



BASIC SKILLS TO AVOID RISK SITUATIONS FOR SEXUAL ABUSE FOR ADOLESCENT GIRLS WITH INTELLECTUAL DISABILITY: AN VIDEO-BASED INTERVENTION PROGRAMME

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ABSTRACT

The high prevalence rate of sexual abuse among adolescent girls with intellectual disability throws light on the missing links in their sexuality educational programmes. Empirical evidences are scanty in Indian context encompassing these skills to prevent sexual abuse. An effort was made by designing video based intervention package focusing on the crucial factors to train them in achieving skills to avoid risk situations for sexual abuse. Seven adolescent girls with mild Intellectual disability within the age range of 15-18 years were part of this study. All of them received 20 skill training sessions of 30 minutes each over a period of four weeks through videos. The data were collected before and after the intervention using a checklist on skills to avoid risk situations for sexual abuse (SARSA). The video based intervention programme resulted in enhancing the skills to avoid risk situations for sexual abuse significantly paving a path for safe mobility in their surroundings.

KEYWORDS : Sexual abuse, risk situations, Adolescent girls, intellectual disability

A properly evaluated sexuality education is indispensable to all adolescents with disabilities (Banerjee, Ray, & Panda, 2013) because of the high prevalence of sexual abuse among this vulnerable population (Kvam & Braathen, 2008; Pan, 2007). In India correct statistics regarding the sexual abuse for women with intellectual disability are scanty. The survey of Mohapatra and Mohanty (2004) featured the perceived 'ease' of getting away with sexual abuse may be a risk factor for these girls and women with Intellectual disability. Current statistics show that 80% of special needs girls and 50% of boys are believed to be abused by age of 18 (Banerjee, Ray, & Panda, 2013). This heightened scenario urges the personnel/care giving staff to give appropriate training to girls and women with intellectual disability on moral grounds to sense the danger or risk in their surroundings and react appropriately.

Women with Intellectual disability are vulnerable mainly due to lack the information regarding sexuality and sexual health (Greenwood & Wilkinson, 2013) or do not understand the information presented to them (Murphy & Elias 2006). The situational characteristics associated with sexual assault are more threatening (Barger et.al.,2009) which may further exploit the women with intellectual disabilities with multiple assaults in their life time. Nowadays information about sex from internet and mobile sources may involve highly sexualised imagery or ideas or connection with persons who may abuse (Eastgate et.al.,2012) posing another serious risk situation for sexual abuse of persons with Intellectual disability.

Therefore it is essential to train them to understand the difference between the risk zone and comfort zone which hardly gets any attention. Because of the taboo attached nothing much research was done in Indian context. Considering the largely unmet need in the present sexuality training, it is fundamental to develop a preventive package for giving orientation in avoiding risk situation for sexual abuse. It will not only assures safety but also increases their self esteem and independent living. The present study represents an initial attempt to develop and examine a video based programme for adolescent girls with intellectual disability to impart these crucial life skills.

Aim

To study the effect of video-based intervention in accomplishing basic skills to avoid risk situations for sexual abuse for adolescent girls with intellectual disability.

Objectives

To assess the current level of skills in avoiding risk situations for sexual abuse among adolescent girls with intellectual disability.

To find the enhancement in the skills, if any, to avoid risk situations for sexual abuse through video-based intervention among adolescent girls with intellectual disability.

Methodology

It was a pre-post single group experimental study. Sample Seven students diagnosed as mild Intellectual disability within the age range of 15-18 years having minimum expressive and receptive language

were selected for the study. Sample was drawn from one of the rehabilitation centre in Hyderabad following simple random technique.

Tools

I. Skills to avoid risk situations for sexual abuse (SARSA) checklist: Content validly was established by giving this checklist to the professionals working in the field of special education. The final version consisted of 13 items related to risk situations such as maintaining privacy during bathing and changing dress/ sanitary pads, awareness of secluded and dark places, recognizing inappropriate touch, gestures and reporting the risk situation to parents /teachers etc. The items were prepared such that the students responses could be recorded in 'yes' or 'no' format.

II. Picture based assessment kit: To assess the skills in the SARSA checklist the pictures were presented to students individually through power point presentation.

Steps that are followed during the preparation of Video based Intervention

For the items in SARSA checklist structured video content was prepared by the researcher to provide intervention on risk situations for adolescent girls with intellectual disability.

Content was repeated in the video in order to enhance the skill learning of the participants.

Each skill was linked by dramatizing the content, direct anchor mentions and voice over.

The video was shot in Telugu language and researcher herself played the key role.

To emphasize on the risk situation 'No' and 'Wrong' terminology was used in the video.

Procedure

After taking the written consent from the parents the students were taken for study.

Initially each of the students was assessed and the scores were taken as pre test score.

Following which they were given 20 skill training sessions through videos.

In the first video session the researcher was passive but during the second session she was interactive eliciting the expressions from the participants. After showing short content of the video the researcher was briefing the skill by pausing the skill for two minutes. Then the participants were encouraged to the role play. After the intervention skills in avoiding risk situations were assessed and the participants were evaluated to the skills enhances in them.

Results and Discussion

The overall analysis of data showed enhancement in certain skills in avoiding risk situations such as awareness of the secluded places, differentiating between appropriate and inappropriate touch, distinguish the inappropriate gestures, recognizing the risk in inappropriate touch, and in reporting the abusive /risk situation to parents/teachers.

