

A Comparative Study to Evaluate Mothers' Awareness Regarding Child Abuse in Rural and Urban Areas of Lucknow City

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Abstract: Child abuse constitutes a critical public health and social issue with long-term psychological, physical, and emotional consequences for affected children. The present study was conducted to assess and compare the level of awareness regarding child abuse among mothers residing in selected rural and urban areas of Lucknow city. A quantitative descriptive research design was employed, and a total of 100 mothers were selected through purposive sampling technique. Data were collected using a structured questionnaire comprising demographic variables and items assessing awareness related to general, physical, and sexual abuse. The reliability of the instrument was established using Cronbach's alpha coefficient ($r = 0.9$), indicating high internal consistency. The findings of the study revealed that mothers residing in urban areas demonstrated significantly higher levels of awareness compared to their rural counterparts across all domains of child abuse. The study emphasizes the urgent need for structured educational interventions and community-based awareness programs, particularly in rural settings, to enhance early identification and prevention of child abuse.

Keywords: Child Abuse, Maternal Awareness, Rural Population, Urban Population, Public Health, Nursing Research

INTRODUCTION:

Child abuse is a pervasive global public health and social concern that significantly affects the physical, psychological, and emotional well-being of children. It encompasses various forms of maltreatment, including physical abuse, sexual abuse, emotional abuse, and neglect¹. Despite increasing awareness and the establishment of legal frameworks for child protection, child abuse continues to remain underreported and inadequately addressed, particularly in developing countries such as India². Globally, the magnitude of child abuse is alarming, with studies indicating that a substantial proportion of children experience some form of abuse during their lifetime³. Reports suggest that approximately one in three girls and one in six boys are subjected to sexual abuse before reaching adulthood, underscoring the urgent need for effective prevention and early intervention strategies⁴.

In the Indian context, child abuse has gained increasing attention over the past few decades; however, it continues to pose a serious challenge due to socio-cultural barriers, stigma, lack of awareness, and limited reporting mechanisms. Factors such as poverty, illiteracy, rapid population growth, and child labour further increase children's vulnerability to abuse and exploitation. Importantly, a significant proportion of abuse occurs within familiar environments, including family settings, making early identification particularly challenging⁵. Mothers, as primary caregivers, play a pivotal role in safeguarding children and recognizing early signs of abuse. Their level of awareness is crucial for prevention, timely identification, and intervention. However, maternal awareness is influenced by multiple determinants, including educational status, socio-economic conditions, cultural beliefs, and access to health and information systems. A marked disparity exists between rural and urban populations in terms of access to education, healthcare services, media exposure, and child protection resources⁶. Evidence from studies conducted in Lucknow highlights significant differences in awareness levels between rural and urban mothers. Urban mothers tend to demonstrate comparatively higher awareness, including knowledge of legal frameworks such as the Protection of Children from Sexual Offences (POCSO) Act, 2012, and the ability to recognize various forms of abuse, including psychological and neglect-related maltreatment. In contrast, mothers in rural areas often exhibit limited awareness and may fail to recognize non-physical forms of abuse, frequently normalizing practices such as corporal punishment or emotional neglect as acceptable disciplinary methods⁷.

These disparities are further influenced by differences in healthcare access and information dissemination. Urban populations benefit from greater exposure to structured educational programs, healthcare services, non-governmental organization (NGO) initiatives, and digital media, which enhance awareness levels. Conversely, rural mothers often face barriers such as low literacy, limited access to maternal and child health services, restricted mobility, and socio-cultural constraints, which hinder their exposure to child protection information and reduce the effectiveness of awareness interventions⁸.

Given these contextual differences, there is a critical need to assess and compare the level of awareness among mothers in rural and urban settings. Understanding these disparities will help identify knowledge gaps and inform the development of targeted, culturally appropriate interventions aimed at improving maternal awareness and strengthening child protection mechanisms.

