and then implement it into practice is something that can take some time. The more we work with evidence the easier it will become to integrate that into our practices after a change or a new discovery. Doing this capstone was the start of that and expanding our capabilities to better practice in one way or another. I think my group worked well together and we are very proud of the final product of this capstone project.

- Jessica Young

**Appendix B - Brochure**

**Appendix C - Survey handout**

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Please circle one of the answers for each objective.

Prior to this session, have you ever received training on identifying sexual abuse?

- Yes
- No

I can identify signs of sexual abuse.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly Disagree

I can identify at least 3 risk factors for sexual abuse.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly Disagree

If I identify sexual abuse, I know how to properly report the situation.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly Disagree

This educational session was a good use of my time.

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly Disagree

Please provide any feedback you may have to improve our educational session.

Comments: