

## The Effect of Psycho-Education Program Developed for Sexual Abuse on Counseling Teachers' Reporting Sexual Abuse and Information and Risk Recognition Attitudes

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### ARTICLE INFO

#### Article history

Received: August 14, 2020

Accepted: October 15, 2020

Published: October 31, 2020

Volume: 8 Issue: 4

Conflicts of interest: None

Funding: None

The research has been produced from a scientific research project. SBA-2019-7259, Atatürk University (Project information)

### ABSTRACT

This study aimed to analyze the effect of the psycho-education program for sexual abuse on counseling teachers' attitudes towards reporting sexual abuse and their knowledge and risk recognition levels. The research was by using the embedded design, one of the mixed method approaches. In the quantitative dimension of the study, quasi-experimental design with pretest-posttest groups was performed, while in the qualitative dimension, the opinions of counselors were included. The study group of the research consisted of eight counselors in the experimental group and eight counselors in the control group, working in schools affiliated to the Ministry of National Education. A two-Factor ANOVA model for mixed measurements was utilized to analyze the experimental study. Paired t-test for dependent samples was used to analyze the pretest and posttest scores of the participants. Content analysis was used in the analysis of qualitative data. The quantitative findings of the study showed that the psycho-education program applied to the experimental group displayed a significant difference between the counseling teachers' attitudes towards reporting sexual abuse and their knowledge and risk recognition levels compared to the control group. In the qualitative results of the study, it was observed that the counselors classified the characteristics of children at risk in terms of exposure to sexual abuse under the two themes of family factors and lack of social skills. In another result, it was discovered that children exposed to sexual abuse displayed behavioral and emotional symptoms. It is thought that the training that counselors will receive in schools on sexual abuse will be beneficial for the protection of the mental health of children and young people.

**Key words:** Child, Abuse, Counselors, Psycho-Education Program, Sexual abuse

### INTRODUCTION

Child neglect and abuse are considered a problem that carries the potential to affect millions of children around the world and causes irreparable results in many aspects of the child's psychological, cognitive, physical, emotional, and social issues. Child neglect is stated as the inability of people obliged to care for the child to adequately meet the child's needs, such as care, nutrition, clothing, education, love, and protection, and leaving the child alone in this regard (Pelendecioğlu and Bulut, 2009). On the other hand, child abuse is the intended or unconscious display of harmful and risky behaviors by adults or institutions responsible for the child's development, which have adverse medical, psycho-social, and developmental effects (Leetch and Woolridge, 2013; Savi Çakar and Yazıcı Okuyan, 2017). Child sexual abuse is one of the types of abuse that can be witnessed in all societies worldwide and has become a universal problem. Child sexual abuse is the inclusion of the child in sexual activity by applying threats and pressure to achieve sexual pleasure by an adult or someone older than the child (Işık and Demircioğlu, 2019; Walsh,

Zwi, Woolfenden and Shlonsky, 2018). In cases of sexual abuse of children forcing into sexual intercourse, oral-genital contact, exhibitionism, violence for sexual pleasure are frequently encountered (Adams, Mrug and Knight, 2018; Koçtürk, 2016). In children, after such events, there occur signs of abuse such as showing excessive interest or indifference to sexual matters, exhibiting sexual behaviors, pissing themselves despite having gained toilet habit, trying to touch their genitals, encountering features that suggest sexual abuse in their games (Armour, Elklit ve Christofferson, 2014; Gümüş, 2017; Ulukol, 2013).

In cases of sexual abuse, the acts of sexual abuse being hidden for years, and the symptoms not being recognized by people close to the child (family, teacher, friend, etc.) have more adverse effects on children in terms of psychological and physiological health in the long term than other types of abuse. In the researches, fear, and anxiety (Musliner and Singer, 2014), emotional disintegration due to trauma (Gullbritt, Barbro, and Karin, 2013), withdrawal in relationships with family and friends (Alpaslan, 2014), increased

feelings of shame and guilt due to the thought of holding oneself responsible for the incident (Herman, 2011) are encountered in children who are victims of sexual abuse. Adolescent who were sexually abused in childhood are prone to personality disorder (Izdebeska, 2020), substance addiction (Mendoza Melendez, Cepeda, Frankeberger, Lopez-Macario ve Valdez, 2018), suicide attempts (Van Der Kolk, 2018) and risky sexual behaviors (Daspe, Vaillancourt-Morel ve Sabourin, 2018). School administrators and teachers have a significant effect on recognizing and preventing sexual abuse cases in schools where children spend most of their time other than their families. Teachers and administrators must have knowledge and awareness of sexual neglect and abuse, considering the risk of children at all levels of education being exposed to such negative experiences. School counselors/psychological counselors are among the groups of teachers that have a critical role in recognizing the difficulties experienced by children in schools and determining the solutions. Counselors have some responsibilities in terms of having sufficient knowledge about sexual abuse of children, in recognizing the risk factors and mainly in taking necessary steps to report the abuse. The most significant problem encountered by counselors at the point of reporting sexual abuse cases is the indecision they experience between taking a direct preventive intervention and whether to report the incident to the authorities (Koca, 2011). Besides, increasing concerns due to whether or not to report a sexual abuse case by oneself, whether the abuse case is correct, considering one's own life safety, the reactions of the student's guardian, being accused of lying, and the lack of information about which authorities to make the notice cause the notification process on the part of the counselors to be even more complicated. (Lambie, 2005; Kürklü, 2011). In order to prevent all these concerns that may arise during the notice process, teachers need to be aware of the abuse to report abuse cases to the authorities and develop a positive attitude in reporting it (Kenny and McEachern, 2008).

