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TEACHERS' CHALLENGE IN TEACHING THE PREVENTION OF SEXUAL ABUSE IN DISABILITIES

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Abstract

Individuals with disabilities are one of the most vulnerable people due to sexual abuse. A recent study found that 31.7% of children with disabilities experience violence, and these children are at twice the risk of being subjected to violence compared to children without disabilities. This alarming disparity underscores the crucial role of educators. Teachers, given their professional roles with special needs students, are uniquely positioned to provide essential sexual education and protective guidance in schools. To explore the challenge faced by teachers in special schools in teaching the prevention of sexual abuse among children with special needs. The methodology used included a qualitative method with a phenomenology approach using in-depth interviews with 11 teachers in special schools and analysis of data was done using qualitative thematic analysis. Four themes emerged summarizing such as type of disabilities, teacher's competence, environment, and implementation of health reproduction in school. Most teachers revealed that the challenge in teaching sexual abuse prevention is a limitation in a student's ability to learn, teacher's limited knowledge in handling the students, neglectful parenting, lack of training for teachers, and non-inclusive health reproduction programs. This study showed that the experience of special school teachers in preventing sexual abuse is considered to have been done well but not maximized due to the challenges felt by teachers. Programs should encourage development of skills and knowledge of special school teachers. Sexual abuse prevention education for children with disabilities can be made a special program in special schools.

Keywords: Teacher; Challenge; Sexual Abuse; Disability

Abstrak

Individu dengan disabilitas merupakan individu yang rentan mengalami kekerasan seksual. Sebuah studi menunjukkan bahwa 31,7% anak dengan disabilitas mengalami kekerasan, dan risiko dua kali lebih tinggi dibandingkan dengan anak tanpa disabilitas. Ketimpangan yang mengkhawatirkan ini menegaskan betapa pentingnya peran pendidik, terutama guru di sekolah luar biasa (SLB), yang memiliki posisi strategis dalam memberikan edukasi seksual dan perlindungan bagi siswa berkebutuhan khusus. Penelitian ini bertujuan untuk menggali tantangan yang dihadapi oleh guru-guru di SLB dalam mengajarkan pencegahan kekerasan seksual kepada anak-anak dengan kebutuhan khusus. Metode yang digunakan adalah pendekatan kualitatif dengan pendekatan fenomenologi, melalui wawancara mendalam terhadap 11 orang guru SLB. Data yang diperoleh dianalisis menggunakan analisis tematik. Dari hasil penelitian, muncul empat tema utama: jenis disabilitas, kompetensi guru, lingkungan, dan implementasi pendidikan kesehatan reproduksi di sekolah. Mayoritas guru mengungkapkan bahwa tantangan utama dalam mengajarkan pencegahan kekerasan seksual meliputi keterbatasan kemampuan belajar siswa, kurangnya pengetahuan guru dalam menangani siswa, pola asuh orang tua yang kurang peduli, minimnya pelatihan bagi guru, serta program kesehatan reproduksi yang belum inklusif. Studi ini menunjukkan bahwa upaya guru SLB dalam mencegah kekerasan seksual sudah dilakukan dengan baik, namun belum optimal karena berbagai tantangan yang mereka hadapi. Oleh karena itu, dibutuhkan program yang mendukung pengembangan keterampilan dan pengetahuan para guru SLB. Pendidikan pencegahan kekerasan seksual bagi anak-anak dengan disabilitas perlu dijadikan program khusus di sekolah luar biasa agar perlindungan terhadap anak-anak ini dapat dilakukan secara lebih maksimal.

Kata kunci: Teacher; Challenge; Sexual Abuse; Disability

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Introduction

Every child has a unique nature and is born with different potential and the advantages of talent and interest. Children must be provided with education and protection along with their growth and development. Education is a process that begins in the womb and continues throughout life (Kuset et al., 2020). Meanwhile, children must be protected from various negative actions such as exploitation and sexual violence (Handayani, 2017). Sexual violence is considered to exploit inequalities in status and power, abusing the rights and trust of a person who is the target of such behavior. From the above understanding, it is known that sexual violence can affect anyone including children.

