



VIOLENCE AGAINST CHILDREN IN THE FAMILY
(Increased Risk of Degenerative Diseases)

Meri Neherta¹, LiliFajria², ArifRohman Mansur³, Aisyah Rahmadini⁴

^{1,2,3,4}Child, Maternity Department, Nursing Faculty Universitas Andalas Padang City, Indonesia

Abstract

Violence against children in the family is an iceberg phenomenon where only a small proportion of cases emerge to public attention. Until now, the submerge portion is unknown. Violence experienced will have an impact on the physical and psychological. This study aims to determine the description, types, forms, and perpetrators of violence against children in Padang, Indonesia. **Methods:** The descriptive research design was carried out in Padang City from October 2022 – December 2022. The research sample was 1000 school-age children using the simple random sampling method. Then, the Child Abuse Screening Tool Questionnaire (ICAST-C) was used to measure violence against children. Data is presented using a frequency distribution. **Results:** The results showed 95.10% psychological violence, 94.60% physical violence, 31.60% social violence, and 22.10% sexual violence. Most perpetrators were mothers (80%), fathers (61.3%), grandfathers (14.8%), brothers (15.4%), and uncles (13.1%). **Conclusions:** Most school-age children (95.1%) have experienced physical, psychological, sexual, and social violence in the family, where the perpetrators are mothers, fathers, grandfathers, brothers, and uncles. It is recommended that all prospective brides and grooms receive health education about the basic needs of child development and the role and function of the family in creating a prosperous family.

Keywords: Violence, perpetrators, types of violence, school-age children, family, Degenerative Diseases

Correspondent Author:

1. Dr. Ns. Meri Neherta, M. Biomed

Child, Maternity Department, Nursing Faculty Universitas Andalas
Padang City, Indonesia

E-mail: merineherta@nrs.unand.ac.id. Scopus id:57189051391

ORCID id:[0000-0002-4992-9342](https://orcid.org/0000-0002-4992-9342)

2. Dr. Ns. Lili Fajria, M. Biomed

Child, Maternity Department, Nursing Faculty Universitas Andalas
Padang City, Indonesia

E-mail: lilifajria@nrs.unand.ac.id

Scopus ID : 57213829350

ORCID : 0000-0002-8740-6729

3. Ns. ArifRohman Mansur, M. Kep

Child, Maternity Department, Nursing Faculty Universitas Andalas
Padang City, Indonesia

E-mail: arifrohmanmansurphd@nrs.unand.ac.id

4. AisyahRahmadiniS.Kep

Child, Maternity Department, Nursing Faculty, Universitas Andalas
Padang City, Indonesia

E-mail: aisyahrahmadini@gmail.com

The issue of violence against children in the social sphere in the context of families

in Indonesia is like an iceberg phenomenon. The exact number has not been properly reported⁽¹⁾ At any rate, violence is a problem in all countries around the world. Globally, it is estimated that up to 1 billion children aged 2-17 years experienced physical, sexual, and emotional violence in the past year ⁽²⁾⁽³⁾. Most of the violence against children in the family is perpetrated by their parents⁽⁴⁾. Likewise, in Indonesia, violence against children in families has continued to increase in the last three years. In 2019 there were 11,057 people; in 2020, it grew to 11,278 people; in 2021, it rose again to 12,556 people⁽⁵⁾⁽⁶⁾.

Padang is one of the cities in Indonesia where 76% of the population is native to the Minangkabau tribe, famous for its close family kinship. Even though it looks calm and comfortable, this area also has cases of violence against children in families. According to data from one of the Community Social Institutions, cases of violence against children in Padang have increased significantly every year. In 2020, there were 94 cases of violence, of which 32 cases were victims of family violence. Then, in 2021 it increased again to 104 cases, of which 47 were family violence victims⁽⁷⁾. Ironically, the family that was expected to be a shelter for children has now become the main basis of threats for the children.

