

Using nominal group technique to investigate the factors of child sexual abuse in Malaysia

Norsayyidatina Che Rozubi¹, Azad Athahiri Anuar², Konstantinos Kosmas Gaitis³,
Nurul Khairani Ismail¹

¹Department of Counselling at the Psychology and Counselling, Faculty of Human Development, Sultan Idris Education University, Tanjung Malim, Malaysia

²Faculty of Education, University of Malaya, Kuala Lumpur, Malaysia

³Childlight—Global Child Safety Institute, Moray House School of Education and Sport, University of Edinburgh, Edinburgh, United Kingdom

Article Info

Article history:

Received Aug 21, 2023

Revised Jan 6, 2024

Accepted Mar 5, 2024

Keywords:

Abuse and sexual
Children
Counseling
Education
Psychology
School

ABSTRACT

This study aims to study the factors contributing to sexual abuse of children in Malaysia. This study uses the nominal group technique (NGT) approach in determining the list of factors for victims and predators, involving six experts from six different institutions that are directly involved with the issue of child sexual abuse (CSA). The findings of the study show that there are four factors that reach the highest value (86.7%) for the victims, which are naivety and lack of knowledge, family problems, unsafe environment, and social media. As for predator factors, two factors were rejected because they reached a low value, namely the factor of “wanting to try” (60%), and mental health issues (66.67%). Finally, the highest predator factors found are family crisis and upbringing style, with each reaching a value of 83.33%. The findings of the study show that several factors in the occurrence of sexual abuse against children can be identified. This matter needs attention so that this problem can be controlled and prevented from spreading in the community. The NGT method shows an effective and acceptable methodology for solving the problems of this study.

This is an open access article under the [CC BY-SA](https://creativecommons.org/licenses/by-sa/4.0/) license.



Corresponding Author:

Norsayyidatina Che Rozubi

Department of Counselling at the Psychology and Counselling, Faculty of Human Development,

Sultan Idris Education University

35900 Tanjong Malim, Perak, Malaysia

Email: sayyidatina@fpm.upsi.my

1. INTRODUCTION

Child sexual abuse is when a child is sexually abused by making it a tool for sexual stimulation either by asking, forcing, cheating, and so on until performing sexual activities [1]. It can happen in various places [2], including workplace, school or home. Children who are victimized may not understand what is happening, whether it constitutes abuse, and may be afraid to tell someone [3]. The definition of child sexual abuse (CSA) can give the impression that it is a serious problem for children all over the world. A recent meta-analysis of 55 studies from 24 countries reported that the prevalence of CSA against females is between 8% and 31% and 3% and 17% for males, which includes sexual abuse in terms of non-contact abuse, contact abuse, forced intercourse, and mixed sexual abuse [4]. This report shows that the issue of CSA is becoming more serious and attracts increased attention on a global scale, because it constitutes a serious violation of children's rights, affecting their ability to grow up and develop in a healthy state, both mentally and physically, and with dignity [5]. CSA has short-term and long-term effects on victims [6], such as bad

behavior and personality problems [7], cognitive disorders and academic failure [8], and biopsychosocial health problems [9].

In Malaysia, the issue of CSA is also worrying, as can be seen based on the statistics of the Royal Malaysian Police (PDRM), a total of 1,348 cases of child sexual offences have been recorded in the six months between January and June 2022, including cases of gang rape, incest, unnatural sex, and obscene sex [10]. Based on these statistics, we can see that this problem spreads very quickly over a short period of time. This matter is very worrying, because it will have a very negative effect not only on the victims, but also on society as a whole. Therefore, awareness and understanding of this matter must be present in every individual in society so that this problem can be controlled either in terms of prevention or effective treatment [11].

Identifying the factors that cause CSA is very important and is part of the effort to control and prevent this problem from occurring and continuing to spread in the community. Based on past studies, there are many factors that have been identified for the occurrence of CSA, which may be different for each country, place or culture. Nevertheless, factors from the point of view of victims and predators have been the focus of most previous studies on this topic [12]. Kebede and Belay [13] conducted a study to see the factors that contribute to CSA in Bahir Dar, Ethiopia, from the perspective of the police and the perpetrators, namely the predator factor. Among the factors that can be identified from the results of this study are late marriage, cultural norms, and excessive alcohol consumption. Meanwhile, Su and Lin [14] has presented several risk factors for the occurrence of CSA, namely parenting style, domestic violence, harsh punishment practices at home, and emotional problems [15]. In addition, among other factors in the occurrence of CSA based on past studies are environmental factors [16], such as the predator having a space or place that allows him to do this act against children without the knowledge of others [17]. The experience of parents as victims is also seen as a factor in the occurrence of CSA [18], [19]. Therefore, the factors that can lead to the occurrence of CSA need to be identified so that they can be curbed and prevented. Therefore, this study aims to study the factors contributing to sexual abuse of children in Malaysia using nominal group technique approach.