Dündar and Hareket (2017) attribute the erroneous attitudes and concerns they encounter during the reporting process of sexual abuse cases against children to the lack of knowledge of counselors about neglect and abuse and their inability to recognize risk factors on behalf of children. It is critical for counselors, who carry out a significant role in preventive mental health services in schools, to possess information about child neglect and abuse, and recognize risk factors for children. Most children explain cases of neglect and abuse that they do not tell their families and that the classroom teacher cannot recognize to the counselor, whom they see as a trustworthy person at school. It is also emphasized that the counselor should know what to do about the relevant case and the risk situations experienced on behalf of the child after this sharing (Uçar, Yıldız, Dursun-Bilgin, and Baştemur, 2020). However, many school counselors lack knowledge in recognizing sexual abuse cases, evaluating risk factors, and directing them (Uşaklı, 2012). In the researches conducted, counselors stated that this lack of information they experienced was due to the limited education for many other types of neglect and abuse including sexual abuse in both university

and professional life (Bahadır-Yılmaz, 2013; Doğan, 2016; Walsh, Mathews, Rassafiani, Farrell, and Butler, 2012).

In order to understand the experiences of child victims of sexual abuse, counselor teachers are expected to have the skills to communicate effectively and manage the traumatic situation. In other words, it is thought that counselors should know basic skills related to emotional literacy. This can be achieved by improving the emotional literacy skills of counselors. Especially today, the concept of literacy is used to mean having knowledge in a specific field (Mader, 2005). In this context, school counselors should have emotional literacy knowledge about sexual abuse in order to understand the experiences of children exposed to sexual abuse.

These training sessions also contribute to teachers' knowledge and risk recognition levels on negligence and abuse and their responsibilities in the reporting process. Once again, thanks to the training to be received, teachers become more sensitive to children's rights as well as understanding their duties and responsibilities and provide similar training to students, parents, and teachers, thereby increasing personal awareness.

### **Research Purpose**

This study aimed to investigate the effects of the psycho-education program developed for sexual abuse on the attitudes of counselors towards reporting sexual abuse and their knowledge and risk recognition levels about child sexual abuse and neglect. In line with this general-purpose, answers were sought for the following sub-problems:

1. Do the attitudes of the counselor teachers participating in the psycho-education program towards reporting sexual abuse display a significant increase compared to the counselors in the control group?
2. Do the knowledge and risk recognition levels of the counselor teachers participating in the psycho-education program about child sexual abuse and neglect display a significant increase compared to the counselors in the control group?
3. What are the risk factors for children to be sexually abused according to counselors?
4. How do counselors understand that children are sexually abused?
5. What are the views of counselors on the effects of eye movement desensitization (EMDR) and Cognitive Therapy on children who were sexually abused?
6. What are the opinions of the counselor teachers on the implementation of the psycho-education program?

### **METHOD**

#### **Research Model**

The research was designed using an embedded design, one of the mixed-method approaches. Mixed-methods are a means of collecting, analyzing, and applying qualitative and quantitative data within a defined approach (research design or methodology) (Creswell and Garret, 2008). In the embedded design, one of the qualitative or quantitative methods is dominant, and the

other supports it. The reason for the use of embedded design in this study is that it is important to determine the perceptions of the counselor, since the use of an experimental design in the intervention of sexual abuse cases alone is not sufficient. Besides, it was preferred to apply a quasi-experimental design in the quantitative dimension of the research and the phenomenology design in the qualitative part.

### Study Group

An announcement was made from the Guidance Research Center after obtaining legal permission from the Erzurum Provincial Directorate of National Education to determine the counselors in the study group. Within the scope of the research, for the selection of the participants in the experimental and control groups, a scale of knowledge and risk recognition levels of child sexual abuse and neglect and teachers' attitudes towards reporting child sexual abuse scale were used. Considering the scores obtained from both scales, 8 individuals were randomly assigned to the experimental group and eight to the control group. The ages of the study participants ranged from 22 to 25. Fifteen of the participants in the research were female, and one was male.

In the qualitative part of the study, eight counselors were interviewed. A maximum variety of sampling method was applied to determine the counselors to be interviewed. This sampling method was preferred since it allows for in-depth research.

### Data Collection Tools

#### *Personal information form*

A personal information form was used to collect information about the counselors' age, gender, professional seniority, graduation program, and demographic variables.

#### *The Questionnaire for determining the knowledge and risk recognition levels of teachers on child abuse and neglect*

The questionnaire was developed by Dilsiz and Mağden (2015). The questionnaire consists of 53 items and five sub-dimensions, which are neglect, physical abuse, sexual abuse, risk recognition in abuse and neglect, and behavioral symptoms of children. In this study, the sexual abuse dimension was used. The Cronbach's alpha internal consistency reliability coefficient of the sexual abuse sub-dimension was determined as .94.

#### *The Turkish psychometric properties of teachers' attitudes towards reporting child sexual abuse scale*

The scale was developed by Ekşi, Koç, and Türk (2018). The scale has three sub-dimension, which are committed to the reporting role, confidence that the system will respond effectively to reporting, and worry about the consequences of reporting. Cronbach's alpha internal consistency reliability coefficient of the scale was determined to be .84 and for the sub-dimensions. .79, .60, and .77, respectively. High scores

obtained from the scale show the positive attitude of teachers towards reporting sexual abuse. In this study, the scale was evaluated by taking the total score.

#### *Semi-structured interview form*

For examining the opinion of the counselor teachers concerning the child and adolescents who are the victims of abuse and their views on the determination of their intervention approaches, face-to-face interviews were held with eight counselors. Interview technique is used to learn about past events that will not repeat. A semi-structured form consisting of two open-ended questions was applied in the interviews. The final form was given to the interview form after conferring with two experts in Guidance and Psychological Counseling and one from educational sciences.

#### *Reflective diaries*

In this study, after some sessions in which the experimental research was applied, reflective diaries were kept to evaluate the feelings, thoughts, observations, and impressions about the intervention program. Reflective diaries were used to provide a supportive contribution to the analysis of the data.

#### *Camera recordings*

In applying the psycho-education program to the counselor teachers, the data were recorded with a camera to collect the data appropriately and avoid data loss. Accordingly, a computer camera was used. With the Zoom program, the work was conducted online, and the interviews were recorded. The camera recordings were re-examined in writing the findings and used in the writing of the interview results.

