

A Study to Assess the Knowledge regarding Good Touch and Bad Touch among School Children in Selected School of Western Maharashtra

Maj Mahima Anna¹, Maj Praveena Prabhakar², Maj Shilpa Baby³,
Maj Rebecca Thomas⁴, Lt Col Tanu Jadli⁵

Abstract: Background Children in India are not aware about the topic and thus become more susceptible to child sexual abuse (CSA), a rising evil in society. Objective: To assess the knowledge regarding good touch and bad touch among school children and to associate the knowledge of good touch and bad touch with selected sociodemographic variables. Methodology: In this cross sectional study 120 children of the age group of 6 - 8 yrs were selected to assess the knowledge regarding good touch and bad touch. Simple random sampling was used. Data collection was done using a structured validated questionnaire comprising of two sections: Section I for assessing socio demographic variables and Section II for assessing knowledge regarding good touch and bad touch. Results: The data collected were analyzed using frequency, percentage and ANOVA. The study finds that 50% of the children had good knowledge about good touch and bad touch and 48% of students had average knowledge while only 2% of the students had poor knowledge. Among the selected sociodemographic variables a significant association to knowledge was found only with standards in which they are studying Discussion: The present study suggests that 50% children had good knowledge about good touch and bad touch which can be attributed to the sensitization given by the school and family. Conclusion: Only half of the students had good knowledge hence there should be more emphasis on imparting the education about good touch and bad touch to the primary school children who are vulnerable for sexual abuses.

Keywords: Child sexual abuse, Good touch Bad touch, School children awareness, Primary Education, Sociodemographic factors

1. Introduction

At a very young age, children get curious and start exploring their bodies by touching or rubbing their body parts even the genitals. During these years, they require appropriate guidance such as role, safety, and what privacy and private parts mean³. Good touch and bad touch are two important concepts that everyone should be aware of. Good touch is any kind of physical contact that makes someone feel safe and comfortable. This can include hugs, high - fives, and pats on the back. On the other hand, bad touch is any kind of physical contact that makes someone feel uncomfortable or scared. This can include hitting, pushing, or grabbing someone without their permission.⁴

It is imperative to sensitize children about various issues regarding good touch and bad touch as it would make them emotionally strong. It helps them handle the not - so - positive events in life in a better way and healthier way. Understanding the difference between good touch and bad touch will help them grow and help them understand various events in their life so that they do not impact their personality and well - being. It is important for adults to talk to children about good touch and bad touch so they can recognize when something is not right and know how to get help if needed⁴.

According to WHO, "Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent or that violates the laws or social taboos of society. Child sexual abuse is evidenced by sexual activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. This may include but is not limited

to the inducement or coercion of a child to engage in any unlawful sexual activity; the exploitative use of a child in prostitution or other unlawful sexual practices and or the exploitative use of children in pornographic performance and materials.⁸"

Children with challenges are at an additional risk because they are targeted on account of their visible 'difference' or 'vulnerability'. People with severe intellectual disabilities may not understand what is happening or have a way to communicate the assault to a trusted person. Others with a less severe disability may realize they are being assaulted, but don't know that its illegal⁹.

Mental health problems have been increasingly acknowledged as one of the most common consequences of child sexual abuse so that children and young people who suffer sustained assaults, particularly from someone in a position of trust, often go on to exhibit symptoms of post - traumatic stress disorder, borderline personality disorder and /or dissociative identity disorders. More recent studies have explored the impact of sexual abuse specifically on children with severe intellectual disabilities, confirming that they share some of these long - term impacts of abuse in childhood¹⁰

A study conducted in 2007 by the Government of India, Ministry of Women and Child Development on 125, 000 children in 13 Indian states reported the prevalence of child sexual abuse (CSA) as 53%. The awareness of the difference between 'good touch' and 'bad touch' is crucial for the social and psychological development of all children. Every child is 'special' and has the right to know everything to keep himself/herself safe and away from sexual abuse. Due to rising cases of CSA in society, it is necessary to assess the level of awareness in children. Research on the topic is scanty as of now and studies on awareness level among Indian

children are especially limited¹². In 2011, a total of 33, 098 cases of sexual abuse of children were reported in the nation as compared to 26, 694 in 2010 – an increase of 24%. And 7112 cases of child rape were reported during 2011 in comparison to 5484 in 2010 presenting a growth of 30%. Further, UNICEF found that between 2005 – 2013, 10% of Indian girls may have experienced sexual violence when they were 10 – 14 years of age, and 30% when between 15 – 19 yrs of age.¹³

Educating children about bad touch helps them develop boundaries and the ability to identify and report inappropriate behavior. However, it is very often, especially among children, that they are unable to tell the differences between the two. It is important to only tell children the difference between the two. It's equally crucial to let kids know that touching from family members or close friends might be viewed as inappropriate. Bad touches are not always just from strangers. Although it is sad and disgusting, often family members and close members of the social environment that you are a part of can engage in such behaviors.

Problem Statement

A study to assess the knowledge regarding good touch and bad touch among primary school children in selected primary school of Western Maharashtra.

Objectives

- To assess the knowledge regarding good touch and bad touch
- To find association between the level of knowledge regarding good touch and bad touch and the sociodemographic variables.

Operational Definitions

- Knowledge - Idea of the child regarding good touch and bad touch
- Good touch – It is a touch that makes a child feels secure, happy and cared for.
- Bad touch – It is a touch that makes a child uncomfortable, afraid, nervous and unsafe.
- Primary school children - Girl children attending 1st, 2nd and 3rd

Inclusion Criteria

- Children whose parents have given consent
- Girl children attending 1st, 2nd and 3rd class

Exclusion Criteria

- Children with learning disability

Hypothesis.

- H0: The primary children has no knowledge regarding good touch and bad touch
- H1: the primary school children has some knowledge regarding good touch and bad touch

Ethical considerations

The research study has been approved by the ethical committee of the college. The prerequisites were fulfilled and the permission to conduct the study was taken from the selected school. Permission obtained from the concerned authorities and department in charges for conducting the study. The informed consent was taken from the parents of

the participants. The privacy and the confidentiality of the information was ensured.

2. Methodology

Research Design -

Cross sectional descriptive design was used.