According to the World Health Organization, about 15% of the world's population is disabled, or more than 1 billion people. Thus, it can be said to be the largest minority group in the world. A person with a disability is any person with physical, intellectual, mental, and/or sensory limitations who experiences obstacles and difficulties to participate fully and effectively with other citizens based on equal rights. A recent study found that 31.7% of children with disabilities experience violence, and these children are at twice the risk of being subjected to violence compared to children without disabilities (Cunnington & Clark, 2022). A report from the Australian Institute of Health and Welfare (AIHW) update 2021-2022 found that 1 in 4 (25% or 748,000) women with disabilities had experienced sexual violence after the age of 15 and 1 in 14 (6.6% or 187,000) men with disabilities had experienced sexual violence after the age of 15 (Australian Institute of Health and Welfare, 2022). Women with disabilities are more prone to experiencing sexual violence. This is because they lack the necessary skills and knowledge to protect themselves from this type of attack (Warratch et al., 2021). Individuals with disabilities may be at greater risk of sexual violence due to other factors such as social isolation, limited sexual education, dependence on others including for intimate hygiene, reduced physical defenses, helplessness, and communication barriers that prevent disclosure of abuse.

Child sexual abuse is not a rare occurrence or a new phenomenon but has been happening for a long time around the world. This phenomenon is like an iceberg that looks small from the outside, but in fact, is hidden inside, not a little sexual violence itself is carried out by people who are known to the victim, such as school security officers, teachers, neighbors, and even their own family. Several studies reveal that verbal and non-verbal harassment (showing genitals, touching sensitive body parts, showing sexual images) and discrimination against children and adolescents with disabilities are common in public spaces. Children with disabilities require special prevention and treatment because discrimination and exclusion are often experienced by children with disabilities. Despite various regulations in place, the rights of children with disabilities in Indonesia are not being fully met. Issues such as stigma, discrimination, violence, labeling, and exploitation persist. Additionally, these children often lack access to services in health, education, religion, social welfare, and rehabilitation. There are also significant gaps in providing child identity, training, and assistance, limited accessibility, and insufficient opportunities for them to voice their opinions and obtain necessary

information. Regarding prevention, UNICEF also advocates the ministry of education for the adoption of national policies on child protection in educational settings like increasing the capacity of teachers in combating sexual violence (UNICEF, 2021).

Teachers encounter several significant challenges when teaching the prevention of sexual abuse to students with disabilities. One of the primary obstacles is the lack of adequate training and resources that are specifically designed to address the needs of these students. Many educators are not adequately prepared to handle the sensitive nature of this topic and may not know how to communicate prevention strategies in ways that are accessible and understandable for students with a range of cognitive and sensory disabilities. This lack of specialized training makes it difficult for teachers to ensure that all students, regardless of their disability, can grasp the important concepts related to personal safety, boundaries, and recognizing inappropriate behavior.

Additionally, societal stigma and misconceptions surrounding disabilities further complicate the issue. In some cases, there is a prevailing belief that individuals with disabilities are less likely to be targets of abuse or that they cannot fully comprehend or communicate such experiences. This leads to a lack of comprehensive discussion and education on the topic, leaving students vulnerable. Teachers also face the challenge of fostering an environment of trust and openness, where students feel safe and comfortable discussing sensitive topics like sexual abuse. This becomes even more challenging when working with students who have more severe disabilities, as the need for individualized approaches becomes essential. Addressing these challenges requires ongoing professional development, better resources, and a commitment to creating an inclusive, supportive environment for all students.