### The Experimental Process

#### *Content of the psychoeducation program prepared for teachers*

The psycho-education program prepared was applied to the experimental group by the researcher twice a week for five weeks, with an average session duration of 70 minutes. Due to the pandemic period, sessions were not held face-to-face. They were held in the form of a video conference using the Zoom program. The subject nature of the sessions is given in Table 1:

### Data Analysis

#### *Analysis of the quantitative data*

For the experimental study analysis, 2x2 (experimental/control groups X pretest/posttest) two-factor ANOVA model was used for mixed measurements. In this design, the first factor reveals the experimental treatment groups (experimental and control groups), and the second factor shows repeated measures (pretest and posttest measurements) of the dependent variable. To define in which groups the difference determined in the variance analysis was significant, the dependent samples t-test was applied to compare the scores obtained from the pretest and posttest measures. The SPSS

22 program was used for the statistical calculations of the analyses. In the study, the statistical analyses of the findings were based on the significance level of .05.

**Analysis of qualitative data**

The researchers' and counselors' diaries were transferred to the computer environment by the researcher. Before the content analysis, the audio recordings obtained from the interviews with the participants were converted into written documents with the participants' permission. Semi-structured interview form and reflective diaries were utilized to support quantitative data within the scope of the research. In parenthetical coding, the first letter defines the code given to the interviewees. The number next to the first letter is the number assigned to the interviewee, the second number represents the age of the participant, and 'F' is the female teachers. Yıldırım and Şimşek (2006) expressed content analysis as collecting related data within the framework of specific concepts and themes and interpreting them in a way that the reader can comprehend. The content analysis includes the processes of coding data, finding themes, organizing codes and themes, defining and interpreting the findings (Glesne, 2015). Nvivo 12 program was used to analyze the data obtained from semi-structured interviews, reflective diaries, and counselor diary.

Some strategies were carried out to examine the consistency of the results obtained in the qualitative study with the data collected. Strategies such as credibility, transferability, consistency, and verifiability stated by Lincoln and Guba (1986) were used to increase the quality of the data collected for the qualitative dimension of the study. For credibility, several data collection sources such as semi-structured

interviews, reflective diaries, and camera recordings were used, apart from focus group meetings with the participants. The research data were confirmed by the participants, and the accuracy of the results was considered. For transferability, the data were described in detail, and direct quotations were used. For the consistency of the data obtained in the study, the recording was done to collect and analyze the data. In coding and thematizing data, attention was paid to find the themes according to the meaningful relationship between them by bringing together the codes related. For verification, the raw data of the research were organized in the computer environment. These raw data received feedback from two faculty members who are experts in this field regarding the study's planning, data collection, analysis, and evaluation.

**Ethical Process**

Ethical permission for the study was obtained from the Atatürk University Educational Sciences Ethics Committee on March 11, 2019. Besides, permission was obtained from Erzurum Provincial Directorate of National Education on March 08, 2019, to carry out psycho-education study for counselors. All procedures in human studies were carried out in line with the 1964 Helsinki declaration and its subsequent amendments or comparable ethical standards.

**RESEARCH FINDINGS**

**Findings Regarding the Quantitative Data**

In this part of the study, experimental research results on the effects of the psycho-education program towards sexual abuse on the attitudes of counseling teachers towards reporting sexual abuse, and their level of knowledge and risk recognition about abuse were covered.

**Findings regarding the attitudes of teachers towards reporting sexual abuse**

The arithmetic means and standard deviations of the scores achieved by the participants in the experimental and control groups of the study in attitudes towards reporting sexual abuse before and after the application are given in Table 2.

As seen in Table 2, while the mean score of the counseling teachers participating in the psycho-education program regarding their attitude towards reporting sexual abuse (ATRSA) before the experiment was 27.50, this value was found to be 40.88 after the experiment. In the control group, the pre-experiment ATRSA score was 29.75, and this value was 28.88 after the experiment. According to this result, it

**Table 1.** Content of the Psycho-education program

Session	Content
1	What are the risk factors, types of abuse, and sexual abuse indicators that affect abuse? What is sexual abuse?
2	What are the types of sexual abuse? Who can be sexually abused? What is the impact of sexual abuse on individuals?
3	What are the risk factors affecting sexual abuse? What are the developmental consequences of sexual abuse?
4	What are the duties and responsibilities of the school administration in sexual abuse?
5	What should the parent do in case of sexual abuse?
6	What should a school counselor do in case of sexual abuse?
7	What are the activities to be done to people who have been exposed to sexual abuse?
8	According to cognitive behavioral therapy, how can an individual exposed to sexual abuse be intervened?
9	How can an individual exposed to sexual abuse be intervened with EMDR therapy?
10	Evaluating the program content and completion

**Table 2.** Arithmetic mean and standard deviation values of the experimental and control groups' attitude towards reporting sexual abuse scale

Groups	Pretest			Posttest	
	N	M	SD	M	SD
Experimental	8	27.50	7.23	40.88	4.12
Control	8	29.75	3.85	28.88	3.94

can be stated that there was an increase in the mean ATRSA score of the experimental group and a minimal decrease in the control group. Two-factor ANOVA results concerning whether the changes observed in the ATRSA scores of the counselor teachers before and after the experiment show a significant difference are presented in Table 3.

As seen in Table 3, the ATRSA scores of the participants participating in the psycho-education program display a significant difference from before to after the experiment. In other words, the group effect was observed to be significant in the participants' mean scores in the experimental and control groups in the ATRSA pretest and posttest measurements ( $F_{(1,14)} = 19.06; p < .05$ ). Among the groups, 58% of the change in the level of attitude towards reporting sexual abuse during the measurements can be explained by the experimental procedure ( $\eta^2 = .58$ ).

