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Physical Health Problems Related to Domestic Violence among Primary School Children at Beni- Suef City

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Abstract

Background: Domestic violence is an abuse of power where one person uses power over another person and it is a violation of a person's human rights. Aim of the study: Assess the physical health problems related to domestic violence among primary school children at Beni-Suef City. Research design: Descriptive research design was used to achieve the aim of the current study. Sample: A convenience sample. Setting: Khaled Ibn Al-Walid in Abd El salam Arif and Al Ajami Primary schools in Al-Rahba. Tool: Two tools were used to achieve the aim of this study, First Tool: A Structured interviewing questionnaire which consisted of three parts to assess personnel characteristics of primary school children, general data about family, primary school children's knowledge regarding domestic violence, Second Tool: Childhood Exposure to Domestic Violence Scale (CEDV) by Linda Chamberlain, 2016. Result: The study showed that, 22.0% of the studied participants had a good level of knowledge regarding the domestic violence, 77.3% of the studied participants had experienced low domestic abuse and 81.3% of the studied participants had a medium impact of domestic violence. Conclusion: The result of the current study revealed that there was a highly significant positive association between their total abuse score and their impact of violence score which means a negative association between studied participant's knowledge and abuse and impact of domestic violence. Recommendation: Further research studies should be undertaken to investigate the domestic violence confounding factors among school students to tailor and implement adequate prevention programs.

Key words: The impact, Domestic Violence, Children, Primary School

Introduction:

Children who are exposed to domestic violence will often suffer from social, behavioral, and emotional problems, all of which can hinder their educational development. The evidence in this field has a tendency to display the affected children as the 'forgotten victims'. However, does display a wide variety of impacts this exposure can have, these impacts will vary from child to child, but it is undeniable that the effects do hinder their educational progression (**Doroudchi et al., 2023**).

The term "domestic violence" is taken to include acts of violence or threats of violence against a partner or former partner or a child in which the other partner or the child is harmed or fears harm to him or herself or to his or her property as a consequence of violence. This definition encompasses physical violence, sexual violence, emotional abuse and intimidation, and behaviors designed to control the other person or take away their freedom. Most often these acts occur within the context of a current or previous intimate or family relationship, extending to where ex-partners are harmed in trying to leave a violent relationship (Vikander & Källström, 2024).

Domestic violence is an abuse of power where one person uses power over another person and it is a violation of a person's human rights. Domestic violence can have long-lasting effects on victims/survivors and children who witness it. Effects of domestic violence negatively impact on parents and children's ability to move forward from separation, and to co-parent without fear and abuse (Lysova et al., 2024).

Primary school-aged children are at a developmental age where they are learning important behaviors, attitudes, and values from family members and peers. It is also known as a 'window of opportunity' for establishing and promoting health values and behavior. During this stage, children are laying down patterns of behavior which carry through to adolescence and adulthood. It is important to recognize the impacts that exposure to domestic violence may have at this crucial stage, to be able to intervene effectively (Celik, 2024).

The Effects of Domestic Violence in Schools, Consistent violence and abuse impact every corner of a child's life. It affects mental wellbeing, prevents them from having a healthy emotional balance, and manifests itself, sometimes, in physical discomfort. Children's stability and mental health play a big part in his or her school life and ability to learn. A compromised school can affect a student's friends, teachers, and class (Winfield et al., 2023).

It's more likely for children who experience domestic violence to have trouble in school, such as getting bad grades and failing to develop their social abilities. They may become a bully or be bullied. They may "act out" in class, have trouble focusing, and fail to create close friendships. As they become teens, they risk developing substance addictions, which present a whole new slew of problems. They may become acutely depressed, miss classes, and even drop out of school all together (Bhuller et al., 2024).

The role of the community health nurse in all schools is to provide training to teachers on how to help kids facing domestic violence, beginning with understanding how to discuss the topic with their students. But stopping domestic violence doesn't start at school; it starts at home. Strong families make strong students. Schools and teachers still have a great deal of influence over children, however. And teachers and staff should be ever on their guard (Kaysin et al., 2024).

