The Social Advocacy Process in Cases of Children Victims of Sexual Abuse at the SOW OFF Indonesia Institution

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ABSTRACT: Social advocacy plays a significant role in enhancing the protection and handling of minors who experience sexual abuse and violence. Collaboration between child protection agencies, non-governmental organizations, and the government in building advocacy networks is crucial for advocating for better policy changes and ensuring effective implementation. Despite some progress, challenges remain in this social advocacy process. Barriers such as insufficient resources, social stigma, and low public awareness need to be addressed. This study aims to investigate the social advocacy process regarding the handling of minors experiencing sexual abuse and violence. Through a qualitative approach, literature review, and interviews with relevant stakeholders, the research analyses advocacy efforts in addressing cases of sexual abuse and violence against children. Additionally, this study proposes recommendations for improvement, including enhancing public education, broader stakeholder training, and strengthening child protection policies. The advocacy process in handling minors involved in sexual abuse and violence requires a strong social advocacy effort. By strengthening the social advocacy process through education, policy reinforcement, training, victim support, and a robust advocacy network, we can improve protection and handling of these cases and give a voice to those who need support in cases of sexual abuse and violence against minors.

KEYWORDS: Social advocacy process, children, sexual abuse, sexual violence, protection

I. INTRODUCTION

Sexual abuse is any form of behaviour with a sexual connotation that is carried out unilaterally and is unwanted by the victim. It can take the form of words, writings, symbols, gestures, and actions that are sexually suggestive [1]. Activities with sexual connotations can be considered sexual abuse if they contain the following elements: the perpetrator's unilateral imposition of will, the event is determined by the perpetrator's motivation, the event is unwanted by the victim, and it results in suffering for the victim, according to [2]. Sexual abuse here refers to any form of sexual behaviour that is unwanted by the person receiving the treatment, and sexual abuse can happen to any woman [3]. From a behavioural aspect, Farley (1978) defines sexual abuse as unwanted sexual advances, which can take various forms, including subtle, coarse, open, physical, or verbal, and are one-sided in nature.

According to Rubenstein in Collier (1998), sexual abuse is unwanted sexual behaviour or actions based on sex that offend the recipient. Sexual abuse is any behaviour or attention of a sexual nature that is unwanted or undesired and causes disturbance to the victim. Sexual abuse includes, but is not limited to, sexual favours in exchange for something, coercion into sexual activities, derogatory statements about sexual orientation or sexuality, requests for sexual acts favoured by the perpetrator, verbal or behavioural expressions with sexual connotations, and more, all of which fall under the category of sexual abuse. From the above definitions, it can be concluded that sexual abuse is a disturbing, annoying, and unsolicited act performed by one person towards another in the form of sexually suggestive behaviour done unilaterally and undesired by the victim [5]. Forms of sexual abuse include physical abuse, verbal abuse, non-verbal abuse or gestures, visual abuse, and psychological or emotional abuse.

According to the World Health Organization (WHO), sexual violence is any action taken with the intention of obtaining sexual acts or other actions aimed at someone's sexuality through coercion, regardless of the relationship status with the victim (WHO, 2017). Child sexual violence worldwide requires serious attention from various parties to reduce its incidence. According to a report by the United Nations Emergency Children's Fund (UNICEF), in 28 European countries, there are 2.5 million young women who have reported experiencing sexual abuse, including physical contact. Information on child sexual violence in Indonesia remains limited, due to the lack of an integrated reporting system among related agencies. Data released corresponds to the reports received by each agency, and not all victims report the incidents they experience. The impact of sexual violence on children can result in significant health issues, including physical injuries, sexual health issues (such as HIV infections and other reproductive diseases), psychological disturbances, and long-term health effects [6]. According to research by Ningsih & Hennyati (2018), the

psychological impact experienced by victims of sexual violence includes depression, nightmares, phobias, distrust of others for extended periods, and may even disrupt relationships with others.

