

Health Educational Program Regarding Prevention of Sexual Harassment among Young Female Adolescents

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Abstract

Objective: The main objective of this study is to develop a health education program regarding the prevention of sexual harassment among young female adolescents.

Methods: A quasi-experimental design was used. The study was conducted in Jordan in That Alnetakeen governmental School for Females in Irbid city. A purposive sample composed of 140 students, from the 6th and 7th grade has been chosen. A Self-Administered Questionnaire was utilized. It was composed of 3 parts, part one: socio-demographic data, part two: Assess Female student's knowledge about sexual harassment pre/post program. Part three: Assess the measurement and protection practices that the female students can take into consideration toward sexual harassment.

Results: The main findings of this study: More than half of the young female adolescents were at the age of 12 years and lived in the village. Majority of them had satisfactory knowledge regarding sexual harassment, the prevention methods and side effects from exposure to sexual harassment with a highly significant difference between pre, post educational program implementation at $P < 0.001$. Also, the current study represented more than one-tenth of the Young female adolescents had total done practices to protect them against sexual harassment pre educational program changed to a majority of them had total done practices post-program implementation with a highly significant difference between pre, post educational program implementation at $P < 0.001$.

Conclusion: Sexual harassment is unwanted sexual attention, many adolescents experience it as victims, perpetrators or both, adolescent sexual harassment is one of the major problems of the adolescent that affect their health and security specifically, as various (regional, national and Global).

Keywords: Health educational program; Sexual harassment; Young; Female; Students

Introduction

The term “*sexual harassment*” can be described as a pattern of unwanted gendered/sexual conduct described in women's accounts of their employment experiences. Sexual harassment is commonly known as unwanted sexual attention. Many adolescents consider it as victims, perpetrators or both. As physical contact like kissing, hugging and touching, it can take different cases as non-physical contacts like sexual remarks, jokes, gestures, and looks, or showing sexually plain images, messages or notes or publishing sexually related rumors [1,2].

A recent study among pre-college girls in grades seven found 51% reporting some form of sexual abuse [3], among those adolescents who reported sexual abuse, a full 12% reported rape, six percent reported forced oral sex, and one percent reported an attempted rape. Almost one-third (32%) of these assaults took place between the ages of 12 and 17 years. Similarly, in the National Survey of Adolescents funded by the National Institute of Justice, eight percent of teens surveyed reported that they had been sexually assaulted [4]. In the National Survey of Children's Exposure to Violence, 14% of girls aged 14 to 17

had been victims of completed or attempted rape in their lifetimes, and six percent reported that the violence had occurred in the past year [5].

In Egypt, the national survey conducted by the Center for Diseases Control and Prevention showed that among high school girls, 22.9% had been in physical violence and 21.2% had non-physical violence on school property within 1 year [6]. Also, WHO reported that 80 percent of women in rural Egypt believed that beating by her partner is allowed if the woman refuses to have sex? Comparing to Jordanian community who does not sufficiently addresses the sexual harassment issue although it's large and increasingly prevalent problem in Jordan [7]. These reports imply that sexual violence exists worldwide; hence, sexual harassment is increasingly being recognized as a public health concern worldwide.

The different kinds of sexual harassment are physical (unwanted physical contact, as strip searches by or in the company of the opposite sex, touching, and rape, among others), verbal (unwelcome sexual advances, jests or explicit remarks about a person's body in their presence and non-verbal (unwelcome gestures, indecent exposure, unwelcome display of obscene pictures. The University Of KwaZulu-Natal management also realizes these three types of sexual harassment (physical, verbal and non-verbal) [8]. In reality, sexual harassment is a huge problem that adversely influences students' emotional and

educational growth. A recent study by the American Association of University Women found that 83% of female and 79% of male students in grades 8 through 11 had been sexually harassed at school in ways that interfered with their lives. One-third of the surveyed students, 20% of boys and 44% of girls said that they fear being sexually harassed during the school day [9].

Sexual harassment can be destructing and have various effects on the emotional well-being, physical health, and vocational success of those who experience it; it makes students give up and hate education and work, educational advancement, and career chances. The physical and emotional impacts of sexual harassment are the same to rape and incest and face the diagnostic criteria for post-traumatic stress disturbance, the label "*Sexual Harassment Trauma Syndrome*" to demonstrate the turret of impacts surrounding sexual harassment and security of workplaces. There are a lot of burdens, and problems of suffering from sexual harassment for health care and social service for young female adolescents, some contexts are at higher risk of violent and abusive behavior, involving Sexual Harassment and Sexual Assault [10].

