

## School-Based Sex Education as a Strategy to Empower Elementary School Students to Cope with Sexual Violence

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### Abstract

**Background:** Children are vulnerable to sexual violence, which can have devastating and long-lasting effects on their physical and mental health. Therefore, it is essential to provide them with early sexual education that will help them avoid such dangers. However, there is no formal and systematic program to prevent sexual violence against elementary school pupils in Indonesia, particularly in the city of Gorontalo.

**Objectives:** This study's objectives were to investigate the impact of school-based sex education on the self-help skills of elementary school students in the face of sexual violence. The study also intended to contribute to the development of effective and appropriate sex education materials for elementary school students in Gorontalo.

**Methods:** This study is a quantitative approach with a true experimental design. 200 fifth-grade elementary school pupils were randomly assigned to either the experimental or control group. The experimental group received sex education on topics including puberty, reproduction, self-confidence, courage, communication, and sexual violence. The group serving as the control received no treatment. Using a questionnaire, the students' self-help skills in the face of sexual violence were evaluated. The Anakova test was used to analyze the data.

**Result:** Results indicated a significant difference between the experimental group and the control group in terms of their self-help skills when confronting sexual violence. After receiving the sex education intervention, the experimental group had higher scores than the control group. This suggests that the sex education program had a positive effect on the students' capacity to assist themselves in situations involving sexual violence.

**Conclusion:** The study concluded that school-based sex education can enhance elementary school students' self-help skills in the face of sexual violence. The study also suggested that sex education should be incorporated into the curriculum and taught by instructors who are trained in interactive and participatory teaching techniques. This is the first study of its kind to examine the reduction of sexual violence against pupils in the Indonesian city of Gorontalo.

**Keywords-** School-based sex education, self-help, sexual violence, primary school students.

### Introduction

Children are a valuable human resource with a bright future. Children are vital to the development of nations. However, children are particularly susceptible to physical, emotional, and sexual violence. Child sexual abuse (CSA) has increased from the past to the present in various regions of the world (O'Farrell et al., 2021; Wulandari et al., 2020).

School-based sexual violence is prevalent among New Jersey children (Dickson et al., 2023; Goldfarb & Lieberman, 2021). Victims typically remain silent out of fear of falling out of school and school bureaucracy. Also prevalent among Taiwanese schoolchildren are sexual and gender-based violence (Lee & Celis, 2023). Women students in Taiwan, from elementary to secondary school students, tend to be unable to fight and voice out on CSA cases. CSA also occurs in Nigeria (Atenchong & Oluwasola, 2023; Okah et al., 2023), and female students in primary and secondary institutions are the targets of CSA perpetrated by school administrators. It's a parental and educational concern. CSA also occurs in other universes. Almutairi and Hunter (2023); Ferguson et al. (2023); Gilbert and Fields (2023); Kassler and Hinderaker (2023); Maslowski et al. (2023); Padilla-Walker et al. (2023); Robinson et al. (2017); Rudolph et al. (2023). CSA also occurs in Indonesia (Advianti, 2014; Astuti & Hadiati, 2018; Wulandari et al., 2020). In Indonesia, 66 percent of infants have CSA (Wulandari et al., 2020). 41% of CSA offenders come from families dominated by fathers, relatives, neighbors, or coworkers. Gorontalo, Indonesia was also affected by CSA (Advianti, 2014; Utina, 2014a, 2014b).

The impact of CSA is that the child becomes depressed, anxious, and traumatized, which can affect the child's psychological development in later stages (Almutairi & Hunter, 2023; Ferguson et al., 2023). Astuti and Hadiati (2018); Wulandari et al. Children have trouble interacting with their surroundings and adjusting to new environments. Victims of sexual violence will experience despondency, psychosomatic illness, depression, anxiety, suicidal ideation, poor academic performance, cardiovascular disease, alcoholism, and substance abuse. Astuti and Hadiati (2018), Ayers (2007), Erogul and Hasirchi (2013), Tobachnick (2013). It influences the educational process. Children are simple to teach in school, and student achievement in learning is declining.