Teachers and parents are crucial in helping adolescents with disabilities build healthy relationships and safeguard themselves from sexual violence. Research indicates that in Iran, due to traditional family norms, discussing sexuality is considered taboo, and addressing sexual matters with adolescents, particularly girls, is often seen as shameful. The problem causes parents to hide or deny their children's sexual problems to protect the family's reputation (Goli et al., 2020). In education, teachers are the main actors in the fight against sexual violence and are one of five people in the sexual violence prevention team in the educational environment (Australian Institute of Health and Welfare, 2022). A study also showed that teachers are the most common professionals close to children to share their experiences. Trained teachers are effective in improving prevention by recording, reporting, and referring cases of child abuse (Madrid et al., 2020). A study conducted at a university in Sydney in 2022 found that the implementation of reproductive health education or specifically sexual education did not work properly due to resistance from some parties because children with disabilities were unlikely to do so. In addition, there are still many teachers lack of special skills in teaching reproductive health (Strnadová et al., 2022).

Learning programs and activities must pay attention to preparing students to make the best decisions for themselves, one of which is through reproductive health education. Reproductive health education is a form of prevention of sexual violence that presents important information that children should know so that they understand that

sexuality is part of their physical health (Vaskivska, H.O. et al., 2018). In addition, several forms of prevention of sexual violence against children with disabilities include adopting a comprehensive and inclusive reproductive health curriculum, providing support to victims in the form of treatment, and strengthening communication between teachers and students (Arizona Response to Sexual Violence, 2021). In Indonesia, there is no policy related to reproductive health curriculum, so each school implements reproductive health education following the capacity and facilities of each school (Rohmah et al., 2021). Another problem found in the implementation of reproductive health education for children with disabilities is that the learning barriers of children with disabilities require special learning methods to optimize their potential. Some modifications need to be made in learning, for example by simplifying complex concepts (Hermawan, 2020).

For children with disabilities, teaching reproductive health education can be done in special schools. Based on data obtained from 2020-2021, there are 2,250 schools in Indonesia with 28,033 new students, 29,014 teachers, and 3,186 educators. Among the 34 provinces in Indonesia, West Java ranks first in all aspects with details of 385 schools, 5,067 new students, 24,779 students, 4,666 teachers, and 729 educators.³⁹ In 2022-2023, the largest number of special schools in West Java are in Bandung City with 45 schools, and 44 schools in Bandung Regency (Ministry of Education, Culture, Research, 2022).

Global challenges identified by the United Nations International Children's Emergency Fund (UNICEF) in 2016 concerning the prevention of sexual violence in children include (1) barriers from children themselves such as disabilities or other needs (2) lack of awareness, understanding of parents, caregivers, and the wider community in the home environment as well as principals or teachers in the educational environment about sexual violence, (3) lack of skills and training of professionals including teachers in identification, and (4) lack of information from reproductive health education (Radford et al., 2016). The role of teachers is the thing that holds control in efforts to promote and prevent sexual violence, especially in children with special needs amid their challenges and limitations in obtaining learning.

Method

This research is a qualitative study with a phenomenological design, which is a research design where researchers identify human experiences about a particular phenomenon, in this study, the researcher explores the challenges in preventing sexual violence against children with disabilities by special school teachers. The paradigm in this research is interpretivism. Data was gathered using in-depth interviews with teachers. These interviews were conducted face-to-face in an environment that allowed informants to share their experiences and insights openly and without pressure. Interviewing as a method was selected because it offers flexibility and allows researchers to dig deeper into the experiences, perceptions, and contextual challenges that participants face. The researcher used probing techniques to further explore answers and gain a rich and detailed understanding of the phenomenon being studied.

The subject selection technique in qualitative research is purposive sampling. The

number of samples is said to be sufficient when it has reached the redundancy stage in the sense that the data has been saturated (Sugiyono, 2019). Based on Creswell, the identified sample recommendations can vary in the range of 3-15 people (Creswell & Poth, 2018). The subjects selected in this study were adjusted to the inclusion criteria and exclusion criteria. Inclusion criteria such as teachers who have more than 1 year length of employment, and actively involved in sexual violence prevention and the exclusion criteria of this study were unable to attend at the time of the study and were not willing to become informants. The main instrument in this research is the researcher and using other tools, namely in-depth interview guidelines in the form of sheets containing a grid of questions. In supporting the research process, research tools were used including stationery, book, voice recorder, and camera. The in-depth interview time ranged from 35-40 minutes. Ethics in this research was facilitated by the Health Research Ethics Commission of Padjadjaran University on February 16, 2023 with the number 209/UN6.KEP/EC/2023 and registration number is 2212031620.

