

Teachers' Knowledge and Attitudes Regarding Child Abuse in Selected Primary Schools at Minia City

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Abstract Background: Child abuse is the most critical health issues worldwide, it continues to be one of the first warnings to the child's emotional and social well-being globally; it one common health problem and a violation of children's human rights. **Aim of the study:** Is to assess the knowledge and attitudes of the teachers concerning child abuse. **Research design:** A descriptive design was used to conduct the study. **Sample:** The study demonstrated on 274 institution teachers. **Setting:** Eight urban and rural public primary schools were collected from Minia city. **Data collection Tools:** Included two instruments; the first tool is a structured knowledge questionnaire. The second is the attitude rating measure. **Results:** About two-thirds of the school teachers had poor knowledge about child abuse, and (62%) recognized a negative attitude about child abuse. **Conclusion:** Child abuse is a global issue, and children face it in many forms, and more awareness will help in contending the problems. **Recommendation:** Design and implement an educational program for teachers to increase their knowledge about child abuse and to promote child health.

Keywords: child abuse, knowledge, attitude, school teachers

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1. Introduction

Childhood is a critical phase of human life, during which personality features is developed. Health status including mental and physical health largely depends on the quality of education and life in this period. So, a silent and safe transition requires the support of family and community. [1]. According to [2] child abuse can be defined as "All types of dynamic and/or emotional ill-treatment, sexual abuse, negligence and commercial or other exploitation, which results in actual or potential harm to the child's well-being, survival, development or dignity in the context of a relationship like responsibility, trust or power. Exposure to intimate spouse violence is also sometimes included as a form of child maltreatment". International Statistics of Child Abuse in 2017 reported that 40 million children subjected to abuse each year. [3] Rates of child abuse and neglect are five times higher for children in families with low socioeconomic status compared to children in families with higher socioeconomic status. [4]

National Council for Motherhood and Childhood issued a report on the number of notifications received by the

Council during the first half of 2016, which confirmed the existence of 2284 cases of violence against children in Egypt. [5] In 2016, the percentage of physical destruction of children in Egypt reached 75% of Egypt's children, who are subjected to physical abuse either by families or even care homes. According to the latest statistics of UNICEF, psychological violence in Egypt ranges from 40 to 50% is exposed to this type of abuse. As for the sexual intensity of children as a result of circumcision or other customs, 55% of the children have remained subjected to sexual violence as a result of different practices. [6]

Child abuse resumes to be one of the primary threats to the child's emotional and social well-being globally affects children of all ages, gender, races, ethnicities, in varied socioeconomic classes and is at the forefront in the line of widespread social issues and economic problems. [7] It includes acts of physical, sexual, and emotional hurt. It concluded that about half of all children who signify abused are of school age. The consequences of it can be profound for its victims, including physical and emotional injury, difficulty in building healthy relationships, and increased likelihood of engaging in child abuse as an adult. [8]

Educators and teachers are in close contact daily with a large number of children for a longer extended period as

the child spends a longer duration of time in the school. So, educators can observe behavioral changes in the child and thus are in a better status to detect and report child abuse, but are not implemented or are not adequately informed. [9] Opinions and attitudes of teachers influence the perception of violence also consequently reporting cases. [10]

The approach of teachers toward reporting of child abuse is a critical determinant in handling the situation. Many determinants may potentially be influenced by their attitude and perception that may affect the quality of decision making and reporting of child abuse that teachers need to take into concern. [11] The same author added that teachers witness social-emotional problems in their students, such as anxiety, self-harming behaviors, aggressiveness, low self-esteem, and sadness, which may be connected with divorce and other family dysfunction, but they also may indicate child abuse. [10] Stated that there is incongruence between the identification of child abuse and its reporting suggesting incomplete awareness of child abuse. The lack of sufficient knowledge and information indicates a break in the crucial role of teachers in the identification and early assistance of an abused child.

In the same context [12] reported that social and cultural values of communities might also influence the individual attitudes of teachers concerning what constitutes unacceptable practice towards children and may affect their describing behavior. Due to their coverage of children, primary school teachers, and public child healthcare workers play a pivotal role in the prevention and description of child abuse among children most at risk. Several preventive strategies can be done from primary to secondary and tertiary prevention to decrease the prevalence of child abuse and its associated costs and human suffering. [13]

Teachers see children for quite a few hours during the day, and students usually recognize teachers as adults who can be trusted. Therefore, many opportunities for detecting abuse may come up. Children may disclose abuse with words, through play, or by hinting. If this occurs, teachers should try to confront the issue by asking questions and finding out relevant information. Teachers may also observe that abuse is taking place without a child saying anything. In all situations, teachers should take child violations seriously and follow guidelines to report the violation. Once the violence has published, teachers can play a role in the improvement of the child as well by completing a safe plus secure environment for the sacrifice. Educators can make a difference in students' lives by distinguishing and reporting child abuse, but how will teachers fulfill this responsibility if they are uneducated about this issue? [14]