Cases of sexual abuse against minors continue to occur widely in society. In fact, these cases are among the most frequent types of sexual offenses. According to data from the Central Bureau of Statistics (BPS), there were 1,164 cases of rape reported in Indonesia in 2021. Alleged cases of sexual violence and abuse were prevalent throughout 2021. These incidents occurred in various places traditionally considered safe, such as schools, universities, and Islamic boarding schools. The Ministry of Women's Empowerment and Child Protection (KPPPA) recorded 8,800 cases of sexual violence between January and November 2021. Meanwhile, the National Commission on Violence Against Women (Komnas Perempuan) recorded 4,500 reports of sexual violence from January to October 2021. In the 2021 Gender Equality Barometer study by IJRS and INFID, places such as parks, empty houses, and stadiums were identified as the most vulnerable areas for sexual abuse, with a percentage of 62.4%.

The Ministry of Women's Empowerment and Child Protection (Kemen PPPA) has declared a sexual violence emergency in Indonesia. According to Kemen PPPA, cases of sexual abuse against women and children in West Bandung Regency were notably high, with 14 reported cases of sexual abuse from early January to mid-February 2023. The frequency of sexual abuse cases in West Bandung Regency has been increasing, with most victims being minors aged 14 to 16 years. Furthermore, more than 80% of sexual violence victims in Bandung Regency were women, unmarried, and predominantly children and adolescents aged 10-19 years. Children are more likely to become victims of sexual violence compared to adults. In addition to their limited knowledge about sexual violence, this perception is linked to the mental vulnerability of children, who are more easily subjected to threats, coercion, or persuasion. Children often lack the courage to resist, especially if the perpetrator is someone they know. Society needs to recognize that most sexual violence perpetrators are not only acquaintances but also trusted individuals, such as boyfriends, neighbours, teachers, and even biological fathers.

Advocacy is defined as an effort to approach others who are considered to have influence over the success of a program or activity being carried out [8]. The role of an advocate is rooted in both social reform traditions and social services. This role is active and directed, where a community worker performs the advocacy function to represent communities needing assistance or services that the relevant institutions neglect. In performing advocacy, a community worker often must persuade professional groups or elites to achieve the desired goals. According to Fakih et al. (2000), advocacy is a systematic and organized effort to influence and push for policy change. Advocacy by social workers in helping the poor is often closely related to management concepts [10]. The goal of advocacy is to bring about change, and there will always be resistance, opposition, and conflict. Social advocacy is a systematic and organized effort to influence and push for change by providing support and defending the weak or those who are victims of policies and injustices. Social advocacy is done so that a group or individual can regain their human rights [11].

Sexual abuse is one of the most dominant issues concerning children, among other child- related issues. Social advocacy in this case involves all activities conducted by an institution providing social advocacy for child victims of sexual abuse. The advocacy process begins with problem identification, assessment, planning, implementation, and ends with evaluation [12]. If this issue is left unresolved, the number of child sexual abuse cases will continue to rise, with severe consequences for children. The physical impact of sexual abuse may include injuries to intimate parts of the child, psychological impacts include mental trauma, fear, shame, anxiety, and even suicidal thoughts or attempts. Furthermore, the social impact on children may involve cynical treatment from society and a fear of social interaction. Sexual abuse will leave a long-lasting trauma into adulthood, and pose future health problems [13].

Various explanations about the social advocacy process for minors facing sexual abuse and violence at the SOW OFF Indonesia institution in Bandung Regency are provided. The institution is willing to serve and support children who experience sexual abuse and violence. Children often withdraw and do not seek to report the criminal treatment they face to the authorities. This is because children fear being further cornered by various questions from investigators, especially when the child is a minor. Thus, it can be said that not all cases, including sexual abuse and violence, can be resolved through legal channels. Social advocacy support is needed to provide services and protection for victims and their human rights. Social advocacy in this case includes all activities carried out by an institution providing social advocacy to child victims of sexual violence. The process of social advocacy involves problem identification, formulating solutions, raising awareness and political will, implementing policies, and evaluation.

