

# The Primary Caregiver Experiences in Serving Children Victims of Physical Violence in Banda Aceh City: A Phenomenology Study

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## Abstract

This study aims to explore primary caregivers' experiences in serving children victims of physical violence in Banda Aceh City. The experience in question involves perception, adaptation response, physiological delivery, assisting the adaptation process related to self-concept role function, and assisting the child's adaptation process related to aspects of interdependence. This research was qualitative research with a phenomenological approach. The main informant of this research is the primary caregiver as the key informant who provides care and fulfills the needs of children who are victims of physical violence. Characteristics of key informants are living at home with child victims of violence, meeting children's daily needs, and explaining their experiences well. Research data was collected through interviews and relevant literature studies and then analyzed using the Colaizzi technique. The results of this study are 1) The primary caregiver understands that the physical violence felt by the child is a consequence of the wrong actions that have occurred, 2) The primary caregiver feels the negative impact of physical violence on the child, 3) The primary caregiver helps the violent child in the physical aspect. Present physiological needs by seeking material support, 4) The primary caregiver helps children with physical violence in the aspect of self-concept by providing moral support, 5) The primary caregiver helps children who are victims of physical violence in the aspect of role function with the support of strategies that improve the child's role function, and 6) The primary caregiver helps children who are victims of physical violence in the aspect of interdependence by seeking counseling assistance.

**Keywords:** *Experience, Primary Caregiver, Childer, Violence*

## Introduction

Violence against children is a worldwide phenomenon that creates great challenges for the health care system because it has severe consequences for victims under 18 ages. The category of violence

against children can be divided into four parts: physical violence, psychological or mental violence, sexual violence, and social violence. According to WHO (2016), one in four adult children has experienced violence at the age of children and adolescents. On average, 50% of children in the world experience physical, emotional, and sexual violence<sup>(1)</sup>.

Meanwhile, in Indonesia, UNICEF (2015) stated that 40% of children aged 13 -15 years reported

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having been physically assaulted at least once a year, 26% reported having received physical punishment from their parents or caregivers at home, and 50% of children reported being bullied at school<sup>(2,3)</sup>. For the context of Aceh Province, the Office of Women's Empowerment, Child Protection, Population Control and Family Planning (DP3AP2KB) reported that cases of violence against women and children in 2020 decreased from the previous year. Throughout 2020 116 cases consisted of 69 cases against women and 47 against children. This number is the smallest of the last six years, namely in 2015, there were 144 cases, 2016 as many as 176 cases, 2017 as many as 140 cases, 2018 as many as 144 cases, and 2019 as many as 137 cases<sup>(4,5)</sup>.

Although it has decreased, the number of acts of violence against children is still quite worrying. Moreover, physical violence against children is not only short-term but also long-term. Physical violence against children also impacts their mental and psychological health<sup>(6)</sup>. One study stated that the psychological impact of violence against children is a prolonged trauma that makes children unable to enjoy their childhood well even though they have received the right help. This trauma can also carry over until they reach adulthood<sup>(7)</sup>. Another study also stated that children who were victims of violence had a 2.15-fold risk of mental disorders. These psychiatric disorders include anxiety, depression, bipolar disorder, sleep disorders, post-traumatic stress disorder, psychotic disorders, and organic mental disorders<sup>(8)</sup>.

In Indonesia, some regulations regulate the handling of violence against women and children in an integrated manner. This program plays a role in providing integrated service centers for women's empowerment and child protection in every area so

that if there are acts of violence against children, they can be reported immediately<sup>(9)</sup>. The programs provided are in the form of complaint services, victim assistance services, legal consultation services, psychological/psychiatric consultation services, home visit services, referral services, and data and information services. One of the efforts to overcome acts of violence against children is to use primary caregivers, namely providing basic needs for children who are victims of physical violence and finding solutions to psychological problems suffered by victims of violence. The service mechanism through the primary caregiver is listed in the Decree of the Minister of Health of the Republic of Indonesia Number 1226/MENKES/SK/XII/2009 concerning guidelines for the management of integrated services for victims of violence against children and women in hospitals<sup>(10)</sup>.