Findings obtained from the ANOVA analysis showed that there was a significant difference between the groups in terms of the measurements. The source of this difference determined in the study was examined through a t-test for dependent variables. When the t-test results for dependent variables were examined, it was discovered that the experimental group's ATRSA posttest mean scores ( $M=40.88$ ) were significantly higher than the pretest ( $M=27.50$ ) mean scores ( $t_{(7)} = 5.00; p < .05$ ). It was seen that there was no significant difference between the pretest mean score of the experimental group ( $M=27.50$ ) and the pretest mean score ( $M=29.75$ ) of the control group ( $t_{(7)} = -.66; p > .05$ ). It was determined that the posttest mean score ( $M=40.88$ ) of the experimental group was significantly higher than that ( $M=28.88$ ) of the control group ( $t_{(7)} = 6.62; p < .05$ ). The pretest and posttest measurement changes of ATRSA by groups are given in Figure 1.

When Figure 1 is examined, it is observed that the attitude towards reporting sexual abuse scores of the counselor teachers in the experimental group increased from pretest to posttest. In the control group, a slight decrease from pretest to posttest was observed. It is seen that the lines on the graphs are not parallel or overlapping. Thus, it can be assumed that the F value of the collective effect found as a result of the variance analysis reflects the significant differences.

### Findings regarding teachers' knowledge and risk recognition levels on child abuse and neglect

The arithmetic means and standard deviations of the participants' scores in the experimental and control groups of the study regarding the measurement of knowledge and risk

recognition levels on child abuse and neglect before and after the application are given in Table 4.

As seen in Table 4, while the mean score of the counseling teachers participating in the psycho-education program was 50.88 on the pre-experiment knowledge and risk recognition level scale (CSKRCS), this value was 64.88 after the experiment. In the control group, while pre-experiment CSKRCS was 53.75, this value was 51.63 after the experiment. According to this result, it can be stated that there was an increase in the CSKRCS mean score of the experimental group and a minimal decrease in the control group.

ANOVA results regarding whether the changes observed in the CSKRCS scores of the counselor teachers before and after the experiment indicated a significant difference or not are presented in Table 5.

As a result of the analyses, a significant difference was observed between the CSKRCS pretest and posttest scores of the participants ( $F_{(1,14)} = 12.28; p < .05$ ). The posttest scores of the counselor teachers were significantly higher than their pretest scores. A significant difference was discovered between the mean scores of the experimental and control groups ( $F_{(1,14)} = 4.85; p < .05$ ). Besides, measurement and group joint effects were investigated in the study. This effect was found to cause a significant difference between groups ( $F_{(1,14)} = 22.65; p < .05$ ). The experimental procedure can explain 62% of the change in the CSKRCS level observed between the groups during the measurements ( $\eta^2 = .62$ ). It can be assumed that the psychoeducational program applied caused a difference in the CSKRCS scores of the counselors.

Findings obtained from the ANOVA analysis showed that there was a significant difference between the groups in terms of the measurements. The source of this difference determined in the study was examined through a t-test for dependent variables. When the t-test results for the dependent variables were analyzed, it was discovered that the experimental group's CSKRCS posttest mean scores ( $M=64.88$ ) were significantly higher than the pretest mean scores ( $M=50.88$ ) ( $t_{(7)} = 20.55; p < .05$ ). It was observed that there was no significant difference between the experimental group's SANKRRL pretest mean scores ( $M=50.88$ ) and the control group's pretest mean scores ( $M=53.75$ ) ( $t_{(7)} = -1.50; p > .05$ ). It was determined that the posttest mean score of the experimental group ( $M=64.88$ ) was significantly higher than the posttest mean score ( $M=51.63$ ) of the control group ( $t_{(7)} = 3.45; p < .05$ ). The representation of the pretest and

**Table 3.** ANOVA Results of ATRSA pretest-posttest scores

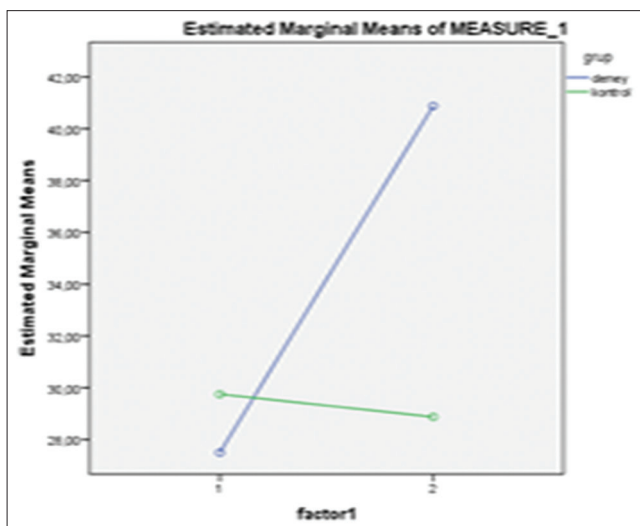
Source of the variance	Sum of squares	Df	Sum of squares	F	p	Eta-Square ( $\eta^2$ )
Intergroup	589	15				
Groups (Experimental/Control)	190.125	1	190.125	6.67	.02	.32
Error	398.875	14	28.491			
Intragroup (Subjects)	1017	16				
Between measurements (pretest-posttest)	312.500	1	312.500	14.66	.02	
Group*Measurement Interaction	406.125	1	406.125	19.06	.001	.58
Error	298.375	14	21.313			

posttest monitoring measurement changes of CSKRCS by groups is shown in Figure 2.

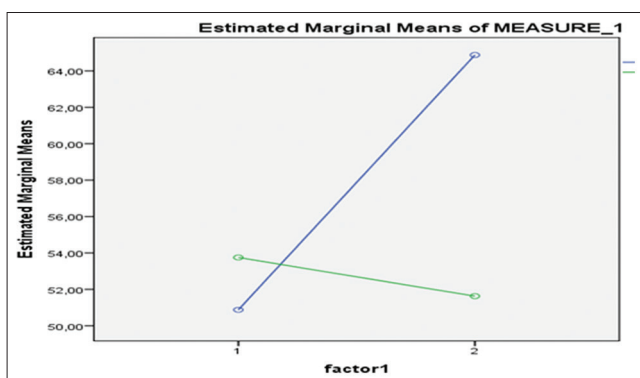
When Figure 2 is examined, it is noticed that there is an increase in the teachers' knowledge and risk recognition levels on child abuse and neglect scores of the counseling teachers in the experimental group from the pretest to the posttest. In the control group, a slight decrease from pretest to posttest was observed. It is seen that the lines on the graphs are not parallel or overlapping. Thus, it can be assumed that the F value of the collective effect found as a result of the variance analysis reflects the significant differences.