Significance of the study:

Five million children witness domestic violence every year in the United States, and 40 million American adults live in the shadow of domestic violence. Hence, it has been found that children who live in homes suffering from violence are more likely to experience major psychological problems in the short and long term, learning difficulties, lower IQ scores and problems with attention and memory (Shattnawi et al., 2024).

In Egypt, children in homes with violence are physically abused or seriously neglected at a rate 1500% higher than the national average. Those who grow up with domestic violence are 6 times more likely to commit suicide and 50% more likely to abuse drugs and alcohol. If you grow up with domestic violence, you're 74% more likely to commit a violent crime against someone else. Children of domestic violence are 3 times more likely to repeat the cycle in adulthood (Shorey& Baladram 2024).

Aim of the study:

This study aimed to assess physical health problems related to domestic violence among primary school children at Beni-Suef city through:

- 1) Assessing the impact of domestic violence on physical health of primary school children
- 2) Assessing the knowledge of primary school children about domestic violence.

Research Questions: -

To fulfill the study purposes, the following research questions were answered:

- 1-What are the impacts of domestic violence on physical health of primary school children?
- 2-What is the level of knowledge of primary school children about domestic violence?

Subjects and methods

Design: A descriptive research design was used to achieve the aim of this study.

Setting: The study was conducted in two schools (Khaled Ibn Al-Walid in Abd El salam Arif and Al Ajami Primary school in Al-Rahba.

Subject

A convenient sample of 150 primary school children who exposed to domestic violence, who were over than 10 years old and accepted to participate in the study in the previous study settings. The study sample size represented 25% of the total schools.

Tools of data collection: The following tools were used for data collections:

I First Tool: A Structured interviewing questionnaire: This tool was developed by the researcher to collect data and consisted of three parts:

A-The first part: included characteristics of primary school children such as (age, education, residence, etc.)

B-The second part: included general data about the family such as (Place of residence, number of family members, and family income).

C-The third part: included data about primary school children's knowledge regarding domestic violence it included 11 MCQ questions such as (Meaning, causes, risk factors, signs and symptoms, etc.).

Scoring system: - For each question had a number of correct answers were given, and each participants were asked to select all correct answers, their answers were scored as (0) for don't know, (1) for incomplete correct answer, and (2) for complete correct answers.

The total knowledge score was calculated as the following:

Good knowledge $\geq 75.0\%$ of total knowledge score. **Fair knowledge** -- 60.0% < 75.0% of total knowledge score. **Poor knowledge** -- < 60.0% of total knowledge.

Second Tool: Childhood Exposure to Domestic Violence Scale

Childhood Exposure to Domestic Violence Scale (CEDV) by Linda Chamberlain, 2016. The CEDV was a 35-item, self-administered questionnaire designed for children ages 10 to 16 years old. It took approximately 30 minutes for participants to complete the questionnaire.

It was used to evaluate the prevalence of domestic violence domains including: Physical abuse (9 items), emotional (9 items), neglect (6 items), economic (3 items) and sexual (2 items).

Scoring system: - For each participant, their responses were scored as (2) for Yes and >2 times, (1) for Yes and 1-2 times, and (0) for no responses The total Childhood Exposure to Domestic Violence Scale score was calculated as the following:

No abuse -- 0% of total childhood exposure to domestic violence scale score. **Low abuse --** < 60% of total childhood exposure to domestic. **High abuse** \geq 60% of total childhood exposure to domestic violence scale score

Third tool: - Impact of Domestic violence assessment tool. It was developed by the research after reviewing related literature to assess impact of the domestic violence on child wellbeing. It consists of 4 different domains, it is composed of 33 items including, Physical state (10 items), psychological state (11 items), social domain (5 items), and school performance (7 items).

Scoring system: for each item, the participants' responses scored as (0) for not applicable, (1), for light impact, (2) for medium impact, and, (3) for acute impact.

