

Assessment of Knowledge and Attitude about POCSO Act among Medical Interns: A Questionnaire based Study

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Abstract

Background: The issue of child sexual abuse is a worldwide problem that exists among both developed as well as developing countries. The most vulnerable groups in society for sexual abuse are these children. The number of incidents involving child sexual assault is rising alarmingly.

Material and Methods: It is across sectional questionnaire based study from February 2023 to July 2023 comprising of 100 medical interns (50 males and 50 females) conducted at Jawaharlal Nehru Medical College, A.M.U, Aligarh, Uttar Pradesh.

Results: In this cross sectional study, 100 medical interns comprising of 50 males and 50 females participated. The questionnaire consisted of 10 multiple choice questions about the POCSO Act. 76% of medical interns knew what the acronym POCSO Act means. The age of child under POCSO Act was known to 82% participants. 71% participants were aware that POCSO Act is gender neutral.

Conclusion: Although teaching young children about appropriate and inappropriate touching starts in the primary grades, CSA can be reduced by increasing knowledge and awareness in the local community. The cases of child abuse in India require a holistic approach from every member of society.

Keywords: POCSO Act, Child abuse, Sexual Offence

Introduction

The issue of child sexual abuse is a worldwide problem that exists among both developed as well as developing countries. The most vulnerable groups in society for sexual abuse are these children. The number of incidents involving child sexual assault is rising alarmingly. 2012 saw the adoption of the Protection of Children from Sexual Offences (POCSO) Act which was passed in order to safeguard minors

from exploitation and sexual abuse. Additionally, it allows for the creation of special courts to hear cases involving child sexual assault. It also specifies the use of child-friendly practices for gathering evidence, looking into the offence, and holding a trial for it. A child is defined as a person who has not reached the age of 18 in accordance with the POCSO Act of 2012.

World Health Organization (WHO) defines Child Sexual Abuse as the engagement of a child in sexual

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activity that they do not completely understand, are unable to give informed consent to, are not developmentally ready for and are unable to give consent for, or that violates social norms or taboos.¹ Extreme repercussions from child sexual abuse (CSA) impede a child's development and growth.^{2,3} CSA has been linked to a number of unhealthy habits and poor social, mental, and physical health consequences over the course of life.^{4,5,6} For adult CSA survivors, greater risk for violent behaviour, domestic violence, and increased risk of CSA perpetration as adults are some other typical consequences. Future psychological effects that may occur include PTSD, depression, substance abuse, etc.

Physical abuse, sexual abuse, emotional abuse, and neglect are the four main categories under which the World Health Organization has categorized child abuse and maltreatment. Six different forms of child sexual offences are listed in the POCSO Act. i.e. Sexual Assault, Aggravated Sexual Assault, Penetrative Sexual Assault, Aggravated Penetrative Sexual Assault, Sexual Harassment and Using Child for Pornographic Purposes.

Material and Methods

This is a cross sectional questionnaire based study conducted among the Medical interns of Jawaharlal Nehru Medical College, A.M.U, Aligarh, Uttar Pradesh. A questionnaire was prepared consisting of 10 multiple choice questions about POCSO Act. 100 medical interns comprising of 50 males and 50 females participated in this study from February 2023 to July 2023. All participants attempted all questions. The purpose of the study and the procedure to fill up the questionnaire was explained to the interns. Statistical analysis was done by using Microsoft Excel and the results were calculated in percentages. Ethical clearance was taken for this research from Institutional ethical committee. A predesigned and pretested questionnaire form was compiled to capture the relevant information from the interns after obtaining informed consent.

Results

In this cross sectional study, 100 medical interns comprising of 50 males and 50 females participated. The questionnaire consisted of 10 multiple choice

questions about the POCSO Act. According to knowledge based questions (Table no. 1), 76% of medical interns knew what the acronym POCSO Act means. The age of child under POCSO Act was known to 82% participants. 71% participants were aware that POCSO Act is gender neutral. Child helpline number of India was known to 63% of individuals. Only 74% of healthcare individuals were aware that punishment is graded as per magnitude of offence under POCSO Act. Trial of cases under POCSO Act are held at child friendly Special courts was correctly marked by 60% people. 87% of people were aware of the POCSO Act's violations. 79% of participants were aware that failing to disclose child sexual abuse within the required time frame is a serious offence. 90% participants knew that a child cannot be punished for giving false information or false complaint under the provisions of POCSO Act.