Research Setting

The study was conducted in a selected primary school of Pune

Population

The population of the present comprises primary school girl children of the age group of 6 - 8 years

Sample Size

In present study, the sample was 120 primary school girl children of age group 6 - 8 years old.

Sample size was calculated according to the formula

$$n = P * (1 - P) * Z^2 / e^2$$

Sample size is calculated on the basis of the study done by Sudhakar A, Vaijayantimala, Revathy and Johnsy Rani on knowledge of good touch and bad touch of primary school children.

Sampling

Simple Random Sampling

Tool

The investigator used a structured questionnaire for data collection. It was organised under two sections as described below: -

Section A

It consists of Demographic data which includes age, class, religion,, type of family, birth order of the child, mother's education.

Section B

It consists of questionnaire regarding knowledge on good touch & bad touch

Scoring Mode

For every correct answer I Mark was given. The maximum total score was 10. There was no negative marking.

Methods of data collection

A structured questionnaire was administered to the children by interview method.

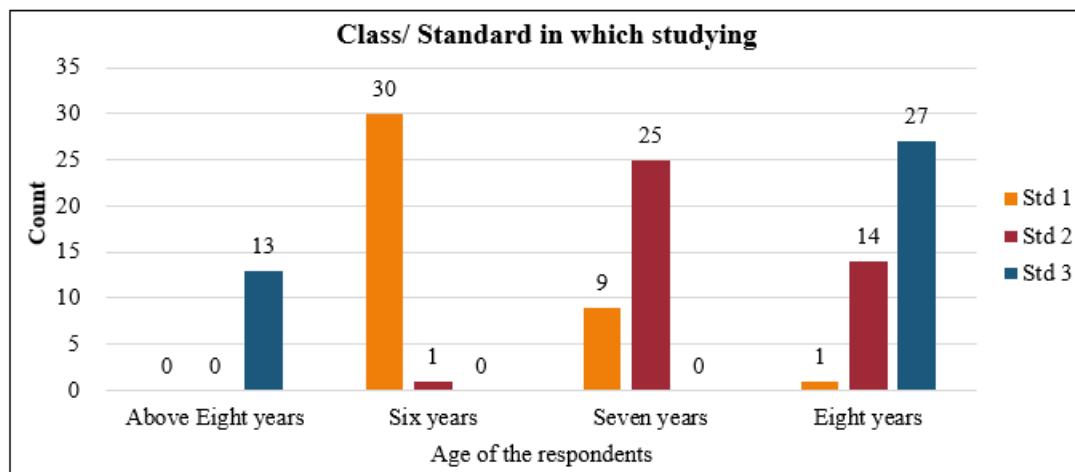
3. Data Analysis & Interpretation

Analysis of Demographic Variables

Table 4.1: Distribution of respondents as per age and class/standard in which studying

		Count				
		Class/Standard in which studying			Total	
		Std 1	Std 2	Std 3		
Age of the Respondents	Above Eight Years	0	0	13	13	
	Six Years	30	1	0	31	
	Seven Years	9	25	0	34	
	Eight Years	1	14	27	42	
Total		40	40	40	120	

Table 4.1 and figure 4.1 presents the distribution of respondents concerning both their age and the corresponding class or standard they are enrolled in. The age categories include six years, seven years, eight years, and above eight years, while the classes are denoted as Std 1, Std 2, and Std 3. The total count of respondents amounts to 120.

**Figure 4.1:** Distribution of respondents as per age and class/standard in which studying

Upon reviewing the age distribution, a noticeable trend is observed, with the majority of respondents falling into the eight years category, totaling 42 individuals. Subsequently, there are 34 respondents aged seven years and 31 respondents aged six years. Additionally, 13 respondents are categorized as being above eight years old.

Shifting focus to the distribution across classes, it is evident that each of Std 1, Std 2, and Std 3 has an equal representation of 40 respondents. This suggests a balanced distribution of participants across the different classes.

Further insights are gleaned from examining the intersection of age and class. Among six - year - olds, the majority (30 respondents) are enrolled in Std 1, while only 1 respondent is in Std 2. In contrast, seven - year olds are more prevalent in Std 2, constituting 25 respondents, while Std 1 has 9 respondents in this age group. Among eight - year - olds, Std 3 emerges as the predominant class, with 27 respondents, whereas Std 1 and Std 2 have 1 and 14 respondents,

respectively. Notably, respondents above eight years old are exclusively enrolled in Std 3, totaling 13 individuals.

Table 4.2: Distribution of respondents as per class/standard in which studying and order of birth

Count						Total
		Order of birth				
		>3	First	Second	Third	
Class/ Standrard in which studying	Std 1	0	15	23	2	40
	Std 2	1	16	16	7	40
	Std 3	2	20	12	6	40
Total		3	51	51	15	120

Table 4.2 and figure 4.2 presented here outlines the distribution of respondents based on both their class or standard of study and their order of birth, categorized as ">3", "First", "Second", and "Third". The data covers three classes, namely Std 1, Std 2, and Std 3, with a total of 120 respondents.

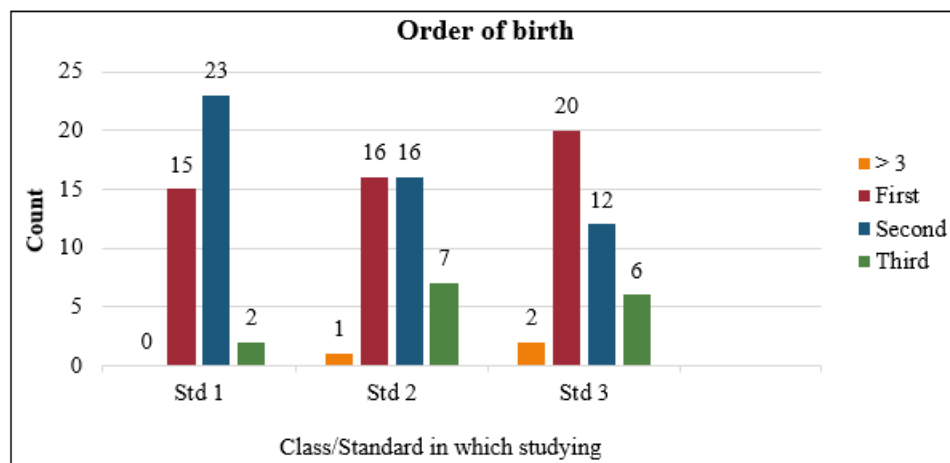


Figure 4.2: Distribution of respondents as per class/standard in which studying and order of birth

When examining the distribution across orders of birth, a notable trend emerges with the majority of respondents falling into the "Second" order, comprising 51 individuals. Additionally, there is an equal distribution of 51 respondents in both the ">3" and "First" categories, while the "Third" order accounts for 15 respondents.