Therefore, the present study aims to evaluate and compare mothers' awareness regarding child abuse in selected rural and urban areas of Lucknow city, with the objective of enhancing preventive strategies and promoting child safety.

RESEARCH METHODOLOGY

This study employs a quantitative descriptive survey design with a comparative descriptive approach. The primary aim is to assess and compare the awareness levels of child abuse among mothers residing in urban and rural areas of Lucknow, India. The design is selected for its efficiency in systematically collecting data from a defined population at a single point in time, enabling the description and comparison of awareness levels between the two groups.

Study Design and Variables

The core of the methodology is a cross-sectional survey administered in November 2024. This design provides a practical and timely "snapshot" of the current state of awareness.

Key Variables:

- Independent Variable: Place of residence, categorized as urban or rural.
- Dependent Variable: Level of awareness regarding child abuse, measured as a total score on a structured questionnaire.
- Extraneous Variables: Factors such as maternal age, educational attainment, and socioeconomic status, which are recorded for descriptive purposes and to contextualize the findings.

Study Setting, Population, and Sampling Strategy

The study will be conducted at the Community Health Center (CHC) in Chinhat, Lucknow. The target population comprises mothers of children under 18 years of age who access services at this center. Specific inclusion and exclusion criteria (sampling criteria) will be applied to define the final study sample, ensuring participants are relevant to the research objectives while maintaining ethical standards.

Tool Development and Validation

A structured questionnaire was developed specifically for this study to measure awareness of child abuse. The instrument consists of 25 items organized into three domains:

1. General awareness of child abuse.
2. Awareness of physical abuse.
3. Awareness of sexual abuse.

Scoring and Interpretation: The questionnaire yields a total possible score of 56 points. Awareness levels are categorized as follows:

- Poor Awareness: 0-19 points
- Average Awareness: 20-38 points
- Good Awareness: 39-56 points

Validation and Reliability: To ensure the tool's quality, a systematic validation process was undertaken:

- The questionnaire was translated from English to Hindi and back-translated to verify conceptual accuracy.
- Content validity was established through expert review.
- The instrument was pre-tested and a pilot study was conducted to assess clarity and feasibility.
- Internal consistency reliability was measured using Cronbach's alpha, which yielded a coefficient of 0.9 for the pilot sample.

Data Collection and Analysis Plan

Data were collected by trained personnel through in-person administration of questionnaires in November 2025 to ensure clarity and better response rates for this sensitive topic. Data analysis was conducted in two stages: descriptive statistics (frequencies, percentages, means, and standard deviations) were used to summarize demographic characteristics and awareness levels, while the chi-square test was applied to assess the association between residence (urban/rural) and levels of awareness (poor/average/good). This approach provided a structured framework to effectively compare child abuse awareness among urban and rural mothers.

Study Setting and Contextual Rationale

The study was conducted at Community Health Center (CHC) Chinhat, located in Lucknow district, Uttar Pradesh, Northern India. Lucknow district encompasses approximately 2,095.4 km² with a population of 1,550,842 residents distributed across eight rural administrative blocks. CHC Chinhat represents a strategic setting for maternal and child health research, as such facilities typically serve a catchment population of approximately 120,000 people. The selection of this setting is justified by the documented healthcare needs of the region. Lucknow district reports an infant mortality rate of 45 per 1000 live births and an under-5 mortality rate of 60 per 1000 live births, both higher than the national averages for India. These statistics highlight the contextual importance of research focused on maternal knowledge and child welfare. The facility's location provides access to both urban and rural populations, enabling the planned comparative analysis.

Target Population and Sampling Criteria

The target population for this study was mothers of children under 18 years of age residing in the catchment area of CHC Chinhat. This definition facilitates a comparative assessment of awareness between urban and rural mothers, a design element common in health research within this context.

Inclusion Criteria:

1. Mothers residing in selected urban or rural areas within CHC Chinhat's catchment area.
2. Mothers of at least one child under 18 years of age.
3. Willingness and ability to provide informed consent for participation.