There are numerous causes of juvenile sexual abuse. These factors include the child's ignorance of their own sexual organs and the need to protect them, the child's lack of awareness of the possibility of sexual violence in any environment, including the home, school, and other settings, and the child's fear of reporting sexual violence that has occurred or has already occurred. Moreover, from the point of view of education, formal education still considers that sexuality education that involves the identification of sexual organs, gender roles, sexual violence, the danger of bad sexual relations, etc. are considered taboo. (Advianti, 2014; Ayers, 2007; Gateway, 2006; Wulandari et al., 2020); (Advianti, 2014; Ayers, 2007; Wulandari et al., 2020). Therefore, the students are not adequately educated about the sexual organs they possess and how to care for them, safeguard their bodies, and avoid the dangers they pose. Children require sexual education due to their ignorance, confusion about the changes in their sexual organs during puberty, and ignorance of the prospect of sexual abuse, as well as the negative effects of CSA.

Sexuality education can be conducted either outside or within the curriculum. The sexuality education conducted within the educational program has many benefits, one of which is a long time span during learning, so that knowledge of positive values related to sexuality can be well recorded in long-term memory; the child is able to internalize these values; children can more easily take care of the sexual organs; accept changes in the sexual organ; recognize negative CSA situations and keep themselves safe; and children are able to internalize these values. Astuti and Hadiati (2018); Dickson and others (2023); Fakunle and Opadere (2023); Maslowski and others (2023). Therefore, sexuality education in institutions is of the utmost importance.

Sexuality education is not limited to gender and reproductive organ knowledge. Also covered by sexuality education are gender roles, gender equality, and reproductive health. Atenchong and Oluwasola (2023); Erogul and Hasirchi (2013); Okah and others (2023). Sexuality education is also associated with healthy relationships and organ care. (Ferguson et al., 2023; Ladd, 1998; Reber & Reber, 2010; J. W. Santrock, 2005; W. J. Santrock, 2007; Tobachnick, 2013; Ferguson et al., 2023; Ladd, 1998; Reber & Reber, 2010; J. W. Students are also taught to be aware of sexually transmitted diseases, pregnancies, and sexual violence. (2018) (Astuti & Hadiati). Sexuality education teaches students about CSAs that are likely to occur to them or their peers (Wulandari et al., 2020). Because every human being is valuable and deserving of affection, sexuality education also teaches students about self-respect.

Sexual education is one of the measures taken to prevent sexual violence. According to the CDC (Centers for Disease Control and Prevention), there are three (3) categories of sexual violence prevention: (1) primary prevention, which is the approach and prevention taken before sexual violence occurs, (2) secondary prevention, which is an immediate response given after sexual violence has occurred. This response pertains to the short-term effects of violence, whereas tertiary prevention is a long-term response to sexual violence designed to address the long-term effects of violence and heal the perpetrator (Tobachnick, 2013). After the occurrence of sex violence, secondary and tertiary prevention strategies are implemented to reduce or remedy the negative effects of the violence, and in some cases to prevent its recurrence.

Achieving success Sexuality education is influenced by a number of factors, including parental support, a cultural mindset that views sexuality education as neither taboo nor unimportant for children, a humanistic dialogue, the firmness of the school system against sexual violence, and the cultivation of student awareness regarding the significance of self-sexuality and wholeness. Almutairi and Hunter (2023); Atenchong and Oluwasola (2023); Padilla-Walker and colleagues (2023). Given the significance of sex education around the globe, researchers from different parts of the world have conducted and studied a great deal of sexuality education.