Focusing on the distribution within each class, distinct patterns surface. In Std 1, there are no respondents in the ">3" order, with 15 and 23 respondents in the "First" and "Second" orders, respectively. Two respondents are classified under the "Third" order, resulting in a total of 40 respondents for Std 1.

Moving to Std 2, there is one respondent in the ">3" order, 16 in the "First" order, 16 in the "Second" order, and seven in the "Third" order, summing up to 40 respondents. For Std 3, two respondents are in the ">3" order, 20 in the "First" order, 12 in the "Second" order, and six in the "Third" order, totaling 40 respondents.

Table 4.3: Distribution of knowledge level

Knowledge Level	Score	Percentage
Poor Knowledge	<5	2%
Average Knowledge	5 - 7	48%
Good Knowledge	>7	50%

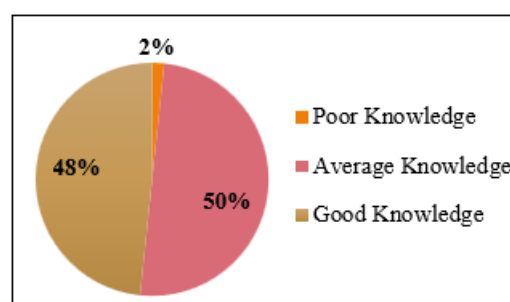


Figure 4.3: Distribution of knowledge level

Table 4.3 and Figure 4.3 shows that 50% students had good knowledge, 48% had average knowledge and only 2% had poor knowledge.

Table 4.4: Distribution of respondents as per class/standard in which studying and religion

Count							Total
		Religion					
		Hindu	Muslim	Chirstian	Sikh	Others	
Class/Standard in which studying	Std 1	31	7	2	0	0	40
	Std 2	25	12	0	0	3	40
	Std 3	29	5	0	1	5	40
Total		85	24	2	1	8	120

Table 4.4 and figure 4.4 provided offers insights into the distribution of respondents based on both their class or standard of study and their religious affiliations, including Hindu, Muslim, Christian, Sikh, and Others. The classes considered are Std 1, Std 2, and Std 3, with a total of 120 respondents.

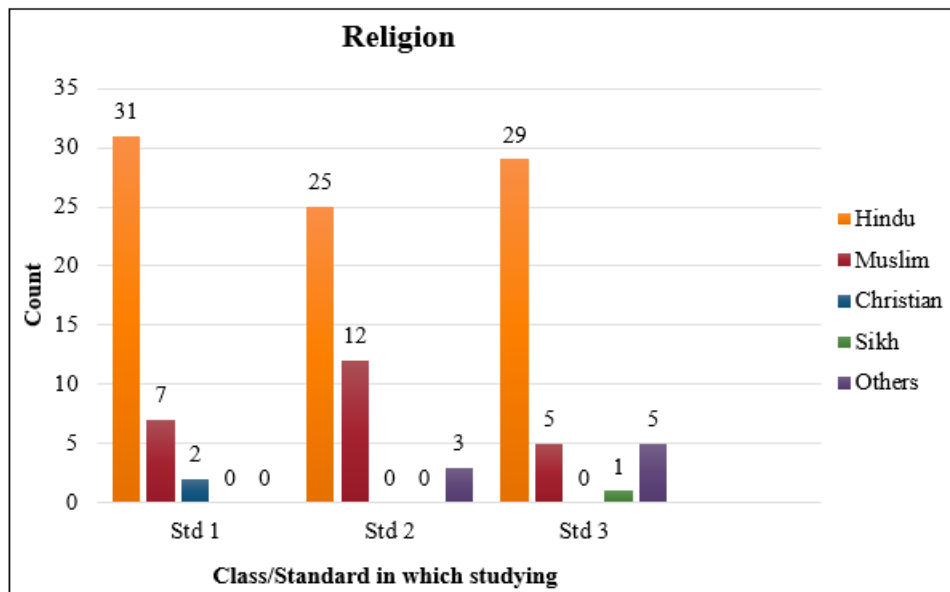


Figure 4.4: Distribution of respondents as per class/standard in which studying and religion

Examining the data, it is apparent that the majority of respondents across all classes identify as Hindu. In Std 1, 31 out of 40 respondents follow Hinduism, followed by 25 out of 40 in Std 2 and 29 out of 40 in Std 3. Muslims represent the second - largest religious group in each class, with 7, 12, and 5 respondents in Std 1, Std 2, and Std 3, respectively.

Christian respondents are present only in Std 1, comprising 2 out of 40, while Sikh respondents are found in Std 1 (1 out of 40) and Std 3 (1 out of 40). The category "Others" is represented across all three classes, with 3 in Std 2 and 5 in Std 3, making a total of 8 respondents in this group.

In terms of overall counts, the majority of respondents adhere to Hinduism, totaling 85 out of 120. Muslims constitute the second - largest group with 24 respondents, while Christians, Sikhs, and Others make up smaller proportions.

Table 4.5: Distribution of respondents as per Class/Standard in which studying and type of a family

Count					
		Type of family			Total
		Nuclear	Joint	Extended	
Class/Standrard in which studying	Std 1	18	22	0	40
	Std 2	7	28	5	40
	Std 3	17	19	4	40
Total		42	69	9	120

Table 4.5 and figure 4.5 provides insights into the distribution of respondents based on both their class or standard of study and the type of family they belong to, categorized as Nuclear, Joint, and Extended. The classes considered are Std 1, Std 2, and Std 3, with a total of 120 respondents.