The data analysis method employed in this study was thematic analysis. Utilizing a qualitative approach grounded in phenomenology, the research sought to identify and organize thematic patterns to capture the essence and meaning of participants' lived experiences. The data analysis process involved several systematic stages. Initially, the researcher organized and prepared the data for analysis by transcribing interview recordings verbatim and documenting participant identities. The transcription process was conducted meticulously by replaying the interview recordings and accurately transcribing the spoken content into Microsoft Word. Subsequently, the researcher engaged in an in-depth reading and review of all data, complemented by a repeated listening of the recordings, while simultaneously making reflective notes to capture emerging insights. The next phase involved the coding of all interview data, facilitated through the use of NVivo 12 software, allowing for the systematic categorization of meaningful units. Following the coding process, the researcher developed descriptions and generated overarching themes by synthesizing related categories. These descriptions and themes were then integrated into a coherent narrative, representing the challenges encountered by teachers in efforts to prevent sexual violence against individuals with disabilities. The final stage of analysis involved drawing interpretations from the identified themes, thereby providing a comprehensive understanding of the research phenomenon.

Results and Discussion

Informants in this study consisted of 11 teachers from three special schools including SLB D YPAC, SLB Riantya, and SLB B Karya Bhakti Bandung City. Based on the table below, the researcher obtained that the age range of the informants in this study was 29-58 years old. The results of this study show that most informants are in the adult age stage with a good level of emotional maturity to provide education on preventing sexual violence in disabilities.

Characteristics based on the education background are D3 till master education with various majors related to the education of children with disabilities. This indicates

that the informants have received special education in teaching children with disabilities, both in designing the learning process and how to communicate. Most informants also have a working period of more than 10 years, with a range of 8-28 years. A teacher's work experience can reflect the credibility of the teacher in educating children, the longer the teacher teaches about sexual violence prevention (Hadija et al., 2021).

Table 1. Teacher responses (n=11) to sexual abuse prevention challenge

Characteristics	Total	Percentage (%)
Age (year) 21-30		
31-40	1	9.1
41-50	4	36.4
51-60	2	18.2
	4	36.4
Sex		
Male	1	9.1
Female	10	90.9
Education Background		
D3	1	9.1
Bachelor of Special Education	9	81.8
Master of Special Education	1	9.1
Length of Service (year)		
1-10	1	9.1
11-20	9	81.8
21-30	1	9.1

The results of the qualitative research are divided into 4 themes, namely type of disability, teacher competence, environment, and implementation of reproductive health education.

1.1. Types of Disability

Based on the informants' opinions, the physical disabilities that exist in this school are physically disabled and cerebral palsy. The limitations possessed by students greatly affect teachers in providing learning. The challenges encountered by special school teachers in preventing sexual violence against children with physical disabilities include difficulties in communication and a sense of helplessness in responding to risky situations. The diversity of limitations possessed by children with disabilities, such as in terms of communication, the informants revealed that this situation is a challenge for teachers. Meanwhile, in this case, cerebral palsy is also a challenge for special school teachers in addition to communication and helplessness, it is also followed by a lack of understanding in absorbing material about preventing sexual violence. In general, children with disabilities face environmental and individual barriers that can interfere with the child's life process. Environmental barriers include limited access to early intervention programs, discrimination, rigid curricula that unsuitable their needs, and non-inclusive school and classroom environments. While individual barriers can be in the form of communication difficulties, lack of motivation, lack of confidence, and easy-to-experience violence. Several other studies have also used other media for the visually impaired such as the use of puppets and drama (Khau, 2022).