In the United States and internationally, sexuality education is incorporated into the school curriculum. (Vantanteek et al., 2019). This sexuality education covers mental, physical, and social aspects of sexuality. This sexuality education provides an understanding and interpretation of the associated negative consequences if sexual organs are not properly cared for at a young age. This sexuality education has not yet highlighted the puberty-related alteration of sexual organs and the possibility of CSA. Sexuality education in Canada is also associated with genital education and the possibility of sexual violence. (2023, Gilbert & Fields). This education has not covered puberty, including how to care for the sexual organs and safeguard oneself from sexual violence in the surrounding environment. In sexuality education, gender and gender equality are also addressed. (Dickson and colleagues, 2023; Unterhalter, 2023). In England, Ethiopia, and Taiwan, gender, sexual relations, negative premarital sexual consequences, and reproductive health are also covered in the curriculum. Lee & Celis (2023), Maslowski et al. (2023), Pincock et al. (2023), and Setty (2023). This sexuality education has not yet addressed sexual violence and self-defense in situations of CSA.

Additionally, sexuality education is grounded in religious and cultural values. Almutairi & Hunter, 2023; Kassler & Hinderaker, 2023; Negron-Gonzales, 2023; Okah et al., 2023; Alaggia et al., 2019; Almutairi & Hunter, 2023; Kassler & Hinderaker, 2023; Okah et al., 2023). The absence of logical and acceptable explanations for a child's behavior in relation to sexuality and reproductive organs creates a void in the teaching of religious dogmas regarding what can and cannot be done in terms of sexuality. Children are only instructed about the consequences they will receive if they engage in negative sexual behavior. Culture-based sexuality education is also a research deficit related to the existence of children's culture in schools that teach children about sexuality perceptions as a taboo to discuss. This will affect the outcome of sexual education as well as the impact of sexual education research and education. In addition, there is sexuality education that focuses on the relationship between parents and children (Alaggia et al., 2019; Atenchong & Oluwasola, 2023; Ferguson et al., 2023; Padilla-Walker et al., 2023); Rasmussen, 2012; Rudolph et al., 2023). It is anticipated that the outcomes of this sexuality education will enable parents to educate their offspring about sexuality. This results in a lack of time for parents to educate their children about sexuality, limitations in monitoring the sexuality education provided to children, and parental concern for different children.

Indonesia also implements sexuality education (Astuti & Hadiati, 2018; Wulandari et al., 2020). In Indonesia, sexuality education involves teaching children about puberty, recognizing the reproductive organs, sexual health, sexual violence, and the ability to care for themselves and report sexual violence. This research leaves numerous voids in sexuality education that emphasizes cognitive aspects by introducing sexuality and sexual violence-related knowledge. This sexuality education does not include the cultivation of the awareness of the changes in the organs of the body during puberty, which is achieved in later stages of development, the consciousness of the

continuous change, the consciousness of accepting the changes, the knowledge of the need to preserve organs in the body, the comprehension of self-worth with all forms of change, and the knowledge to love oneself.

This sexuality education has not addressed the consciousness aspects of the logic behind why we should defend ourselves in situations of sexual violence, the significance of maintaining reproductive physical health and individual mental health in relation to sexuality. This sexuality education has also not addressed the topics of solidarity with friends who may become victims of CSA and what to do when encountering friends who are CSA victims. Due to the issue of crippled CSA cases, the significance of school-based sexuality Education, and the fact that there is still a sexuality-related divide, the purpose of this study is to determine the impact of school-based sex education on self-help (self help) students who have experienced sexual violence. This sexuality education has a related novelty that involves awareness of changes in puberty, a consciousness in adapting to those changes, a conscience to feel valued and worthy of caring for the organs of the body, as well as the courage to take care of oneself and speak out about CSAs that are likely to occur to oneself and one's peers. This research focuses primarily on primary prevention because it is a preventative and protective measure that protects minors from sexual violence before it occurs. Children are provided with self-help knowledge and skills (henceforth referred to as self-assistance) as primary preventative measures against the occurrence of sexual violence.

### **Method**

This study employs true experimental methods (Shadish et al., 2002). 200 fifth-grade elementary school students served as research subjects. The experimental group consisted of 100 students with 53 female students and 47 male students, while the control class consisted of 100 students with 48 female students and 52 male students. One group is measured twice, namely before and after treatment, and this group is referred to as the experimental group. A comparable group that did not receive any treatment was referred to as the control group (Gravetter & Forzano, 2006; Shadish et al., 2002).