Based on the problem background above, the researcher is interested in conducting research on the topic: "The Social Advocacy Process in Cases of Children Victims of Sexual Abuse at the SOW OFF Indonesia Institution". With this research, sexual abuse can be minimized or even prevented. This research is expected to contribute ideas and theoretical knowledge that can be used in studies related to the process of social advocacy for children who are victims of sexual abuse.

II. METHOD

This research was conducted to gather in-depth information regarding the advocacy process in handling minors who are victims of sexual abuse and violence at the SOW OFF Indonesia institution. Specifically, this research aims to clearly and thoroughly describe the advocacy process in handling minors involved in sexual abuse and violence cases, through the stages of advocacy starting from initial approach, assessment, advocacy planning, advocacy implementation, and evaluation. To achieve the research objectives, the method used is a qualitative research approach. Qualitative research is a type of research that produces and processes

descriptive data, where the data is reported in the form of images or written and spoken words from informants, and not in numerical form [14][15][16][17].

The type of research used in this study is qualitative research. The qualitative approach is a research approach that uses a particular social situation and describes the reality accurately, supported by words based on relevant data collection techniques and data analysis from natural situations. This type of research is a problem-solving procedure that investigates the subject or object of study by describing the situation of the subject or object, analysing data according to existing reality, and connecting it with various theories to support the discussion, enabling a clear and complete understanding of the conclusion.

The selection of informants is based on the principle that the individuals chosen have expertise in the issue, possess the necessary data, and are willing to provide accurate and complete information. This research involved three informants: 3 (three) parents of children who are victims of sexual abuse by their religious teachers and a friend of the victim. The purposive sampling in this research will be guided by the following criteria:

a) The sample selection should be based on specific characteristics or traits that represent the key features of the population.
b) The subjects selected as samples must have the most prominent traits found within the population (key subjects).
c) The determination of the population characteristics will be carefully conducted during the preliminary study.

The subjects selected as informants in this case are families of children who are victims of sexual abuse, including the first victim's family (F), the second victim's family (R), and the family of another child victim of abuse (A). The characteristics of the subjects are based on their connection to the cases of sexual abuse.

Table 1. Characteristics of Informant Subjects: Families of Children Who Are Victims of Abuse.

No.	Details	Information
1.	Head of Family	Mr. Nyoman, 47 years old
	Housewife	Mrs. Siti Aisyah, 41 years old
	Number of Children	1. Ari Rahmar (20 years old)
		2. F (9 years old)
		3. N (4 years old)
	Status	Married for 10 years since 2013 Status: Widower with 2 children and a widow
	Occupation	Street food seller (fried rice)
2.	Head of Family	Mr. Dani
	Housewife	Mrs. Nur Aqki
	Number of Children	1. R (10 years old) 2. A (2 years old)
	Status	Married for 11 years since 2012
	Occupation	Daily labourer (furniture maker)
3.	Head of Family	Mr. Dede
	Housewife	Mrs. Diana
	Number of Children	1. A (8 years old)
		2. K (2 years old)
	Status	Married for 9 years
	Occupation	Livestock labourer

Based on Table 1 regarding the characteristics of families with children who became victims of sexual abuse as informants in Cijagra Village, Paseh District, Bandung Regency, the first victim, a child from the family who experienced abuse (F), is 9 years old. The family of (F) is headed by Mr. Nyopan (47 years old), who is married to Mrs. Siti Aisyah (41 years old). They have been married for 10 years since 2013. Before marriage, Mr. Nyopan is a widower with two children, and Mrs. Siti Aisyah was a widow with one child. Mrs. Siti has two children with Mr. Nyopan and has a child from her previous marriage, making a total of three children: Ari Rahmat (20 years old), F (9 years old), and Naufal (4 years old). According to information from the family, particularly from Mrs. Siti Aisyah, (F), the second child of Mrs. Siti, became the victim of abuse. The incident occurred in the late afternoon, when the perpetrator enticed (F) to play marbles at the perpetrator's house. It is suspected that (F) was taped during the incident. The problem was discovered in June 2022, and (F) only confessed after friends of (F) also became victims of abuse. On April 1, 2023, (F) admitted to the family after Mrs. Diana from family (A) informed them that (F) had been harassed. The victim's family immediately panicked and gradually questioned their child about the incident. The family then contacted other families of victims harassed by the same perpetrator. The family of (F) immediately confirmed the report to the social workers in Cijagra Village, and the report was referred to the police for further investigation, including a medical examination of (F).

