

Child Abuse Cases: Comparing before and during the COVID-19 Pandemic

Beta Ahlam Gizela¹

Available online at: www.xournals.com

Received 20th August 2022 | Revised 15th September 2022 | Accepted 30th September 2022

Abstract:

Covid-19 pandemic brought a major change in people's lives. The demands of being able to adapt quickly do not always live up to expectations. This condition can have a bad impact on vulnerable groups, include children to have a higher risk of experiencing violence. On the other hand, health services and stakeholder attention are focused on handling pandemics. The purpose of this study is comparing the prevalence of cases of violence in children before and during the pandemic examined at Dr. Soeradji Tirtonegoro Hospital, comparing risk factors for child abuse before and during pandemics. Method: This is an observational study, analysed in descriptive data. Result: The results of research conducted at Dr. Soeradji Tirtonegoro Hospital period of 2017-2019 showed an relatively flat in cases of violence both physically and sexually against children every year. In 2017 there were 15 cases, 2018 increased to 17 cases, 2019 to 14 cases. In pandemic period researcher get the number of child abuse increase to 26 cases. Most victims are female, and the age around 15-17 year old. Conclusion: Prevalence of child abuse cases managed in Dr. Soeradji Tirtonegoro Hospital increased during pandemic.

Keywords: *Vulnerable, Child Abuse, During Pandemic, Prevalence, Hospital*

Authors:

1. Dr. Soeradji Tirtonegoro Hospital, Klaten, INDONESIA

Introduction

Covid-19 pandemic brought a major change in people's lives. Changes in work or study habits and activities that usually took place in the office and school became to be done at home. The demands of being able to adapt quickly do not always live up to expectations. Mental stress is experienced by the whole community. This condition can have a bad impact on vulnerable groups.

Children as a vulnerable group are feared to have a higher risk of experiencing violence. On the other hand, health services and stakeholder attention are focused on handling pandemics. This condition can worsen the fulfilment of children's needs, including handling cases in case of violence. Based on this thought, this study is proposed to explore findings that can be the basis of improvements in the handling of further cases more broadly.

The purpose of this study is: comparing the prevalence of cases of violence in children before and during the pandemic examined at Dr. Soeradji Tirtonegoro Hospital, comparing risk factors for child abuse before and during pandemics, mapping patterns of handling cases of violence in children in pandemic times.

Method

The design of this study is observational. The study subjects were clinical forensic patients of child abuse at Emergency Room Dr. Soeradji Tirtonegoro Hospital, Klaten City, Central Java Province, Indonesia. Data collection is done in a retrospective cohort. The initial stage in the study was the retrieval of forensic case data of child abuse clinics found in Emergency Room in March-December 2017, 2018, 2019 and 2020. The 2017, 2018, 2019 data is pre-pandemic data. The 2020 data is data in the pandemic period.

The inclusion criteria in this study are: medical records of clinical forensic patients at Emergency Room Dr. Soeradji Tirtonegoro Hospital in March-December 2017, 2018, 2019, and 2020. The exclusion criteria in this study is incomplete medical record.

Data is processed using stata. Processing begins with descriptive data related to demographics and cases of child abuse before and during pandemics.

Ethical Clearance

This research has been approved by Medical and Health Ethic Committee Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Ethic Committee Approval No. KE/FK/0338/EC/2021.

Results and Discussions

Child abuse is one of cases that requires examination of clinical forensic medicine, the examination of living victims for legal proof, in addition to cases of crimes of decency, victims of traffic accidents, victims of persecution, victims of poisoning, and domestic violence (Aflanie *et al.*, 2017).

Child abuse is a global problem. Violence against children occurs in almost every country in the world. Violence Against Children Survey (VACS) says 1 in 4 girls have experienced sexual violence (Lemoyne, 2005). KPAI data in 2014 shows cases of violence against children in Indonesia tend to increase from year to year (Indonesian Child Protection Commission (KPAI), 2015). It needs good treatment to overcome this problem, one of them in the field of health. Health workers must provide treatment and recovery services for victims' health in accordance with professional standards, standard operating procedures, and medical needs of victims. The service is carried out in basic health facilities and referral health facilities owned by the government, local government or the public including the private sector (Government Regulation (PP) No. 4 Year 2006, 2006).