Table 1: Knowledge based questions regarding POCSO Act

S. No.	Questions	Correct Response	Incorrect Response
1	What is the full form of POCSO Act?	76%	24%
2	What is the age of child under POCSO Act?	82%	18%
3	Is POCSO Act a gender neutral law?	71%	29%
4	What is child helpline number?	63%	37%
5	Is reporting child sexual abuse mandatory?	95%	05%
6	What is the maximum punishment under POCSO Act?	74%	26%
7	Trials of cases under POCSO Act are held at?	60%	40%
8	What are the offences under POCSO Act?	87%	13%

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9	Is there any time limit for reporting abuse under the POCSO Act?	79%	21%
10	Can a child be punished for giving false information or false complaint under the provisions of POCSO Act?	90%	10%

The current study on interns' attitudes towards child sexual abuse found that while 16% of them believed that the child welfare committee should play a key role, the majority of them- 84% suggested that the community at large, including all organizations- government and non-government should work together to support sexually abused children. According to 23% of participants, it is urgently necessary to start training children in elementary school in order to decrease child sexual abuse. While the majority of healthcare personnel (90%) agree that a coordinated effort of all of the aforementioned steps is necessary, just 38% of respondents believe that severe law enforcement is the most important thing to follow. In contrast, 23% believe that community awareness raising is more vital.

Discussion

In India, POCSO Act 2012 deals with child sexual abuse cases. It is divided into 46 sections and was published in official gazette on 20th June 2012 but came into force on 14th November 2012. Child sexual abuse has gone largely unrecognized and unreported in India for a number of reasons, including fear of embarrassment, guilt, community denial, associated sociocultural stigma, lack of confidence in government agencies, and a communication gap between parents and children about the issue.⁷

87% of the individuals knew various offences under POCSO Act which is similar to study conducted by Kadu et al.⁸ The offences and punishments listed under POCSO Act of 2012, amended in August 2019 are as follows-

1. Sexual Assault- imprisonment of three to five years and fine
2. Penetrative Sexual Assault on child below 16 years of age- minimum imprisonment of 20 years which may extend to remainder of natural life and fine
3. Penetrative Sexual Assault on child of 16 to 18 years of age- minimum imprisonment of 10 years which may extend to imprisonment for life and fine
4. The Aggravated Penetrative Sexual Assault- minimum rigorous imprisonment of 20 years which may extend to imprisonment for life and fine or with capital punishment
5. Aggravated Sexual Assault- imprisonment of five to seven years and fine
6. Sexual Harassment- imprisonment which can extend upto three years and fine
7. Use of child for pornographic purposes- five years and fine and in the event of subsequent conviction, seven years and fine

It is required to report cases of child sexual abuse in accordance with the POSCO statute. Calling the 24-hour toll-free emergency child helpline at 1098 is a simple action anyone who discovers an instance of child sexual abuse in India can do.⁹ Child helpline number of India was known to 63% of individuals. To enhance reporting of such crimes and protect children in India, medical professionals need to be made more aware of this crucial undertaking. In comparison to Yasvanth¹⁰, who discovered that 60% of people were not aware of the punishments mandated for the various offences mentioned by the act, in our study 74% of interns were aware of the maximum punishments described in the POCSO Act 2012.

95% of people were aware of the penalties for failing to report a case of child sexual abuse under the POCSO Act. Not reporting a case of child sexual abuse can result in a punishment of imprisonment of up to 6 months, with or without fine. This was a very encouraging finding. Knowledge about this punishment for doctors is really necessary. Singh et al¹¹ proposed a multi-centric and cohesive approach for the management and prevention of child sexual abuse. It also covers the application of laws and policies, identifying and punishing offenders, providing support for victims, professional training, and medicolegal amenities.

A doctor who treats a victim must show their expertise in taking a victim's history in a way that is child-friendly, gathering evidence after a thorough medical examination, treating any physical or genital injuries that may be present and assessing the victim's mental health and, if necessary, referring them for psychiatric counseling sessions. The victim's age may occasionally need to be assessed by the doctor in absence of ID card such as aadhar card, etc.

Conclusion

Although teaching young children about appropriate and inappropriate touching starts in the primary grades, child sexual abuse can be reduced by increasing knowledge and awareness in the local community. To handle the cases of sexual abuse for a better structural approach and improved outcome, a multidisciplinary approach involving primary healthcare professionals, police officers, legal agencies, lawyers, child welfare committee workers, Paediatricians, Gynaecologists, Forensic experts, Psychiatric specialists, and NGOs is essential. Ensure that POCSO Act knowledge is incorporated into school and university curricula. A youngster who has experienced sexual abuse requires the greatest possible counselling and psychological support. The cases of child abuse in India require a holistic approach from every member of society.

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