The measurement of students' self-help in dealing with sexual violence is measured using a 78-item questionnaire that includes cognitive, affective, and psychomotor tests. The cognitive tests pertain to puberty and reproduction, while the affective and psychomotor tests pertain to self-confidence and courage. There are four options on the measuring scale: strongly concur (SS), agree (S), disagree (KS), and disagree (TS). A score of 4 is given for the answer choice strongly agree (SS), a score of 3 for the answer choice agree (S), a score of 2 for the answer choice disagree (KS), and a score of 1 for the answer choice disagree (TS). In contrast, for unfavorable statements, the scores for strongly agree (SS), agree (S), disagree (KS), and strongly disagree (TS) are 1, 2, 3, and 4, respectively. The reliability test using the Alpha Cronbach formula and SPSS 20.0 for Windows yielded a value of 0.916, indicating that the self-help scale was reliable. The higher the reliability coefficient, which approaches 1.00, the greater the reliability, and conversely, the lower the coefficient, the lower the reliability. High-reliability measurements are referred to as reliable measurements (Azwar, 2012; Gravetter & Forzano, 2006). A device is deemed reliable if its coefficient of reliability is greater than 0.60. In this research, the Anakova data analysis technique was used to test the hypothesis.

### **Procedure and Ethic**

This research was authorized by the Gorontalo City government, parents, and instructors at the school where it was conducted. The experimental class will receive treatment instruments in the form of teaching materials regarding school-based sex education consisting of six topics, namely puberty, reproduction, self-confidence, fortitude, communication, and sexual violence. Before administering treatment, collaborating instructors in the experimental class received the school principal-recommended School-Based Sex Education (PSBS) training. Following a brief training period, both groups were administered a 78-item questionnaire-based pretest. After the pretest, the experimental group received treatment in the form of PSBS material for 12 meetings, where each material was presented in 2x meetings with details for 1x meeting lasting 2 lesson hours (1 lesson hour = 35 minutes) or 70 minutes, for a total of 840 minutes of learning time. The PSBS curriculum includes activities, children's stories, movements, songs, and roleplay. During the experimental group's learning, the control group received no treatment. After treatment, both research groups were given a posttest.

## Results

This study employs Anakova data analysis, generating the following results:

Source	Sum of Squares	df	Mean Square	F	Sig.
Pretest	55860,502	1	55860,502	118,643	0,000
Kelompok	17772,931	1	17772,931	37,748	0,000
Galat (Error)	92753,318	197	470,829		
Corrected Total	170663,820	199			

a. R Squared = 0,457 (Adjusted R Squared = 0,451)

The F value obtained for the experimental group and control group was 37.748, which was found to be statistically significant with a p-value of 0.000. In comparison, the critical F value at a significance level of 5% and degrees of freedom 1 and 197 was determined to be 3.889 using the F table. The obtained F count value exceeds the critical F table value ( $F_{count} > F_{table}$ ) or the significance level is below the predetermined alpha level of 5% (0.050). Therefore, it can be inferred that there exists a disparity in self-help abilities between the experimental group and the control group. In other words, the implementation of the School-Based Sex Education treatment (PSBS) significantly impacts students' independent assistance.

## Discussion

Schools play a crucial role in providing sex education so that students are better equipped to cope with sexual violence. In Gorontalo City, 200 fifth-grade elementary school students participated in the study. The results of hypothesis testing indicate that school-based sex education has an effect on students' self-help in coping with sexual violence. These results corroborate the research's proposed hypothesis. The findings of this study indicate that school-based sex education can produce students who are capable of coping independently with sexual violence. This finding is consistent with previous research indicating that school-based sex education can protect children from sexual abuse (Astuti & Hadiati, 2018; Atenchong & Oluwasola, 2023; Eroglu & Hasirchi, 2013; Ferguson et al., 2023; Okah et al., 2023; Wulandari et al., 2020).