At the implementation level, primary caregiver services do not always run well, and there are various challenges faced, especially in meeting the needs of children who are victims of violence. Theoretically, to provide targeted and quality interventions for primary caregivers, it is necessary first to understand primary caregivers' experiences in assisting the adaptation response of children who are victims of physical violence. Several studies have stated that experience influences providing services and care, including primary caregivers<sup>(11-14)</sup>. Therefore, this study aims to explore primary caregivers' experiences in serving children victims of physical violence in Banda Aceh City. The experience in question involves perception, adaptation response, physiological fulfillment, assisting the adaptation process related to self-concept role function, and assisting the child's adaptation process related to aspects of interdependence.

## Method

This research was qualitative research with a phenomenological approach. In this study, researchers used two categories of informants: key informants and associate informants. Key informants are the primary caregiver that provides care and fulfill the needs of children who are victims of physical violence. Key informants consist of mothers, fathers, grandmothers, or other closest relatives who accompany children who are victims of physical violence. Characteristics of key informants are living at home with child victims of violence, meeting children's daily needs, and explaining their experiences well. Associate

informants are parties who participate or are in charge of handling the problem of violence against children in Banda Aceh City. This study's data collection tools include researchers as the main data collection tool, demographic data forms, interview guides, and field notes. This research has obtained a permit from the Nursing Research Ethics Commission (KEPK) of the Faculty of Nursing, Syiah Kuala University, on January 4, 2021. Data analysis was carried out using the Colaizzi technique<sup>(15)</sup>.

## Result and Discussion

This study was interviewed eight informants consisting of key informants and associate informants.

**Table 1: Informants Characteristic**

No	Age	Gender	Relation	Education	Profession
1	36	Female	Biological children	Elementary School	Housewife
2	53	Female	Foster Children	Bachelor	Civil Servant
3	52	Female	Foster Children	Diploma 3	PNS
4	36	Female	Foster Children	Senior High Scholl	Housewife
5	35	Female	Foster Children	Bachelor	Housewife
6	53	Female	Biological children	Senior High Scholl	Housewife
7	51	Female	Assosiate	Bachelor	Civil Servant
8	44	Male	Assosiate	Bachelor	Private Sector

From the eight informants interviewed, six informants are primary caregivers or key informants, and two informants are associate informants who are directly involved in caring for children who are victims of physical violence. All participants are domiciled in Banda Aceh City. All research informants who have been interviewed are involved in providing direct care

to child victims of violence, meeting their needs, and assisting victims in their daily lives.

Based on the interviews, this study has identified seven themes related to the experience of primary caregivers helping children who are victims of physical violence in Banda Aceh City.

Consequences of emotional outbursts and forms of punishment that need to be avoided

In certain circumstances, the primary caregiver considers that the physical violence that occurs is a form of emotional outburst from the parents as a result of the child's behavior, so that the child must receive a reward in the form of a punishment for what has been done. This theme also explains how the primary caregiver's opinion on physical violence that occurs in children is a form of punishment given to children to educate, improve, or control children's behavior so that the primary caregiver understands that one of the acts of violence committed by the closest people, both parents, and closest family, is used as a justification for taking refuge in committing physical violence to children for the best interests of the child.

This study identifies that the primary caregiver's perception of physical violence in children is an emotional outburst that normally occurs in parents towards their children. They consider that violence against children by parents or closest family is natural in educating and shaping children's character (Informant 2 Interview Results ). However, the primary caregiver is aware that the violence that occurs can disrupt the child's psychology, such as the child's lack of motivation in academics, inability to control emotions, and inability to interact well socially.

From the data obtained, it is known that the primary caregiver who takes care of children who are victims of physical violence perceives punishment to discipline a child. A child who likes to fight and does not comply with all applicable regulations can provoke parents' emotions to commit acts of violence. This is in line with other studies that state that in Thai

society, physical violence perpetrated on children by slapping and hitting is a traditional method passed down from generation to generation in the community. They preserve it as a culture that physical violence is used as a form or way of disciplining a child<sup>(16)</sup>. However, some primary caregivers think that physical violence is unnecessary and should be avoided. From the results of data analysis, they found that violence against children was something that should not be done. By avoiding acts of violence, children can enjoy childhood well, and they can play, go to school, study, and sleep according to their developmental level.