The consequences of sexual harassment among adolescents involve risks of suicidal thoughts, suicidal ideation and feeling unsafe at school. For females, they have higher challenges for self-damage, eating problems, lower self-esteem, increased heavy episodic drinking, depressive symptomatology, and smoking, the sexually abused females were more likely to also report poor health, often complaining of walking and carrying out daily activities, pain, memory loss, dizziness, and vaginal discharge in the 4 weeks prior to the interview [11].

Prevention and management of sexual harassment have been researched, formulated and tested. In some high school education, the sexuality and reproductive health curricula were prepared to focus almost exclusively on biology, offering little guidance and information about the relational and emotional aspects of intimacy, attraction, sexuality, and reproduction. Although, the inveterate nature of malignant organizational problems, there is work that can be done in the organizational context to prevent Sexual Harassment. Thus, there is a continuing responsibility for organizational prevention as the first base of defense. Here we look at what has been done to decrease education and work place harassment more broadly and then recognize three ideas for future work. The hierarchical power dynamic is at the base of sexual harassment and examining that power dynamics in hierarchical relationships is a path that has not been investigated. One condition that establishes the phase for prohibiting sexual harassment is reducing sexual harassment in the education and workplace. The National Institute for Occupational Safety and Health brought the important concentration to research on workplace and education harassment as a source of morbidity and death-rate. Sexual Harassment falls into the scope of abusive, even violent attitudes, whether the violence is interpersonal, verbal, in nature or physical. The creation of a secure, safe workplace is considered a priority for organizations, particularly healthy ones that place priority on their human resources [12].

Sexual assault prevention education programs try to face and stop sexual harassment from happening. This is primary prohibition and is pointed at whole population groups (for example, school groups or vocational groups). Contemporary forms of sexual harassment prohibition education have developed from feminist community organizations increasing awareness about violence against females. The majority have been carried in school settings. Recently, programs are

being enhanced in sporting, tertiary educational and other social settings [13].

Moreover, sexual harassment is a devastating problem, damage young people and destroy their future, so, it's important to face sexual harassment among young female adolescents, and try to design programs to prevent this huge problem, so, in this study we will try to evaluate the problem and develop a health educational program regarding the prevention of sexual harassment among young female adolescents.

Study questions

In order to assess what the effect of sexual harassment among young female adolescents, the following questions will be addressed:

- What are the main factors that pay young people for sexual harassment for a female?
- What are the real effects of sexual harassment on female adolescents?
- Are health education programs effective for preventing sexual harassment among young adolescents?

Methodology

Research design

A quasi-experimental design was utilized to assess Health educational programs regarding the prevention of sexual harassment among young female adolescents.

Sample and setting

A random sample was used to choose three classes from the 6th grade and two from 7th with a total number of 140 students from (That-Alnetakeen) governmental school in Jordan/Irbid city.

Size

A purposive sample was recruited, with a total of 140 students have been chosen for the study according to inclusive criteria; 6th and 7th grade students, their age ranged between 11-12 years old, and with a family consent form.

Study instruments

A predesigned questionnaire was developed by the researcher based on recent related literature and experts, opinion it includes the following parts:

1st Part: Socio-demographic characteristic of the young female students with (9 Items) including age, educational class, living place, family income, birth order, father and mother educational level, father and mother job and type of sexual attempt were exposed.

2nd Part: Female student's knowledge about sexual harassment. For the validity purpose, the tool was tested through 5 experts, from community health nursing department, Faculty of Nursing, Ain Shams University and for the reliability the Cronbach's Alpha coefficient was 0.75. The scale includings:

1. Basic knowledge regarding sexual harassment with (20 Items) including definition, types, Causes, availability of educational

programs regarding sexual harassment and the family role regarding the education of sexual harassment

2. Side effects of exposing to sexual harassment with (29 items) covering the psychological effects (9 Items), social effects (9 Items) and physical effects (11 Items)

3. Prevention of sexual harassment with (12 Items) including increase awareness of the early adolescents regarding sexual harassment, family role in follow up, monitor children during relationships even with relatives, trust relationship between family and children, school role in monitoring students, encourage female students to avoid deserted Ares, family and school cooperation beside the social media and increase religion and ethical awareness in this regards. The scored was calculated as 1 for the correct answer, and 0 for the wrong one. The whole knowledge questions scored 46 questions with 78 points, a total of 60% and above were considered satisfactory, and less than 60% were considered unsatisfactory.