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The second victim, a child from the family who experienced abuse (R), is 10 years old. The family of (R) is headed by Bapa Dani, who is married to Mrs. Nur Aqki. They have been married for 11 years since 2012 and have two children: R (10 years old) and Ali (2 years old). (R) became the next victim after (F). According to information obtained by the family of (R), the incident happened at the end of 2022, after (F) had been harassed by the perpetrator. During the school holiday at around 9:30 AM, (R) was riding a bicycle when the perpetrator approached and asked the victim to retrieve a toy from the perpetrator's house. Shortly after, the perpetrator locked the outside door and committed the act against (R). However, the act was interrupted when (F) and the perpetrator's younger sibling (I) discovered what was happening.

The final victim, a child from the family who experienced abuse (A), is 8 years old. The family of (A) is headed by Bapa Dede, who is married to Mrs. Diana. Bapa Dede has two children: A (8 years old) and Kaila (2 years old). According to the information from (A) and the family of (A), the incident occurred when (A) became aware of her friends talking about the abuse. Afterward, (A) suddenly refused to attend religious school or go to study the Quran. It was suspected that (A) had been repeatedly molested by the perpetrator while playing with friends and after returning from religious school, particularly in intimate areas. However, (A) was never taken to the perpetrator's house. Mrs. Diana found out the reason (A) no longer wanted to attend religious school after A) told him that his friends had 40 harassed by the perpetrator and Mrs. Diana immediately contacted the families of (F) and (R) who becomes a victim is understood by the same perpetrator.

Table 2. Characteristics of the Perpetrator

No.	Family Name of Perpetrator	Number of Children from the Perpetrator's Family	Description
1.	**Head of Family:** Mr. AL **Housewife:** Mrs. HA	1. D (16 years old) 2. I (10 years old)	It is suspected that D committed harassment against an elementary school from a religious school. D, who is still in the 9th grade of junior high school of a religious foundation or studies in the neighbourhood, because D is known to be skilled reciting religious texts, frequently prays, and serves as a mosque imam.

Table 3. Characteristics of Children after the Incident

No.	Name	Age	Child's Characteristics After the Incident
1.	F	9 years old	Became self-centered, emotional, impulsive, and showed aggressive behavior toward animals.
2.	R	10 years old	Frequently upset, needs extra attention from their mother, emotionally unstable, and reluctant to attend religious activities
			due to uncomfortable experiences.
3.	A	8 years old	Became withdrawn and quiet after the incident.

Based on Table 3, the characteristics of child victims of abuse are described according to information from their families. The children experienced indirect changes after the abuse but did not display serious conditions such as trauma. However, each child who became a victim no longer wanted to attend Quranic recitation classes or religious school.

III. RESULTS AND DISCUSSION
A. The Profile of SOW OFF (Social Worker Office) Institution Indonesia
1. Background of SOW OFF Institution Indonesia

The Social Worker Office Indonesia, or SOW OFF Indonesia is an institution that supports the profession of social workers in practising social work assistance and social welfare. It also functions as a social welfare institution dedicated to providing consultation services on social work practices by social workers to clients. This institution upholds ethics, professionalism, and a high level of responsibility in delivering social assistance services to clients, both directly and indirectly.