The total scoring was calculated as: **No Impact** 0. **Light impact** --1- 66.7%. **Medium impact** -33.-66.7%. **Acute impact** -> 66.7%.

Tools reliability: The data collection tools were tested for reliability by the Cronbach alpha test, it was (0.865) for the knowledge tool, (0.896) for the Childhood Exposure to Domestic Violence Scale, and (0.935) for the Impact of Domestic Violence assessment tool.

Operational design The operational design includes the preparatory phase, pilot study, and fieldwork

Preparatory phase The investigator reviewed current and past, local and international related literature and theoretical knowledge of various aspects of the study using books, articles, journals, and the internet to prepare the tools for data collection.

Pilot Study A pilot study was conducted on 10% (15 students) under study to assess the feasibility of the study as well as the clarity and objectivity of the tools. The needed modifications were incorporated, and those subjects were not included in the actual study sample

Fieldwork: The purpose of the study will be simply explained to the participants who agree to participate in the study before any data collection. The researcher collected data from participants. Data collection was done 2 days/week by the researcher in two schools selected randomly from the educational zone (east and west) in Beni- Seuf City. An interviewing questionnaire sheet was filled in and completed by the participants.

- I. Administrative design: Approval to carry out this study was obtained from the Dean of the Faculty of Nursing, Beni-Suef University, and official permission will be obtained from the directors of two schools selected randomly from the educational zone (east and west) in Beni-Seuf City for conducting the study.
- II. Statistical design: The collected data will be scored, tabulated, and analyzed by personal computer using the Statistical Package for the Social Sciences (SPSS) program version 25. Data were presented using descriptive statistics in the form of frequencies and percentages for categorical data, and the arithmetic mean and standard deviation (SD) for quantitative data. Qualitative variables were compared using chi-square test (X2). In addition, the r-test was used to identify the correlation between variables. study The level of significance was: Statistically significant p < 0.05

Highly statistically significant p < 0.001Not significant P < 0.05

Results:

Table (1): indicates that 42.7% of the studied participants age ranged from 11-<12 years, with mean of 11.68±2.59 years old. 54.7% of them were male, 40.7% of them were at 5th grade primary, and 28.7% of them had the third arrangement among their students.

Figure 1: Illustrates that 54.0% of the studied participants had a fair level of knowledge regarding the domestic violence, 22.0% of them had a good level of knowledge on the other hand 24.0% of them had a poor level of knowledge.

Figure 2: indicates that 77.3% of the studied participants had experienced low domestic abuse, 22.7% of them experienced high level of domestic violence abuse.

Table (2), indicates that 37.3%, 29.3% and 22.7% of the studied participants had experienced acute symptoms as lack of appetite, speaking like pronunciation like stuttering and join their nails respectively. In addition, 43.4%, 42.7% and 40.7% of the studied participants medially experienced the following symptoms difficulty in speaking like pronunciation like stuttering, eating and sleep disorders and phobias and insomnia respectively. Moreover 54.0% and 44.7% of them slightly had headache and stomach pain and frequent disease. On the other hand, 31.3%, 30.7% and 16.0% of the studied participants never experienced frequent disease, involuntary urination and digestive problems respectively.

Figure 3: illustrates that 81.3% of the studied participants had a medium impact of domestic violence, 10.7% of them experienced acute impact of domestic violence, and 8.0% of them had a light impact of domestic violence.

Table (3), indicates that there was a highly

significant relation between studied participants' arrangement among brothers and their total domestic violence knowledge score (p<0.001**), also there was a significant relation between studied participants' age and academic year and their total domestic violence knowledge Score (p<0.05*). On the other hand, there was no statistical significant relation between their gender and their total domestic violence knowledge score (p>0.05).

Table (4), indicates that there was no statistical significant relation between their age, gender, academic year and their arrangement among family brothers and their studied participants' total abuse score (p>0.05).