While limiting child abuse is identified as a social and international priority, nurses are in a perfect position to intervene in child abuse and neglect at elementary, secondary including tertiary levels as they interact with children in a variety of dispensary and community-based settings. [15] The individual nurses must know their responsibilities and accept it. Nurses have both an ethical and legal responsibility towards injured children, which they cannot escape; this is at the moral core of nursing care. [16]

All stakeholders, especially those in close contact with the child (for example teachers, doctors) require to be adequately trained to detect, manage and report any cases of maltreatment [10], [17] If the child does not inform the accusation, a supervisor can detect damage through observation of a child. That is the most likely location to occur because of that stigma connected to child abuse. A child may be planning for an adult to notice what's going on or may even be trying to hide the circumstances to protect a parent or guardian. Every child is various, each one reacts differently to the abuse, but with each type of abuse, there are some typical signs that a teacher would be able to notice. [18]

1.1. Significance of the Study

It is thoroughly known that the childhood period is the fundamental stage for providing children with experience and skills that enable them to face life and its demands. Hence, the dangerousness of child abuse phenomenon is that it hurts children extension, growth, and personality which reflect negatively on the lives of a child, family, and community as a whole. [19]

[20] Stated that school staff must be the first to be aware that a child may be a victim of abuse and is struggling because of adverse events occurring in his /her lifetime. Teachers are one of the critical groups that, in addition to teaching the students can have a role in detection and management of child maltreatment and abuse in schools. [21] Mentioned that, several inquiries findings that teachers lack the particular knowledge and attitudes concerning child abuse that needed valuable guidance and supportive direction concerning early detection and reporting of cases so different preventive approaches can be taken.

1.2. Aim of This Study

To assess teachers' knowledge and attitudes regarding child abuse in selected primary schools in Minia city.

1.3. Research Questions

1. What is the level of teachers' knowledge about child abuse?
2. What are the teachers' attitudes about child abuse?
3. Is there a relationship between the teachers' knowledge and attitudes regarding child abuse and their socio-demographic characteristics?

2. Methodology

2.1. Research Design

A descriptive research design was used in this study.

2.2. Setting

The study was conducted in eight urban, and rural public primary schools in Minia city included the following schools: 6 October, Taha Hussein, El Shaheed, Kafr El Mansoura, El sheik Essa, Damshir 1, Tala Girls 2 and Al Borgaya Boys 2.

2.3. Study Duration

Data collected within three months second term years of 2017.

2.4. Sampling

A purposeful sample of 274 educators was chosen, which represented all male and female teachers that have the same or more than five years' history working in eight pre-mentioned urban and rural primary schools. The study sample distributed as follows: 25 from 6 October school, 27 from Taha Hussein school, 42 from El Shaheed school, 51 from Kafr El Mansoura academy, 34 from El sheik Essa, 25 from Damshir 1 school, 32 from Tala Girls 2 school and 38 from Al Borgaya Boys 2 school.

2.5. Tools of Data Collection

Two instruments were used to collect the necessary data include:

First Tool:

An interviewing questionnaire: It developed by the researchers based on reviewing the related literature and considering the experts' opinions. It comprised of two parts to assess the following:

Part 1:

socio-demographic characteristics: Include (10) questions such as (age, gender, marital status, residence, educational level, monthly income, number of children, years of experience, place of school, ...etc.).

Part 2:

Knowledge of teachers concerning child abuse includes a question about types of abuse, signs of physical harm, behavioral symptoms of physical abuse, types of emotional abuse, etc.).

Scoring system each accurate answer scored as one point, plus various incorrect answers scored as zero. The total rate for all question related to knowledge obtained 103 marks (100%), categorized into three levels as follow:

- Poor knowledge (0- <60%)
- Average knowledge ($\geq 60-74\%$)
- Good knowledge ($\geq 75\%$)

Second Tool: Attitude Rating Scale

It was developed by [22] to assess teacher attitude toward child abuse: it composed of 23 items using a rating scale of two levels (agree, and disagree)

The score ranged from one to two, disagree=1, agree=2, a total score equals 46 points, which represents 100%.

- Positive attitude ≥ 24 degree 50%
- Negative attitude ≤ 22 degree 50%.

2.6. Validity

The questionnaire was guided on the panel of five experts of the community as well as psychiatric nursing staff, who have reviewed the instruments for clarity, relevance comprehensiveness, understanding, applicability, and easiness. Based on their guidance, all jury members agree that the current study tools were valid and relevant to the aim of the study.

2.7. Reliability

The internal consistency of the questionnaire was calculated using Cronbach's alpha coefficient. Test-retest obtained done. The Cronbach's alpha of the review were 0.838, and 0.961 respectively indicate excellent reliability.

2.8. Pilot Study

A pilot study was conducted on 10% of the whole number of research which equal 30 teachers to test the study process and to evaluate the efficiency and clarity of tools that implied utilized in the study.

2.9. Ethical Consideration

Official permission to conduct the current study was collected from the Dean of nursing faculty and school directors. Written informed consent was obtained from each participant after explaining the nature and benefits of the study. Each participant proclaimed that their participation in the study was voluntary, and there was no harm if they no engage in the research. Privacy was considered during the gathering of data. Members were affirmed that all their data are highly confidential.