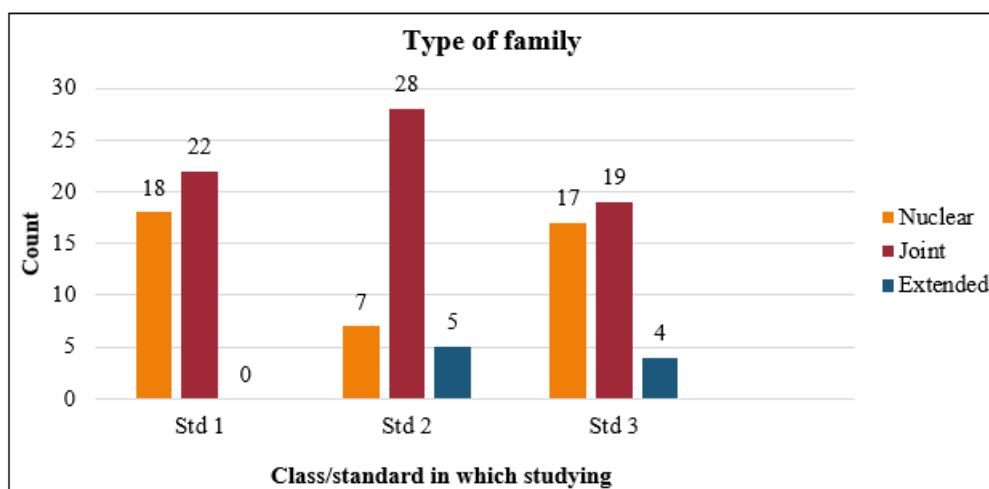


Figure 4.5: Distribution of respondents as per class/ standard in which studying and type of family

Examining the data, it becomes apparent that the distribution of family types varies across the different classes. In Std 1, the majority of respondents, 22 out of 40, belong to Joint families, followed by 18 respondents in Nuclear families. Extended families are not represented in Std 1. In Std 2, Joint families continue to be the predominant type, with 28 out of

40 respondents, whereas Nuclear families account for 7 respondents, and 5 respondents belong to Extended families. In Std 3, the distribution is more balanced, with 19 respondents in Joint families, 17 in Nuclear families, and 4 in Extended families.

When considering the overall count, Joint families are the most prevalent among the respondents, totaling 69 out of 120.

Nuclear families follow with 42 respondents, while Extended families constitute a smaller proportion with 9 respondents.

Table 4.6: Distribution of respondents as per class/standard in which studying and Mother's education

Count						
		Mother's education				Total
		12th	Graduate	Post Graduate	10 th	
Class/Standard in which studying	Std 1	3	29	6	2	40
	Std 2	16	19	3	2	40
	Std 3	4	26	6	4	40
Total		23	74	15	8	120

Table 4.6 and figure 4.6 provided offers insights into the distribution of respondents based on both their class or standard of study and their mothers' educational

qualifications, classified into four categories: 12th, Graduate, Post Graduate, and 10th. The classes considered are Std 1, Std 2, and Std 3, with a total of 120 respondents.

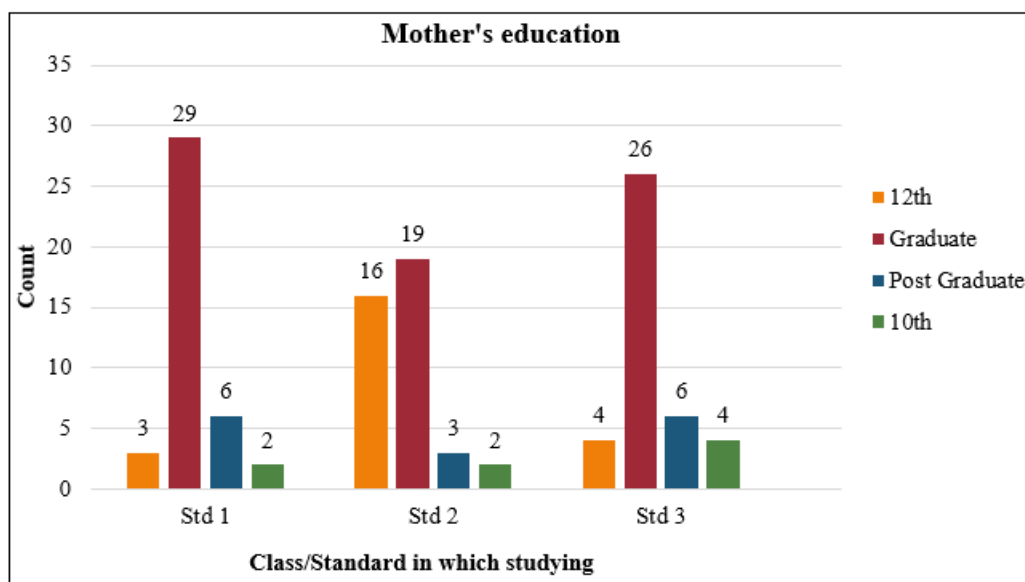


Figure 4.6: Distribution of respondents as per class/standard in which studying and Mother's education

Analyzing the data reveals variations in the distribution of mothers' educational levels across different classes. In Std 1, the majority of respondents (29 out of 40) have mothers with a Graduate degree, followed by 6 with Post Graduate qualifications, 3 with 12th standard education, and 2 with a 10th standard education. In Std 2, there is a more balanced distribution, with 19 respondents having Graduate mothers, 16 with 12th standard education, 3 with Post Graduate qualifications, and 2 with mothers educated up to 10th standard. In Std 3, the trend is similar to Std 1, with 26 respondents having Graduate mothers, 6 with Post Graduate qualifications, 4 with 12th standard education, and none with mothers educated up to 10th standard.

Considering the overall count, the majority of mothers of the respondents hold Graduate degrees, totaling 74 out of 120. Post Graduate mothers constitute the second - largest group with 15 respondents, followed by 23 with 12th standard education, and 8 with mothers educated up to 10th standard.

