

Implementation of Article 69A of Law Number 35 of 2014 on Child Protection for Victims of Child Sexual Molestation: A Case Study of the Office of Women's Empowerment and Child Protection in Bone Regency

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Abstract

Sexual violence against children, particularly molestation, constitutes a serious legal and social problem in Indonesia that threatens children's rights to safety, healthy development, and dignity. This study examines the implementation of Article 69A of Law Number 35 of 2014 on Child Protection by the Women's Empowerment and Child Protection Agency of Bone Regency, South Sulawesi, and analyzes the structural factors that inhibit its effectiveness. Employing an empirical legal method with a sociology of law approach, data were collected through observation, documentary review, and interviews, then analyzed within a theoretical and regulatory framework rather than reported verbatim. The findings indicate that DP3A Bone Regency has carried out four forms of special protection: reproductive health education, physical and psychological rehabilitation, psychological assistance, and legal assistance. These forms are consistent with the mandate of Article 69A and are reinforced by cross-institutional coordination with law enforcement agencies and social service institutions. Nevertheless, three structural inhibiting factors were identified: evidentiary challenges arising from the non-physical nature of sexual crimes, low public legal literacy and social stigma that suppress case reporting, and inadequate infrastructure particularly the absence of a safe house (shelter). These findings contribute empirically to the literature on child protection law implementation, demonstrating that legislative provisions alone are insufficient without institutional strengthening, public legal education, and adequate resource allocation. The study recommends strengthening DP3A's institutional capacity, intensifying multisector collaboration, and implementing community based prevention programs.

Keywords: *Child protection; legal implementation; Sexual violence*

Abstrak

Kekerasan seksual terhadap anak, khususnya pencabulan, merupakan persoalan hukum dan sosial yang serius di Indonesia yang mengancam hak anak atas keselamatan, tumbuh kembang, dan martabat. Penelitian ini mengkaji implementasi Pasal 69A Undang-Undang Nomor 35 Tahun 2014 tentang Perlindungan Anak oleh Dinas Pemberdayaan Perempuan dan Perlindungan Anak Kabupaten Bone, Sulawesi Selatan, serta menganalisis faktor-faktor penghambat efektivitasnya. Dengan menggunakan metode yuridis empiris berpendekatan sosiologi hukum, data dikumpulkan melalui observasi, telaah dokumentasi, dan wawancara yang dianalisis melalui kerangka teoritik dan regulasi, bukan dilaporkan secara verbatim. Hasil penelitian menunjukkan bahwa DP3A Kabupaten Bone telah menjalankan empat bentuk perlindungan khusus: edukasi kesehatan reproduksi, rehabilitasi fisik dan psikologis, pendampingan psikologi, serta pendampingan hukum. Bentuk-bentuk ini sejalan dengan mandat Pasal 69A dan diperkuat oleh koordinasi lintas lembaga bersama aparat penegak hukum dan lembaga layanan sosial. Namun demikian, tiga faktor penghambat struktural berhasil diidentifikasi: kendala pembuktian akibat sifat non-fisik kejahatan seksual, rendahnya literasi hukum masyarakat dan stigma sosial yang menekan pelaporan kasus, serta ketidakcukupan sarana dan prasarana, khususnya ketiadaan rumah aman (shelter). Temuan ini berkontribusi secara empiris pada literatur implementasi hukum perlindungan anak, menunjukkan bahwa ketentuan legislasi saja tidak memadai tanpa penguatan kelembagaan, edukasi hukum publik, dan alokasi sumber daya yang memadai. Penelitian merekomendasikan penguatan kapasitas DP3A, intensifikasi kolaborasi multisektor, dan program pencegahan berbasis komunitas.

Kata kunci: *Perlindungan anak; implementasi hukum; kekerasan seksual*

Introduction

Children constitute a vulnerable class of legal subjects that require special protection from the state, families, and society at large. From a human rights perspective, children possess fundamental rights to safety, healthy development, and protection from all forms of violence, as guaranteed by the 1945 Constitution of the Republic of Indonesia and the Convention on the Rights of the Child, to which Indonesia is a signatory state (Nashriana, 2021). Despite these normative guarantees, empirical realities reveal that child sexual abuse particularly molestation remains a serious and growing problem, not only in terms of absolute numbers but also in the severity of its destructive impact on children's long-term development.