Table (5), indicates that there was a highly significant relation between studied

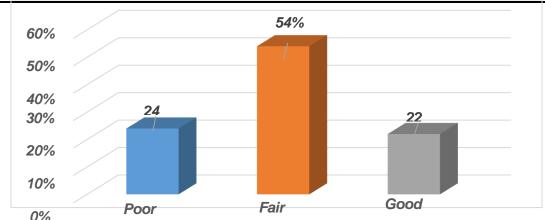
participants' age and total impact of domestic violence score (p<0.001**), also there was a significant relation between studied participants' academic year and arrangement among brothers their total impact of domestic violence score (p<0.05*). On the other hand, there was no statistical significant relation between their gender and total impact of domestic violence score (p>0.05).

Table (6), indicates that there was a negative association between studied participant's knowledge and abuse and impact of domestic violence, and there was a highly significant positive association between their total abuse score and their impact of violence score.

Table (1): Frequency distribution of personnel characteristics of the studied participants (n= 150)

Variable	Frequency	%		
Age in years				
9-<11	39	26.0		
11-<12	64	42.7		
≥12	47	31.3		
Mean ±SD	11.	68±2.59		
Gender				
Male	82	54.7		
Female	68	45.3		
Academic year				
Third Grade Primary	19	12.7		
Fourth Grade Primary	20	13.3		
Fifth Grade Primary	61	40.7		
Sixth Grade Primary	50	33.3		
Arrangement of the child among				
First	18	12.0		
Second	42	28.0		
Third	43	28.7		
Fourth	30	20.0		
Fifth	17	11.3		

The number is not mutually exclusive.



70% Figure (1): Percentage distribution of total knowledge score among the studied participants.

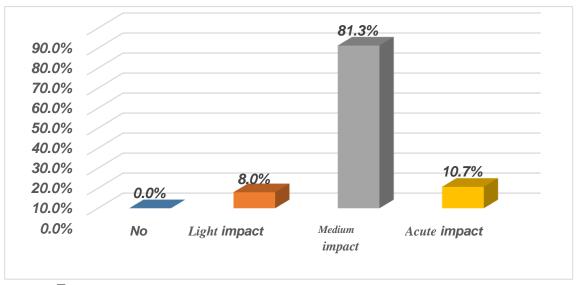


Figure (2): Percentage distribution of total domestic abuse score among the studied participants.

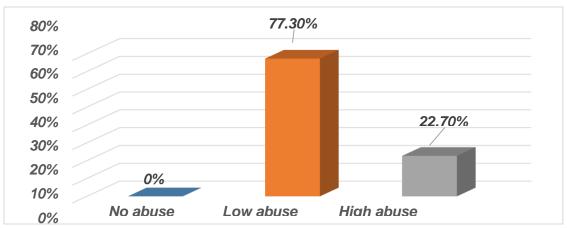


Figure (3): Percentage distribution of total impact of domestic violence score among the studied participants.

Table (2): Distribution of impact of violence on physical condition among the studied participants (n=150).

Impact on physical condition	Not ap	plicable	Li	ight	Me	dium	Acute	
	No	%	No	%	No	%	No	%
Physical symptoms								
	20	13.3%	81	54.0%	39	26.0%	10	6.7%
Sleep disorders	17	11.3%	47	31.3%	64	42.7%	22	14.7%
Lack of appetite	16	10.7%	23	15.3%	55	36.7%	56	37.3%
Frequent disease	47	31.3%	67	44.7%	33	22.0%	3	2.0%
Failure to Thrive	21	14.0%	63	42.0%	50	33.3%	16	10.7%
Gastrointestinal problems (stomach pain, eating disturbances,,)	24	16.0%	71	47.3%	45	30.0%	10	6.7%
Phobias and insomnia	13	8.7%	50	33.3%	61	40.7%	26	17.3%
Difficulty in speaking like pronunciation like Stuttering	15	10.0%	26	17.3%	65	43.4%	44	29.3%
Joints and bones	28	18.7%	39	26.0%	49	32.6%	34	22.7%
Urinary tract problems (as involuntary urination)	46	30.7%	39	26.0%	45	30.0%	20	13.3%

The number is not mutually exclusive.