2.10. Study Procedure

An official letter of the study approval was obtained from the Dean of the faculty of nursing at Minia University to the Directorate of Education, and the request was transferred to primary education and one school was selected from each sector in Mina city to carry out the study. This letter included a brief explanation of the aim of the study, and permission was requested from each manager to carry out the research. Data were collected two days per week; data was collected on Sunday and Monday per week at school time. It has lasted for three months second term years of 2017; the interviewers explained the questions to the teachers. Instruments were introduced to teachers to be filled, and each interview consisted of five teachers and lasted for about half an hour, ten minutes to explain the questionnaire and a third of an hour to fill it out.

2.11. Statistical Analysis of Data

Data were collected, tabulated, and analyzed by computer using "the statistical package for social science" (SPSS) version 20, descriptive data were expressed as number and percentage. The mean and standard variation offered questionnaire data. F-test or (ANOVA) was used for multiple groups. Probability (p-value) Equal to, or less than 0.05, was considered significant in the study of relationships.

3. Results

Table 1: Illustrates that the age of the examined sample ranged from 27-58 with the mean age is 39 ± 6.8 . As well as more than half of them were females. Also, 62.8% of

that total educators' residence in the urban area, and 80.3% of them had a college education, more than third number of children in the class ranged from 40-50 children, 56.9 % of teachers said yes about child exposure to abuse during work life. 39.9% reported that the type of violence that the child exposed was negligence. Also, there were

statistically significant differences between rural and urban teachers with age, gender, residence, institutional level, number of the student in class, child exposure during work-life, type of violence that child exposed at p-value (0.008, 0.008, 0.001,0.004, 0.001, 0.02, 0.01) respectively.

Table 1. Distribution of the studied sample according to their socio-demographic characteristics

Data	Total N=274		Urban school N=145		Rural School N=129		P
	No.	%	No.	%	No.	%	
Age Range	27-58		27-58		28-58		0.008*
Mean \pm SD	39 \pm 6.8		40.1 \pm 6.9		37.7 \pm 6.6		
Gender							
Male	121	(44.2%)	75	(51.7%)	46	(35.7%)	0.008*
Female	153	(55.8%)	70	(48.3%)	83	(64.3%)	
Marital status							
Single	21	(7.7%)	15	(10.3%)	6	(4.7%)	0.2
Married	231	(84.3%)	117	(80.7%)	114	(88.4%)	
Divorced	13	(4.7%)	8	(5.5%)	5	(3.9%)	
Widow	9	(3.3%)	5	(3.4%)	4	(3.1%)	
Residence							
Urban	172	(62.8%)	124	(85.5%)	48	(37.2%)	0.001*
Rural	102	(37.2%)	21	(14.5%)	81	(62.8%)	
Income							
In Sufficient	141	(51.5%)	78	(53.8%)	63	(48.8%)	0.4
sufficient	133	(48.5%)	67	(46.2%)	66	(51.2%)	
Number of children							
With no children	49	(17.9%)	31	(21.4%)	18	(14.1%)	0.1
1-3	133	(48.7%)	73	(50.3%)	60	(46.9%)	
>3	91	(33.3%)	41	(28.3%)	50	(39.1%)	
Years of experience							
5-<10	118	(43.1%)	59	(40.7%)	59	(45.7%)	0.6
10-<20	85	(31%)	48	(33.1%)	37	(28.7%)	
\geq 20	71	(25.9%)	38	(26.2%)	33	(25.6%)	
Educational level							
Secondary	54	(19.7%)	38	(26.2%)	16	(12.4%)	0.004*
University	220	(80.3%)	107	(73.8%)	113	(87.6%)	
Number of child in class							
<30	18	(6.6%)	12	(8.3%)	6	(4.7%)	0.001*
30-40	91	(33.2%)	33	(22.8%)	58	(45%)	
40-50	108	(39.4%)	60	(41.4%)	48	(37.2%)	
>50	57	(20.8%)	40	(27.6%)	17	(13.2%)	
Child exposure to abuse during work life							
Yes	156	(56.9%)	92	(63.4%)	64	(49.6%)	0.02*
No	118	(54.1%)	54	(36.6%)	65	(50.4%)	
Type of violence that child exposed							
Physical	60	(38.5 %)	45	(48.9%)	15	(23.4 %)	0.01*
Negligence	62	(39.9 %)	26	(28.3 %)	36	(56.2 %)	
Emotional	23	(14.7 %)	14	(15.2 %)	9	(14.1 %)	
Sexual	4	(2.6 %)	3	(3.3%)	1	(1.6%)	
Don't know	7	(4.5%)	4	(4.3%)	3	(4.7%)	