**Table 4.** Arithmetic mean and standard deviation values regarding the knowledge and risk recognition levels of the experimental and control groups on sexual abuse and neglect

Groups	Pretest			Posttest	
	N	M	SD	M	SD
Experimental	8	50.88	1.88	64.88	1.45
Control	8	53.75	5.63	51.63	9.86



**Figure 1.** Representation of Changes in Attitude towards Reporting Sexual Abuse Pretest-Posttest Measurement by Groups



**Figure 2.** Teachers' Knowledge and Risk Recognition Levels on Child Abuse and Neglect Pretest - Posttest Measurement by Groups

### Findings Regarding Qualitative Data

In this part of the study, the data obtained from the pre and post interviews with the school psychological counselors to interpret the qualitative subsections' findings were analyzed and interpreted in line with the sub-problems.

#### Findings regarding the views of counselors regarding the risk factors in sexual abuse of children

The sub-problem about the risk factors in sexual abuse of children according to the counselors was assessed with content analysis. As a result of the analysis, counselors' evaluation of the characteristics of children at risk of being exposed to sexual abuse was grouped under two themes as a family factor and a lack of social skills. The theme and code distribution resulting from the content analysis is shown in Figure 3.

When Figure 3 is reviewed, it is observed that after the interviews with the counselors, the psychological counselors grouped the risk factors in sexual abuse under the family factor and lack of social skills categories. Some examples of counseling teachers' views on the family factor in sexual abuse are as follows: (M3-22-F): "For example, neglect may be emotional, psychological or physical neglect of the child. So it can be both in terms of care and love. You see, negligence will inevitably lead to abuse. For example, a child who cannot find love at home can look for it in different ways outside. Unfortunately, the child becomes vulnerable to abuse in this case."

(M1-23-F): "Sometimes children can be harmed as a result of hostility to that family. Again, it can be like feuds and terror, in terms of damaging."

(M4-24-F): "Cultural and social risks, for example, are widespread in prisons, and I think this is the risk too."

(M8-25-F): "I think parental attitudes definitely affect."

Some of the views of the psychological counselors concerning the lack of social skills are as follows:

(M7-25-F): "Since mentally disabled children will not be able to complain or remember the abuser, I seriously think they are a risk group in the society."

(M6-24-F): "The child thinks that because he/she does not trust himself/herself, nobody will believe him/her and he/she cannot protect himself/herself against the abuser."

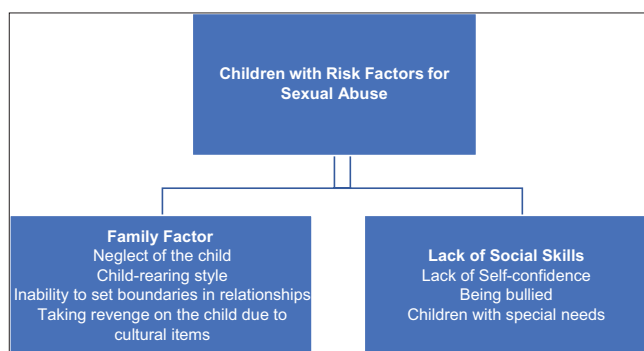
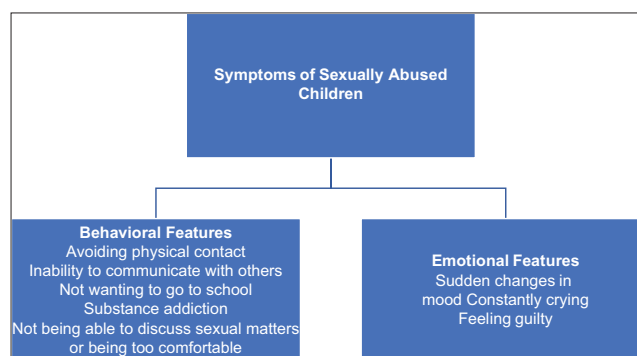
(M5-23-F): "It may be high in students who cannot defend their rights, have poor problem-solving and coping skills."

#### Views of counselors regarding how children understand the symptoms of sexual abuse

The sub-problem regarding the symptoms of sexual abuse in children was evaluated by content analysis by receiving the counselors' opinions. As a result of the analysis, the symptoms of children exposed to sexual abuse were grouped under two themes as behavioral and emotional characteristics. The theme and code distribution following the content analysis is shown in Figure 4.

**Table 5.** ANOVA results teachers' knowledge and risk recognition levels on child abuse and neglect pretest-posttest scores

Source of the variance	Sum of squares	Df	Sum of squares	F	p	Eta-Square ( $\eta^2$ )
Intergroup	836.968	15				
Groups (Experimental/Control)	215.281	1	215.281	4.85	.045	.26
Error	621.687	14	44.41			
Intragroup (Subjects)	1123.49	16				
Between measurements (pretest-posttest)	282.031	1	282.031	12.28	.01	.47
Group*Measurement Interaction	520.031	1	520.031	22.65	.01	.62
Error	321.427	14	22.96			

**Figure 3.** Risk factors for child sexual abuse**Figure 4.** Symptoms of Sexually Abused Children

When Figure 4 is reviewed, it is observed that the counselors grouped the symptoms of sexually abused children under behavioral and emotional characteristics categories. Some examples from the views of school counselors regarding behavioral symptoms in sexual abuse are as follows:

(M5-23-F): "It is especially so if it's someone who has been sexually abused as he/she knows too much about sexuality. For example, it might be a sign that a kindergarten student knows more than he/she should know."