Feel the negative impact of physical violence on children

Based on the interview results, it is known that the primary caregiver understands that every violent behavior that occurs in children has a fatal impact on the daily life of a child to adulthood. Primary caregivers reveal various forms of children's behavior after receiving acts of violence such as pensive, aloof, easily emotional, violent behavior, doing dangerous actions, and can cause prolonged trauma.

The primary caregiver perceives that the adaptation response experienced by the children in their care is often pensive, daydreaming, depressed, and looking down (Informant 1 Interview Results). Violence also makes children hold grudges and want to take revenge on others. The interview results also show that the primary caregiver understands that violent behavior received by children can change children's behavior, one of which is the child's inability to control emotions. The forms of behavior that emerge are quite diverse, such as children often feeling afraid, sad, depressed, irritable, speaking rudely, and others (Informant 3,4,5 Interview Results). Another thing that also appears in children who are victims of violence is the emergence

of dangerous behaviors such as dangerous things, making noise in the school environment, and can endanger themselves (Informant 2).

From the research that has been done, it can be seen that there is a change in the form of children's behavior patterns due to physical violence on children. These changes are in the form of children's behavior that prefers to be pensive and alone in the room, act rudely towards others, unable to control emotions, annoy their friends at school, and perform dangerous actions. The primary caregiver also revealed that children who have experienced physical violence tend to want to show others that a child treated as weak by someone will eventually psychologically try to show that he or she is strong. If he gets abusive actions from outside, he will turn violent towards others. Another thing that also happens is the trauma experienced by victims of violence in fear that they will be treated with physical violence again in the future. The trauma then changes the pattern of the child's relationship with the surrounding environment so that the child is afraid of being returned to his parents, causing trauma.

That is in line with one study which states that physical violence experienced by children can have the same effect, damaging the development of children in the future. The consequences can negatively impact children's physical and psychological development. One of the psychological impacts on children is that it can cause prolonged trauma so that children cannot enjoy their childhood well even though they have received the right help. This trauma can also carry over until they reach adulthood<sup>(7)</sup>.

### **Meet daily needs**

The interview results show that the primary caregiver always tries her best to help children meet

their daily needs even though they find it difficult. The economic hardship makes it very difficult for the primary caregiver to meet the children's daily needs, especially during this pandemic (Informant 1,3,5 Interview Results). The results of this interview indicate that the primary caregiver's efforts to care for and meet the needs of children are also a significant challenge. Unstable economic conditions require them to work outside to meet the needs of their children. This condition certainly harms the fulfillment of daily needs.

### **Community Support**

From the interviews conducted, the primary caregiver revealed that all children's material needs are fully supported by institutions or assistance from foundations and non-governmental organizations. However, sometimes the primary caregiver uses personal expenses to meet the child's needs under certain conditions. Meanwhile, primary caregivers as their accompanying caregivers to meet the needs of their foster children receive assistance from foundations or non-governmental organizations (Informant 2,3,5 Interview Results).

The primary caregiver as a substitute caregiver also revealed that several communities provided material assistance to victims through foundations where children who were victims of violence lived. From the results found during the interview process, it is known that some communities provide self-help in the form of daily necessities such as food, clothing, and medical assistance that supports the rehabilitation process. Some say that institutions or foundations fully support children's material needs or assistance. This is in line with one of the studies, which states that the mechanism that can be done in helping victims of violence against children is by assisting in economic

mechanisms. This is because encouraging social and economic aspects greatly contributes to the recovery process of violence and abuse against children. Helping in this form makes emotional resilience helped indirectly so that the emotional function of victims of violence will quickly recover<sup>(17)</sup>.