3rdPart: Preventive measurement and protection practices that the female students can take in consideration toward sexual harassment with (19 Items) including reporting to school member or family member or friends to deal with the harasser, run away from harasser, ignoring the situation, ask the harasser to stop, shouting or asking for help, threatening the harasser of reporting to school or family member, fight with harasser, use self-defense or stop going to school. The scoring was based on 4 points Likert scale, ranging from 0 (did not do it) to 4 (things are made better. The final score of students responses was classified either 60% and above representing done correctly or less than 60% denoting not done. For the validity purpose, the tool was tested through 5 experts, from community health nursing department, Faculty of Nursing, Ain Shams University and for the reliability the Cronbach's Alpha coefficient was 0.77.

Program description

Preparatory phase

- Approval was taken from research of ethics committee, Faculty of Nursing, Ain Shams University. Official permission including the title and purpose of the study was submitted from the concerned authorities in the (That-Alnetakeen) governmental school for females in Irbid city, Jordan to get approval for data collection to conduct the study.
- The pre-test self-administrative questionnaire items have been explained for each class by the researcher to ensure the students understanding for each item. The time needed for filling in the forms varied from 40 to 60 min. The obtained data were considered as baseline or pre-program data.

Program development and implementation phase

The educational program was implemented to the students inside their classes, divided according to the age and grade. It was administered in 8 sessions (6 theories & 2 practices). The duration of each session was two class hour (50×2+100 min). It started with an orientation session to acquaint students with the educational program objectives and procedures. The program included theoretical as well as practice parts. The educational program was implemented & carried out to the study group and media in addition to the use of guiding booklet specifically designed and developed based on university youth assessment need.

The program contents

- Meaning of sexual harassment, causes, and types.
- Components of female reproductive system, Physiological and psychological changes in the female body during puberty and the relation with being a victim for sexual harassment.
- Sexual harassment risk factors and consequences which include the physical, psychological and social aspects.
- Female's attitudes toward sexual harassment.
- Preventive measurement of sexual harassment.
- Family and schools roles in the prevention of sexual harassment.
- Importance of educational program in the prevention of sexual harassment.

Program evaluation phase

This was done through giving posttest similar to the pretest, evaluation administered to study subjects after one month of completion of the program in order to estimate the effect of the program on female's adolescent's knowledge and practices related to prevention of sexual harassment.

Statistical design

Data were revised, coded, analyzed and tabulated using the number and percentage distribution and carried out in the computer. Statistical Package for Social Science (SPSS) version 20 was used. The following statistical techniques were used: Percentage, Mean Value, Standard Deviation, Chi-square (χ^2), T paired test and proportion probability (P-value) Ethical considerations (Figures 1-3).

Results

Approval was taken from research of ethics committee, Faculty of Nursing, Ain Shams University. Official permission including the title and purpose of the study was submitted from the concerned authorities' That-Alnetakeen governmental school for females in Irbid city, in Jordan to get approval for data collection to conduct the study. Informed consent was obtained from each participant and their parents before collecting any data. The researcher explained to the students the study aim in a simple and clear manner to be understood by their age. Assuring that no harmful maneuvers will be performed or used, and no foreseen hazards will be anticipated from conducting the study. Participants were informed about their right to withdraw from the study at any time without giving any reason; Participants were informed that data will be considered confidential and will be used only for the aim of this study. The researcher phone number and all possible communicating methods were identified to the participants to return at any time for any explanation (Tables 1-8).

Item	No.	Percentage %
Age		
11	69	49.3
12	71	50.7
Grade		
6 th	70	50
7 th	70	50

Living place		
City	69	49.3
Village	71	50.7
Income		
Sufficient	69	49.3
Insufficient	71	50.7
Family member		
3-5	62	44.3
6-9	60	42.9
>9	18	12.8
Father level of education		
Do not read or write	3	2.1
read and write	8	5.7