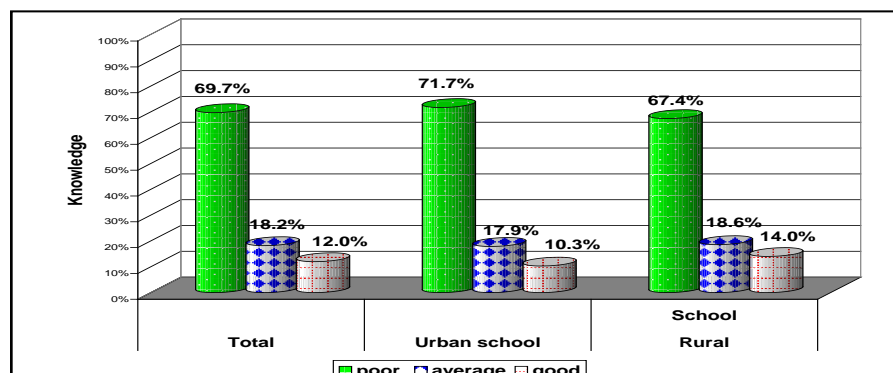


Figure 1. Knowledge of teachers regarding child abuse (P-value=0.6)

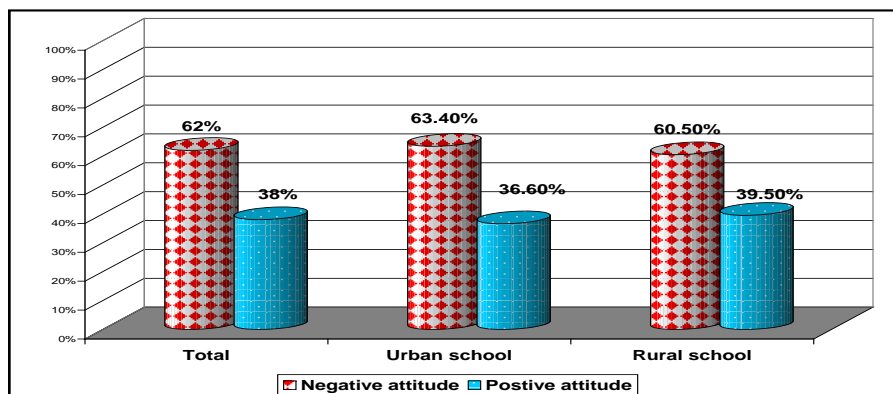


Figure 2. The attitude of teachers regarding child abuse (P-value=0.6)

Table 2. Differences between socio-demographic characteristics of the studied sample and their knowledge about child abuse

Data	Poor knowledge N=191		Average knowledge N=50		Good knowledge N=33		p
	No.	%	No.	%	No.	%	
Age Mean ±SD	38.7±6.8		39.9±6.9		38.7±6.6		0.5
Gender							
Male	84	(44%)	24	(48%)	13	(39.4%)	0.7
Female	107	(56%)	26	(52%)	20	(60.6%)	
Marital status							
Single	16	(8.4%)	4	(8%)	1	(3%)	0.9
Married	159	(83.2%)	42	(84%)	30	(90.9%)	
Divorced	10	(5.2%)	2	(4%)	1	(3%)	
Widow	6	(3.1%)	2	(4%)	1	(3%)	
Residence							
Urban	120	(62.8%)	31	(62%)	21	(63.6%)	0.9
Rural	71	(37.2%)	19	(38%)	12	(36.4%)	
Income							
In sufficient	94	(49.2%)	27	(54%)	20	(60.6%)	0.4
Sufficient	97	(50.8%)	23	(46%)	13	(39.4%)	
Number of children							
With no children	38	(20%)	8	(16%)	3	(9.1%)	0.4
1-3	90	(47.4%)	27	(54%)	16	(48.5%)	
>3	62	(32.6%)	15	(30%)	14	(42.4%)	
Years of experience							
5-<10	104	(54.4%)	14	(28%)	0	0	0.001*
10-<20	57	(29.8%)	15	(30%)	13	(39.4%)	
≥20	30	(24.1%)	21	(42%)	20	(60.6%)	
Educational level							
Secondary	45	(23.5%)	9	(18%)	0	0	0.006*
University	146	(76.4%)	41	(82%)	33	(100%)	
Number of child in class							
<30	12	(6.3%)	4	(8%)	2	(6.1%)	0.04*
30-40	63	(33%)	21	(42%)	7	(27.1%)	
40-50	79	(41.4%)	19	(38%)	10	(30.3%)	
>50	37	(19.4%)	6	(12%)	14	(42.4%)	
Child exposure to abuse during work life							
Yes	111	58.1%	30	(60%)	15	(45.5%)	0.3
No	80	(41.9%)	20	(40%)	18	(54.5%)	
Type of violence that child exposed							
Physical	43	(48.7%)	12	(40%)	5	(33.3%)	0.9
Negligence	42	(37.8%)	12	(40%)	8	(53.3%)	
Emotional	16	(14.4%)	5	(20%)	2	(13.3%)	
Sexual	4	(3.6%)	0	0	0	0	
Don't know	7	(6.3%)	0	0	0	0	

Table 3. Differences between socio-demographic characteristics of the studied sample and their attitude about child abuse