Globally, the World Health Organization (WHO, 2020) estimates that approximately one in five women and one in thirteen men report having experienced sexual abuse during childhood. In Indonesia, the National Commission on Violence Against Women (Komnas Perempuan, 2023) has documented a consistent upward trend in reported cases of child sexual abuse. This trajectory reflects systemic weaknesses in the implementation of child protection policies at the regional level (Rosifny, 2020). Theoretically, the effectiveness of legal protection is not determined solely by the quality of statutory norms. It is equally contingent upon the availability of competent law enforcement personnel, adequate facilities, community legal awareness, and a conducive legal culture (Soekanto, 1984; Nurdin et al., 2023).

Law Number 35 of 2014 on the Amendment to Law Number 23 of 2002 on Child Protection constitutes the primary legal instrument governing child protection in Indonesia. Article 59(1) of this law obligates the central government, regional governments, and other state institutions to provide special protection to children. More specifically, Article 69A enumerates the forms of special protection available to child victims of sexual molestation, including reproductive health education, physical and psychological rehabilitation, social assistance, accompaniment throughout judicial processes, and the protection of victims' identities from media disclosure. The implementation of these provisions at the operational level falls under the mandate of the Office of Women's Empowerment and Child Protection (Dinas Pemberdayaan Perempuan dan Perlindungan Anak/DP3A) as the designated regional government agency responsible for child protection matters.

Prior research has documented significant challenges in the implementation of child protection law across Indonesia. Afifah and Lessy (2014) identified structural weaknesses in the protection afforded to child witnesses within the criminal justice system. Pratiwi et al. (2023) found suboptimal application of the Child Protection Act in cases of child sexual violence in South Jakarta. Zahra (2025) emphasized the necessity of an integrated preventive and curative approach to addressing child molestation cases. Nonetheless, scholarly literature specifically examining the implementation of Article 69A of Law No. 35/2014 by DP3A offices in South Sulawesi and Bone Regency in particular remains notably limited.

This study addresses that research gap by providing an empirically grounded, institution-based case study analysis in Bone Regency a region with

distinctive geographic and sociocultural characteristics within the broader context of child protection policy implementation in Eastern Indonesia. Official data from DP3A Bone Regency document a significant increase in child sexual violence cases, rising from 15 cases in 2023 to 27 cases in 2024 (DP3A Kabupaten Bone, 2025), which underscores the urgency of evaluating the legal protection framework in this area.

Drawing on this background, the study formulates two central research questions: (1) How has DP3A Bone Regency implemented Article 69A of Law Number 35 of 2014 on Child Protection in relation to underage victims of sexual molestation? (2) What factors inhibit the effective implementation of these provisions? The study aims to critically analyze the forms of legal protection that DP3A Bone Regency has provided and to identify the structural barriers affecting their effectiveness, with a view to formulating evidence-based policy recommendations.

Research Method

This study employs an empirical juridical method (socio-legal research), an approach that examines law not merely as a normative system but as a social phenomenon that operates and evolves within society (Widiarty, 2024; Soekanto, 1984). Within this paradigm, law is understood as the product of dynamic interactions among norms, institutions, and social behaviors, such that the effectiveness of legal implementation cannot be assessed solely on the basis of statutory text but must be evaluated against how norms function in practice (Pound, 1910; Banakar & Travers, 2013). The study adopts a sociology of law approach, which analyzes the reactions and interactions of legal norm systems within their social contexts (Rahardjo, 2006). This approach is particularly appropriate given that the implementation of Article 69A of Law No. 35/2014 is inextricably linked to social, cultural, and institutional factors that shape its practical execution.

The research was conducted at DP3A Bone Regency, South Sulawesi Province, which was selected through purposive sampling based on its institutional relevance as the body mandated to implement Article 69A and on empirical grounds relating to the documented increase in child sexual violence cases in the area. Data sources comprised two categories. Primary data were obtained through in-depth interviews with key informants within DP3A Bone Regency and through direct field observation. Secondary data were derived from applicable legislation, official case records maintained by DP3A, regional policy documents, and a systematic review of academic literature indexed in Scopus and Indonesia's national journal indexing system (Sinta) at tiers 1, 2, and 3.

Data collection techniques included: (1) participatory observation of DP3A's service procedures and operational mechanisms; (2) semi-structured interviews with officials and staff of DP3A Bone Regency as key informants; and (3) documentary analysis of case archives, annual reports, and relevant regulatory instruments. Data were analyzed qualitatively using the interactive analysis model of Miles and Huberman (2014), comprising three concurrent flows: data reduction, data display, and conclusion drawing/verification. Data validity was ensured through source triangulation and methodological triangulation. Interview findings

were integrated into theoretical frameworks to produce scientifically meaningful conclusions rather than purely descriptive accounts.