Exclusion Criteria:

1. Mothers with cognitive or communication impairments that would preclude valid questionnaire completion.
2. Temporary residents or visitors to the area.
3. Mothers unable to provide informed consent.

Research Instrument Development

The development and validation of the research instrument followed established best practices for survey design in healthcare research. This systematic process ensured the questionnaire's reliability, validity, and cultural appropriateness for assessing awareness of child abuse among mothers in urban and rural Lucknow, India.

Ethical Considerations

The study was conducted in accordance with established ethical principles for research involving human participants, particularly within the Indian context. Informed consent was obtained by providing participants with clear information about the study in Hindi, ensuring voluntary participation and the right to withdraw at any time. Confidentiality was maintained by anonymizing data and securely storing it with restricted access. The study received prior approval from the institutional ethics committee and adhered to national guidelines issued by the Indian Council of Medical Research (ICMR). Special care was taken to address participant vulnerability by adapting the consent process for different literacy levels and designing the questionnaire to minimize any psychological discomfort, ensuring minimal risk and upholding ethical research standards.

RESULTS:

The present study was conducted among 100 mothers (50 urban and 50 rural) to assess and compare awareness regarding child abuse.

Demographic Characteristics

The majority of participants (32%) belonged to the 18-25 years age group, followed by 26-30 years (30%). Regarding education, most mothers had primary-level education (lower and upper primary: 26% each), while only 6% were graduates. In terms of occupation, the majority were housewives (51%), followed by laborers (43%). Most participants (86%) belonged to nuclear families.

Table 1: Distribution of Participants According to Demographic Variables (N=100)

Variable	Category	Frequency	Percentage
Age (years)	18–25	32	32%
	26–30	30	30%
	31–35	13	13%
	36–40	11	11%
	41–45	14	14%
Education	Lower Primary	26	26%
	Upper Primary	26	26%
	High School	20	20%
	PUC	10	10%
	Graduate & above	6	6%
Occupation	Housewives	51	51%
	Laborers	43	43%
	Others	6	6%
Family Type	Nuclear	86	86%
	Joint	14	14%

Awareness Levels in Urban and Rural Areas

In urban areas, the majority of mothers (58%) had good awareness, 38% had average awareness, and only 4% had poor awareness. In contrast, in rural areas, most mothers (64%) had average awareness, 22% had poor awareness, and only 14% demonstrated good awareness.

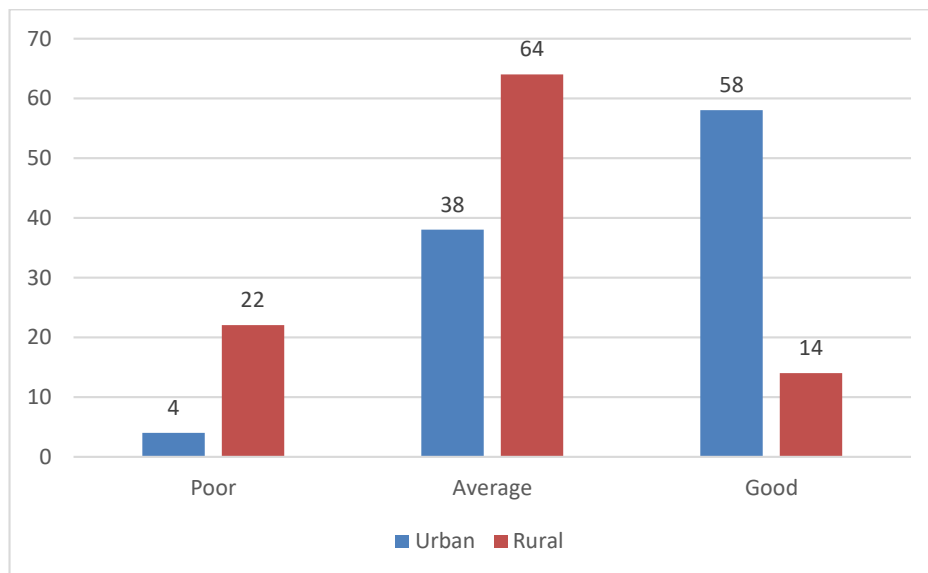


Fig 1: Comparison of awareness levels regarding child abuse among urban and rural mothers