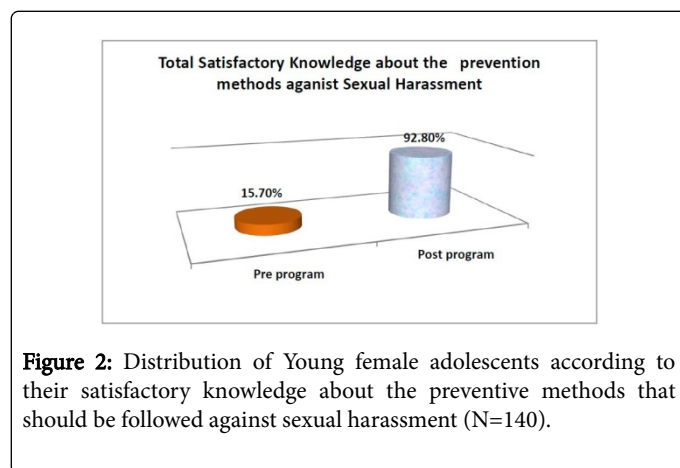
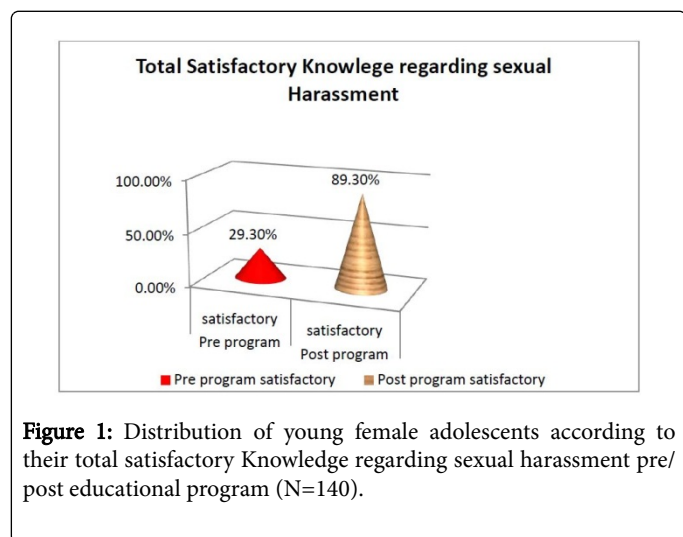
preparatory	23	16.4
Secondary/Diploma	66	47.1
Bachelor	40	28.6
Mother level of education		
Employee (government/private technical)	75	53.6
Retired	60	42.9
	5	3.5
Mother job		
Working	83	59.3
Not working	57	40.7

Table 1: Distribution of young female adolescents according to their socio-demographic characteristics (N=140).

Type of sexual attempt were exposed n=(109)		
Someone asked you to date	43	39.5
Someone sent sexual/love messages	13	11.9
Talk about how much they liked your body or parts of it	31	28.4
Someone has sent a joke on your phone or said to you	7	6.4
Someone tried to touch you on purpose	5	4.6
Someone tried to remove your clothes	0	0
Someone looked at you in a suggestive sexual way	5	4.6
Someone had been following regularly	31	28.4
One had sexual comments on you or a whistle	2	1.8
Passed pornographic material to you directly or <i>via</i> email, phone	4	3.7
The attempt happened in (109)		
Transportation	45	41.3
Home/Relatives home	9	8.2
Out Side home	55	50.5
The time of attempt (109)		
Morning	40	36.7
After noon	14	12.8
Night	55	50.5
Absent from school when being harassed (109)	8	7.3
Leave from school after being harassed (8)		
One day	3	37.5
2 days to 3 weeks	3	37.5

More than 3 week	2	25
There is a relationship with the person who harassed	9	8.2

Table 2: Distribution of the young female adolescents according to their type of sexual attempt were exposed (n=9).



Psychological effects	Pre		Post		Chi-square	
	N	Percentage	N	Percentage	χ^2	P-value
knowledge about Psychological effects of sexual harassment						
Joy and self-confidence	11	7.9	116	82.9	159	0.001**
Depression and unwillingness to talk to others	10	40	137	97.9	231	0.001**
Continuous crying	13	9.3	111	79.3	139	0.001**
Fear of people	21	15	140	0	207	0.001**
Tension and confusion	47	33.6	133	95	115	0.001**
Lack of focus in the study	43	30.7	140	0	148	0.001**
Lack of sense of security	10	40	133	95	216	0.001**
Lack of desire to study	32	22.9	116	82.9	101	0.001**
Fear of going out of the house	33	23.6	140	0	173	0.001**
Rest	28	20	127	90.7	159	0.001**

Note: *Responses not mutually exclusive; **highly significance.

Table 3: Distribution of Young female adolescents according to their satisfactory knowledge about side effect from exposure to sexual harassment (psychological effects) (N=140).