Results and Discussion

Trends in Child Sexual Molestation Cases in Bone Regency: An Empirical Overview

Official records maintained by DP3A Bone Regency indicate a substantial increase in child sexual violence cases over the two most recent reporting years. A total of 15 cases were recorded in 2023, all involving female victims, and this figure rose to 27 cases in 2024 (DP3A Kabupaten Bone, 2025).

Table 1. Reported Child Sexual Violence Cases at DP3A Bone Regency, 2023–2024

No.	Year	Male Victims	Female Victims	Total
1	2023	–	15	15
2	2024	–	27	27

Source: DP3A Bone Regency Archive, 2025 (processed by authors)

An increase of 80% within a single year is a deeply concerning indicator, reflecting trends also observed at the national level. Komnas Perempuan (2023) has documented a surge in reported child sexual violence cases nationwide, driven in part by heightened post-pandemic reporting awareness and the proliferation of social media, which has expanded children's exposure to potential perpetrators (Noviana, 2015; Irianto, 2021). Importantly, these figures are broadly considered to underrepresent the actual scale of the problem the so called dark number given that many cases go unreported owing to social stigma and victims' fear of reprisal (Erlinda, 2022).

From a criminological perspective, the persistently high incidence of child molestation reflects the weakness of both formal and informal social control mechanisms at the community level (Hirschi, 1969). Social control theory posits that criminal behavior is more likely to occur when social bonds are weakened a condition that, in the context of child sexual violence, correlates with inadequate family supervision, diminished community cohesion, and insufficient engagement by child protection institutions (Gultom, 2023).

Implementation of Article 69A of Law No. 35/2014 by DP3A Bone Regency

The analysis of implementation is guided by the policy implementation theory developed by Van Meter and Van Horn (1975), which identifies six key determinants of policy effectiveness: policy standards and objectives, resources, inter-organizational communication, the characteristics of implementing agencies, socio-economic and political conditions, and the dispositions of implementors. This framework is complemented by Soerjono Soekanto's (1984) theory of legal effectiveness, which emphasizes five determining factors: the law itself, law enforcement personnel, facilities and infrastructure, community awareness, and legal culture.

a. Reproductive Health Education Services

DP3A Bone Regency delivers an education program encompassing counseling on reproductive health, the identification of warning signs of sexual

abuse, and information on available reporting mechanisms. The program targets a broad range of audiences, including parents, teachers, healthcare workers, law enforcement personnel, and the general public. Normatively, this initiative aligns with Article 69A(a), which mandates educational measures concerning reproductive health for child victims.

From a theoretical standpoint, community-based education constitutes a primary prevention strategy that has been demonstrated to be effective in reducing the incidence of child sexual abuse (Finkelhor et al., 2015). A meta-analysis conducted by Daro and Donnelly (2002), which examined child sexual abuse prevention programs across multiple countries, found that educational interventions simultaneously engaging parents, teachers, and communities produced significantly greater impact than programs targeting children alone. The multi-stakeholder orientation of DP3A Bone Regency's education program is therefore consistent with evidence-based best practices in child protection.

Nevertheless, the effectiveness of these educational initiatives requires periodic evaluation through measurable outcomes, such as changes in case-reporting rates and shifts in community knowledge and attitudes. Wurtele (2009), in the context of child sexual abuse prevention (CSAP) programs, established that the success of educational interventions cannot be assessed solely by the number of participants reached but must also account for sustained behavioral and attitudinal change. In Bone Regency, the development of structured program evaluation mechanisms remains an area requiring improvement to ensure institutional accountability.

b. Physical and Psychological Rehabilitation Services

DP3A Bone Regency provides rehabilitation services for molestation victims over a period of approximately three months. These services include medical examinations, physical care, trauma management, and referral to more comprehensive healthcare facilities when clinically necessary. This constitutes a direct operationalization of Article 69A(b), which mandates prompt intervention, including medical treatment and/or rehabilitation.

From the perspective of mental health science, child sexual abuse produces complex and enduring traumatic sequelae, including Post-Traumatic Stress Disorder (PTSD), depression, anxiety, behavioral dysregulation, and impaired capacity for interpersonal relationships (Herman, 1992; Putnam, 2003). A longitudinal study conducted by Maniglio (2009) found that child victims of sexual abuse who did not receive rehabilitative intervention faced a two- to four-fold greater risk of long-term psychological disorder compared with those who received professional care.