(M2-23-F): "Yes, I think if the child does not make eye contact when someone approaches him/her, s/he covers his/her face; if s/he is startled, these may be signs of abuse."

(M6-24-F): "I think children and adolescents with substance addiction are at risk of being abused."

(M8-25-F): "Some were abused in childhood and this leaves traces in their personality. There may be symptoms such as depression, school anxiety, introversion, inability to talk with people in the social environment."

Some of the views of psychological counselors concerning emotional symptoms in sexual abuse are as follows:

(M7-25-F): "If the child leaves the regular behavioral pattern and exhibits emotional problems, then we may be suspicious."

(M1-23-F): "Those at the kindergarten level who do not participate in a game, stop sometimes, have a crying fit, and those who have disrupted night sleep may have symptoms."

### **Counselors' views on the effects of emdr and cognitive therapy on child victims of sexual abuse**

The sub-problem of the counseling teachers' views concerning the effect of EMDR and cognitive therapy on

children who are victims of sexual abuse was evaluated by content analysis. As a result of the analysis, the effect of EMDR and Cognitive Therapy on children exposed to sexual abuse was grouped under two themes as therapeutic intervention and effect. The theme and code distribution resulting due to the content analysis is shown in Figure 5.

When Figure 5 is reviewed, it is observed that the counselors grouped the effects of EMDR and cognitive therapy on children exposed to sexual abuse under the effect and therapeutic intervention categories. Some examples of the views of the school counselors concerning the effect category are as follows:

(M2-23-F): "It really makes sense to constantly process negative memories and reduce their impact to almost zero. I am thinking of getting the training of both approaches."

(M8-25-F): "For EMDR therapy, the right brain and left brain being active is very functional. Besides, talking about intermediate and basic beliefs within cognitive distortions in cognitive therapy has been very effective."

Some of the views of psychological counselors for therapeutic intervention are as follows:

(M6-24-F): "In cognitive-behavioral therapy, setting objectives one by one can take a long time. But in EMDR therapy, we study both the past, the present, and the future. At the same time, there can be transitions between memories. I see this as an advantage."

(M5-23-F): "Cognitive-behavioral therapy is a little longer. As it extends over time, it may have less effect on traumatic events."

(M3-22-F): "If we use cognitive behavioral therapy and EMDR therapy together, it may be useful in solving the problems."

(M1-23-F): "In EMDR therapy, it seems practical to switch to the counselee's memories. In cognitive therapy, it doesn't happen right away. It takes three to four sessions to catch automatic beliefs and intermediate beliefs."

**Counselors' views concerning the effect of psycho-education program on themselves**

The sub-problem about the effect of the psycho-education program that the counselors attended on them was evaluated by content analysis. As a result of the analysis, the psycho-education program's effect on the counseling teachers was gathered under three themes as preventive work, obtaining information, and psychological factors. The theme and code distribution resulting from content analysis is shown in Figure 6.

When Figure 6 is examined, it is observed that the effect of the psycho-education program that the counselors attended is gathered under the categories of preventive, obtaining information, and psychological factors. Some examples of the counselors' views on preventive work are as follows:

(M5-23-F): "From these studies, I learned how important it is to conduct preventive studies, primarily for students in the risk group, before a case occurs."

(M8-25-F): "What I have learned for children at risk, mainly those who stay alone in the classroom, who are excluded, who are bullied, who cannot defend themselves, and who have low coping skills will be effective."

Some of the views of the counselors about getting information are as follows:

(M7-25-F): "At least the most crucial part for me about abuse is what we will do legally. I think we are well informed about it."

(M2-23-F): "It was so good to learn about our duties and responsibilities. I thought, the whole thing was on our shoulders. For example, it was very comforting to learn that there are trauma intervention teams and guidance services execution commission in schools."

Some of the counselors' views on psychological factors are as follows:

(M6-24-F): "It gave me extreme self-confidence to learn that the information I heard from others is not correct; everything is under a legal obligation and guaranteed."

(M3-22-F): "Before this training, I was very confused. I did not know what to do if I faced such a situation. I was a little worried. After the training, I felt good. I was happy. In short, I can say that my courage has increased. If such a case occurs, I believe I will overcome it successfully."

**DISCUSSION AND CONCLUSION**

In this section, the results obtained based on the research findings are included in the discussion by assessing the results.

**Discussion and Conclusion Regarding Quantitative Findings**

In this part of the study, experimental research results on the effects of the psycho-education program towards sexual abuse on the attitudes of counseling teachers towards