Nominal group technique (NGT) is a method of gathering data that has been developed by Olsen [20] as an organizational planning tool [21] to reach consensus in a structured and face-to-face small group discussion and sharing by comparing experiences [22] for each disadvantage and advantage [23]. This NGT method involves four core processes: i) brainstorming ideas; ii) recording ideas; iii) clarification; and iv) voting [24]. Starting with the first process, each participant is given an explanation of the research question, which gives them time to brainstorm around the topic to be discussed. Next, participants will present their ideas, which will be recorded and displayed by the researcher. In the third process, the researcher organizes the ideas of the participants into a rough theme; at this stage, ideas that are more or less the same will be combined, and ideas that are not suitable will be removed. The participants can also add ideas as needed. The final process for participants will be to individually evaluate the ideas presented from the most to the least important [25].

One of the main features of NGT that differentiates it from other consensus techniques, such as the Delphi technique, is a face-to-face, structured discussion that usually involves 5 to 12 participants. The ability of participants to discuss, debate, and explore the topic of discussion is the strength of this NGT method [23]. This technique has been widely used in various research fields [26]. An example of this is the study by Hussain *et al.* [27] which used the NGT to develop guidelines on how best to reduce, handle, and report missing data in palliative care clinical trials. While there is also a study conducted to identify the use of different NGTs to obtain items for health surveys regarding advantages and disadvantages [22]. Harb *et al.* [28] in their study have used NGT to identify barriers and facilitators of physical activity for people with scleroderma. In conclusion, NGT is an efficient method with structured and democratic procedures to obtain value from group discussion data and obtain consensus.

2. RESEARCH METHOD

To achieve the objective of the study, which is to identify the factors of sexual abuse against children in Malaysia, the NGT method was used to collect and analyze the study data. This NGT method has been chosen by researchers because it has certain advantages, such as being able to consider the views of all participants and avoiding an individual dominating the group. In addition, NGT is also a very systematic, cost-effective, and adaptable method [29].

2.1. Study participants

The participants, or sample, of this study consisted of six experts from six different institutions who were directly involved with the issue of CSA [20]. The selection of these participants is based on several criteria, namely: i) individuals who have extensive knowledge and experience and have a background in the field related to the study; ii) are willing to spare time and willingness; iii) can communicate well; and

iv) have service and experience over 5 years. The first participant is a family counsellor at the National Population and Family Development Board (LPPKN), an experienced participant conducting counselling sessions and managing cases related to CSA. The second participant is a member of the PDRM with the rank of ASP who is directly involved with CSA issues. Next, the third participant is a counsellor at the District Education Office (PPD) who is heavily involved with CSA issues among school students. The fourth participant is a counsellor at the Department of Social Welfare (JKM) who is exposed to many cases of CSA in the local community. The fourth participant is a counsellor at the Malaysian Ministry of Health (KKM) who has a lot of experience conducting counselling sessions with clients referred regarding CSA issues. The last participant is a counselling lecturer at the Public Institute of Higher Education (IPTA) who has experience teaching and conducting research related to CSA. The number of participants employed in this study is considered to be ideal and suitable for implementing NGT; this coincides with the recommendation that the ideal group size for NGT is between five and nine participants [21].

2.2. Data collection

In order to collect research data, all participants were gathered at a mutually agreed-upon time. When all the participants were gathered, the researcher gave a briefing on the topic of discussion, procedures, and the NGT process that will be carried out. All participants showed good cooperation throughout the data collection process. Participants were given a consolation prize after the NGT session. The data collection process using NGT has four steps, including brainstorming ideas, round-robin recording of ideas, clarification, and voting.

2.2.1. Step 1: brainstorming ideas

The objective of this step is to make it easier for all study participants to contribute ideas regarding the study topic. Participants individually, together with the researcher, wrote verbatim suggestions of ideas regarding the CSA factor to reduce the possibility of bias through the influence of the researcher. All participants' ideas are important and documented. There is no limit to the ideas that participants can provide. At this stage, the researcher did not ask any questions or give any suggestions to the participants [30].