Table (3): Relation between studied participants' total domestic violence knowledge score and their personnel characteristics (Table 1).

Variable	riable Total knowledge score								
	Poor		Fair		Good				
	No	%	No	%	No	%	re		
Age in years							9.14	<0.05*	
10-<11	14	38.9%	21	25.9%	4	12.1%			
11-<12	13	36.1%	31	38.3%	20	60.6%			
≥12	9	25.0%	29	35.8%	9	27.3%			
Gender							0.86	>0.05	
Male	22	61.1%	42	51.9%	18	54.5%			
Female	14	38.9%	39	48.1%	15	45.5%			
Academic year							13.3	<0.05*	
Third Grade Primary	10	27.8%	9	11.1%	0	0.0%	7		
Fourth Grade Primary	4	11.1%	12	14.8%	4	12.1%			
Fifth Grade Primary	13	36.1%	31	38.3%	17	51.5%			
Sixth Grade Primary	9	25.0%	29	35.8%	12	36.4%			
Arrangement of the child among brothers							37.1 5	<0.001**	
First	10	27.8%	7	8.6%	1	3.0%			

Second	6	16.7%	22	27.2%	14	42.4%
Third	9	25.0%	28	34.6%	6	18.2%
Fourth	1	2.8%	18	22.2%	11	33.3%
Fifth	10	27.8%	6	7.4%	1	3.0%

The number is not mutually exclusive

Table (4): Relation between studied participants' total abuse score and their personnel characteristics.

		Total a	buse score		Chi square	P value
Variable	Low	abuse	Hig	gh abuse		
	No	%	No	%		
Age in years					2.05	>0.05
10-<11	32	27.6%	7	20.6%		
11-<12	51	44.0%	13	38.2%		
≥12	33	28.4%	14	41.2%		
Gender					1.78	>0.05
Male	60	51.7%	22	64.7%		
Female	56	48.3%	12	35.3%		
Academic year					2.44	>0.05
Third Grade Primary	16	13.8%	3	8.8%		
Fourth Grade Primary	16	13.8%	4	11.8%		
Fifth Grade Primary	49	42.2%	12	35.3%		
Sixth Grade Primary	35	30.2%	15	44.1%		
Arrangement of the child among					2.64	>0.05
brothers						
First	16	13.8%	2	5.9%		
Second	34	29.3%	8	23.5%		
Third	31	26.7%	12	35.3%		
Fourth	22	19.0%	8	23.5%		
Fifth	13	11.2%	4	11.8%		

The number is not mutually exclusive

Table (5): Relation between studied participants' total impact of domestic violence score and their personnel characteristics.

			Chi	P				
Variable	Light Medium			Acute		square	Value	
	N	%	No	%	No	%		
	0							
Age in years							15.59	< 0.001

10-<11	5	41.7%	31	25.4%	3	18.8%		**
11-<12	7	58.3%	45	36.9%	12	75.0%		
≥12	0	0.0%	46	37.7%	1	6.3%		
Gender							1.21	>0.05
Male	5	41.7%	67	54.9%	10	62.5%		
Female	7	58.3%	55	45.1%	6	37.5%		
Academic year							12.78	<0.05*
Third Grade Primary	1	8.3%	16	13.1%	2	12.5%		
Fourth Grade Primary	3	25.0%	16	13.1%	1	6.3%		
Fifth Grade Primary	8	66.7%	43	35.2%	10	62.5%		
Sixth Grade Primary	0	0.0%	47	38.5%	3	18.8%		
Arrangement of the child among brothers							21.33	<0.05*
First	5	41.7%	12	9.8%	1	6.3%		
Second	4	33.3%	36	29.5%	2	12.5%		
Third	1	8.3%	36	29.5%	6	37.5%		
Fourth	2	16.7%	26	21.3%	2	12.5%		
Fifth	0	0.0%	12	9.8%	5	31.3%		

Table (6): Correlation between studied participants' total knowledge, total abuse score and total impact of domestic violence score.