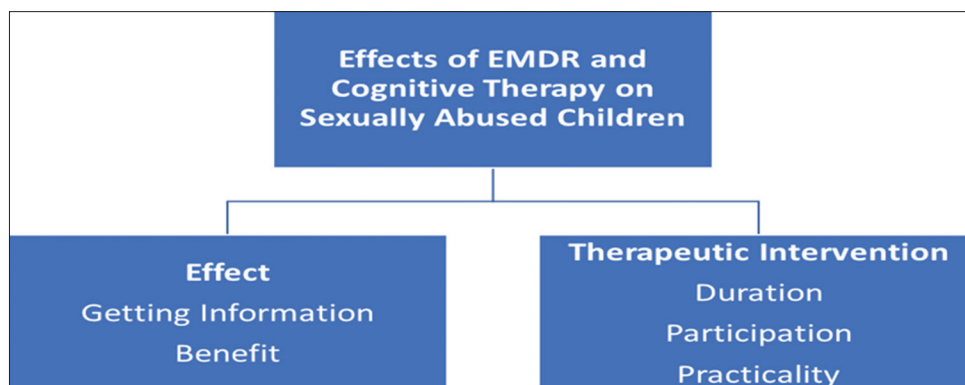


Figure 5. The effect of EMDR and cognitive therapy

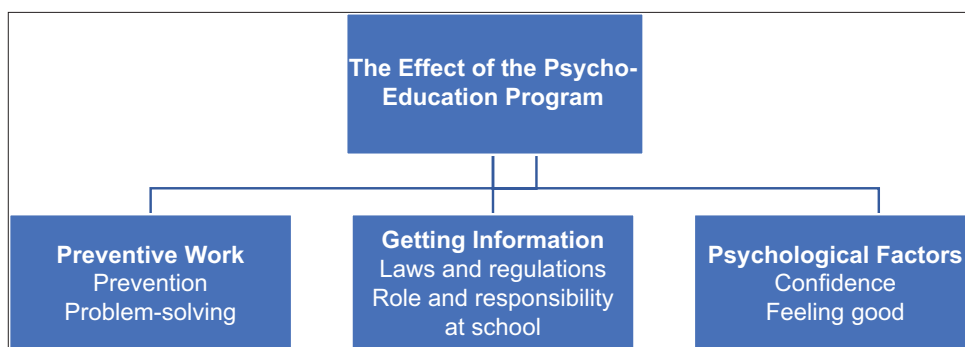


Figure 6. The Views of Counselors Regarding the Implementation of the Psycho-Education Program



reporting sexual abuse, and their level of knowledge and risk recognition about abuse are covered.

### ***Discussion and conclusion regarding the attitudes of counselors towards reporting sexual abuse***

While there was no significant difference between the scores of the counseling teachers in the experimental and control groups obtained from the scale for reporting sexual abuse before the application, a significant difference between the scores of attitudes towards reporting sexual abuse after the application was observed in favor of the teachers in the experimental group. With this result, it can be assumed that the psycho-education program conducted in the experimental group had a positive effect on increasing the attitudes of the counselors towards reporting sexual abuse. When the researches were examined, it was seen that awareness studies conducted for reporting sexual abuse were beneficial for counselors on establishing effective relationships with victim students (Mitchell, 2010), easily understanding behavioral changes in children who are victims of sexual abuse (Wurtele and Kenny, 2010), differentiating the ways to follow in the reporting process (Page and Page, 2011; Bilge, Taşar, Kılınçoğlu, Özmen, and Tıraş 2013), encountering less legal problems related to reporting obligation (Aksel and Yılmaz-Irmak, 2015) issues. Eren-Gümüş (2016) also discovered that teachers who participated in the practice program of defining the first interview framework for reporting suspicion of sexual abuse and creating a written source encountered less difficulty in the reporting process. In this context, the research findings in the literature support the current research results.

The counseling teachers knowing children and building close relationships at schools imposes specific responsibilities on reporting the sexual abuse incident and coping with the student's adverse emotions after the case. However, counselors' misinformation and attitude regarding sexual abuse intervention and legal notification obligations create some legal sanctions on their behalf. Primarily the fear of encountering negative experiences after false reporting, the desire to stay away from the case and erroneous thoughts of having no legal responsibility to report the incident are among the main reasons of legal sanctions (Dereobalı, Çırak-Karadağ, and Sönmez, 2013). The anxiety of encountering legal sanctions also causes the counselor to see oneself inadequate in a similar case and develop negative professional and personal associations. The research findings and the results in the literature show the contribution of the training to be provided to the counselors in reporting sexual abuse cases for obligations and consultancy services in cases of abuse.

### ***Discussion and conclusion regarding counseling teachers' knowledge and risk recognition levels on child abuse and neglect***

There was no significant difference between the scores of the counseling teachers in the experimental and control groups on the scale regarding their knowledge and risk recognition levels about child abuse and neglect before the application.

After the application, there was a significant difference in favor of the teachers in the experimental group. With this result, it can be stated that the psycho-education program carried in the experimental group positively increased the knowledge and risk recognition levels of the counselors about child abuse and neglect. Although child abuse and neglect have an individual impact on the child, it profoundly affects the family and society where the child is and causes emotional and social difficulties. Considering the lifelong effects of neglect and abuse experienced during childhood, counseling teachers who share such negative experiences with students or cause cases to be revealed must have sufficient knowledge to identify instances of neglect and abuse and to address risk factors. This is because, after neglect and abuse, counselors play an active role in the rehabilitation process of traumatic experiences in the child, family, and other students. Counselors, who possess sufficient knowledge about child abuse and neglect and have a high level of risk recognition will be successful in recognizing the sudden emotional withdrawals in the child, the scars on the visible parts of the body, academic failures, acts such as aggression and anger. At the same time, the counselor will provide a suitable conversation environment by making the victim feel safe (Tugay, 2008). For the counselor teachers to carry out these works and processes in a healthy way, their knowledge and risk recognition levels about child abuse and neglect should be adequate. When the studies conducted in the literature are examined, Pitts (2015) observed that teachers who participated in studies aimed at reducing risk factors in cases of neglect and abuse were more successful than other teachers in problem-solving caused by different experiences of neglect and abuse. It was stated that teachers who participated in awareness studies on risk factors that reveal negligence and abuse found themselves more competent in responding to possible similar cases (Adamo, 2011; Müderrisoğlu, Dedeoğlu, Akço, and Akbulut, 2014). Doğan and Bayar (2018) determined that counselor teachers who got sexual abuse training had an advantage over their colleagues in identifying the negligence and abuse they faced in the profession and knowing the risk factors. Therefore, the research findings coincide with the results of the study.

### **Discussion and Conclusion Regarding Qualitative Findings**

In this section, the results and discussions of the qualitative findings obtained to support the research's quantitative findings are included. After the interviews with the counselors, the sub-problem about the risk factors in sexual abuse of children was assessed with content analysis. As a result of the analysis, two different categories were formulated regarding the risk of exposure to sexual abuse as a family factor and a lack of social skills. However, it was noted that teachers generally stated their opinions on the family factor and focused on parents' responsibilities. The teachers, who also discussed the risk of lack of social skills, which is the other category, made evaluations about the content of the associated risk factor. These evaluations were similar to the statements in the psycho-education program implemented

for teachers by Orak (2015). Paslı (2017), in his study on family risk factors in sexual abuse, classified these factors as problems in communication within the family, the rearing of the child, and factors arising from incorrect norms and beliefs related to the culture. Veenema, Thornton, and Corley (2015) stated that children with different disabilities are at high risk of being abused due to the difficulties they undergo in forgetting the case and expressing themselves. The most fundamental way to prevent sexual abuse is to identify the individual and social risk factors on behalf of children. Identifying the risk factors will speed up the early discovery and intervention process of abuse on behalf of counselors. Teachers' views and related research results in the study also support the idea that knowing and identifying possible risk situations in sexual abuse and supporting intervention methods with similar psycho-education studies contribute significantly to the teachers' awareness of the cases and the intervention process.