Social effects	Pre		Post		Chi-square	
	N	Percentage	N	Percentage	χ^2	P-value
knowledge about Social effects of sexual harassment						

Isolation from others	34	24.3	122	87.1	112	0.001**
Fear of people others	30	21.4	137	97.9	170	0.001**
Hatred of society	43	30.7	135	96.4	131	0.001**
Speed of emotion	31	22.1	136	97.1	164	0.001**
Disorder in social relationship with others	27	19.3	128	91.4	147	0.001**
Feelings of distrust in others	45	32.1	140	100	144	0.001**
Doubt and loss of security	39	27.9	140	100	158	0.001**
Mistrust of the surrounding men	56	40	140	100	120	0.001**
Refusal to marry	33	23.6	134	95.7	151	0.001**
Rest	37	26.5	132	94.3	135	0.001**

Note: *Responses not mutually exclusive; **highly significance.

Table 4: Distribution of Young female adolescents according to their satisfactory knowledge about side effect from exposure to sexual harassment (social effects) (N=140).

Physical effects	Pre		Post		Chi-square	
	N	Percentage	N	Percentage	χ^2	P-value
knowledge about physical effects of sexual harassment						
Eating Disorders	37	26.4	140	100	163	0.001**
Continuous headache	23	16.2	134	95.7	179	0.001**
Excessive sweating and redness of the face	44	31.4	119	85	82.6	0.001**
Increase the number of heart beat	78	55.7	140	100	79.6	0.001**
Feeling difficulty breathing	89	63.6	140	100	62.4	0.001**
Feeling tight and pain in the chest	21	15	128	91.4	164	0.001**
Sleep and difficulty sleeping	67	47.9	140	100	62.4	0.001**
Repetition of night nightmares	25	17.9	136	97.1	180	0.001**
Periodical disorders	47	33.8	140	100	139	0.001**
Feelings of constant pain and fatigue	47	33.8	110	78.6	57.5	
Repeated absence from school	56	40	140	100	120	
Rest	49	35	121	86.5	77.6	0.001**

Note: *Responses not mutually exclusive; **highly significance.

Table 5: Distribution of Young female adolescents according to their satisfactory knowledge about side effect from exposure to sexual harassment (physical effects) (N=140).

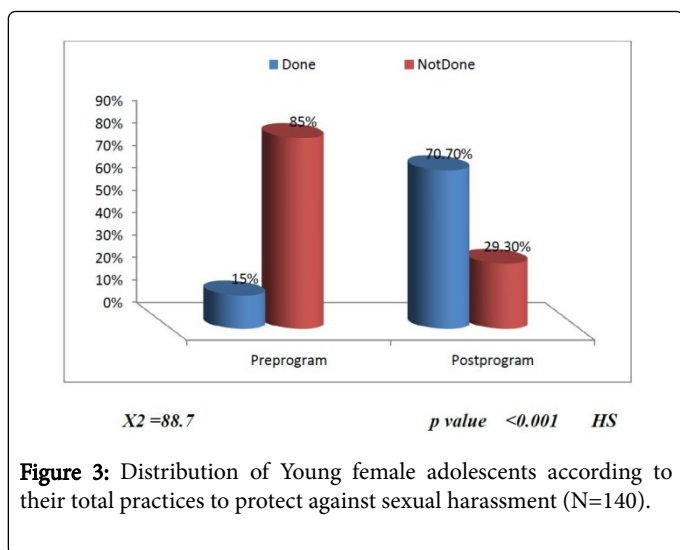


Figure 3: Distribution of Young female adolescents according to their total practices to protect against sexual harassment (N=140).

Items	knowledge Mean ± SD	T- test	P-value
Age (years)			
11	15.93 ± 2.41	3.111	0.050*
12	17.31 ± 3.05		
Father Education level			
Do not read or write	16.59 ± 4.14	2.706	0.023*
read or write Preparatory	17.27 ± 3.11		
Secondary/Diploma	18.44 ± 2.93		
Bachelor	3.44 ± 0.98		
Mother Education level			
Do not read or write	16.32 ± 3.04	0.976	0.409
read or write Preparatory	15.09 ± 3.09		
Secondary/Diploma	18.33 ± 4.21		
Bachelor	18.78 ± 3.82		
Living place			
City	14.81 ± 3.43	1.311	0.003*
Village	15.9 ± 3.29		
Father Job			
Government employee	15.93 ± 2.41	2.849	0.006*
Technical	17.31 ± 3.05		
Private sector employee	18.79 ± 2.92		
Retired	14.24 ± 3.50		
Mother job			

Working	9.21 ± 3.28	2.17	0.033*
Not working	8.24 ± 2.06		
Note: *Significant 0.05.			

Table 6: Association between of young female adolescent's total knowledge and their socio demographic characteristic pre educational program (N=140).