Item-wise Awareness

Urban mothers showed higher awareness across most domains of child abuse, including general aspects, physical abuse, and sexual abuse. Rural mothers primarily demonstrated average awareness, with comparatively lower knowledge regarding possible abusers, risk factors, and preventive aspects.

Table 2: Item-wise Awareness of Mothers Regarding Child Abuse in Urban and Rural Areas

Domain of Awareness	Urban Mothers	Rural Mothers
General Awareness	High	Average
Physical Abuse	High	Average
Sexual Abuse	High	Average
Knowledge of Abusers	Good	Poor
Risk Factors	Good	Average
Preventive Aspects	Good	Average

Comparison Between Urban and Rural Mothers

Statistical analysis using the chi-square test revealed a **highly significant difference** between urban and rural mothers in all domains:

- General child abuse awareness ($\chi^2 = 21.68$)
- Physical abuse awareness ($\chi^2 = 17.74$)
- Sexual abuse awareness ($\chi^2 = 19.7$)
- Overall awareness ($\chi^2 = 23.04$)

In all cases, calculated χ^2 values exceeded the tabulated value at the 0.05 level of significance, indicating that urban mothers had significantly higher awareness than rural mothers.

Association with Demographic Variables

No significant association was found between awareness levels and demographic variables such as age, educational status, occupation, or type of family in both urban and rural groups ($p > 0.05$).

DISCUSSION:

The present study revealed a significant difference in awareness levels of child abuse between urban and rural mothers. Urban mothers demonstrated higher awareness across all domains, including general, physical, and sexual abuse. These findings are consistent with studies showing that urban populations have better access to education, healthcare services, and media exposure, which enhances awareness^{9,10}. In contrast, rural mothers often face barriers such as limited access to information and socio-cultural constraints, leading to lower awareness levels¹¹.

The higher awareness among urban mothers regarding sexual abuse, particularly long-term effects, may be attributed to increased exposure to awareness campaigns and legal frameworks such as the Protection of Children from Sexual Offences Act. Similar findings were reported by Gupta¹², where urban mothers showed better recognition of abuse indicators compared to rural mothers. Interestingly, the study found no significant association between awareness and demographic variables such as age, education, or occupation. This finding contradicts some previous research¹³, which suggested that education significantly influences awareness. However, it aligns with other studies indicating that environmental exposure and access to information play a more critical role than individual demographic factors^{1,14}.

The predominance of average awareness among rural mothers highlights a critical gap, especially in identifying subtle forms of abuse such as emotional and sexual abuse. This is supported by global evidence from the World Health Organization, which emphasizes that under-recognition of abuse remains a major barrier in child protection. Overall, the findings emphasize the urgent need for targeted awareness programs in rural areas, focusing on early identification, prevention, and reporting of child abuse.

CONCLUSION:

The study concludes that although mothers possess basic awareness about child abuse, significant gaps still exist in areas such as types of abuse, reporting mechanisms, knowledge of the POCSO Act, and appropriate response and rehabilitation measures. Urban mothers demonstrated significantly higher awareness compared to rural mothers; however, both groups showed limitations influenced by stigma and misconceptions. The lower awareness among rural mothers highlights the need for targeted educational and community-based interventions. Strengthening awareness programs and providing accurate knowledge can empower mothers to effectively identify, prevent, and respond to child abuse, thereby promoting child safety and protection.

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Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

Conflicts of Interest

The author declares no conflicts of interest

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