Several teachers from special schools have highlighted difficulties in teaching about sexual violence to learners with autistic disabilities including the need for special media,

continuous repetition, interaction disorders, communication difficulties, incomprehension, sensitivity, and often not focusing on learning. The majority of informants said that children with autism are included in a group of disabilities that are difficult to teach both in delivery and understanding. Their lack of self-control in carrying out activities requires teachers to control the situation and conditions in providing learning to children with autistic limitations. Intellectual disabilities found in this research are mentally disabled and down syndrome. Generally, the informants mentioned that the challenges experienced in dealing with learners are having to use simple language in teaching, needing repetition, easily getting to know and being close to others, not understanding, not caring about their surroundings, and having difficulty concentrating and being uncooperative. The challenges encountered by several informants in teaching students with visual impairments are helplessness and lack of tools in learning, the majority of informants revealed that some schools that are not special schools for the blind, experience limited tools or media in delivering information. Thus, this becomes an obstacle for children with visual impairments in learning about reproductive health other than using their audio function.

In children with intellectual disabilities who have knowledge below average, the teacher is asked to convey an instruction repeatedly. Children with intellectual disabilities have difficulty in problem-solving, and critical thinking skills, cannot identify problems, have difficulty in activating prior knowledge, and have deficits in conceptual understanding. This aligns with the research conducted by Ahammed in 2021, The challenges faced by teachers in instructing children with intellectual disabilities include behavioral issues, insufficient time, difficulties with parents, self-esteem concerns, and emotional problems (Ahammed, 2021). According to other research findings, autism can be evaluated through the classroom learning environment. Autistic children can receive sex education effectively through small group or individual instruction tailored to their learning preferences, allowing for a more thorough educational experience (Bloor et al., 2022)

1.2. Environment

The challenges faced by special school teachers in preventing sexual violence also stem from environmental factors, which can be divided into two main sub-themes: the home environment and the school environment. Within the home environment, teachers encounter various issues that affect the effectiveness of reproductive health education and efforts to prevent sexual violence. Several key problems were identified, including family culture that may view discussions about sexuality as taboo, parents' busy schedules, lack of attention to children's emotional and developmental needs, limited supervision, and low levels of parental knowledge regarding reproductive health. In addition, economic challenges and low educational attainment among parents also influence how much support and reinforcement children receive at home regarding topics addressed at school.

The informants (5 out of 11) stated that the most common challenge they face is the lack of parental attention. This lack of engagement makes it difficult for teachers to optimize learning outcomes, as children do not receive adequate support or follow-up at

home. Teachers often feel that their efforts in the classroom are undermined when parents are not involved in reinforcing lessons or guiding appropriate behavior at home. Another critical challenge is the limited supervision of children's behavior. Without proper monitoring, children with disabilities may be more vulnerable to inappropriate interactions or exploitation, particularly if they have difficulty communicating or understanding social boundaries. Teachers emphasized that active parental supervision is essential in preventing sexual violence and ensuring children's overall safety. These environmental factors highlight the importance of collaboration between schools and families. Strengthening communication with parents and increasing parental awareness and involvement are crucial steps toward creating a supportive environment that promotes both education and protection for children with disabilities. Addressing these challenges requires a joint effort between educators, families, and the wider community.

Meanwhile, the challenges of special school teachers in the school environment are also an important concern for informants. Informants revealed that the school learning program related to the prevention of sexual violence still has many problems, including children often having holidays so that the program is not delivered effectively, there is no cooperation between fellow teachers, the regulation has not been implemented, the class structure is still mixed, and there are toilets in one school that are still mixed between men and women. Based on the results, problems encountered in terms of the home environment such as family culture, busy parents, lack of attention, lack of supervision of children, lack of knowledge, low economic level, and low parental education level. Parents have obtained positive attitudes in the form of support for sexual violence prevention programs, but knowledge and practices are still poor.