Practice s	Total Knowledge				
	Satisfactory		Unsatisfactory		Chi-square
	N	Percentage (%)	N	Percentage (%)	N Percentage (%)
Done	86	61.4	13	9.3	18.1 <0.001**
Not done	22	15.7	19	13.6	
Note: **Highly significance.					

Table 7: Relation between young female adolescents total knowledge and their total practice score level Post educational program (N=140).

Items	Pre	Post	Student's test	
	Mean ± SD	Mean ± SD	T	P
Total Knowledge score	12.6 ± 3.3	28.5 ± 8.3	21.126	<0.001**
Total Practice score	5.3 ± 2.5	20.7 ± 6.3	23.803	<0.001**
Note: **Highly significance.				

Table 8: Correlation between female adolescent knowledge & practices pre/post educational program (N=140).

Narrative of findings

Table 1, Shows that the young female adolescents were at the age of 12 years living in the village & also not sufficient income was representing 50.7 respectively. 44.3% their family member from 3-5 member. According to their father, educational level found that 47.1% were finished secondary or diploma and 28.6% was a bachelor, and only 29.3% of them were a government employee. The same table represents that 42.9% of their mothers were preparatory school and 40.7% were not working.

Table 2, Illustrates that Regarding the type of sexual attempt were exposed was found 39.5% who bothered them and asked the date while 28.4% Talk about how much likes their body or parts of it or Someone has been following them regularly while 50.5% of them the time of attempt occurs at night& 8.2% of the person harassed were from relatives, and less than one-tenth was leave from school when harassed.

Figure 1, Emphasizes that 29.3% of the studied sample had total satisfactory knowledge pre educational program regarding general knowledge about sexual harassment changed to 89.3% with a highly statistically significant difference between pre, post educational program at $P < 0.001$.

Figure 2, illustrates that 15.7% of young female adolescents had a total satisfactory knowledge pre educational program about the prevention methods against Sexual Harassment improved to 92.8%

with a highly statistically significant difference between pre, post educational program at $P < 0.001$.

Table 3, reflects that 20.0% of young female adolescents had a total satisfactory knowledge pre educational program about Psychological effects of sexual harassment while changed to 90.7% with a highly significant difference between pre, post educational program at $P < 0.001$.

Table 4, reflects that 26.5% of the of young female adolescents had a total satisfactory knowledge pre educational program about social effects of sexual harassment while changed to 94.3% with a highly significant difference between pre, post educational program at $P < 0.001$.

Table 5, demonstrates that 35.0% of the young female adolescents had total satisfactory knowledge pre educational program regarding physical effects of sexual harassment while changed to 86.5% with a highly significant difference between pre, post educational program at $P < 0.001$.

Figure 3, reveals that 15.0% of the Young female adolescents had total done practices to protect them against sexual harassment pre educational program changed to 85.0% had total done practices post-program implementation with a highly significant difference between pre, post educational program implementation at $P < 0.001$.

Table 6, Shows that there were statistically significant differences between young female adolescents total knowledge score level and their age, father educational level & job, living place and mother job.

Table 7, states that there were highly statistically significant differences between Young female adolescents total knowledge and their total practices Post educational program at $p < 0.001$.

Table 8, demonstrates that there was a highly statistically significant difference between female adolescents total knowledge, & their Practices pre/post educational program implementation at p -value < 0.001 .

Discussion

One of the most harmful problems meeting students in recent years is sexual harassment behavior; it demands stronger emotional reactions among student, involves fear, frustration, feeling hurt, anger, resentment, helplessness, anxiety, and irritation [14]. Regarding sociodemographic characteristics of the young female adolescents, the results of the current study revealed that young female adolescents were at the age of 12 years representing half of them. A result about Sexual violence and its health consequences for female children in Swaziland agree with the study that a cluster survey study that shows that 56.7% from the sample were female, with the mean age 13.45 years and half of them lived in urban areas. This may be due to that younger age may be a reflection of the lack of experience and lower education, resulting in students' inability to handle potentially difficult situations. About income, the present study revealed that the highest percentages of the sample, not sufficient income.

Similarly, in a study about Sexual abuse of school-age children: Evidence from Kenya who observed that young schoolgirls, who came from lower-income families, are tempted into sexual liaisons by gifts and other promises. Maybe this indicated that economic problems also exert huge pressures on students making them violent or submissive in the face of social challenges. This finding seems broadly in line with the literature from other studies in Africa, such as the Violence against

Children studies, as well as studies from high-income countries [15,16].