Data	Negative attitude N=170		Positive attitude N=104		p
	No.	%	No.	%	
Age Mean \pm SD	37.9 \pm 6.4		40.7 \pm 7.2		0.001*
Gender					
Male	79	(46.5%)	42	(40.4%)	0.3
Female	91	(53.5%)	62	(56.6%)	
Marital status					
Single	15	(8.8%)	6	(5.8%)	0.004*
Married	143	(84.1%)	88	(84.6%)	
Divorced	11	(6.5%)	2	(1.4%)	
Widow	1	(0.6%)	8	(7.7%)	
Residence					
Urban	115	(67.6%)	57	(54.8%)	0.03*
Rural	55	(32.4%)	47	(45.2%)	
Income					
In sufficient	87	(51.2%)	54	(51.9%)	0.9
Sufficient	83	(48.8%)	50	(48.1%)	
Number of children					
With no children	31	(18.2%)	18	(17.5%)	0.4
1-3	87	(51.2%)	46	(44.7%)	
>3	52	(30.6%)	39	(37.9%)	
Years of experience					
5-<10	84	(49.4%)	34	(32.7%)	0.01*
10-<20	25	(25.9%)	41	(39.4%)	
\geq 20	42	(24.7%)	29	(27.9%)	
Educational level					
Secondary	40	(23.5%)	14	(13.5%)	0.04*
University	130	(76.5%)	90	(86.5%)	
Number of child in class					
<30	11	(6.5%)	7	(6.7%)	0.3
30-40	50	(29.4%)	41	(39.4%)	
40-50	72	(42.4%)	36	(34.6%)	
>50	37	(21.8%)	20	(19.2%)	
Child exposure during work life					
Yes	95	(55.9%)			0.6
No	75	(44.1%)			
Type of violence that child exposed					
Physical	38	(40%)	22	(36.1%)	0.4
Negligence	39	(41.1%)	23	(37.7%)	
Emotional	10	(10.5%)	13	(21.3%)	
Sexual	4	(4.2%)	0	0	
Don't know	4	(4.2%)	3	(4.9%)	

Figure 1: Shows that more than two thirds (69.7%) of the studied sample had poor knowledge about child abuse

Figure 2: Shows that 62% of teachers had a negative attitude regarding child abuse.

Table 2: Demonstrates that 60.6% of teachers whose experience is more than 20 years have good knowledge about child abuse. As well as 100% of sample with university have a good knowledge. Whereas 41.4% whose quantity of children in class between 40-50 students have inadequate knowledge about abuse. Also, there were statistically significant differences between years of experience, educational level as well as the number of children in class at p-value (0.001, 0.006, 0.04) respectively.

Table 3: Illustrates that 84.6% of teachers who have a positive attitude toward child abuse were married, and 86.5% of them have an academy education. Whereas 67.6% of those who have negative attitudes were from the

urban home. 49.4% of them, have 5-<10 years of experience. Also, there were statistically significant differences between gender, marital status, residence, years of experience as well as the educational level p-values (0.001, 0.004, 0.03, 0.01, and 0.04) respectively.

Table 4: Shows that 42.1% of teachers reported that low income is school determinant factors related to the teacher about knowledge of child abuse. Moreover, there was a statistically significant difference between urban and rural school teachers regarding their knowledge of school determinants factors related to the teacher.

Table 5: Illustrates that 36.5% of the studied sample reported that default assignments are the school determinants factors that related to the child. Furthermore, there was a statistically significant difference between urban and rural school teachers regarding their knowledge about school determinants factors related to the child.

Table 4. Differences between urban and rural teachers regarding their knowledge about school determinants (Factors related to the teacher) of child abuse

Factors related to teacher	Total N=274		Urban school N=145		Rural School N=129		P
	NO	%	NO	%	NO	%	
Life pressures	83	(30.3%)	30	(20.7%)	53	(41.1%)	0.003*
Low income	115	(42.1%)	68	(46.9%)	47	(36.4%)	
Worrying	12	(4.4%)	6	(4.1%)	6	(4.7%)	
Family problems	27	(9.9%)	20	(13.8%)	7	(5.4%)	
Crowding of class	16	(5.8%)	11	(7.6%)	5	(3.9%)	
Anxiety	21	(7.7%)	10	(6.9%)	11	(8.5%)	

Table 5. Differences between urban and rural teachers regarding their knowledge about school determinants (Factors related to students) of child abuse

Factors related to students	Total N=274		Urban school N=145		Rural School N=129		p
	NO	%	NO	%	NO	%	
Bad behavior	78	(28.5%)	45	(31.0%)	33	(25.6%)	0.001*
Default assignments	100	(36.5%)	66	(45.5%)	34	(26.4%)	
Rioting	35	(12.8%)	16	(11%)	19	(14.7%)	
Cheating	12	(4.4%)	9	(6.2%)	3	(2.3%)	
Don't know	49	(17.9%)	9	(6.2%)	40	(31%)	

Table 6. Comparison between urban and rural teachers regarding their knowledge about notification of child abuse