Regarding research on sex education in an effort to increase students' self-help in coping with sexual violence, self-help is essentially an effort to help oneself, where individuals are responsible for themselves without relying on others (Pincock et al., 2023; Reber & Reber, 2010; Rudolph et al., 2023; Wulandari et al., 2020) (Reber & Reber, 2010). Self-help can be defined as a conscious effort to change oneself, one's behavior, one's emotions, one's skills, one's thoughts, or a subconscious process in order to solve multiple existing problems (Astuti & Hadiati, 2018; Ladd, 1998; Wulandari et al., 2020). In addition, self-help focuses more on problem-solving and finding a better objective than it does on addressing life issues. Self-help in the context of sexual violence refers to an individual's cognitive, affective, and psychomotor abilities that enable them to face the threat of sexual violence and assist themselves in coping with various problems in life (Maslowski et al., 2023; Rudolph et al., 2023; Wulandari et al., 2020). Children are extremely susceptible to sexual violence; therefore, it is necessary to provide education and understanding about sex and sexuality so that children will have the knowledge and skills to safeguard themselves from all potentially dangerous situations, including sexual violence. Consequently, supplying sexuality education materials in experimental classes is extremely beneficial for students.

Students can benefit greatly from school-based sex education that focuses on self-help because this sex education is designed to increase students' awareness of genital organ changes during puberty and their ability to acclimate to these changes. This sex education can also encourage students to recognize that they are valuable and therefore should preserve their body organs. Students become aware of the importance of maintaining the health of reproductive organs, maintaining good relationships, understanding gender roles and gender balance, knowing what can and cannot be done to reproductive organs and other body organs, and being receptive to signs of CSA.

Efforts to defend yourself, the courage to speak out against CSA, and sensitivity and concern for victims and potential victims of CSA.

This sex education can significantly aid students in coping with sexual violence because it teaches them that they can be agents of change in reducing CSA by cultivating sensitivity and empathy toward other friends who may be victims of CSA and by accompanying CSA victims.

Because it employs child-friendly education techniques such as games, role playing, children's stories, movements, and melodies, this sex education can also aid students significantly in coping with sexual violence. This inventive and child-friendly method is able to optimize the cognitive, affective, and psychomotor development of children in minimizing CSA. Through children's stories and role acting, children are also able to articulate CSA and develop empathy for other victims. Through role playing and children's literature, kids can experience real-life situations.

Self-development is valuable in the sex education provided in Gorontalo, which can also foster an understanding of why accepting and caring for the body and spirit are essential. So that students cannot effectively internalize the case and how to mitigate it, even though they understand it intellectually. However, valuable self-cultivation in sex education conducted in Gorontalo can encourage students to continue maintaining their health and avoid CSA.

In general, this research generates important findings that can provide useful implications for cultivating and improving self-help or self-help abilities for elementary school students in dealing with sexual violence through school-based sex education. This study demonstrates that school-based sexual education can encourage students' self-help in coping with sexual violence. After receiving school-based sex education, students in the experimental group demonstrated a significant difference in their self-help or self-help capacities in dealing with sexual violence. These findings indicate that elementary school students must receive sex education in school in order to be equipped to handle situations that contribute to sexual violence. Puberty and reproduction, which are cognitive aspects, self-confidence and courage, which are affective aspects, and communication and sexual assault, which are psychomotor aspects, are covered in school-based sex education.

This research is limited to the population of grade 5 (five) students in five (five) State Elementary Schools in four (four) subdistricts in Gorontalo. If the findings of this study are to be generalized to a larger population, a more extensive empirical investigation is required. Another limitation is that School-Based Sex Education (PSBS) materials about puberty, reproduction, self-confidence, fortitude, communication, and sexual violence are only distributed to grade 5 (fifth) students, despite the fact that they can also be distributed to grade 4 (four) and 6 students. There are six primary institutions.

## Conclusion

The research findings indicate a noteworthy impact of the implementation of school-based sex education (PSBS) materials on students' ability to effectively address instances of sexual violence. The implementation of school-based sex education in Gorontalo City aims to mitigate instances of sexual violence among children by providing them with independent support in addressing such issues inside the school environment.

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