2.2.2. Step 2: round-robin recording of ideas

This stage aims to generate as many ideas as possible from the participants and choose the ones that are considered the most important by asking for help in taking turns. After reading the ideas that were written down during step 1 to all participants, they can add new ideas if deemed appropriate. At this stage too, any discussion or questions are not allowed [31].

2.2.3. Step 3: clarification

A representative of the participants read back all the ideas regarding the victim and predator factors of the occurrence of CSA that had been listed and asked for clarification if necessary. For example, if a participant suggested "threat factor", the participant who suggested this was asked to explain what was meant by the term used.

2.2.4. Step 4: voting

In this last stage, participants were asked to vote on all their ideas. This voting process was carried out with the researcher reading a list of recorded ideas to each participant and asking the participant to give a score of 5 (strongly agree), 4 (agree), 3 (neutral), 2 (disagree), and 1 (strongly disagree).

2.3. Data analysis

In order to simplify the matter of analyzing the gathered data, the researcher used the NGT-Plus computer software [32]. NGT-Plus is computer software that has been specially developed to make the process of analyzing NGT data faster and more structured. All participants' voting scores were entered into NGT-Plus and analyzed.

3. RESULTS

In total, there were nine ideas generated and voted on by each participant (Table 1) regarding victim factors. Four ideas received the majority of casted votes, each with a score of 26 out of 30 (86.67%). These four ideas are naivety and lack of knowledge, family problems, unsafe environment, and social media. As regards "naivety and lack of knowledge", this factor was voted with the highest score of 5 by two participants, and with score of 4 by four participants. The second factor is "family problems". As many as two participants also gave the highest score of 5, while four participants gave it a score of 4. The same votes were casted for the third idea, "unsafe environment". The fourth idea, "social media," which achieved the

highest voting score, was given a score of 5 by four participants and score of 3 by two participants. As for the remaining five ideas, these also achieved high scores in the voting process and were consequently accepted: two of those ideas gathered a voting score of 24 out of 30 (80%), with “parenting style” receiving six votes on a score of 4, and “lifestyle,” which was given a score of 5 by two participants, a score of 4 by another two participants, and score of 3 by two more participants. The next idea is “threat”, which has a voting score of 22 out of 30 (73.33%), meaning that four participants gave it a score of 4 and two participants gave it a score of 3. Two more ideas received an overall vote score of 21 out of 30 (70%). These were “peer influence” and “financial problems”.

As for the predator factors, a total of eight ideas were voted by the study participants. However, two of those ideas were removed after the data analysis process was carried out due to having a low vote score value, namely “wanting to try” with a vote score value of 18 out of 30 (60%) and “mental health issues” with a vote score value of 20 out of 30 (66.67%). The highest vote for the predator factor is “Pornography”, which has a total of 27 votes out of 30 (90%), meaning that three participants gave it a score of 5 and three a scores of 4. The two ideas that reached the second highest vote score value for the predator factor were “family crisis” (83.33%), with two participants gave this a score of 5, three a scores of 4, and one a score of 3. “Upbringing style” also has a voting score of 25 out of 30 (83.33%), i.e., five participants have voted on a score of 4 and one on a score of 5. Next is the idea that reached a total vote score of 23 out of 30 (76.67%), namely “drugs’ influence” and “religion” [four scores (4), one score (5), and one score (2)]. The last idea is “experience as a victim,” which has a voting score of 22 out of 30 (73.33%), which means that four participants have given a score of 4 and two have given a score of 3. The findings of this study are shown in Table 1.