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2. Legal Basis

As the environment of the profession evolves in terms of the number of professionals and developments in science and technology within the field of social work, it becomes necessary to formalise independent (private) social work practices into a professional institution. This is outside the existing Social Worker Professional Organisation that regulates professionalism standards and ethical guidelines for social work professions in Indonesia. The establishment of this professional institution also signifies the development of the profession and its professionalisation process. The legal bases for its establishment include:
Preamble of the 1945 Constitution of the Republic of Indonesia

a) Law No. 4 of 1979 and Law No. 11 of 2009 on Social Welfare
b) Law No. 20 of 2004 on the National Education System
c) Law No. 18 of 2002 on the National System, Research, Development, and Application of Science and Technology
d) Law No. 35 of 2009 on Narcotics
e) Law No. 35 of 2014 on Amendments to Law No. 23 of 2002 on Child Protection
f) Law No. 11 of 2012 on Juvenile Criminal Justice System
g) Law No. 13 of 2011 on Handling the Poor
h) Law No. 19 of 2011 on Ratification of the Convention on the Rights of Persons with Disabilities
i) Law No. 26 of 2012 on Standards for Social Rehabilitation of Victims of Narcotics, Psychotropics, and Addictive Substances Abuse
j) Regulation of the Minister of Social Affairs No. 08 of 2012 on Guidelines for Data Collection and Management of Social Welfare Problems
k) Regulation of the Minister of Social Affairs No. 17 of 2012 on Accreditation of Social Welfare Institutions
l) Regulation of the Minister of Social Affairs No. 108/HUK/2009 on Certification of Professional Social Workers and Social Welfare Personnel
m) Regulation of the Ministry of Social Affairs No. 1 of 2012 on Community Social Workers

3. Objectives and Goals of SOW OFF

The objectives of SOW OFF Institution are as follow:

a) To differentiate the profession of Social Workers from other public service professions, such as doctors, lawyers, and psychologists.
b) To establish an independent Professional Social Worker office.
c) To provide independent social services, not limited to Social Welfare Problem Groups (PMKS) but for the public experiencing social issues.
d) To set an example of social services by Social Workers outside the government and other social welfare institutions.
e) To function as a social welfare institution operating under social work science.

As a Professional Institution and Social Welfare Institution, SOW OFF Indonesia aims to fulfil its responsibilities with high professionalism standards and achieve high performance levels focused on clients or the public. To achieve this, four basic needs must be met:

a) Credibility: Providing credible information and systems for Social Workers.
b) Professionalism: Ensuring clear identification of professionals in the field.
c) Service Quality: Maintaining high- performance standards in social worker services.
d) Trust: Building client trust through ethical professionalism in social services.

4. Management

SOW OFF Institution Indonesia operates with a dynamic and efficient management structure designed to support its mission of excellence in helping children who are victims of sexual abuse. The office management structure includes:

a) Chairperson/General Program Director
b) Secretary
c) Treasurer
d) Social Worker Administration (ASW Program Manager)

e) Advocacy Service and Networking
   Development (ASNET Program Manager)
f) Social Policy and Planning (SIPLAN Program
   Manager)
g) Resource and Development Program
   (R&D Program Manager)
h) Social Education Development (SED Program
   Manager)
i) Five Social Workers:
j) Social Worker Assistants
k) Psychologists
l) Lawyers
m) Social Members/Volunteers

5. Program Services

SOW OFF Institution Indonesia offers a range of specialized program services designed to empower individuals and organizations. With a focus on personal development, professional training, and community engagement, our programs cater to diverse needs, ensuring growth and skill enhancement. Whether through workshops, courses, or consulting services, SOW OFF is committed to providing impactful, quality learning experiences that foster innovation and success. The following assistance services are offered:

a) Family social services
b) Social services
c) Correctional services
d) Social work administration services
e) Advocacy services
f) Consultation services
g) Social mediation services
h) Social assistance: Building social relationships with clients to solve problems, enhance support, and improve access to public services and social welfare facilities.
i) Social research and development: Systematic investigations to provide data and test hypotheses for theory formulation or service development.
j) Community development: Processes where individuals or groups collaborate to address social welfare needs and mobilise resources through social participation principles.