4. Analysis of Responses

Table 4.7: Distribution of respondents based on response to question regarding awareness of body parts

Are you aware of your body parts?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	10	8.3	8.3	8.3
	Yes	110	91.7	91.7	100
	Total	120	100	100	

Table 4.8: Distribution of respondents as per response to question regarding identifying body parts

Are you aware of your body parts?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Correctly Identified	110	91.7	91.7	91.7
	Incorrectly Identified	10	8.3	8.3	100.0
	Total	120	100.0	100.0	

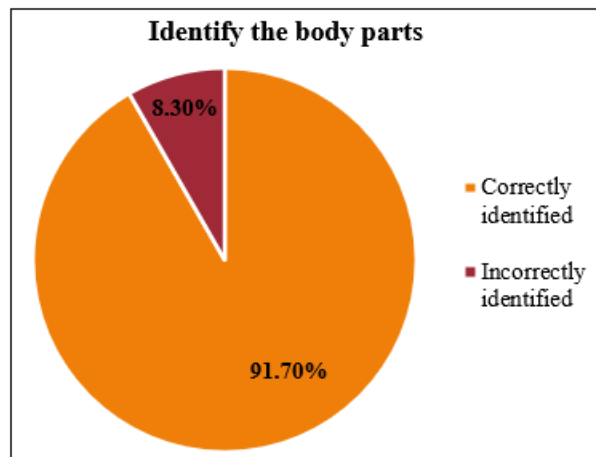


Figure 4.8: Distribution of respondents as per response to question regarding identifying body parts

Table 4.9: Distribution of respondents as per response to question regarding cousin touching body parts

If your cousin touches your private part, is it a good touch?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	15	12.5	12.5	12.5
	No, Not a Good Touch	105	87.5	87.5	100.0
	Yes	15	12.5	12.5	12.5

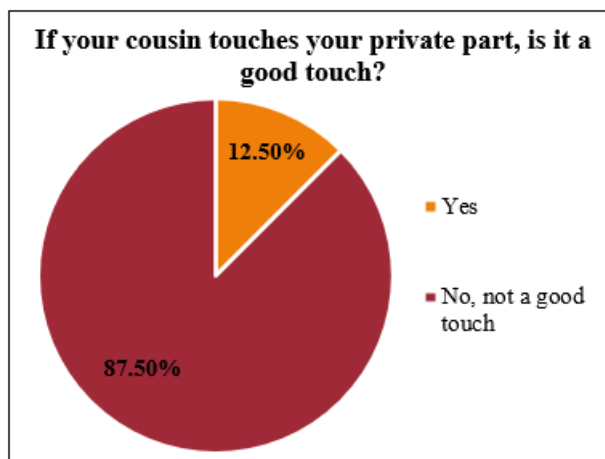


Figure 4.9: Distribution of respondents as per response to question regarding cousin touching body parts

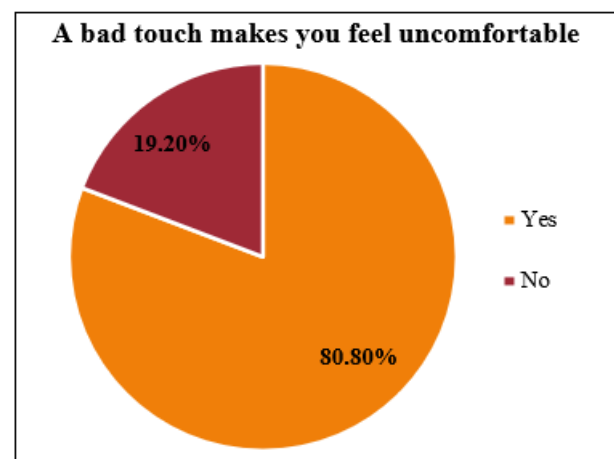


Figure 4.10: Distribution of respondents as per response to question whether bad touch makes you feel uncomfortable

Table 4.10: Distribution of respondents as per response to question whether bad touch makes you feel uncomfortable

A bad touch makes you feel uncomfortable					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	23	19.2	19.2	19.2
	Yes	97	80.8	80.8	100.0
	Total	120	100.0	100.0	

Table 4.11: Distribution of respondents as per response to question regarding identifying a good touch

Which among the following is a good touch?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Incorrect Response	5	4.2	4.2	4.2
	Correct Response	115	95.8	95.8	100.0
	Total	120	100.0	100.0	

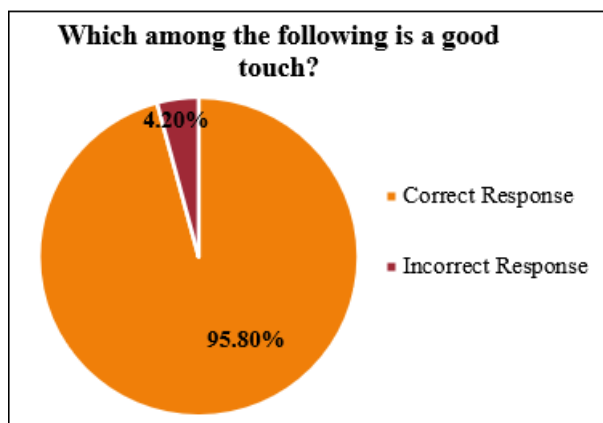


Figure 4.11: Distribution of respondents as per response to question regarding identifying a good touch

Table 4.12: Distribution of respondents as per response to question regarding identifying a bad touch

Which among the following is not a good touch?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Incorrect Identification	33	27.5	27.5	27.5
	Correct Identification	87	72.5	72.5	100.0
	Total	120	100.0	100.0	

Table 4.13: Distribution of respondents as per response to question regarding action to be taken if someone tries to give you a bad touch

What action would you take if someone tries to give you a bad touch?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Incorrect Response	13	10.8	10.8	10.8
	Correct Response	107	89.2	89.2	100.0
	Total	120	100.0	100.0	