The rehabilitation services offered by DP3A Bone Regency are consistent with the minimum victim service standards established by Indonesia's Ministry of Social Affairs (2021) and UNICEF's (2020) guidelines on child-sensitive rehabilitation. The practice of referring cases requiring more intensive care to hospitals in Soppeng and Makassar reflects an application of the continuum of care principle, which is strongly recommended in the professional management of sexual violence victims (Gosita, 2012; Gultom, 2023).

c. Psychological Counseling Services

Psychological counseling represents a critical component of recovery for child molestation victims. DP3A Bone Regency delivers this service through an initial psychological needs assessment, followed by individual and group counseling sessions, and psychoeducation for victims' families to equip them with the knowledge and skills needed to provide appropriate support. All costs associated with psychological counseling are borne by DP3A, reflecting the state's institutional commitment to fulfilling its child protection mandate.

The trauma-informed care approach applied by DP3A aligns with recommendations issued by the Substance Abuse and Mental Health Services Administration (SAMHSA, 2014), which emphasizes the importance of trauma-sensitive, stigma-free, survivor-centered psychological services. Research conducted by Afifah and Lessy (2014) in the Indonesian context further confirms that sustained psychological counseling is not only central to victims' recovery but also plays a significant role in enhancing victims' willingness and capacity to provide testimony in judicial proceedings.

The incorporation of family members into the recovery process is a practice robustly supported by the scientific literature. Cohen et al. (2006), in their seminal study on Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), demonstrated that interventions actively involving caregivers produced more significant and more rapid improvements in trauma symptomatology compared with child-only interventions. The family-inclusive counseling model employed by DP3A Bone Regency therefore corresponds with internationally recognized standards of care for child victims of sexual violence.

d. Legal Assistance Services

The legal assistance services provided by DP3A Bone Regency encompass guidance for victims and their families throughout the case reporting process, accompaniment during investigation and court proceedings, and administrative support in meeting legal procedural requirements. Active coordination with police, prosecutors, and judicial authorities serves as the primary mechanism through which DP3A facilitates victims' access to justice.

From a legal standpoint, these services constitute the implementation of Article 69A(e), which mandates protection and accompaniment for victims throughout every stage of the judicial process. The availability of legal assistance for child victims who are unable to afford private legal representation is, moreover, a manifestation of the principle of equal access to justice, as guaranteed by Law Number 16 of 2011 on Legal Aid (Igusti, 2021).

From a victimological perspective, legal assistance functions not merely as a conduit to formal justice but as a mechanism of victim empowerment enabling victims to reclaim a measure of agency over their own circumstances (Gosita, 2012). Research by Pratiwi et al. (2023) demonstrated that victims who received legal accompaniment reported higher satisfaction with the judicial process and experienced lower rates of secondary victimization. The cross-sectoral coordination maintained by DP3A Bone Regency with law enforcement bodies reflects an application of the multi-agency working principle that is widely recommended in child protection governance frameworks (Munro, 2011).

Structural Factors Inhibiting Implementation

The analysis of implementation barriers is conducted through the lens of Soerjono Soekanto's (1984) theory of legal effectiveness, which identifies five determinants of legal efficacy: the substance of the law, law enforcement personnel, facilities and infrastructure, community legal awareness, and legal culture. The three inhibiting factors identified in this study can be systematically mapped onto this theoretical framework.

a. Evidentiary Challenges

One of the most significant structural barriers to the effective implementation of legal protection for molestation victims is the limitation of available legal evidence. Unlike physical assault, which typically leaves visible and documentable physical injuries, sexual crimes particularly molestation frequently leave no readily identifiable physical traces, especially when reporting occurs well after the time of the offense (Chazawi, 2007; Rosifny, 2020).

Indonesia's criminal procedural law (Article 183 of the Code of Criminal Procedure/KUHAP) requires a minimum of two categories of evidence to establish guilt. In the absence of compelling physical evidence, molestation cases rely heavily on victim and witness testimony and expert examination (*visum et repertum*). Research by Azriadi (2021) found that evidentiary limitations are among the principal reasons for the high proportion of cases that fail to advance to the prosecution stage. This challenge is compounded by the shortage of qualified forensic specialists and medical practitioners capable of conducting *visum* examinations to adequate standards in districts such as Bone Regency.