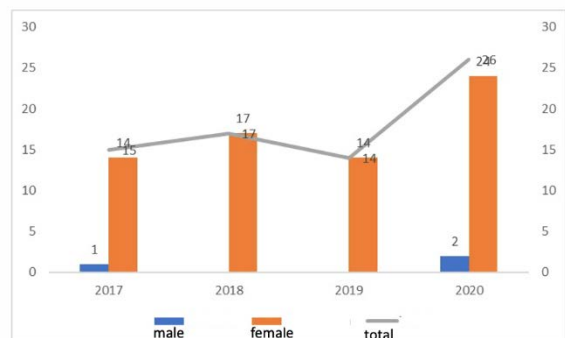


Figure No. 1: Gender of Child Abuse Victims

The 2017, 2018, and 2019 data are pre-pandemic data, covering March to December. The 2020 data is data during the pandemic, covering March to December. According to who, violence is the intentional use of

physical force or force, which threatens and actually occurs, against oneself, an individual or group of people or society, resulting in or most likely resulting in bruising/trauma, death, psychological loss, developmental abnormalities or deprivation of rights (Pinheiro, 2006).

The results of research conducted at Emergency Room Dr. Soeradji Tirtonegoro Hospital, Klaten City, Central Java Province, Indonesia period of 2017-2019 showed a relatively flat in cases of violence both physically and sexually against children every year. In 2017 there were 15 cases, 2018 increased to 17 cases, 2019 to 14 cases. In pandemic period researcher get the number of child abuse increase to 26 cases. Data released from the Indonesian Child Protection Commission for cases of violence against children in Indonesia, especially in physical and sexual violence, decreased from 280 cases in 2017 to 268 cases in 2018, and increased in 2019 to 304 cases. This research is in line with data released by the Ministry of Women Empowerment and Child Protection where for victims of violence against children in Central Java from 940 cases in 2017 rose to 1052 cases in 2018 and 992 cases in 2019.

Factors that influence the increase in cases of violence against children in central Java are low economic, social, cultural, lifestyle, and education levels (jatengprov.go.id, 2017). According to data from the 2015 Central Java Provincial Development Analyst Series for the economic level of Central Java is quite stagnant from year to year with the slow decline in poverty rates. According to National Development Planning Agency, Klaten, where the hospital located is an area whose economic growth is below the provincial average (National Development Planning Agency, 2014). Meanwhile, in Indonesia itself according to the Data and Information Center of the Ministry of Health of the Republic of Indonesia on Violence against Children and Adolescents risk factors from the level of education that commits the most acts of violence against children at the level of education that does not have an elementary school diploma, and followed by elementary school/ equivalent as the second most.

Gender of children who are victims of violence against children in Emergency Room Dr. Soeradji Tirtonegoro Hospital is mostly experienced by girls. This study is in line with data released by the Ministry of Women Empowerment and Child Protection of the Republic of Indonesia on violence data of Central Java province

which from 2017 to 2019 girls were the victims of violence compared to boys. Another study reviewed by Janise, *et al.* (2015) also reported that the gender of the child who received the most violence in the city of Manado was from girls (51%). Different findings obtained by Almuneef, *et al.* (2016) who reported victims of child abuse 55.5% came from boys.

The reason why girls are often victims of violence is because girls are considered weak compared to boys. Girls are also created with beautiful levels and body shapes that make many girls victims of violence (Purbararas, 2018). Gender differences in child abuse have different impacts between boys and girls. Boys tend to get external disorders such as alcohol abuse while girls are more impactful in internal disorders such as depression and anxiety (Meng and D'Arcy, 2016).