Notification	Total N=274		Urban school N=145		Rural School N=129		P
	No	%	No	%	No	%	
Psychiatrist	89		48		41		0.01*
	32.5%		33.1%		31.8%		
Social worker	82		41		41		
	29.9%		28.3%		31.8%		
Nurse	7		3		4		
	2.6%		2.1%		3.1%		
Manager	12		9		3		
	4.4%		6.2%		2.3%		
police	9		7		2		
	3.3%		4.8%		1.6%		
Committee	3		3		0		
	1.1%		2.1%		0.0%		
Parents	10		9		1		
	3.6%		6.2%		0.8%		
Don't know	62		25		37		
	22.6%		17.2%		28.7%		

Table 6: Shows that 32.5% of teachers reported that they would notify psychiatrist in case of abuse. Moreover, there were statistically significant differences among urban and rural school teachers regarding their information about notification at p-values (0.01).

4. Discussion

"Children are still the fruit of the marital relation." Every day, millions of children throughout the world were confront to abuse, carelessness, exploitation, and violence in different settings, including in their homes, buildings, associations, and work environments. As a result, children experience impacts on their physical and mental health, their education, and their overall quality concerning life. The consequences of violence on children are often intergenerational, with those who have faced abuse as a child more likely to become a drastic adult. This cycle has a long-term impact on a family's economic wellbeing. [23]

In the current study, the socio-demographic data of the teachers revealed that more than half of the teachers were female gender; this may remain assigned to that females prefer working in the field of education. This finding consistent with the study by [21] which showed that the majority 89% were females, due to female tendencies to choose to teach higher than males. Also, the study by [24] mentioned that 81.9% were females with Bachelor's degrees or higher and results of [25] showed that 90% of primary school teacher was female. Also, current study results showed that the number of urban teachers is more than rural teachers this may be explained by that increase in the density of schools in city than rural as well as most teachers prefer to work in cities to improve their living conditions. The majority of the sample has university education due to secondary school of five years is not present now, and the government replaces it with university education.

Furthermore, the results regarding the present study revealed that 41.4% of urban teachers have 40-50 students

in the class this may be due to increasing population density in the urban community. Also, (39.7%) of violence that children exposed to were neglect and (38.5%) were physical abuse; this means that neglect and physical abuse are the most prevalent type of abuse. It supported by the report of [26] which showed that in Saudi Arabia, physical abuse and neglect were shown to be the most prevalent forms of maltreatment against children. This may reflect the similarity of culture. Although these findings were inconsistent with the study of [27] in Australia in which the most common form is emotional abuse (41.6%), followed by inattention (30.2%), physical (21.9%) and sexual abuse (6.3%) may be due to cultural differences.

Concerning teachers' knowledge about child abuse, the current study illustrated that more than two-thirds of teachers had poor awareness about child abuse it may be attributed to a lack of educational programmers for teachers about child abuse. This consistent with study by [25] which showed that in pre-test the majority (60%) of teachers had poor knowledge and (20%) had average and good knowledge regarding child abuse and neglect respectively also in a study by [28] revealed that there was insufficient knowledge of school teacher toward child abuse. Whereas the pre findings are not consistent with the study by [21] in which 80% of the subjects had an average experience of abuse. Furthermore study by [29] in which (57%) of the sample, their knowledge about child abuse was good.

Regarding to teachers' attitudes about child abuse, this study results showed that 62% of them have a negative attitude toward child abuse. This may be manifested in the condition of lack of knowledge and awareness of the symptoms of child abuse and reporting procedures, which may affect their capacity to report cases of suspected abuse. Future studies should further explore sociocultural and sociopolitical influences on attitudes (via components before-mentioned as views on adherence to family roles, conformity to norms, perceptions of punishment, and conceptions of shame, self-reliance, and spirituality). This is consistent with the results of [30] which demonstrated that the majority of primary school teachers had a negative attitude towards child abuse. Whereas this is inconsistent with the result of [24] which showed that 95 percent of the teachers had a favorable attitude, this may be due to cultural differences.

Regarding to differences between socio-demographic characteristics of the studied sample with their knowledge about child abuse the study result demonstrated that there were statistically significant difference between socio-demographic characteristics of teachers and their education, in which more than half of teachers (54.4%) whose their experience from 5-<10 years of had poor knowledge this may be related to lack of expertise about how to deal with child or to observe the physical or psychological signs of abuse. This is consistent with the study by [1] who reported that years of experience were positively related to the awareness level among the participant.

Also, there was a statistically meaningful variation between teachers' educational levels and their knowledge. The study explained that 100% of teachers with good experience were graded from university education and the most significant percentage of secondary school represented

poor knowledge about abuse this may be described by the difference of generations in some concepts of learning and methods of punishment also, may be due to raise awareness of the child abuse problem through programs in social media that play essential role in enhancing community information about child abuse in recent time which not available in this past. This is consistent with the study by [22] which showed that there is a statistically significant difference between total knowledge score levels of the study sample and their level of knowledge. Moreover, there is a substantial difference between a number of child in class and teachers knowledge in which (41.4%) of teachers whose number of children in class is 40 to 50 child had poor experience this may be due to that the increasing number of students makes observation difficult and also increases the chances of abuse.