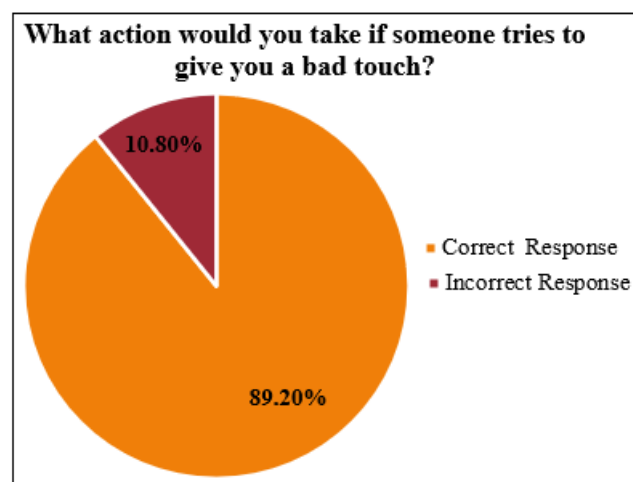


Figure 4.13: Distribution of respondents as per response to question regarding action to be taken if someone tries to give you a bad touch

Table 4.14: Distribution of respondents as per response to question, whether you will let a stranger tickle you under your clothing

Will you let a stranger touch or tickle you under your clothing?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	7	5.8	5.8	5.8
	No	113	94.2	94.2	100.0
	Total	120	100.0	100.0	

Table 4.15: Distribution of respondents as per response to question, whether it is ok to say no to elders, if you don't like their touch

Is it ok to say no to elders, if you don't like your touch?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	55	45.8	45.8	45.8
	Yes	65	54.2	54.2	100.0
	Total	120	100.0	100.0	

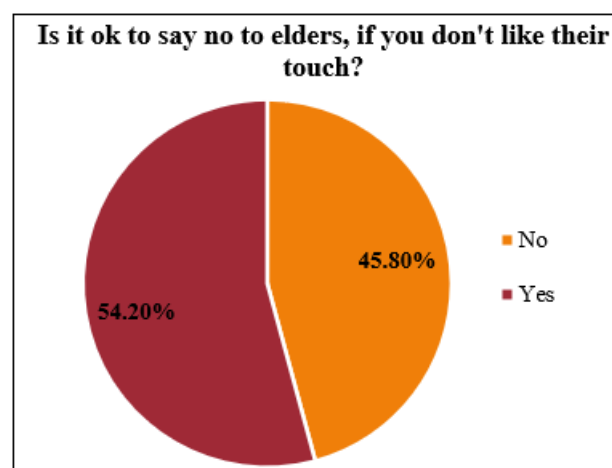


Figure 4.15: Distribution of respondents as per response to question, whether it is ok to say no to elders, if you don't like their touch

Table 4.16: Distribution of respondents as per response to question, whether you can decide who can hug or kiss you

Can you decide who can hug or kiss you?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	46	38.3	38.3	38.3
	Yes	74	61.7	61.7	100
	Total	120	100	100	

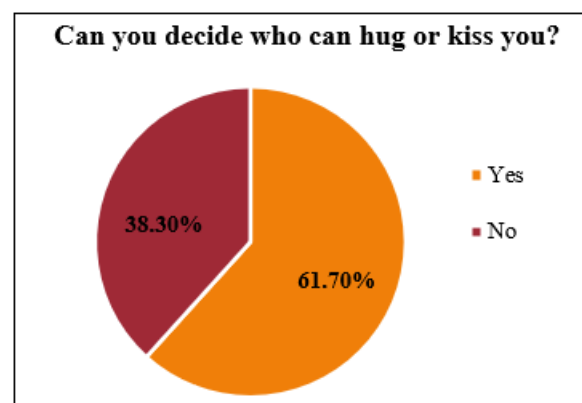


Figure 4.16: Distribution of respondents as per response to question, whether you can decide who can hug or kiss you

Table 4.16: Variation between Class/Standard

Descriptives				
Knowledge Level				
	N	Mean	Std. Deviation	Std. Error
Std 1	40	7.4750	1.30064	.20565
Std 2	40	8.3000	1.32433	.20939
Std 3	40	8.8000	1.01779	.16093
Total	120	8.1917	1.33029	.12144

ANOVA					
Knowledge Level					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	35.817	2	17.908	11.988	.000
Within Groups	174.775	117	1.494		
Total	210.592	119			

RESULTS - We employ Analysis of Variance (ANOVA) to examine potential variations in knowledge levels among three distinct student groups—Std 1, Std 2, and Std 3. The ANOVA results reveal a statistically significant difference in knowledge levels across the groups, supported by low p - value of 0.000. Consequently, the null hypothesis is rejected, indicating substantial disparities in mean knowledge levels among at least two of the three groups. Further analysis of descriptive statistics highlights that the highest mean knowledge level is present in Std 3, with a mean of 8.8000. This underscores that, on average, students in Std 3 exhibit a superior level of knowledge compared to their peers in Std 1 and Std 2. These findings offer valuable insights for educators and policymakers aiming to comprehend and address knowledge gaps among different student cohorts.

Table 4.17: Variation between Religion

Descriptives				
Knowledge Level				
	N	Mean	Std. Deviation	Std. Error
Hindu	85	8.2118	1.42339	.15439
Muslim	24	8.1250	1.26190	.25758
Chirstian	2	8.0000	.00000	.00000
Sikh	1	9.0000	.	.
Others	8	8.1250	.64087	.22658
Total	120	8.1917	1.33029	.12144

ANOVA					
Knowledge Level					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	.903	4	.226	.124	.974
Within Groups	209.688	115	1.823		
Total	210.592	119			

Results - The ANOVA results for the comparison of knowledge levels across different religions indicate a non - significant finding, with a p - value of 0.974. This suggests that there are no statistically significant differences in knowledge levels among the various religious groups considered. The small F - statistic (0.124) and the associated p - value above the common significance level of 0.05 further support this conclusion. In practical terms, this implies that, based on the available data, religion does not appear to be a significant factor contributing to variations in knowledge levels among the respondents.

Table 4.18: Variation between Order of Birth

Descriptives				
Knowledge Level				
	N	Mean	Std. Deviation	Std. Error
First	51	8.2745	1.32783	.18593
Second	51	8.0392	1.42774	.19992
Third	15	8.2000	1.01419	.26186
Total	117	8.1624	1.33234	.12317

ANOVA					
Knowledge Level					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	1.436	2	.718	.400	.671
Within Groups	204.478	114	1.794		
Total	205.915	116			

Results - The ANOVA results for knowledge levels categorized by the order of birth reveal a nonsignificant finding, as indicated by a p - value of 0.671. This suggests that there are no statistically significant differences in knowledge levels among individuals with different birth orders. The means for first - born (8.2745), second - born (8.0392), and third - born (8.2000) individuals are comparable, further supporting the lack of substantial variation. The small F - statistic (0.400) reinforces the conclusion that, based on the available data, the order of birth does not play a significant role in influencing variations in knowledge levels among the respondents.