The Ministry of Women Empowerment and Child Protection of the Republic of Indonesia defines violence as any act that is against the law, with or without the use of physical and psychological means that pose a danger to life, physical, to the end of one's independence (Ministry of Women's Empowerment and Child Protection and Secretary of the Ministry, 2010). Child abuse is any form of child abuse, whether physical, psychological, sexual abuse, neglect or other commercial exploitation, thus posing a danger or loss to a child's health and survival (UNICEF, 2014). The impact of child abuse according to the Independent Expert for the United Nations Secretary-General's Study on Violence Against Children (Suparmanto, 2007) includes physical and psychological developmental disorders, long-term impacts, sustained violence, and socioeconomic disorders (Pinheiro, 2006).

Direct consequences that can be observed in children victims of violence are the presence of severe or mild injuries, cognitive impairment, developmental disorders, psychological disorders such as easy fear, having a feeling that he is not expected to be born in the world, anxiety, to loss of self-esteem. A study says that exposure to violence in children can change a child's brain development by interfering with the process of neurodevelopment. In the new violent conditions, children will experience Post-Traumatic Stress Disorder (PTSD) and depression (Pinheiro, 2006). In this study, examination of the victims was conducted by interdisciplinary team, including psychologist. Regarding national health insurance and social security network, follow up of the outpatients

was managed depend on the severity, in primary, secondary, or tertiary hospital. Dr. Soeradji Tirtonegoro Hospital is tertiary hospital.

According to the Regulation of the Minister of Health no. 68 of 2013 on the Obligation to Provide Information on Violence against Children, health care providers must provide information if they find a case of violence against a child by notifying the child's parents and should report the case to the police by at least bringing documents containing the age, gender of the victim, the name and address of the health care provider, time of examination, as well as the impact on the child's health. If you find a case of child abuse, the health care provider must provide first aid, provide initial counseling, explain to parents about the child's condition, refer if needed, ensure the safety of the child, and record the results of examinations in medical records and visum et repertum (**Ministry of Health, 2013**).

Data from the Women and Children Protection Online Information System, there were more than six thousand cases of child abuse from January 1 to September 19, 2020, which showed an increase in cases in the pandemic period (**Online Information System for the Protection of Women and Children (SIMFONI PPA), 2020**). This increase in cases is followed by an increase in the need for access to health services. Health services are very important in handling cases of violence in children, because in addition to overcoming the health problems caused, it can also be the entrance to handling litigation.

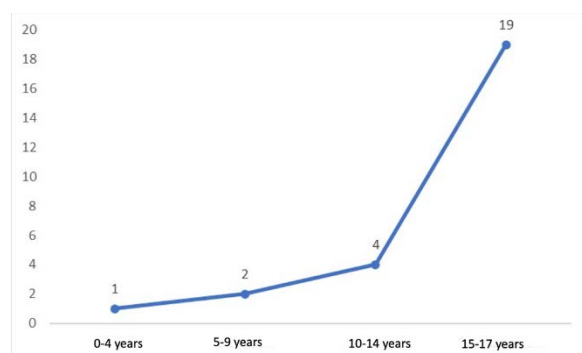


Figure No. 2: Age of Child Abuse Victims

In this study, children were most likely to receive violence between the ages of 15-17 year old. This research is in line with the research of **Janise, et al. (2015)** that the age of most who experienced violence against children in Manado is at the age of 16 years.

Another study conducted by **Almuneef, et al. (2016)** is different from this study which found results for victims of child abuse in Saudi Arabia the most in children aged 5 years. The reason why children aged 11-18 years are more prone to violence is because at this age the child has started to grow up and is easily influenced by the environment so often do not listen to the words of parents. So parents often punish the child and unwittingly cause violence to the child.