Table 1. Result from NGT-PLUS analysis

	Item/solution	Voting value						Total item score	% of agreement	Rank	Result
Victim factor	Naivety and lack of knowledge	5	4	5	4	4	4	26	**86.67	5	Accept
	Family problems	4	4	5	4	5	4	26	**86.67	5	Accept
	Parenting style	4	4	4	4	4	4	24	**80	7	Accept
	Unsafe environment	4	4	5	5	4	4	26	**86.67	5	Accept
	Peer influence	2	4	4	3	3	5	21	**70	10	Accept
	Social media	3	5	5	3	5	5	26	**86.67	5	Accept
	Threat	3	4	4	4	4	3	22	**73.33	9	Accept
	Financial problems	2	4	3	4	4	4	21	**70	10	Accept
	Lifestyle	3	3	5	4	5	4	24	**80	7	Accept
	Experience as a victim	3	4	4	3	4	4	22	**73.33	9	Accept
Predator factor	Wanting to try	2	3	3	3	3	4	18	60	12	Not
	Family crisis	5	3	4	4	5	4	25	**83.33	6	Accept
	Drug's influence	2	4	4	5	4	4	23	**76.67	8	Accept
	Pornography	4	5	5	4	5	4	27	**90	4	Accept
	Mental health issues	3	4	4	3	3	3	20	66.67	11	Not
	Religion	2	4	4	5	4	4	23	**76.67	8	Accept
	Upbringing style	4	4	5	4	4	4	25	**83.33	6	Accept

Note: **Percentage of agreement (>70%).

4. DISCUSSION

This study pinpointed several important factors that cause the problem of CSA to continue to spread among the community, especially in Malaysia. Among the factors that encourage the occurrence of CSA against the victim is the victim's naive state and lack of knowledge about sex. This will cause the predator, who may be the closest individual that often has family ties with the victim, to take the opportunity and commit CSA against the victim, often by persuading them that sex is a normal and common thing to do. Next is the factor of family problems; according to experts or study participants, this factor is one of the common causes of CSA among the community in Malaysia. Among the examples of family problems that are the cause of CSA are divorce issues. Most victims will be exposed to CSA when forced to live with their mother's separated fathers, coupled with the uncontrollable lustful desires of guardians. There are also victims who are forced to live with other people as a result of parental divorce, which will further increase the probability of CSA. This factor also contributes to the existence of unsafe environmental factors, which are among the factors that have the highest votes. A safe environment is very important in efforts to curb the spread of CSA in the community. This unsafe environment factor can occur as a result of other factors, such as the effects of the problem of parental divorce discussed earlier or an existing environment that is inherently unsafe for victims, such as an area's place of residence [33].

In addition, the uncontrolled use of social media by children or victims is also a crucial factor that contributes to the occurrence of CSA, as, for example, victims will be exposed to pornographic videos that can create the desire to do it. This will provide predators with opportunities and space to conduct CSA. This factor is also indirectly related to the factor of peer influence, through which the victim's friends will be exposed to acts, hearings, and conversations related to sex so as to encourage them to commit. This will again open opportunities and space for predators to commit CSA easily and without coercion.

Parenting style factors and lifestyle factors are also seen as among the biggest contributors to the occurrence of CSA. For example, the independent lifestyle of parents without thinking about education and limitations on children on this matter will affect the lifestyle of the victim and further increase the probability of CSA [18]. In addition, the research findings also detect that financial problems can be a factor that contributes to the occurrence of CSA, such as financial limitations that affect the ownership of a suitable house, including the number of rooms. This will create opportunities for the occurrence of CSA among family members, and financial problems will also encourage predators to commit CSA to release lust because they cannot afford paid sex services. The final factor for the victim that can be detected through this study is threat. Because of fear of being threatened by the predator, the victim will remain silent, and this act of CSA will continue, giving courage to the predator to continue doing it.

The findings of this study also found several factors that encourage predators to commit CSA. The factor that got the highest vote is pornography. This factor is seen as very dangerous and almost uncontrollable considering the expansion of pornography today. This addiction to pornography will result in predators being driven to do it in reality, including committing CSA. While the two predator factors that got the second highest number of votes are family crisis and upbringing style, these two factors can make someone a CSA predator. This is because family crisis and upbringing style may affect the process of forming a person's identity, and foster the right conditions for the developing of predatory behaviors. In addition, having been victimized in the past, may also cause a person to commit the same acts to other victims; this is one of the long-term adverse effects that may occur if this CSA problem continues to spread in the community [18].

The influence of drugs is also seen as a factor in the occurrence of CSA, even if it does not reach the highest number of votes. This is because a person who is under the influence of drugs is capable of committing acts beyond sanity and nature. The final factor successfully identified is the religious factor. This is because someone with weak religious and moral beliefs may find it easier to commit bad acts, including CSA. Meanwhile, two factors that had to be rejected after the analysis was carried out because they got the lowest number of votes were the factor of "wanting to try" and the problem of "mental health issues". Although these two factors had to be rejected, they may still be factors in the occurrence of CSA.