In general, it is wrongly assumed that people with disabilities will not become sexually active. Many parents think their children do not need sexual health education because they perceive them as asexual. Consequently, these parents experience fears and anxieties when their children engage in sexual activities (BARTIN et al., 2021; Kammes et al., 2020). It is also confirmed from research conducted by Wos in 2020, Many students with disabilities feel hesitant to express their interest in sexual education when talking to parents or teachers. They believe that adults think children should not be involved in sexual activities, which causes them to feel embarrassed (Wos et al., 2021). Thus, inattention to the development of knowledge about sexuality, rights, and relationships in children with disabilities is likely to increase the risk of harm such as sexual violence for this population (Collings et al., 2020).

1.3. Teacher Competences

One of the key challenges faced by teachers in preventing sexual violence is their own level of competence. Many still hold perceptions that sexual education is a taboo subject, which creates discomfort and reluctance in addressing it openly. This is compounded by a lack of knowledge on how to prepare appropriate teaching materials and how to communicate effectively with students, particularly those with disabilities. These gaps in competence hinder the effective delivery of reproductive health education. Teacher competence is also reflected in their access to training opportunities. Several informants

indicated that there are no regular training programs specifically designed for special school teachers on the topic of reproductive health. Others mentioned that such training had been provided in the past, but it occurred a long time ago and has not been updated or repeated. As a result, many teachers are left without the proper tools and confidence to teach this sensitive subject effectively. Even when training is provided, there are challenges in its implementation. Informants noted that the content of the training often lacks depth, especially regarding issues of sexual violence. The training also tends to offer limited resources, leaving teachers without practical materials or ongoing support. This further contributes to inconsistencies in how reproductive health education is delivered across schools.

In addition to the training-related challenges, teachers also encounter difficulties in the classroom. Some struggle with how to teach complex topics in a way that is accessible and appropriate for children with disabilities. In several schools, the media used for learning is not interactive or engaging, which reduces student understanding and interest. In other schools, there is a complete lack of teaching media related to reproductive health. This absence of adequate tools further complicates teachers' efforts to provide effective and inclusive education. Overall, these challenges highlight the urgent need for improved teacher training, curriculum development, and resource provision to ensure that children with disabilities receive comprehensive and accessible reproductive health education.

Teacher competence is still lacking both in knowledge and the development of the assumption that teaching about sex education is taboo to discuss with children with disabilities. Similar things are conveyed in other studies, in addition to knowledge, the success rate of delivering sexual education depends on the teacher's skills in applying teaching materials related to sexual education (Johan & Yassin, 2019). Research conducted by Nelson (2018) revealed that Teachers are enthusiastic and have the resources needed to teach reproductive health, but they feel they lack the expertise to handle reproductive health concerns with students, especially those with disabilities, including when it comes to culture and religion (Nelson et al., 2020).

This also aligns with several other studies, where Teachers reported feeling unqualified to teach sexual health education, citing a lack of professional knowledge, concerns about potentially causing more harm than good, and uncertainty about how to assist students in developing a positive sexual identity (Taylor & V. Abernathy, 2022). In another study, it was found that teachers, educators, and counselors in special schools believed that discussing sexual issues with children with disabilities is unnecessary and considered taboo. They feared that teaching and training on sexuality for adolescents with intellectual disabilities might encourage sexual behavior and increase their motivation to engage in high-risk sexual activities (Goli et al., 2022). The training of teachers is the most important factor that affects the quality of sex education. This is in line with research conducted by Allam, et al in 2021 regarding the challenges of teachers, it is found that teachers have not received training and none of special strategies for teaching students with disabilities (Allam & Martin, 2021).

1.4. Implementation of Reproductive Health Education

Some of the challenges found from the curriculum and teaching methods include the lack of a special curriculum related to reproductive health, the material provided is also considered insufficiently Islamic for Muslim children, and the content is not adapted to the limitations and specific needs of children with disabilities. Teachers reported that the existing curriculum tends to be generalized, created for typically developing children, and only modified slightly by reducing its complexity – without fully considering the cognitive, emotional, and communicative differences of students with disabilities. In terms of learning methods, the majority of informants (4 out of 11) expressed that the available materials for special school children are not aligned with their actual needs. Many of these materials were seen as too abstract or not concrete enough to be understood by children with intellectual or developmental disabilities. Moreover, the curriculum framework often fails to integrate culturally and religiously appropriate content, especially in contexts where Islamic values are integral to family and school environments. This disconnect makes it difficult for teachers to deliver effective and acceptable reproductive health education.