Moreover, there are no statistically significant differences in the current study between school teachers' age, gender, marital status, income, the number of their kids, and child exposure to abuse during work-life with their total knowledge score levels. This conclusion is consistent with the study of [21] who reported that there no significant association between knowledge and the selected demographic variables such as age, gender, and marital status.

Regarding teacher's attitudes about child abuse, the current study revealed that teachers with negative attitudes were younger. It may be attributed to lack of knowledge and experiences on how to deal with children and solve their problem. In contrast, the majority who had a positive attitude are married it may be due to the increase of experience in dealing with the child. Also, about two thirds of teachers who have a negative attitude were from the urban; this may be due to increased life stressors in an urban community. The majority who had a positive approach has a university education, which attributed to an increasing level of knowledge about abuse during their university study, which unquestionably has positive effects on their attitude. Moreover, there were highly significant differences between marital status, residence, years of experience and educational level with teachers attitude whereas there is no statistically significant differences between primary school teachers gender, income, number of children, number of child in class, child exposure to abuse during work-life and total attitude.

The previous study findings are inconsistent with [22] who's findings revealed that there is a highly statistically significant difference between primary school teachers' age, teaching experience, and the subjects who have the number of children (1-6) with their attitude. Also, it is inconsistent with [21] who founded that all the supervisors had a favorable attitude; no association was found out between attitudes, including the elected demographic variable.

Regarding to knowledge about school determinants (factors related to teacher) of child abuse this study revealed that (42.1%) of total teachers reported that low income is the first determinant for them for child abuse this may be associated to the preoccupation of teachers with saving their daily demands which hinder their awareness or interest with child abuse problem. As well as 36.5% reported that default assignments are the first deterrent for hurting as (factors related to the child), it

may be explained by that the teachers in our culture traditionally think that bodily force as banging and insulting is the appropriate way of punishing the child in the case of default assignments.

As regards to teachers' knowledge about notification of child abuse the current study showed that 32.5% of teachers reported they would notify the psychiatrist in the case of child hurt because they believe that he is the most skillful person who can manage this problem and all type of abuse has emotional effects on the child which need psychiatrist. Whereas 22.6 % of teachers do not know who will notify in the case of abuse it may attribute to a lack of knowledge about community agencies or resources that they can contact by or referral to in case of abuse. It is compatible with [31] who asserted that 21% of suspected cases were not reported among real caring providers. Moreover, [32] reasoned that "Underreporting child abuse has got a pandemic trouble.

5. Conclusion

Based on the findings of the present study, it can be concluded that neglect is the most common type of abuse among school children, while physical abuse is the second type. On the other hand, the sexual kind of abuse is hidden and remarkably refused in the society. Also, the bulk of the primary school teachers had poor knowledge and a negative attitude concerning child abuse.

6. Recommendations

From the previous findings, the subsequent suggestions were proposed:

1. Design and implement different educational programs for teachers based on needs assessment concerning child abuse (e.g., definition, types, causes, signs/manifestations, methods like initial detection of a child at high risk, communication, management, etc.) to promote child health and development.

2. Set policies and guidelines for the primary school teachers to proper management for situations, where child abuse was expected and for the teachers who abuse child either bodily, emotionally, or sexually.

3. Empower self-confidence for that primary school teachers reporting / notification of the abused cases, especially the physically and sexually form of abuse.