UNICEF reports that about 17 percent of children from 58 countries experience severe corporal punishment in the face, face and ears, or repeated beatings of the head, face and ears, or repeated beatings. More than 40 percent of children aged 2-14 years' experience severe corporal punishment in Chad, Egypt, and Yemen. In general, 3 out of 10 parents believe that physical violence is necessary in educating children (**UNICEF, 2014**). Psychological violence against children is any act in a child that results in health, physical, mental, spiritual, moral, and social disorders. This form of emotional violence varies, such as limiting the movement of children, belittling children, not giving full attention and affection, scapegoating children, laughing at them, and so on (**Suparmanto, 2007**).

Child sexual abuse is the involvement of a child in sexual activities, without the child's consent and he himself does not understand what is going on, which is characterized by the sexual relationship of the child with an adult or other child, with the aim of providing satisfaction to the person. This sexual violence includes coercion in sexual intercourse, forcing children to hold the genitals of others, stimulation of groping, exposing the genitals to children for sexual gratification, pornography, incest sexual relations, and sodomy (**Suparmanto, 2007**).

About 120 million girls under the age of 20 year old in the world have experienced coercion of sexual intercourse or other sexual activities, and 1 in 3 teenage girls who marry between the ages of 15-19 (84 million) have been victims of physical, emotional, and sexual violence committed by their husbands or partners (**UNICEF, 2014**). The impact of child abuse according to the Independent Expert for the United Nations Secretary-General's Study on Violence Against Children (**Suparmanto, 2007**) includes physical and psychological developmental disorders, long-term impacts, sustained violence, and socioeconomic disorders (**Pinheiro, 2006**).

In this study for the type of violence against children obtained the most violence is sexual violence, with the second order of violence received is both sexual and physical violence, and the less cases of physical violence. In **Janise, et al. (2015)** not in line with this study where the most reported violence is persecution as much as 66% of cases and sexual violence 34%. Another study in Saudi Arabia studied by **Almuneef, et al. (2016)** also mentioned that the most violence against children was physical violence as many as 42% of cases followed by neglect 39%, sexual violence 14%, and psychological violence as much as 4%.

Flynn-O'Brien, et al. (2016) and **Simon, et al. (2018)** also reported that physical violence against children is experienced more by boys than girls. This study also mentions the beginning of this violence is a form of punishment or plan to children who then cause various injuries (**Flynn-O'Brien et al., 2016**). **Indrayana. 2017** also agrees with this study that sexual violence is most accepted by girls as much as 95%.

The reason why women are more at risk of sexual violence and men are more physically violent is the existence of a patriarchal culture in developing countries. In addition, girls are more attractive and less open to things than boys. In addition, sexual violence in girls is more likely to cause stigma against the

family to be so bad that it is rarely reported (**Almuneef et al., 2016**).

Conclusion

Conclusion of this study is:

1. Prevalence of child abuse cases managed in Dr. Soeradji Tirtonegoro Hospital increased during pandemic.
2. Female victims is the most both in pandemic and before pandemic.
3. Most victims in pandemic era is 15-17 year-old.

Acknowledgement

This manuscript and the research behind it would not been possible without support from my mentor in research Nurholis Majid, my research assistance Ahnav Bil Auvaq, and my colleague Kanina Sista. Their enthusiasms, knowledge, and exacting attentions to detail have been an inspiration and kept my work on the track.



References:

Aflanie, Dr. Iwan, et al. *Forensic Medicine and Medicolegal*. Rajawali Pers, 2017.

Almuneef, Maha A., et al. "Family Profile of Victims of Child Abuse and Neglect in the Kingdom of Saudi Arabia." *Saudi Medical Journal*, vol. 37, no. 8, 2016, pp. 882–888. <https://doi.org/10.15537/smj.2016.8.14654>.

"Cases of Violence Against Children." *Indonesian Child Protection Commission*, 2015, www.kpai.go.id/publikasi/kpai-2014-ada-622-kasus-kekerasan-anak. Accessed 23 Sept. 2022.