This finding of the study is in concurrence with the study done by Tang and lee (1999) on female Chinese adolescents with mild mental retardation. In this study participants were more able to accurately recognize inappropriate than appropriate touches and sexual requests through videos.

This finding also agrees with the result of other study conducted by Lumley et.al (1998) where the women with mild to moderate mental retardation were taught to target behaviours: 1) verbally refuse the request, 2) leave the situation, and 3) report the incident to a trusted adult. This differs to present study in the type of assessment procedures and in the objective.

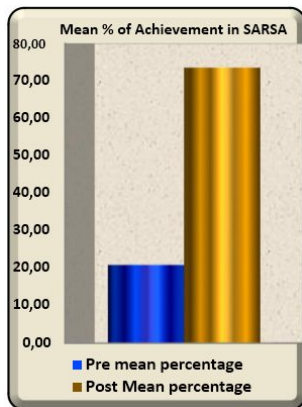
All the participants exhibited 100% improvement on skills related to avoid going to secluded places alone and to refuse financial incentives /gifts for inappropriate touch by familiar/unfamiliar persons which were completely lacked by the participants before the intervention. The improvement in awareness of risk situations for sexual abuse can be attributed to the fact that the dramatization of content could raise their level of curiosity and the role played by the anchor was really appealing to them.

Pre test and post test scores were computed to compare the improvement in skills targeted through intervention. Paired 't' test was used to find the difference between these two which is presented below.

Table1: Mean, SD and 't'-values between pre and post conditions for skills to avoid risk situations

Pre Test		Post Test		N	df=6	Significance of	
Mean	SD	Mean	SD			t-value	't' value
2.71	1.254	10.43	3.309	7	6	t'=7.9	P<0.01

Figure 1. Mean Percentage of Achievement by the Participants in Skills to avoid risk situations



It is observed from the table that there was drastic improvement from pre test to post test scores. Statistical significance of the difference also has been observed in the 't' value where $p < 0.01$. This implies that the video prepared for the intervention proved to be effective in imparting the skills to avoid risk situations among adolescent girls with intellectual disability.

The study gives promising clues in imparting sexuality training through videos with in short period. Even though maintenance and generalization of the skills after intervention could not be asserted, present study provides encouraging data in training the essential life skills in avoiding sexual abusive situations to adolescents with Intellectual disability. Thus these abilities equip them with the skills to protect against sexual abuse and ultimately leading a safe mobility in their surroundings. However this study can be extended in evaluating the efficacy of the intervention with large sample and follow up to find out the generalization of these key skills.

Conclusion

This study is an eye opener for the researcher as it is giving a novel way to prepare the adolescents for their independence in the domain which is grossly neglected. Overall through the present study the most important yet largely overlooked skills for these susceptible population has been addressed. It can also be a good starting point for sexuality curriculum development.

References

- Banerjee, M., Ray, P., & Panda, A. (2013). Role of Sex Education on Odd Sexual and Problem Behaviour: A Study on Adolescents with Autism. *Indian Journal of Community Psychology*, Vol9 (1), 1-20.
- Barger, E., Wacker, J., Macy, R., & parish, S. (2009, August). Sexual Assault Prevention for Women With Intellectual Disabilities: A critical Review of the Evidence. *Intellectual and Developmental Disabilities*, Vol 47 (4), 249-262. doi: 10.1352/1934-9556-47.4.249
- Eastgate, G., Scheermeyer, E., Driel, M. L., & Lennox, N. (2012, March). Intellectual disability, sexuality and sexual abuse prevention A study of family members and support workers. *Australian Family Physician*, Vol 41 (3), 135-139.
- Greenwood, N. W., & Wilkinson, J. (2013). Sexual and Reproductive Health Care for Women with Intellectual Disabilities: A Primary Care Perspective: Review Article. *International Journal of Family Medicine*, Vol 2013, doi: 10.1155/2013/642472
- Kvam, M. H., & Braathen, S. H. (2008). "I thought ... maybe this is my chance": Sexual Abuse Against Girls and Women With Disabilities in Malawi. *Sexual Abuse: A Journal of Research and Treatment*, Vol 20 (1): 5-24.
- Lumley, V. A., Miltenberger, R. G., Long, E. S., Rapp, J. T., & Roberts, J. A. (1998). Evaluation of A Sexual Abuse prevention program For Adults with Mental Retardation. *Journal of Applied Behavior Analysis*, Vol 33 (1), 91- 101. doi: 10.1901/jaba.1998.31-91
- Mohapatra, S., & Mohanty, M. (2004). Abuse And Activity Limitation: A Study On Domestic Violence Against Disabled Women In Orissa, India. *Bhubanesw, Orissa: A research report of a project funded by the Oxfam (India) Trust. Swabhiman.*
- Murphy, N. A., & Elias, E. R. (2006). Sexuality of Children and Adolescents With Developmental Disabilities. *Pediatrics*, 118, 398-403. doi: 10.1542/peds.2006-1115
- Pan, S. M. (2007). Prevalence of Sexual Abuse of People With Intellectual Disabilities in Taiwan. *Intellectual and Developmental Disabilities*, Vol 45 (6), 373-379.
- Tang, C. S., & Lee, Y. K. (1999, March). Knowledge on sexual abuse and self-protection skills: a study on female Chinese adolescents with mild mental retardation. *Child Abuse and Neglect*, Vol 23 (3), 269-279.