In the other sub-problem finding of the study, the counselors' views on how to recognize the symptoms of sexual abuse of children were evaluated by content analysis. After the analysis, the understanding of sexual abuse symptoms was classified as behavioral and emotional symptoms. Children who may be victims of sexual abuse might have behavioral symptoms such as inability to make eye contact, substance addiction, and talk about sexual issues for a long time, and emotional symptoms such as frequent crying crises. Studies show that sexual abuse is classified as purposeful, non-verbal behaviors (substance addiction, withdrawal from social environments, leaving home) and involuntary negative emotions (experiencing intense anger, crying, feeling guilty for no reason) in behavioral disclosure (Alaggia, 2010; Ayeş-Aslan and Çelik, 2020). Although physical and emotional symptoms provide a significant clue in cases of sexual abuse, supplementing it with other symptoms can make the situation easier to be revealed. Besides, sexual abuse symptoms may differ in each child. Thus, providing similar training programs to more people working with children can be effective in fighting abuse.

In another sub-problem of the study, the counselor teachers' views on the effects of EMDR and cognitive therapy on children who were victims of sexual abuse were evaluated with reflective diaries. As a result of the evaluation of the reflective diaries, the effect of EMDR and cognitive therapy was described as therapeutic intervention and effect. In the therapeutic intervention part, the two therapeutic approaches were compared in terms of their application in abuse cases. In contrast, in the effect part, the teachers mostly discussed the effects of EMDR therapy. Lahad, Farhi, Leykin, and Kaplansky (2010) concluded that EMDR and cognitive behavioral therapy had similar effects on traumatized individuals who were sexual abuse victims. In a related study, it was observed that both therapy applications were effective in reducing stress and increasing positive behavior in children who were sexual abuse victims (Jaberghader, Greenwald, Rubin, Zand, and Dolatabad, 2004). Trauma-focused EMDR therapy and cognitive behavioral therapy are known to affect therapeutic studies for children after sexual abuse positively. Primarily, EMDR therapy's handling negative memories

with information processing theory and its faster recovery responses than other therapy approaches can be effective in intervention services for sexual abuse cases. Cognitive-behavioral therapy's ability to replace automatic thought errors and cognitive distortions of individuals with alternatives in traumatic events is effective in counseling services for abuse cases. The evaluations conducted by counselors for two therapy approaches and other research findings reveal that both therapeutic approaches can be effective in therapeutic intervention studies for sexual abuse.

The problem of sexual abuse which affects and concerns the individual, family and social environment is also a violation of rights according to the Universal Declaration of Human Rights. In the United Nations Convention on the Rights of the Child, children's rights are also discussed with detailed articles. Among these articles, it is aimed to protect children in cases of neglect and abuse, including the rights to life, development and protection, as well as sexual abuse. Many states in the international arena have given guarantees to protect children from all forms of sexual abuse. In the Universal Declaration of Human Rights and other important international declarations, it is forbidden to force, deceive, exploit the child to engage in illegal sexual activity, and use it as advertising material in this field, and decisions have been taken to take all kinds of measures. Psychological counselors have critical roles in the implementation of these measures.

Finally, one of the sub-problems of the research, the sub-problem about the effect of the psycho-education program that the counselors participated in, was evaluated by content analysis. After the interviews, the effect of the psycho-education program on the counselors was classified into three categories as preventive work, obtaining information, and psychological factors. Group members assessed the psycho-education application process according to their gains. Positive feedback was collected from the teachers on the three themes and their contents. In a similar study, Aydos (2019) observed that teachers used positive expressions for the training program provided for teachers to increase awareness of sexual abuse. School counselors, who are closely interested in many problems that children may experience in emotional, social, and academic terms, have essential contributions in solving such issues. It is also crucial that counseling teachers fulfill their legal and professional responsibilities in critical and crises such as sexual abuse and neglect. The most functional way towards the relevant knowledge and responsibilities goes through the increase of similar psycho-education studies as in the research.

As a result of the study, it can be said that the counselors developed five basic skills related to emotional literacy such as understanding emotions, empathy, managing emotions, contributing to the recovery of emotional problems and establishing emotional interaction (Steiner, 2003). It can be stated that the psycho-education program improves the emotional literacy of counselor teachers. Therefore, it can be thought that this program contributed to the basic skills of counselors in intervening in sexual abuse cases.

As a result, it was believed that determining the counselor's perceptions about the intervention in sexual abuse cases would be valuable in this study. Noticing the symptoms

of possible abuse cases addressed in psycho-education sessions, determining the risk factors on behalf of the child and reporting to the family and relevant authorities, studies on the positive effects of different therapy approaches such as EMDR and cognitive-behavioral on individuals exposed to traumatic experiences such as sexual abuse and neglect were found useful by counselors. Consequently, it was ensured that the views obtained from the teachers in the study supported the findings regarding the attitude towards reporting sexual abuse and the levels of knowledge and risk recognition in child neglect and abuse.

#### Limitations and Recommendations Regarding the Research

1. The use of qualitative methods in the study and the small number of participants are among the limitations of the study. Thus, using a quantitative research method in future studies will contribute to the generalizability of the research.
2. Research psycho-education sessions were conducted over the web using the Zoom program due to the COVID-19 pandemic process. Related psycho-education sessions can be arranged face-to-face after the pandemic.
3. Another limitation of the study is that there were more female participants than males in the experimental and control groups. In subsequent research, equality can be ensured in the experimental and control groups according to gender.

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