Given the importance of this problem, it is necessary to conduct research to find out the more representative number of victims, perpetrators, types, and forms of violence experienced by children in Padang. This research needs to be carried out in order to plan preventive actions that can be taken so that violence against children can be reduced, or eliminated. Therefore, this study aims to describe the types, forms, and perpetrators of violence against children in Padang, Indonesia.

MATERIALS AND METHODS

This research design is descriptive of a population of elementary school-age children in Padang City. The number of samples is 1000 people, taken by simple random sampling method.

Inclusion criteria:

- Ages 9-12 (grades 3,4,5,6)
- Lives in Padang City
- Able to communicate well
- Physically and mentally healthy

Exclusion criteria:

Participants were absent at the time the research was conducted.

Instrument:

The instrument in this study used 2 kinds of questionnaires.

Questionnaire 1 regarding participant demographic data, including:

- Participant data: age, gender, number of relatives, number of households
- Data of participant's parents (father and mother): Age and occupation of parents.

Questionnaire 2: contains 29 questions explaining forms of violence perpetrated by parents consisting of 10 questions for physical violence, 6 questions for psychological violence, 8 questions for sexual violence, and 5 questions for social violence. Questionnaire 2 is an extension of the Standard Questionnaire from the Child Abuse Screening Tool (ICAST-C) developed by Adam J. Zolotor et al⁽⁸⁾. Assessment of the answers to the questionnaire: getting an act of violence is given a score of 1, and not committing an act of violence is given a score of 0.

Data Collection

The data taken has received permission from:

- Department of Education and Culture of Padang City, as well as the school
- Willingness of participants to provide informed consent that has been approved by their parents and teachers
- Data collection was assisted by enumerators from elementary school teachers who had previously received training from researchers.

Filling out the questionnaire was guided by the enumerator.

- Questionnaire 1 is: Respondents fill in the population data provided in the questionnaire without filling in the names of the participants. Then proceed with filling out the 2nd questionnaire
- Questionnaire 2: filled in by giving a check mark according to the experience that has been obtained by the respondent

After all the respondents filled out all the data, the questionnaires were collected, and the researchers thanked them for all the cooperation that the respondents and enumerators had given.

Health Research Ethics Clearance:

This research has passed an ethical test from the Health Research Ethics Commission with number: LB.02.02/5.7/486/2022

Data analysis; Data were analyzed with SPSS, and displayed with a frequency distribution table. Study time lasts for 4 months, from September 2022-December 2022

RESULTS

The study was attended by 1200 participants, but after checking the completeness of the data, only those provided by 1000 participants meet the minimum information required for this study, and 200 data were discarded because they were incomplete. The characteristics of the respondents who participated in this study were: male 52.4% and female (47.6%) Minangkabau ethnicity (76%). Most of the father's education is high school (55%), as is the case with mother's

education, which is mostly high school (60%). Then, 46.1% of fathers work and 70% of mothers unemployed.

From the results of the study, it was found that 95.1% of children had experienced violence in the family, namely: physical violence by 94.60%, psychological violence by 95.10%, sexual violence by 22.10%, and social violence by 31.60%. Perpetrators of violence: mother (80%), father 61.3%, grandfather 14.8%, brother 35.4%, uncle 13.1%. The following is a detailed description of the types, perpetrators, and forms of each type of violence experienced by elementary school-age children.

Table 1: Frequency Distribution of Physical Violence

Physical abuse	Perpetrators									
	Mother		Father		Grand-father		Brother		Uncle	
	f	%	f	%	f	%	f	%	f	%
pinched	702	70,2	242	24,2	49	4,9	320	32	48	4,8
beaten	357	35,7	259	25,9	43	4,3	204	20,4	32	3,2
Tried	326	32,6	226	22,6	16	1,6	121	12,1	23	2,3
Grabbed	93	9,3	33	3,3	18	1,8	102	10,2	9	0,9
Withdrawn	134	13,4	88	8,8	19	1,9	117	11,7	20	2
Kicked	70	7	54	5,4	15	1,5	103	10,3	14	1,4
Caged	206	20,6	98	9,8	7	0,7	54	5,4	11	1,1
slapped	131	13,1	82	8,2	23	2,3	44	4,4	23	2,3
stepped on	27	2,7	19	1,9	8	0,8	35	3,5	9	0,9
Burned with cigarettes	28	2,8	36	3,6	8	0,8	14	1,4	7	0,7

Table 1 shows that mothers are the highest perpetrators of physical violence in elementary school-age children in Padang City.