B. Research Results

The research results indicate that SOW OFF, as a social worker institution, handles clients affected by violence or sexual abuse through social advocacy processes. The institution provides counselling services, psychosocial support, and advocacy from the initial stages to the evaluation phase, addressing clients' needs and providing resource systems to fulfil their rights.

An assessment was conducted by visiting Cijagra Village with informants who were victims of sexual abuse. The informants included three families of children who were sexually abused by their religious teacher and playmate. These families represented the first victim (F), the second victim (R), and the third victim (A).

The role of the counsellor provided by SOW OFF aims to assist clients in resolving their problems. This service is grounded in professional ethics, ensuring clients are protected. With the rising cases of child sexual abuse, the institution emphasises the role of parents in guiding children and providing a safe environment, both physically and mentally. Families are encouraged to consult counsellors to support the child's development.

1. Initial Approach Phase

Social issues, particularly those concerning children in conflict with the law (ABH), can be identified through various sources such as social media, child welfare organisations, or referrals. Initial information gathering involves validating sources before proceeding with outreach. This step ensures that social workers build trust with clients and their families through professional and procedural means.

The initial approach includes understanding the specific social problems and establishing agreements between social workers/advocates and clients. This ensures that the trustbuilding process adheres to legal and institutional standards. Without formal agreements, the professional handling of the case may lack legitimacy.

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2. Assessment Phase

During the assessment phase, social workers use tools and data collection methods to understand the root cause of the issue. These steps include:

a) Biological Conditions: Using BPSS (BiopsychosocialSpiritual) tools to assess physical health, self-care, and appearance.
b) Psychological Conditions: Evaluating whether the victim's psychological state is affected using assessment tools and gathering information about potential trauma or stress.
c) Psychosocial Conditions: Examining behavioural changes and analysing the victim's social interactions, stress, or trauma.
d) Social Conditions: Understanding the client's family dynamics, social environment, and spiritual background as part of the assessment process.

Social workers ensure clients feel comfortable during assessments by engaging in small talk to build trust. The assessment results guide intervention planning, which includes home visits, direct assistance, and monitoring and evaluation.

3. Intervention Planning Phase

Assessment results are used to develop intervention plans. Social workers and advocates map the child's needs and allocate resources while involving the child in decisionmaking. This process ensures that the intervention aligns with the client's age and social conditions. Social workers act as mediators and advocates, coordinating services with families to ensure comprehensive support.

4. Implementation Phase

During implementation, social workers acknowledge that children often understand their needs and must be given opportunities to express their preferences. Advocates bridge the gap between clients and resource systems, such as education or healthcare, to address the specific issues at hand. Advocacy plans prioritise the most urgent problems, ensuring an effective resolution process.

5. Evaluation Phase

In the evaluation phase, the effectiveness of social advocacy is measured against the client's needs. Social workers assess whether the interventions have resolved the client's issues and track progress through continuous monitoring. Evaluations include reviewing plans and identifying whether goals have been achieved. If necessary, follow-up guidance is provided to ensure sustainable improvements.

CONCLUSIONS

In handling cases involving child victims of sexual violence, both advocates and social workers play crucial roles by providing a range of services, such as counselling, psychotherapy, and support groups. Social workers act as companions for both victims and perpetrators, offering emotional support and guidance throughout the recovery process. They also serve as counsellors for the victims and their families, helping them navigate the emotional and psychological impact of the abuse. Additionally, social workers act as mediators, facilitating communication and resolution between the victim's family, schools, protection agencies, and courts. Another key role of social workers is to act as brokers, connecting victims with necessary resource systems, such as healthcare, legal assistance, or social services.

Advocates and social workers must also develop and maintain networks with other professionals, including psychologists, psychiatrists, doctors, prosecutors, and police, to ensure comprehensive support. For victims, advocates and social workers serve as a vital support system, educators, and advocates, providing essential advocacy services and guidance to aid in their recovery and empowerment.

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