Variables		Knowledge	abuse score	impact of domestic violence score
total knowledge	R	1	008	112
	P value		>0.05	>0.05
total abuse score	R	008	1	.336**
	P value	>0.05		.000
total impact of	R	112	.336**	1
domestic violence score	P value	>0.05	.000	

^{**.}Correlation is significant at the 0.01 level (2-tailed).

Discussion:

Violence in the home is where our respondents perceive that children are most at risk over prolonged periods. If a child has problems, psychological or other, the origin is most probably in the family and the opposite naturally, a good stable family will raise a good person

(Ray, 2019).

Violence in home is often hidden and children who are victims do not dare to speak out. This was mentioned consistently throughout all Member States: People who are beaten up by their mums and dads, they don't have the right to be part of a family because they're not, if they are being beaten up. It's not a loving family. People call you a family, but they don't necessarily know

what's going on behind everything (Refuge, 2020).

Physical abuse is the most familiar form of domestic violence. It involves the use of force against the victim, including direct assaults on the of weapons, driving body, use dangerously, destruction of property, abuse of pets in front of family members, assault of children, locking the victim out of the house, and sleep deprivation. Other examples are as grabbing, pinching, shoving, slapping, hitting, biting, armtwisting, kicking, punching, hitting with blunt objects, stabbing, shooting (Haj, 2021).

Regarding to age of the studied participants, the results of the current study showed that, more than two fifths of studied participants were aged ranged from 11-<12 years. Regarding to gender of the studied participants, the results of the current study revealed that, more than half of studied participants were male. Regarding to academic year of the studied participants, the results of the current study revealed that, nearly two fifths of studied participants were at 5th grade primary.

Concerning to participants' total level of knowledge regarding domestic violence, the results of the current study illustrated that, more than half of studied participant's had a fair level of knowledge regarding the domestic violence. These results supported with study performed by **Adel et al.**, (2022), who stated that, more than half of studied participant's had an average level of knowledge regarding the domestic violence. While these results was in contrast with **Solehati et al.**, (2022), who stated that, more than half of studied participant's had a good level of knowledge regarding the children abuse.

Regarding to total domestic violence abuse score of the studied participants, the results of the current study showed that, more than three quarters of studied participants had experienced low domestic abuse. These results agreed with study performed by **Okafor**, (2020), whose conduct study in Nigeria (study sample equal 1,280 participants) and entitled as "Influence of Domestic Violence on Girl-Child Academic Performance of Students in

Itesiwaju Local Government Area, Oyo State, Nigeria"who mentioned that, less than three quarters of studied participants had experienced low abuse.

Regarding to physical condition of the studied participants, the results of the current study showed that, more than two fifths and less than one thirds of studied participants had a medium eating and sleep disorders and digestive problem respectively. These results agreed with study performed by Erkkilä, (2022), whose conduct study in Rwanda (study sample equal 1290 participants) and entitled as " The association between maternal experience of lifetime intimate partner violence and symptoms of children-A crossillnesses among common 2019-20 sectional study of the Rwanda's Demographic Health Survey" who mentioned that, more than one thirds of studied participants had eating and sleep disorders and digestive problem. In my opinion, these results might be due to that the domestic violence suppresses the immune system increasing the risk for physical and psychological disease and increase hospitalization of children exposed to physical abuse.

Regarding to the relation between total abuse score of studied participants and their personnel characteristics, the results of the present study revealed that, there was no statistical significant relation between age, gender, and birth order and their total abuse score. These results agreed with study performed by **Rafaiee et al.**, (2021), whose conduct study in Iran (study sample equal 400 child) and entitled as "Prevalence of Child Abuse and Correlations with Family Factors Among Elementary Schoolaged Children" who stated that, there was no statistical significant relation between studied participants' age, gender, and birth order and their total abuse score.