Table 2: Frequency Distribution of Psychological Violence

Psychological abuse	Perpetrators									
	Mother		Father		Grand-father		Brother		Uncle	
	f	%	f	%	f	%	f	%	f	%
scolded	800	80	613	61,3	148	14,8	354	35,4	131	13,1
Compared to	320	32	120	12	15	1,5	91	9,1	22	2,2
snapped	268	26,8	186	18,6	28	2,8	116	11,6	35	3,5
glared at	124	12,4	86	8,6	14	1,4	73	7,3	26	2,6
Humiliated	68	6,8	33	3,3	8	0,8	66	6,6	22	2,2
Threatened	128	12,8	68	6,8	5	0,5	78	7,8	24	2,4

Table 2 shows that mothers are the highest perpetrators of physical violence in elementary school-age children in Padang City.

Table 3: Frequency Distribution of Sexual Violence

Sexual abuse	Perpetrators									
	Mother		Father		Grand-father		Brother		Uncle	
	f	%	f	%	f	%	f	%	f	%
Touched Genitals	0	0	27	2,7	4	0,4	9	0,9	7	0,7
Told To Touch The Genitals	0	0	4	0,4	2	0,2	8	0,8	5	0,5
Touched Chest	0	0	29	2,9	10	1	15	1,5	4	0,4
Insert Something Into The Genitals	0	1	2	0,2	0	0	1	0,1	5	0,5
Ordered To Pose Porn	0	1	4	0,4	4	0,4	2	0,2	0	0
Watch Videos Of Naked People	0	0	3	0,3	1	0,1	0	0	4	0,4
Peeked/Watched While In The Bathroom	0	0	6	0,6	2	0,2	6	0,6	3	0,3
Shown Nude Videos/Photos	0	0	1	0,1	0	0	1	0,1	2	0,2

From table 3, it is known that fathers committed the highest number of perpetrators of sexual violence.

Table 4: Frequency Distribution of Social Violence

Social abuse	Perpetrators									
	Mother		Father		Grand-father		Brother		Uncle	
	f	%	f	%	f	%	f	%	f	%
eat less	26	2,6	10	1	6	0,6	11	1,1	6	0,6
dirty clothes	10	1	1	0,1	3	0,3	3	0,3	1	0,1
not given medicine when sick	25	2,5	14	1,4	4	0,4	9	0,9	10	1
often left alone	254	25,4	192	19,2	37	3,7	99	9,9	29	2,9
Less school tools	53	5,3	34	3,4	9	0,9	10	1	10	1
asked to find money	16	1,6	15	1,5	2	0,2	8	0,8	2	0,2

From table 4, it turns out that mothers are the highest perpetrators of social violence.

DISCUSSION

From the research results, it turns out that 95.1% of children have experienced violence in the family, namely: 94.60% physical violence, 95.10% psychological violence, 22.10% sexual violence, and 31.60% social violence. This situation is very concerning, especially since there are children who receive two, three, or even four types

of violence from the person they are entrusted with⁽⁹⁾. The family environment in child development is very important for shaping children's ethical, moral and ethical behavior and building children's trust in others and themselves⁽¹⁰⁾. Violence in the family will reduce the child's comfort and sense of security, which of course will interfere with the child's social, emotional and cognitive development⁽¹¹⁾.