5. CONCLUSION





Based on the findings of the study and the factors for the occurrence of CSA that were successfully found, the problem and issue of CSA need to be curbed either from the point of view of prevention or treatment so that it does not continue to spread and become worse. These factors need to be given attention by all parties involved, whether family members, teachers, authorities, researchers, and so on. It is also hoped that there will be ongoing research carried out, either a series of studies resulting from this study or new research projects that can reach greater depths potentially by using alternative research methods, so that new findings can be presented and then become a tool in the effort to control and prevent the problem of CSA from continuing to occur.

REFERENCES





- [1] D. Russell, D. Higgins, and A. Posso, "Preventing child sexual abuse: a systematic review of interventions and their efficacy in developing countries," *Child Abuse & Neglect*, vol. 102, p. 104395, Apr. 2020, doi: 10.1016/j.chiabu.2020.104395.
- [2] X. Qu *et al.*, "The prevalence of sexual violence against female children: a systematic review and meta-analysis," *Child Abuse & Neglect*, vol. 131, p. 105764, Sep. 2022, doi: 10.1016/j.chiabu.2022.105764.
- [3] C. D. Berkowitz and S. T. Stewart, *Preventing child maltreatment: a guide to taking action and generating evidence*. Geneva: World Health Organization, 2006.
- [4] M. Lu, J. Barlow, F. Meinck, K. Walsh, and Y. Wu, "School-based child sexual abuse interventions: a systematic review and meta-analysis," *Research on Social Work Practice*, vol. 33, no. 4, pp. 390–412, May 2023, doi: 10.1177/10497315221111393.
- [5] A. Debowska, D. Willmott, D. Boduszek, and A. D. Jones, "What do we know about child abuse and neglect patterns of co-occurrence? A systematic review of profiling studies and recommendations for future research," *Child Abuse & Neglect*, vol. 70, pp. 100–111, Aug. 2017, doi: 10.1016/j.chiabu.2017.06.014.
- [6] World Health Organization, *Responding to children and adolescents who have been sexually abused*. Geneva: World Health Organization, 2017.
- [7] M. Rahnnavardi, S. Shahali, A. Montazeri, and F. Ahmadi, "Health care providers' responses to sexually abused children and adolescents: a systematic review," *BMC Health Services Research*, vol. 22, no. 1, p. 441, Dec. 2022, doi: 10.1186/s12913-022-07814-9.