Regarding to the relation between total abuse score of studied participants and their family history, the results of the present study revealed that, there was a statistical significant difference between level of father education and number of family members and their total abuse score. These results agreed with study performed by **Ombati**, (2020), whose conduct study in Kenya (study sample equal 2458 participants) and entitled as "Association between Intimate Partner Violence and Child Growth" who stated that, there was a statistical significant difference between level of partner education and number

of family members and their total abuse score.

Regarding to the relation between total impact of domestic violence score and personnel characteristics ofstudied participants, the results of the present study revealed that, there was a significant relation between studied participants' academic year and arrangement among brothers and their total impact of domestic violence score. These results agreed with study performed by Soliman et al., (2020), whose conduct study in Zagazig (study sample equal 368 children) and entitled as "Multiple risk factors affecting childhood psychosocial dysfunction primary school Egyptian children" who stated that, there was a significant relation between studied participants' birth order and their total impact of domestic violence score.

Regarding to the relation between studied participants' total impact of domestic violence score and their family history, the results of the present study revealed that, there was no statistical significant relation between nature of house, father and mother education, father and mother work and type of family and their total impact of domestic violence score. These results agreed with study performed by **Soliman et al., (2020),** who stated that, there was no statistical significant relation between father and mother education and father and mother work and their total impact of domestic violence score.

Regarding to the correlation between studied participants' total knowledge, total abuse score and total impact of domestic violence score, the results of the present study illustrated that, there was a highly significant positive association between total abuse score and their impact of violence score. These results agreed with study performed by AboKresha et al., (2021), whose conduct study in Egypt (study sample equal 1118 participants) and entitled as " Impact of COVID-19 pandemic and related isolation measures on violence against children in Egypt" who stated that, there was a highly significant positive association between studied participants' total abuse score and their impact of violence score.

In my opinion, these results might be due to domestic violence has found great change in behavior and impact children health status.

Conclusion:

Based on the findings of present study, it can be concluded that:

More than half of the studied participant had a fair level of knowledge regarding domestic violence. Regarding types of violence that the students exposed the current study indicates that more than half of the studied participant experienced the emotional type of domestic violence, almost half of them experienced neglect, less than two thirds of them had physical abuse, more than two fifths of them had an economical abuse and less than one fifths of them experienced sexual abuse.

As regards to the impact of violence on physical state of the studied children the current study illustrated that more than two fifths and less than one thirds of them had a medium eating, sleeping disorders and digestive problems. Regarding the impact on psychological condition the current study showed that more than one quarters of them had acute low self-esteem, more aggressive behavior and can't emphasize and care about others.

Concerning the impact on social relationship the result of the current study denoted that less than two fifths of studied children had not control him-self when they were angry and found it difficult to establish positive relationships with their friends at a medium impact. Regarding to the total impact of violence on the studied children the current study noted that minority of studied children had experienced acute impact of domestic violence and majority of them had experienced medium impact.

Recommendations:

- Further research studies should be undertaken to investigate the domestic violence confounding factors among school students to tailor and implement adequate prevention programs.
- Heath educational program should be provided to all students at educational settings to improve their knowledge regarding domestic violence.
- An educational program should be developed for parents to increase awareness regarding negative effects of violence on their children.
- Establishing a special rehabilitation program to children who affected by violence to overcome children psychosocial problems.
- Provide psychological screening for pupils with

- depression, pupils who have declining school grades, and those with family dysfunction, those experiencing domestic violence, drug abusers as well as those with previous suicidal attempts. So, particular care and attention to young pupils who are at risk can be provided.
- Strengthen role of school health nurses with respect to violence prevention. Support for violence victims' counseling and referral. School health nurse should advocate for avoidance of harsh disciplinary measures, particularly corporal punishment in schools.
- Incorporating "violence awareness training" as a part of schools' core curriculums to teach students better ways to deal with their anger, frustrations and other illfeelings.
- Further research studies should be undertaken to investigate the domestic violence confounding factors among school students to tailor and implement adequate prevention programs.

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