Most of the perpetrators of violence in the family are carried out by mothers who teach their children to trust and be trusted by others, and who supposed to make children confident and feel safe emotionally. The role of the mother in the family includes teaching responsibility, instilling an attitude of hard work, strengthening household harmony, and providing space for children to develop⁽¹²⁾. If the mother commits violence against the child, the impact will be very detrimental, both physically and psychologically⁽¹³⁾. It also affects the weakening of the emotional connection between mother and child. Children who are in weak emotional bonds or feel insecure in family dynamics tend to have higher cortisol levels⁽¹⁴⁾⁽¹⁵⁾. As a result, they are more at risk of developing degenerative diseases in adulthood⁽⁴⁾.

An increase in the hormone cortisol can have several effects that can affect the health and balance of a person's body. Some of the consequences of an increase in the hormone cortisol are⁽¹⁶⁾. Cortisol is often referred to as the "stress hormone" because its production increases during periods of stress. Increased cortisol can trigger the body's stress response, which can lead to physical and emotional symptoms such as fatigue, muscle tension, sleep disturbances, increased heart rate, and changes in appetite⁽¹⁷⁾⁽¹⁸⁾.

High cortisol levels can disrupt a person's sleep patterns. Increased cortisol at night can cause difficulty sleeping, insomnia, or waking up in the middle of the night. Long-term elevated cortisol can lower the immune system, increasing the risk of infection and slowing down the healing process. Cortisol can affect mood and mental well-being. An increase in the hormone cortisol can be associated with an increase in symptoms of depression, anxiety, and feeling excessively tired⁽¹⁹⁾⁽¹⁸⁾.

Long-term high cortisol levels can affect cognitive functions, such as attention, concentration, and memory abilities. An increase in the hormone cortisol is linked to cognitive impairments such as difficulty processing information and impaired memory. Long-term elevated cortisol can contribute to a variety of health problems, including increased blood pressure, increased risk of heart disease, metabolic disorders, weight gain, and decreased muscle mass⁽¹⁷⁾⁽¹⁶⁾.

Children who are victims of violence often experience an increase in the hormone cortisol in their bodies. The hormone cortisol is the body's natural physiological response to stress and threats. In cases of violence, children experience frightening and traumatic situations, which can trigger a stress response and increase the production of the hormone cortisol⁽¹⁷⁾.

An increase in the hormone cortisol in child victims of violence can have several negative impacts, including. Psychological impact: Long-term high cortisol can affect a child's emotional well-being. Child victims of violence may experience symptoms of anxiety, depression, difficulty sleeping, eating disorders, and difficulties in social relationships. Mental health disorders An increase in the hormone cortisol in the long

term can increase the risk that children will experience mental health disorders such as post-traumatic stress disorder (PTSD), anxiety disorders, and depression⁽³⁾⁽²⁰⁾.

High cortisol can affect the process of growth and development of children. This can affect the child's immune system, nervous system, and cognitive function. behavior: aggressive Increased cortisol can contribute to aggressive behavior and irritability in children who are victims of violence. Children may have difficulty regulating their emotions and exhibit aggressive behavior as a coping mechanism for the traumatic experiences they have experienced⁽²¹⁾⁽²²⁾⁽¹⁹⁾.

It is important to provide support and protection to child victims of violence. Involving mental health professionals, such as psychologists or counselors, can help children deal with the psychological impact and recover from experiences of violence. In addition, a holistic approach that includes physical, emotional, and social care is also needed to support the child's overall recovery.

CONCLUSIONS AND RECOMMENDATIONS

Conclusion: 95.1% of children have experienced violence in the family, namely: physical violence 94.60%, psychological violence 95.10%, sexual violence 22.10%, and social violence 31.60%. Perpetrators of violence: mother (80%), father 61.3%, grandfather 14.8%, brother 35.4%, and uncle 13.1%. It is recommended that all prospective bride and groom receive health education about the basic needs of child growth and development as well as increasing the role and function of the family. Conflict of interest: There is no conflict of interest in this study.

Health Research Ethics Clearance: This research has passed the ethical test of health research at the Central General Hospital of Doctor M Djamil Padang with number: LB.02.02/5.7/486/2022

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