Table 4.19: Variation between Type of Family

Descriptives				
Knowledge Level				
	N	Mean	Std. Deviation	Std. Error
Nuclear	42	8.1429	1.42403	.21973
Joint	69	8.2029	1.30135	.15666
Extended	9	8.3333	1.22474	.40825
Total	120	8.1917	1.33029	.12144

ANOVA					
Knowledge Level					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	.289	2	.145	.080	.923
Within Groups	210.302	117	1.797		
Total	210.592	119			

Results - The ANOVA results for knowledge levels based on the type of family structure (Nuclear, Joint, Extended) reveal a non - significant finding, as indicated by a p - value of 0.923. This suggests that there are no statistically significant differences in knowledge levels among individuals belonging to different family structures. The means for Nuclear (8.1429), Joint (8.2029), and Extended (8.3333) family types are relatively close, supporting the conclusion that family structure does not play a significant role in influencing variations in knowledge levels among the respondents. The small F - statistic (0.080) further strengthens the notion that, based on the available data, the type of family structure does not significantly contribute to differences in knowledge levels.

Table 4.20: Variation between Mother's Education

Descriptives				
Knowledge Level				
	N	Mean	Std. Deviation	Std. Error
12th	23	8.2609	1.35571	0.28268
Graduate	74	8.1892	1.3104	0.15233
Post Graduate	15	8.1333	1.35576	0.35006
10th	8	8.125	1.64208	0.58056
Total	120	8.1917	1.33029	0.12144

ANOVA					
Knowledge Level					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	0.197	3	0.066	0.036	0.991
Within Groups	210.394	116	1.814		
Total	210.592	119			

Results: The ANOVA results for knowledge levels across different educational levels (12th, Graduate, Post Graduate, 10th) yield a non - significant p - value of 0.991, suggesting no statistically significant differences in knowledge levels among individuals with varying educational backgrounds. The means for 12th (8.2609), Graduate (8.1892), Post Graduate (8.1333), and 10th (8.1250) education levels are quite similar, reinforcing the conclusion that educational attainment does not play a significant role in influencing variations in knowledge levels among the respondents. The small F - statistic (0.036) further supports the idea that, based on the available data, the level of education does not significantly contribute to differences in knowledge levels.

5. Discussion

The present study is a descriptive cross - sectional study which was undertaken in a selected school of Western Maharashtra, with an aim to assess the knowledge of good touch and bad touch among school children. A structured questionnaire with two subparts was used to collect the data from 120 samples. Section A contain questions related to the sociodemographic variables and section B contain questions to assess the level of knowledge.

In the present study majority of the respondents were falling into the 8 yrs category totaling 42 students. Subsequently there were 34 respondents aged 7yrs and 31 respondents aged 6yrs and 13 respondents were above 8yrs old.

Findings of our study revealed that there is statistically significant difference in knowledge level across the groups supported by a p value of 0.000. Findings of our study revealed that 50% students had good knowledge, 48% had average knowledge and only 2% had poor knowledge. Further analysis of descriptive statistics highlighted that highest mean knowledge level is present in standard 3 with a mean of 8.8000. this underscores that, on average students in standard 3 exhibits a superior level of knowledge compared to their peers in standard 1 and standard 2. This study is similar to the study done by Tyagi R and Nair BT to assess the awareness of good touch and Bad touch in a primary school child of a Metropolis in North India which indicated that age and knowledge level is directly proportional.

The comparison of knowledge levels across different religion, order of birth, type of family and mothers education indicate a non - significant finding with p values of 0.974, 0.671, 0.923, etc with <0.05 level of significance These findings corresponds to a similar study conducted by Sudhakar A, Vajjayanti mala, Revathi and Johnsi Rani where they could not establish a significant relationship of knowledge level and religion, order of birth, mothers education except age of the student for which a significant association was found in the present study. Meanwhile a study conducted by Keshni to assess the knowledge regarding Good Touch and Bad Touch among children (9 - 12 years) in a selected school of Ludhiana, Punjab suggest that there is significant association between sociodemographic variables like age, religion, mothers education with the level of knowledge of good touch and bad touch among students.

6. Conclusion

The study was conducted with the purpose to assess the knowledge of children regarding good touch and bad touch. The study had the following objectives: to assess the knowledge regarding good touch and bad touch among school children and to associate the knowledge regarding good touch and bad touch in school children with sociodemographic variables. The investigator used a cross sectional descriptive research design. 120 children of the age group of 6 - 8yrs were included in the study on the basis of their parents consent in a school at Western Maharashtra. This study finds that half of the students have good knowledge about good touch and bad touch. It also finds that among the selected socio demographic variables only the standard in which the children study has significant association with the knowledge levels.

References

- [1] Tyagi R, Nair BT. Assessment of awareness of good touch and bad touch in primary school children of a metropolis in North India. Sri Lanka Journal of Child Health. 2023 Sep 5; 52 (3): 314–20.
- [2] Khalifeh Kandi ZR, Fard Azar FE, Khalajabadi Farahani F, Azadi N, Mansourian M. Significance of Knowledge in Children on Self - Protection of Sexual Abuse: A Systematic Review. Iranian Journal of Public Health. 2022 Aug 14; 51 (8).
- [3] American Academy of Pediatrics. Sexual Behaviors in Young Children: What's Normal, What's Not? [Internet]. HealthyChildren. org. 2023. Available from: <https://www.healthychildren.org/English/ages-stages/preschool/Pages/Sexual-Behaviors-Young-Children.aspx>
- [4] HopeQure. HopeQure Wellness Solutions Pvt. Ltd [Internet]. HopeQure. [cited 2023 Jul 20]. Available from: <https://www.hopequre.com/blogs/good-touch-vs-bad-touch>
- [5] Teaching Good Touch Bad Touch (Kids Safety Council) [Internet]. [cited 2023 Nov 2]. Available from: <https://familyhelpcenter.net/wp-content/uploads/2015/10/18-Teaching-Good-Touch-Bad-Touch1.pdf>
- [6] Ways to Talk to Your Child About Good and Bad Touch [Internet]. www.michiganmedicine.org. [cited 2023 Mar 5]. Available from: <https://www.michiganmedicine.org>