As regards student school achievement this study demonstrated that the students were exposed to sexual harassment and absent from school when was harassed represented less than one-tenth. In a study on the impact of gendered school experiences on retention and achievements in Botswana and Ghana, the gender-based sexual harassment, such as verbal abuse and physical assault, contributed significantly to the irregular attendance and underachievement of girls. The survey conducted in Botswana further found that 11% of the girls in the sample were seriously considering dropping out of school. For instance, exposed to sexual harassment has often been found to change school or stop attending due to fear of continued harassment [16].

Regarding the type of sexual attempt were the young female exposed this result found that more than one third who bothered them and asked the date while less than one third talk about how much likes their body or parts of it or Someone has been following them regularly this result In the same line with a study about Sexual violence against schoolgirls in Jimma zone: Prevalence, pattern, and consequence. The common types of sexual harassment in the schools were verbal sexual harassment represented 107 (30.2%) and which were comparable with 49.8% and 31.1% from the study conducted in Jimma zone on high school students [17].

Effect of the health educational program on young female students' knowledge & practices

As regards the total knowledge of young female adolescents about sexual harassment, the results of the current study showed that less than one-third of the studied sample had total satisfactory knowledge pre educational program regarding general knowledge about sexual harassment changed to a majority of them with a highly statistically significant difference between pre, post educational program. This could be due to using different methods of educational guidelines program as face to face interaction, discussion, and demonstration supported by using posters, models, and handouts which are effective approaches for conveying information. Also these results Incongruence with the study about experience and perception of sexual harassment during the clinical practice of Korean Students who stated that educational guidelines program can increase students' level of information through the use of basic principles, which are acceptance, understanding, empathy, and communication which are helping students to make decisions for themselves according to their information and problems [18]. This finding disagrees with [19] in a sample 1000 participants, Turkey in a study about Sexual harassment against adolescence students in Turkey "who reported that the majority of students in this study reported that they don't know anything about sexual harassment" [19].

As regards the student knowledge about prevention methods against Sexual Harassment this result illustrates that more than a tenth of young female adolescents had a total satisfactory knowledge pre educational program about the prevention methods against Sexual Harassment improved to most of them with a highly statistically significant difference between pre, post educational program. This finding disagrees with another study which reported that the majority 87.1% of students exposed to sexual harassment reported that they are unsatisfactory knowledge about prevention methods against Sexual Harassment. Form the researcher point of view; this may be expected because of the difference in the setting of the study, culture, tradition,

and belief of the participants with the researcher [20]. Related to student knowledge about Psychological effects of sexual harassment the current study reflects that less than quarter of young female adolescents had total satisfactory knowledge pre educational program about Psychological effects of sexual harassment while changed to most of them with a highly significant difference between pre, post educational program. This finding disagrees with [21] in a study about Perceptions of sexual harassment in Swedish high schools: experiences and school environment problems "sample 500 students" who revealed that the total knowledge of the young students about the psychological consequences of sexual harassment reported highest prevalent was 31% psychological consequences followed by 16.5% physical consequences post guideline program. From the researcher point of view, this may be expected because of the Difference in sample size participants with the researcher. It is supported by [22] in a study about the Prevalence and correlates of gender-based violence among female university students in Northern Nigeria. African who reported that more than a quarter of the young female adolescents had a total satisfactory knowledge pre educational program [21,22].

According to student knowledge about social effects of sexual harassment, this results reported that more than one-quarter of the of young female adolescents had total satisfactory knowledge pre educational program about Social effects of sexual harassment while changed to most of them with a highly significant difference between pre, post educational program. These finding disagree with [18] in a study about the Prevalence and outcomes of sexual violence among high school students in Ethiop, who reported that more than one third of the study respondents have to face trouble sleeping or relaxing, and more than half of the study had poor knowledge about Social effects pretest compared to more than two-thirds had good knowledge posttest regards young female adolescents knowledge regarding physical effects of sexual harassment [23].

The current study demonstrated that more than one-third of the young female adolescents had total satisfactory knowledge pre educational program regarding physical effects of sexual harassment while changed to most of them with a highly significant difference between pre, post educational program. These finding supported with a result by [24] in a study about Alcohol-related sexual assault: A common problem among secondary school students who stated that more than two third of young students had good knowledge post-program regarding general side effects of sexual harassment. This contradicted with [25] in a result about: Predicting sexual aggression: The role of pornography in the context of general and specific risk factors who studied female adolescents reported that 9.9% of them had good knowledge, while 56.1% and 34% had fair and poor knowledge levels at pretest period. At posttest still, those who had a good level of knowledge represented (86.8%).