Flynn-O'Brien, Katherine T., et al. "Prevalence of Physical Violence Against Children in Haiti: A National Population-based Cross-sectional Survey." *Child Abuse & Neglect*, vol. 51, 2016, pp. 154–162. <https://doi.org/10.1016/j.chiabu.2015.10.021>.

Government Regulation (PP) No. 4 Year 2006. *Government Regulation (PP) Concerning Implementation and Cooperation in Recovery of Victims of Domestic Violence*. 2006, peraturan.bpk.go.id/Home/Details/49024. Accessed 23 Sept. 2022.

National Development Planning Agency. *Indonesia - Law No. 35 of 2014 Amending Law on Child Protection (No. 23/2002)*. 2014, www.ilo.org/dyn/natlex/natlex4.detail?p_isn=98588&p_lang=en.



References:

Indrayana, Mohammad Tegar. "Profile of Sexual Violence Against Women and Children Examined at Bhayangkara Dumai Hospital (2009-2013)." *Malay Health Journal*, vol. 1, no. 1, Sept. 2017, pp. 9–13. <https://doi.org/10.26891/jkm.v1i1.2017.9-13>.

Janise, Chriselya L., et al. "Patterns of Injury Cases of Physical Violence in Children in R. S. Bhayangkara Manado Period of 2013." *Biomedic Journal (JBM)*, vol. 7, no. 1, Mar. 2015, pp. 36–40. <https://doi.org/10.35790/jbm.7.1.2015.7290>.

Lemoyne, Roger. "Violence Against Children and International Human Rights Law and Standards." *UNICEF*, 2005, www.unicef.org/violencestudy/2.%20World%20Report%20on%20Violence%20against%20Children.pdf. Accessed 23 Sept. 2022.

Meng, Xiangfei, and Carl D'Arcy. "Gender Moderates the Relationship Between Childhood Abuse and Internalizing and Substance Use Disorders Later in Life: A Cross-sectional Analysis." *BMC Psychiatry*, vol. 16, no. 1, 2016, pp. 1–13. <https://doi.org/10.1186/s12888-016-1071-7>.

Ministry of Health. "Regulation of the Minister of Health Number 68 of 2013 Concerning Obligations of Health Service Providers to Provide Information on Allegations of Violence Against Children." *Peraturan Pedia.id*, 2013, Accessed 23 Sept. 2022.

Ministry of Women's Empowerment and Child Protection and Secretary of the Ministry. "Standard Operational Procedures for Implementation of Minimum Service Standards (MSS) for Integrated Services for Women and Children Victims of Violence." *Jakarta, KPP and PA*, 2010.

"Ministry of Women's Empowerment and Child Protection of the Republic of Indonesia.", *Online Information System for the Protection of Women and Children (SIMFONI PPA)*, 2020, kekerasan.kemenpppa.go.id/ringkasan.

New Global Data Expose Acute Prevalence of Violence Against Children – UNICEF, 2014. www.unicef.org/mena/press-releases/new-global-data-on-violence-against-children. Accessed 23 Sept. 2022.

"P2TP2A: Stop Sexual Violence on Children." *jatengprov.go.id*, 2017, jatengprov.go.id/beritadaerah/p2tp2a-setop-kekerasan-seksual-pada-anak.

Pinheiro, Paulo Sergio. *World Report on Violence Against Children - Secretary-General's Study on Violence Against Children*. WHO, 2006.

Purbararas, Esmu Diah. "Traumatic Problems: Sexual Violence in Adolescents." *Journal of Social Science and Teaching*, vol. 2, no. 1, 2018, pp. 63–89.

Simon, Thomas R., et al. "Injuries From Physical Abuse: National Survey of Children's Exposure to Violence I–III." *American Journal of Preventive Medicine*, vol. 54, no. 1, Elsevier BV, Jan. 2018, pp. 129–132. <https://doi.org/10.1016/j.amepre.2017.08.031>.

Suparmanto, Sri Astuti. "Guidelines for Referring Cases of Violence Against Children (KTA) for Health Workers." *Community Health Development: Jakarta*, 2007.