From a comparative legal perspective, many jurisdictions have adopted specialized evidentiary approaches in cases of child sexual abuse, including standardized forensic interview protocols such as the National Institute of Child Health and Human Development (NICHD) Protocol and the use of video-recorded victim testimony to prevent revictimization through repeated examinations (Lamb et al., 2018). The adoption of such practices within the Indonesian legal system, including at the regional level in Bone Regency, represents a strategically important solution to existing evidentiary barriers.

b. Low Community Legal Literacy and Social Stigma

The second inhibiting factor concerns the low level of legal literacy within the community and the persistent social stigma attached to victims of sexual molestation. Field data indicate that the majority of victims' families choose not to report molestation cases to the authorities, citing shame, fear of public disclosure, or unfamiliarity with reporting procedures. The social stigma borne by victims of sexual violence constitutes the primary barrier to accessing legal protection.

This phenomenon is closely linked to the deeply entrenched practice of victim blaming within patriarchal cultural structures prevalent in many communities, including those in Indonesia (Handayani & Novianto, 2004). Noviana (2015) found that victim-blaming community perceptions constitute the single most influential factor in families' decisions not to report child sexual violence. This is further exacerbated by powerful social taboos that inhibit open discourse on issues

of sexuality and sexual violence in conservative communities, including in South Sulawesi.

From the theoretical perspective of law and society, legal awareness is a precondition for the effective implementation of legal norms. Soekanto (1984) argues that even the most refined legal norms cannot function effectively in the absence of community legal consciousness and compliance. This finding aligns with research by Zahra (2025), which identified a strong correlation between low legal literacy and the high dark number of unreported child molestation cases in Indonesia.

c. Absence of a Safe House (Shelter) and Infrastructure Deficits

The third inhibiting factor is infrastructural in nature, centered on the absence of an independently managed safe house (shelter) operated by DP3A Bone Regency. A safe house is a critical facility in the management of child sexual violence cases, serving as a temporary place of safety for victims particularly in situations where victims cannot safely return to their home environment because the perpetrator is a family member or continues to pose a threat to the victim's safety.

The absence of a shelter constitutes a structural constraint that materially undermines DP3A's capacity to fulfill its special protection mandate in a comprehensive manner. The Ministry of Women's Empowerment and Child Protection of the Republic of Indonesia (2022) has designated the availability of a safe house as one of the primary indicators of an Integrated Women and Child Protection Service (LTPPA). In the absence of this facility, DP3A Bone Regency is compelled to rely on coordination with social institutions in neighboring districts an arrangement that introduces response inefficiencies and heightens the risk of harm to victims during the transitional period.

Research by Gultom (2023), conducted across multiple regions of Indonesia, found that insufficient regional government budgets represent the primary reason for the continued absence of safe houses in many districts and municipalities. This reflects a deeper structural imbalance in the allocation of child protection resources between the central and regional levels of government a systemic issue that warrants serious attention within the frameworks of fiscal decentralization and regional autonomy (Nurdin et al., 2023).

Conclusion

This study yields two principal and interrelated conclusions. First, DP3A Bone Regency has implemented four forms of special protection for child victims of sexual molestation as mandated by Article 69A of Law Number 35 of 2014, namely reproductive health education services, physical and psychological rehabilitation, psychological counseling, and legal assistance. This implementation is supported by inter-agency coordination with law enforcement and social service institutions. Normatively, all four service forms meet the minimum standards prescribed by applicable legislation and are consistent with internationally recommended child protection practices.

Second, the effectiveness of this implementation remains constrained by three structural inhibiting factors: (1) evidentiary challenges arising from the non-physical nature of sexual crimes, which make it difficult to satisfy the minimum two-

category evidentiary standard required under Indonesia's criminal procedural law; (2) low community legal awareness and literacy in child protection, compounded by social stigma that produces widespread underreporting of cases; and (3) the absence of an independently managed safe house, which limits DP3A's capacity to provide direct physical protection to victims at critical moments.

On the basis of these findings, this study advances four policy recommendations: (1) strengthening the capacity of forensic personnel and adopting standardized child interview protocols (NICHD Protocol) to address evidentiary barriers; (2) developing sustained community-based legal literacy programs and anti-stigma campaigns; (3) allocating adequate regional government budgets for the provision of shelter facilities and the enhancement of DP3A's human resource capacity; and (4) strengthening regional legislation (Perda) to support comprehensive implementation of the Child Protection Act in Bone Regency.

Theoretically, this study confirms the continued relevance of Soekanto's legal effectiveness theory as an analytical lens for evaluating child protection policy implementation at the regional level, while simultaneously enriching the empirical literature on child protection governance in Eastern Indonesia. Future research examining the perspectives of victims and their families, as well as comparative analyses across regencies in South Sulawesi, is recommended to further expand the knowledge base in this field.

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