4. Conduct further studies to investigate the contributory factors accompanying child abuse and adequate intervention.

References

- [1] Fallon B, Trocmé N, Fluke J, MacLaurin B, Tonmyr L, Yuan YY. Methodological challenges in measuring child maltreatment. *Child Abuse Negl.* (2010); 34: 70-9.
- [2] World Health Organization (WHO). Child maltreatment. Geneva: WHO; 2014. Available at: <http://www.who.int/mediacentre/factsheets/fs150/en/>. [assessed 1/11/2014].
- [3] Gainesville, F., I .National and State Child Abuse and Neglect Statistics. Available from: <https://arkofhopeforchildren.org/child-abuse/child-abuse-statistics-info>. (2017).
- [4] Fortson, B., Klevens, J., Merrick, M., Gilbert, L., and Alexander, S. Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. (2016).
- [5] Jamal, E., Al Shaarawi, E. Cases of violence against children in Egypt. August. (2016). Available from: <https://alwafd.org>.
- [6] Essam eldine, H. Violence against children negative fact in Egypt. available from :<https://www.albawabhnews.com/3187388> . (2018).
- [7] Collin-Vézina, D., Daigneault, I., & Hébert, M. Lessons learned from child sexual abuse research: Prevalence, outcomes, and preventive strategies. *Child and Adolescent Psychiatry and Mental Health* (7) 1-9. (2013).
- [8] Shore, K. Child Abuse: The School's Role. A Teacher's Guide to Working with Parents. National Professional Resources. (2013).
- [9] Goldman, J. G., & Grimbeek, P. Sources of knowledge of departmental policy on child sexual abuse and mandatory reporting identified by primary school student teachers. *Educational Review*, 63(1), 1-18. (2011).
- [10] Feng, J.Y., Fetzer, S., Chen, Y. W., Yeh, L., & Huang, M. C. Multidisciplinary collaboration reporting child abuse: a grounded theory study. *International Journal of Nursing Studies*, 47(12), 1483-90.
- [11] Walsh, K., Farrell, A., Schweitzer, R., Bridgstock, R Critical factors in teachers' detecting and reporting child abuse and neglect: Implications for practice. Queensland University of Technology, Brisbane, Queensland. (2010).
- [12] Choo, W. Y., Walsh, K., Chinna, K., & Tey, N. P. Teacher reporting attitudes scale (TRAS) confirmatory and exploratory factor analyses with a Malaysian sample. *Journal of interpersonal violence* 28(2) 231-253. (2013).
- [13] Devore, C.D., Wheeler, L.S; Role of the school physician. *Pediatrics*. 131(1): 178-182. (2013).
- [14] Wilson, A. Life or Death: The Relationship between Child Abuse and the Education System. Liberty University. (2012).
- [15] poreddi, V., Pashapu, D. R., Kathyayani, B. V., Gandhi, S., El-Arousy, W., & Math, S. B. Nursing students' knowledge of child abuse and neglect in India. *British journal of nursing*, 25(5), 264-268. (2016).
- [16] Skarsaune, K., & Bondas, T. Neglected nursing responsibility when suspecting child abuse. *Clinical Nursing Studies*, Vol. 4, No. 1 (2016).
- [17] Wulczyn, F., Daro, D., Fluke, J., Feldman, S., Glodek, C., & Lifanda, K. Adapting a Systems Approach to Child Protection : Key Concepts and Considerations. Working document UNICEF. New York. (2010).
- [18] Walsh, K., & A. Farrell. Identifying and evaluating teachers' knowledge in relation to child abuse and neglect: A qualitative study with Australian early childhood teachers. *Teaching and Teacher Education*, 24(3), 585-600. (2008).
- [19] National center for injury prevention and control, division of violence prevention. Adverse Childhood Experiences. April Available from: <https://www.cdc.gov/violenceprevention/acestudy/#1>(2016).
- [20] Feeser, C. J. Care of victims of child maltreatment: the school nurses role by national association school nurses (2017) Available from <https://schoolnurseset.nasn.org/blogs/nasn>.
- [21] Hynniewta, B., Jose, T. T., & Anjali, K. G. Knowledge and attitude on child abuse among school teachers, in selected urban English medium schools of Udupi District. *Manipal Journal of Nursing and Health Sciences (MJNHS)*, 3(1), 32-36. (2017).
- [22] Mekheimer, H. A. Teachers Perception regarding Abuse of Rural Primary Schools Children in Dakahlia Governorate, Ain Shams University. (2011).
- [23] Pereznieto, P., Montes, A., Routier, S., & Langston, L. The costs and economic impact of violence against children. Richmond, VA: Child Fund (2014).
- [24] Sahebihagh, M. H., Hosseini, S. Z., Hosseinzadeh, M., & Shamshirgaran, S. M. Knowledge, Attitude, and Practice of Teachers in Tabriz (Iran) Elementry Schools Regarding Child Abuse (2015-2016). *International Journal of Medical Research & Health Sciences*, 5(9), 336-343(2016).
- [25] Naregal, P. M., Effectiveness of planned teaching program on knowledge regarding prevention of child abuse and neglect among primary school teachers. *Online Journal of Health and Allied Science*. 14(4) (2016).

- [26] Council of Health Services. Saudi Arabia Hospital-Based Child Maltreatment Registry: The Annual Report. (2012).
- [27] Goebbels, A. F. Nicholson, J. M., Walsh, K., & De Vries, H. Teachers' reporting of suspected child abuse and neglect: behavior and determinants. *Health education research*, 23(6), 941-951. (2008).
- [28] Li, X., Yue, Q., Wang, S., Wang, H., Jiang, J., and Gong L, Knowledge, attitudes, and behaviors of healthcare professionals regarding child maltreatment in China. *Child Care Health Dev*; 43:869-75. (2017).
- [29] Sahebihagh, M. H., Hosseini, S. Z., Hosseinzadeh, M., & Shamshirgaran, S. M. knowledge, Attitude and practice of community Health care workers regarding Child Abuse in Tabriz Health Centers in 2015, 2016. *International journal of community based nursing and midwifery*, 5(3), 264 (2017).
- [30] Schols, M. W., Ruiters C., and Ory, F. G. How do public child healthcare professionals and primary school teachers identify and handle child abuse cases? A qualitative study; *BMC Public Health*; 13: 807. (2013).
- [31] Preidt, R., Why some medical practitioners underreport child abuse. Health Day News. Available from: http://www.babycenter.com/204_why-some-medical-practitioners-underreport-child-abuse_10359618.bc. (2011).
- [32] Eads, K., Breaking silence: Underreported child abuse in the healthcare setting. *Online Journal of Health Ethics*; 9. (2013).