As regards the young female adolescents practices to protect themselves against sexual harassment the current study revealed that more than one-tenth of the young female adolescents only know how to protect themselves against sexual harassment pre educational program. This may be found that majority of students are unaware that and they lack many of the skills necessary to defuse a potentially sexual harassment behavior situation while after implementation of program changed to majority of them had total done practices post-program implementation with $P < 0.001$.

A highly statistically significant difference between Young female adolescent's total knowledge and their total practices Post educational program. This is comparable to what discovered by [26] in a study

about A risky boundary: Unwanted sexual behavior among youth and done to assess the knowledge, attitudes, and practices related to sexual harassment among 859 adolescent girls in schools in Sri Lanka, of the total sample, approximately 60% of respondents identified how to protect themselves, only 17.1% don't know and to study undertaken by [27]. In a study about the Impact of sexual harassment victimization by peers on subsequent adolescent victimization and adjustment: A longitudinal study. Journal of Adolescent Health who reported that "only 8.8% of students identified correctly the appropriate time to perform the action taken to protect themselves preprogram improved to 78.8% post-program implementation. Maybe the most common reasons for not practicing may be the students not training to know how to perform it" [26,27].

Related to the statistical association the following study shows that there was a highly statistically significant difference between young female adolescents total knowledge score level and their age, father educational level& job, living place and mother job, which reflects that the parents' education and occupation affect the young female students' readiness to maintain and protect themselves. Which has been similar to a study was done by [28]. In the study about Evaluating a Psycho educational sexual assault prevention program incorporating theatrical presentation, peer education to explore parental perspectives toward the provision of sexual harassment, Parents' knowledge were associated with parental social-demographic characteristics. Also, there was a highly statistically significant difference, between young female students' total knowledge, and practices (action is taken to protect themselves against sexual harassment pre/post educational program implementation at $p\text{-value} < 0.001$). These findings clarify that health education affected the young female students; as the knowledge about sexual harassment, and practices improved. The previous results also in line with the findings of [29] in the study about Evaluation of the effectiveness and implementation of the sexual health program Long Live Love. European Health Psychologist who founded that there was a significant association between respondents' educational qualification and knowledge and practices related to young students counseling, and between age and practices related to sexual harassment. And similar to Meinck et al. [30], in the study about Risk and protective factors for physical and emotional abuse victimization amongst vulnerable children in South Africa. Child Abuse, who reported a significant improvement in knowledge after health education observed [21-23].

All of these results confirm that giving health education to young female adolescents can help them in improving knowledge and practice in prevention and protection from sexual harassment. This accidental that the health education program applied through the present study was useful. This is agreed with [31] in a study about Physical, emotional and sexual adolescent abuse victimization in South Africa reported that the health education intervention applied in his study succeeded in improving the knowledge significantly affirming that it is the cornerstone in prevention and protection from sexual harassment [31].

Conclusion

More than half of the young female adolescents were at the age of 12 years and lived in the village. More than two third of them had satisfactory knowledge regarding sexual harassment, the prevention methods and side effects from exposure to sexual harassment with a highly significant difference between pre, post educational program implementation at $P < 0.001$. Also the current study represented more

than one-tenth of the Young female adolescents had total done practices to protect them against sexual harassment pre educational program changed to most of them had total done practices post-program implementation with a highly significant difference between pre, post educational program implementation at $P < 0.001$. There were highly statistically significant differences between socio-demographic characteristics of young female students and their total knowledge. Also, there was a highly statistically significant difference between female adolescents total knowledge, & their Practices pre/post educational program implementation at $p < 0.001$.

Recommendations

- Implement health education sessions in different schools regarding sexual harassment including knowledge and take certain actions against sexual harassment.
- Mass media through TV, broadcasting, and newspapers should have an active role in increasing community awareness regarding sexual harassment consequences on the females and their families.
- Access to education by girls about sexual harassment must be steadily promoted through adequate policies and sensitization campaigns by MOE (Ministry of education).
- Booklets, manual and simplified teaching materials should be available for parents and teachers to guide them with essential information regarding sexual harassment socially, psychologically and educationally.

Further Research

- Further research is also recommended on how intervention designers should address prototypes of victims and perpetrators of sexual harassment in their programs.
- As necessary, a future study is suggested to be carried out using the longitudinal method to examine the multidimensional impact of adolescent sexual harassment and the development/progress they show in the process of psychosocial support they are provided.

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