Some informants also described challenges in the implementation of reproductive health education for children with disabilities. These include the difficulty of teaching sensitive topics in ways that are developmentally appropriate, the absence of standardized and inclusive teaching materials, and the limited use – or in some schools, the complete absence – of interactive media to facilitate learning. The lack of visual aids, tactile materials, and digital tools significantly hampers the effectiveness of the learning process, particularly for students who require multisensory engagement to understand complex concepts. Furthermore, some teachers experience difficulties in preparing lesson plans, creating adapted content, and finding teaching strategies that align with the diverse disabilities of their students. This often results in inconsistent implementation of reproductive health education across different schools and classrooms. Teachers are left to rely on their own interpretations and creativity, which may vary significantly depending on their individual knowledge, training, and resources available at their institutions.

Based on research conducted by Zulu et al (2019), Teachers' challenges in implementing reproductive health programs generally include a lack of guidance on curriculum design, particularly regarding how to integrate sexuality education into existing subjects. Additionally, issues arise from the misalignment of reproductive health programs with local norms and perceptions of adolescent sexuality, as well as role conflicts between teachers and parents, which complicate the policy's implementation (Zulu et al., 2019). Thus, it is essential to enhance teachers' awareness of the available resources that can be utilized to teach sex education to students with disabilities (Strnadová et al., 2022).

Communication media for reproductive health are often not accessible to people with disabilities. A study in Bangladesh addressed this by creating inclusive leaflets, flipcharts, and brochures, including audio messages for the hearing impaired, color-contrasted visuals for the visually impaired, and simple language and pictures for those with

intellectual disabilities (Balls, 2021).

Conclusion

The novelty of the research "Teachers' Challenge in Teaching the Prevention of Sexual Abuse in Disabilities" lies in its focus on the unique challenges teachers face when teaching sexual abuse prevention to students with disabilities. This research introduces a perspective that has not been extensively discussed in the literature, specifically the difficulties in communicating sensitive and complex concepts, such as personal boundaries and safety, to students with various types of disabilities. Additionally, the novelty of this research is in identifying the limitations in teacher training for addressing this topic, as well as the lack of resources tailored to the needs of students with disabilities.

This research aimed to explore the challenges faced by special school teachers in delivering sexual abuse prevention education to children with disabilities. The findings reveal several key challenges across multiple dimensions, including student characteristics, teacher competence, learning media, and the surrounding environment. One of the most prominent challenges is the diversity of disabilities among students. Children with intellectual disabilities, autism spectrum disorders, hearing impairments, and other conditions require different teaching approaches. Teachers reported difficulty in adjusting content and communication methods to suit each child's specific needs. For instance, children with limited verbal abilities may struggle to express discomfort or understand concepts related to body boundaries and inappropriate behavior. Meanwhile, children with sensory impairments may require alternative media or tools that are not always available in schools.

Teacher competence was another major concern. Many educators lacked sufficient knowledge and experience in teaching sensitive topics such as sexual abuse prevention. A number of informants acknowledged feeling unprepared and expressed discomfort discussing sexuality due to social taboos. Additionally, most had never received formal training on this subject, or if they had, the training occurred years ago and lacked practical guidance. Environmental factors also played a significant role. Teachers noted a lack of parental support, often stemming from parents' limited education, busy schedules, or cultural beliefs that discouraged open discussions about sexuality. This lack of engagement at home made it difficult to reinforce lessons taught at school.

Furthermore, the absence of interactive or inclusive learning media in many schools hindered effective teaching. Some schools had no resources at all for reproductive health education. In conclusion, addressing sexual abuse prevention in special schools requires a comprehensive approach. Programs should enhance teachers' skills through structured training by health experts. Sexual abuse prevention should also be formally established in special education settings to protect children with disabilities effectively.

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