- [8] M. Al-Rasheed, "Child sexual abuse prevention programs for kindergartners: a survey of public actions, attitudes, and beliefs in Kuwait," *Child and Adolescent Social Work Journal*, vol. 34, no. 4, pp. 361–368, Aug. 2017, doi: 10.1007/s10560-016-0466-0.
- [9] A. Padmanabhanunni and N. Gqomfa, "'The ugliness of it seeps into me': experiences of vicarious trauma among female psychologists treating survivors of sexual assault," *International Journal of Environmental Research and Public Health*, vol. 19, no. 7, p. 3925, Mar. 2022, doi: 10.3390/ijerph19073925.
- [10] S. Mustafa, "1,055 cases of childhood suffering in six months (in Malay)," *Berita Harian*, 2022. [Online]. Available: <https://www.bharian.com.my/berita/nasional/2022/09/997082/1055-kes-penderaan-kanak-kanak-dalam-enam-bulan> (accessed Feb. 23, 2024).
- [11] T. Solehati, A. R. Fikri, C. E. Kosasih, Y. Hermayanti, and H. S. Mediani, "The current preventing of child sexual abuse: a scoping review," *Social Sciences*, vol. 11, no. 11, p. 508, Nov. 2022, doi: 10.3390/socsci11110508.
- [12] D. Collin-Vézina *et al.*, "'How many times did I not want to live a life because of him': the complex connections between child sexual abuse, disclosure, and self-injurious thoughts and behaviors," *Borderline Personality Disorder and Emotion Dysregulation*, vol. 8, no. 1, pp. 1–13, Dec. 2021, doi: 10.1186/s40479-020-00142-6.
- [13] W. Kebede and S. Belay, "Factors contributing to child sexual abuse in Bahir Dar, Ethiopia: police and perpetrators' perspectives," *International Social Work*, vol. 65, no. 3, pp. 539–556, May 2022, doi: 10.1177/0020872820959356.
- [14] H.-C. Su and Y.-H. Lin, "Analyses of criminal judgments about domestic child abuse cases in Taiwan," *Children*, vol. 10, no. 7, p. 1237, Jul. 2023, doi: 10.3390/children10071237.
- [15] S. Bott, A. P. Ruiz-Celis, J. A. Mendoza, and A. Guedes, "Correlates of co-occurring physical child punishment and physical intimate partner violence in Colombia, Mexico and Peru," *BMC Public Health*, vol. 22, no. 1, p. 2195, Nov. 2022, doi: 10.1186/s12889-022-14453-6.
- [16] M. Assink *et al.*, "Risk factors for child sexual abuse victimization: a meta-analytic review," *Psychological Bulletin*, vol. 145, no. 5, pp. 459–489, May 2019, doi: 10.1037/bul0000188.
- [17] D. Tener and C. Katz, "Preadolescent peer sexual abuse: a systematic literature review," *Trauma, Violence, & Abuse*, vol. 22, no. 3, pp. 560–570, Jul. 2021, doi: 10.1177/1524838019869103.
- [18] B. C. L. Lange, E. M. Condon, and F. Gardner, "Child sexual abuse and subsequent maternal parenting: a qualitative meta-synthesis," *The Lancet*, vol. 392, p. S6, Nov. 2018, doi: 10.1016/S0140-6736(18)32183-4.
- [19] R. Alaggia, D. Collin-Vézina, and R. Lateef, "Facilitators and barriers to child sexual abuse (CSA) disclosures: a research update (2000–2016)," *Trauma, Violence, & Abuse*, vol. 20, no. 2, pp. 260–283, Apr. 2019, doi: 10.1177/1524838017697312.
- [20] J. Olsen, "The nominal group technique (NGT) as a tool for facilitating pan-disability focus groups and as a new method for quantifying changes in qualitative data," *International Journal of Qualitative Methods*, vol. 18, p. 160940691986604, Jan. 2019, doi: 10.1177/1609406919866049.
- [21] K. Manera, C. S. Hanson, T. Gutman, and A. Tong, "Consensus methods: nominal group technique," in *Handbook of research methods in health social sciences*, Singapore: Springer Singapore, 2019, pp. 737–750, doi: 10.1007/978-981-10-5251-4_100.
- [22] S. I. Harb, L. Tao, S. Peláez, J. Boruff, D. B. Rice, and I. Shrier, "Methodological options of the nominal group technique for survey item elicitation in health research: a scoping review," *Journal of Clinical Epidemiology*, vol. 139, pp. 140–148, Nov. 2021, doi: 10.1016/j.jclinepi.2021.08.008.
- [23] S. Humphrey-Murto *et al.*, "Protocol for an extended scoping review on the use of virtual nominal group technique in research," *PLOS ONE*, vol. 18, no. 1, p. e0280764, Jan. 2023, doi: 10.1371/journal.pone.0280764.
- [24] A. Lakhani, D. P. Watling, H. Zeeman, C. J. Wright, and J. Bishara, "Nominal group technique for individuals with cognitive disability: a systematic review," *Disability and Rehabilitation*, vol. 40, no. 18, pp. 2105–2115, Aug. 2018, doi: 10.1080/09638288.2017.1325946.
- [25] L. Sist *et al.*, "Applicability of the interventions recommended for patients at risk or with delirium in medical and post-acute settings: a systematic review and a nominal group technique study," *Aging Clinical and Experimental Research*, vol. 34, no. 8, pp. 1781–1791, Aug. 2022, doi: 10.1007/s40520-022-02127-7.
- [26] T.-T. Chen, C.-C. Hsiao, T.-P. Chu, S.-H. Chen, M.-N. Liao, and C.-C. Hung, "Exploring core competencies of clinical nurse preceptors: a nominal group technique study," *Nurse Education in Practice*, vol. 56, p. 103200, Oct. 2021, doi: 10.1016/j.nepr.2021.103200.
- [27] J. A. Hussain *et al.*, "Development of guidelines to reduce, handle and report missing data in palliative care trials: a multi-stakeholder modified nominal group technique," *Palliative Medicine*, vol. 36, no. 1, pp. 59–70, Jan. 2022, doi: 10.1177/02692163211065597.
- [28] S. Harb *et al.*, "Identifying barriers and facilitators to physical activity for people with scleroderma: a nominal group technique study," *Disability and Rehabilitation*, vol. 43, no. 23, pp. 3339–3346, Nov. 2021, doi: 10.1080/09638288.2020.1742391.
- [29] D. E. Michel *et al.*, "Using an online nominal group technique to determine key implementation factors for COVID-19 vaccination programmes in community pharmacies," *International Journal of Clinical Pharmacy*, vol. 43, no. 6, pp. 1705–1717, Dec. 2021, doi: 10.1007/s11096-021-01335-x.
- [30] S. K. Anis, A. Masek, M. Nurtanto, and N. Kholifah, "Nominal group technique application towards design of components and elements of non-digital game framework," *International Journal of Evaluation and Research in Education (IJERE)*, vol. 11, no. 1, pp. 213–223, Mar. 2022, doi: 10.11591/ijere.v11i1.22164.
- [31] G. Tsourtos *et al.*, "Using a nominal group technique to approach consensus on a resilience intervention for smoking cessation in a lower socioeconomic population," *BMC Public Health*, vol. 19, no. 1, p. 1577, Dec. 2019, doi: 10.1186/s12889-019-7939-y.
- [32] R. Mustapha, T. N. S. T. Paris, M. Mahmud, M. S. Musa, A. A. Zaini, and J. Zakaria, "Managing students' mental health: the use of NGT and FDM to generate a concrete solution," *International Journal of Asian Social Science*, vol. 13, no. 2, pp. 89–100, Feb. 2023, doi: 10.55493/5007.v13i2.4736.
- [33] L. K. Murray, A. Nguyen, and J. A. Cohen, "Child sexual abuse," *Child and Adolescent Psychiatric Clinics of North America*, vol. 23, no. 2, pp. 321–337, Apr. 2014, doi: 10.1016/j.chc.2014.01.003.