- //www.michiganmedicine.org/health - lab/7 - ways - talk - your - child - about - good - and - bad - touch
- [7] Tips for Teaching Good Touch Bad Touch to Your Child – Podar Blogs [Internet]. www.podareducation.org. [cited 2024 Apr 18]. Available from: <https://www.podareducation.org/blog - tips - for - teaching - good - touch - and - bad - touch - to - your - child#:~:text=Good%20Touch%3A%20Good%20touch%20refers>
- [8] Tyagi S, Karande S. Child sexual abuse in India: A wake - up call. *Journal of Postgraduate Medicine*.2021; 67 (3): 125.
- [9] Ageranioti - Bélanger S, Brunet S, D’Anjou G, Tellier G, Boivin J, Gauthier M. Behaviour disorders in children with an intellectual disability. *Paediatrics & Child Health* [Internet].2012 Feb; 17 (2): 84-8. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3299352/>
- [10] De Sousa AA, Shrivastava AK, Karia SB, Sonavane SS. Child sexual abuse and the development of psychiatric disorders: A neurobiological trajectory of pathogenesis. *Industrial Psychiatry Journal* [Internet].2017; 26 (1): 4. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5810166/>
- [11] MINISTRY OF WOMEN AND CHILD DEVELOPMENT Model Guidelines under Section 39 of The Protection of Children from Sexual Offences Guidelines for the Use of Professionals and Experts under the POCSO Act, 2012 CONTENTS [Internet].2012. Available from: <https://wcd.nic.in/sites/default/files/POCSO - ModelGuidelines.pdf>
- [12] Good touch/bad touch: What children should know? – T. I. M. E. Kids [Internet].2018 [cited 2024 May 30]. Available from: <https://timekidspreschools.in/parenting - blog/?p=280#:~:text=For%20example%20a%20mother%20hugging>
- [13] Good Touch - Bad Touch [Internet]. Amrit Foundation of India. [cited 2023 Dec 6]. Available from: <https://amritfoundationofindia.in/good - touch - bad - touch - 2/>
- [14] Protecting our children: A look at current Indian laws on child abuse. *The Times of India* [Internet]. [cited 2023 Apr 26]; Available from: <https://timesofindia.indiatimes.com/readersblog/personal - blog - of - suhaib - rafi - mir/protecting - our - children - a - look - at - current - indian - laws - on - child - abuse - 50378/>
- [15] Chandar R, Kannappan M. A Study on Sexual Abuse of Children and Youth in India [Internet]. *Semantic Scholar*.2018 [cited 2024 May 29]. Available from: <https://www.semanticscholar.org/paper/A - Study - on - Sexual - Abuse - ofChildren - and - Youth - in - Chandar Kannappan/d2102509b4393c13212de6b4a2b334bb0a3b1c9b>
- [16] Choudhry V, Dayal R, Pillai D, Kalokhe AS, Beier K, Patel V (2018) Child sexual abuse in India: A systematic review. *PLoS ONE* 13 (10): e0205086. <https://doi.org/10.1371/journal.pone.0205086>
- [17] Singh MM, Parsekar SS, Nair SN. An epidemiological overview of child sexual abuse. *Journal of Family Medicine and Primary Care* [Internet].2014; 3 (4): 430. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4311357/>
- [18] Mathew M, Iswarya S, Paul AV. Effectiveness of health education on awareness of child sex abuse among school children. *J Family Med Prim Care* 2021; 10: 4509 - 13.
- [19] Mahalakshmi B, Govindan R, Patel TK, Nagooran SS, Zakirhusen M, Harshal K. Awareness on good and bad touch among school children in north Gujarat, India. *Bioinformation* 19 (8): 849 - 852 (2023)
- [20] Sudakar A, Vijayantimala, Revathi, Johnsy rani. Knowledge on Good Touch and Bad Touch: A Cross - sectional study *Eur. Chem. Bull.*2023, 12 (10), 8689 - 8694
- [21] Tyagi R, Nair BT. Assessment of awareness of ‘good touch’ and ‘bad touch’ in primary school children of a metropolis in North India. *Sri Lanka Journal of Child Health*.2023; 52 (3): 314 - 320. DOI: <http://doi.org/10.4038/slch.v52i3.10574>.
- [22] Raj B, Azad M, Rani B, Anita A. A Study to Assess the Effectiveness of Video Assisted Intervention on Good Touch and Bad Touch among School Going Children in Selected School of Sasaram. *International Journal of Advanced Research in Science, Communication and Technology*.2023 May 2; 225–31.
- [23] Keshni K. A Descriptive Study to assess the knowledge regarding Good Touch and Bad Touch among children (9 - 12 years) in a selected school of Ludhiana, Punjab. *Asian Journal of Nursing Education and Research*.2021 Dec 8; 473–4.
- [24] Manisha P. Awareness Of Good And Bad Touch Among Children. *Manager’s Journal on Nursing*.2018; 8 (2): 1.
- [25] Singh R, Koushal V, Bharti B. A descriptive study on child sexual abuse act in India. *J Family Med Prim Care*.2022; 11: 2923 - 32.
- [26] Somasundaram S, Preethy N. Awareness of child abuse and neglect among working parents in Chennai, India: A knowledge, attitude and practice (KAP) survey. *Journal of Family Medicine and Primary Care*.2020; 9 (2): 602
- [27] Shirley SA, Kumar SS. Awareness and attitude of mothers of primary school children towards child sexual abuse in Tamil Nadu, India. *International Journal of Contemporary Pediatrics*.2019 Dec 24; 7 (1): 191.
- [28] 28Alzoubi FA, Ali RA, Flah IH, Alnatour A. Mothers’ knowledge & perception about child sexual abuse in Jordan. *Child Abuse & Neglect* [Internet].2018 Jan; 75: 149–58. Available from: <https://www.sciencedirect.com/science/article/abs/pii/S0145213417302326>