### **Provides Comfort**

The primary caregiver in helping children relate to self-concept provides more comfort and attention to children. Comfort is given to embrace children to accept their current situation. Giving love and affection can increase children's motivation not to feel lonely and alone. Giving more attention to children who are victims of physical violence can create openness for children to their caregivers, and it is easier for the primary caregiver to identify and resolve problems with children. The attention and support from the primary caregiver can help children get rid of feelings of sadness and reminisce about an unpleasant past. In addition, primary caregivers also do many ways, such as giving rewards to children who want to do positive activities to divert children's attention to the problems they are experiencing, so that children will be more open to their caregivers and can easily find out and solve problems faced by the child (Informant 2.4 Interview Results).

From the data that has been obtained by researchers from interviews that how caregivers or primary caregivers who are beside children who are victims of violence in providing comfort and a sense of security to children by embracing can create a touch of love, motivate children that they are not alone and assume that they are always there. "Other people who are always near him". They also revealed that the comfort is given to their foster children and gave them more attention and rewards than other children. They

also provided support and other support to strengthen the child's aura. The caregiver's attention presents an emotional bond that creates a safe and comfortable relationship for the child so that the child is more open and willing to share stories to distract him from being able to forget the past that has happened. Likewise, with the provision of rewards, for children who are victims of physical violence who have been able to do positive activities or things in getting things done, they feel more appreciated, feel able to be the best again, and feel loved by their caregivers.

### **Normalization of children's roles**

Data from interviews show that primary caregivers are very sensitive to the problems faced by their foster children. They try to do various ways to help the difficulties or suffering experienced by their foster children, and various ways are done to support children against helplessness. They continue to fight with all their might for the future of their foster children. However, sometimes, a caregiver cannot provide support independently to care for, care for and protect their children. The interview results show that in a condition where the primary caregiver cannot provide maximum assistance, they ask for help from child protection agencies to get help in providing counseling to children who are victims of physical violence. Primary caregivers feel happy if children who are victims of physical violence can become helpful people under their care (Interview Results).

Primary caregivers revealed that various forms of support are sought to provide the best for their foster children. To restore the role of children who have received violence, they seek assistance from institutions provided by the government and other private institutions in the city where they live. Caregivers keep trying to make their foster children

become successful children. They never get tired of advising children to accept their situation and follow an everyday life like other children. They give children attention and support to be happy again, and children can return to normal in living their lives. They also include children in every event or activity carried out at the foundation.

### **Counselling Assistance**

In fostering loving relationships with other people, primary caregivers sometimes ask for help from counseling available at one of the institutions or foundations provided by the government or private institutions. Primary caregivers think that sometimes their foster children need help from a counselor to bring back the child's joy. Sometimes children who are physically abused find it difficult to do or maintain good relationships and are less able to carry out social interactions with other people. Therefore, some primary caregivers use the services of a psychologist to recover the trauma felt by their children (Informant 1,6 Interview Results).

From the interview results, it is also known that some children need the help of a psychologist so that children can interact again with other people and build loving relationships with others. According to the primary caregiver, children who have received guidance and counseling from psychologists several times can be happy again as before. The primary caregiver also revealed that the children they take care of have been able to carry out social interactions well. They only try to encourage their foster children always to think positively that not everyone else will do bad things to them. This condition is in line with one of the studies conducted in Romania that individual and group counseling programs for children victims of physical violence have developed the self-image of

children who are victims of physical violence and provide education opportunities and can interact socially again with others<sup>(18)</sup>.

### **Conclusion**

The conclusions obtained regarding the primary caregiver experiences in serving children victims of physical violence in Banda Aceh City are:

1. The primary caregiver understands that the physical violence felt by the child is a consequence of the wrong actions they have done.
2. Primary caregivers feel the negative impact of physical violence on children.
3. Primary caregivers help children who are victims of physical violence fulfill their physiological needs by seeking material support.
4. Primary caregivers help children who are victims of physical violence in the aspect of self-concept by providing moral support.
5. Primary caregivers help children who are victims of physical violence in role function by presenting various support strategies that increase the child's role function.
6. Primary caregivers help children who are victims of physical violence in interdependence function by seeking counseling assistance.

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