BIOGRAPHIES OF AUTHORS

Norsayyidatina Che Rozubi     is a Senior Lecturer in Counselling at the Psychology and Counselling Department, Faculty of Human Development, Sultan Idris Education University (UPSI) and is a registered counsellor. She graduated with a B.ed. (Counselling and Guidance) from University Malaya (UM) in 2008, completed her M.Ed. (Counselling and Guidance) at National University Malaysia (UKM) in 2011 and Ph.D. in Counselling at University Malaya in 2017. She has 15 years of experience in counselling and had served as a counsellor in boarding school. Now she is doing postdoctoral at University of Edinburgh, United Kingdom and as a Global Data Fellow at the Childlight (Global Child Safety Institute) of the University of Edinburgh. Her broad research and teaching interests include child counselling, mental health, play, creative, art therapy and child sexual exploitation & abuse. She can be contacted at email: sayyidatina@fpm.upsi.edu.my.







Azad Athahiri Anuar     is a Ph.D. counselling graduate from the University of Malaya, Kuala Lumpur, Malaysia. He graduated with a B. (hons) of Islamic Studies from National University Malaysia (UKM) in 2008. He later completed his M.Ed. (Counselling and Guidance) at National University Malaysia (UKM) in 2011 and Ph.D. in Counselling at University Malaya in 2018. He is the founder and director of Onmind Consulting which is involved in organizing academic workshops in Malaysia. He has served as a lecturer at the University of Geomatika Malaysia and as a part-time lecturer at Sultan Idris Education University. He can be contacted at email: azadathahirianuar@yahoo.com.



Konstantinos Kosmas Gaitis     has completed his Ph.D. in Law (Criminology pathway) at the University of Edinburgh. His doctoral dissertation offers a critical examination of the human trafficking regulatory framework across Britain. He is a Global Data Fellow at the Childlight Institute of the University of Edinburgh, Scottish Justice Fellow, while he has also tutored at the University of Edinburgh and held research roles for the Edinburgh Study of Youth Transitions and Crime and the Law Society of Scotland. He can be contacted at email: kgaitis@ed.ac.uk.



Nurul Khairani Ismail     is a Post Doctoral officer at University Pendidikan Sultan Idris, Tanjung Malim Perak. Her educational background includes a Bachelor's degree in Nursing from International Islamic University Malaysia's Kuantan campus, a second degree in education, specializing in Educational Psychology from the same university, and a Ph.D. in Preschool Education from Universiti Kebangsaan Malaysia. She has experience in teaching and as researcher at UKM and USM, as well as a research fellow at the Malaysia Institute of Road Safety Research (MIROS). Her research interests and experience are varied, ranging from early childhood and special education through character education and road safety training for youngsters. She can be contacted at e-mail: khairani.miros@gmail.com.