



Empowering your Child
and Preventing
Sexual Abuse

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Empowering Your Child and Preventing Sexual Abuse

It is estimated that between 15-20% of **girls and boys from all socioeconomic groups** in Pakistan are exposed to sexual harassment and abuse before the time they turn 18 years old ("The Bitter Truth", Rozan). With many cases going unreported or undetected, it can be assumed that in reality the statistics are probably much higher. Whatever the numbers may be, it is increasingly clear that not enough is being done to protect children from abuse. Moreover, a number of myths and misconceptions which suggest that only girls, and children from lower socio-economic groups are abused, continue to be believed by many people.

This booklet has been designed as a tool for parents and caregivers to use while talking to their children about child sexual abuse. Rather than focus a great deal of attention on statistics and facts, the aim of the booklet is to provide realistic strategies that parents and caregivers can use to actively help their children learn to protect themselves from abuse. The tips and suggestions laid out are meant to make conversations about abuse with children easier, more effective and practical, and to encourage parents to start talking about a subject area where prevention is the key to safety.

What is Child Sexual Abuse?

The more obvious cases of sexual abuse refer to the physical molestation, fondling or rape of a child. However, sexual abuse also includes any kind of inappropriate exposure to sexual content, both verbal and visual. The following are all forms of sexual abuse:

- × Fondling, touching, or kissing a child inappropriately
- × Fondling, touching or kissing a child's sex organs
- × Making a child touch their own, or someone else's sex organs
- × Having sex with a child or forcing a child to have sex with someone else
- × Showing a child pornographic content
- × Telling a child pornographic stories
- × Making a child pose for pornographic pictures or videos
- × Forcing a child to undress or watch someone undress
- × Showing one's sex organs to, or "flashing," a child with the intent of gaining sexual gratification

Who is an Abuser?

Many myths surround child sexual abuse, but perhaps the most common one is that children are most often abused by male strangers. In actuality, **abusers, both male and female, usually have a previous relationship with the child that they choose to abuse, and often have direct access to that child.** Family friends, family members, domestic help, teachers and neighbors can all be abusers. In fact, a report published by *Rozan* analyzing 200 letters sent in by child abuse survivors reveals that **49% of the child abusers were relatives, 43% were acquaintances** (the highest percentage of which were domestic help) and only 7% were strangers to the child.

The very fact that most abusers are trusted individuals often results in their actions going undetected. In addition, most abusers prey on the naiveté of their victims, and rather than use physical force, use the basis of their relationship to keep their actions a secret. Abusers often strategize ways they can become closer to children and develop their trust by giving gifts and making them feel appreciated. Some abusers even try to become closer to the family of the child so that they may eventually be left alone with the child.

Once access to the child is established, abusers cross boundaries slowly, sometimes with accidental touch, sexual jokes, or by kissing and hugging the child repeatedly. With time, the child becomes more comfortable with the abuser and desensitized to his or her touches and comments. The abuser can then increase the intimacy of his/her acts if there is continued interaction with the child in private spaces. Abusers also take different strategies to make sure that children do not tell someone what is happening to them. Some abusers may use outright aggression and threaten to hurt the child or their family. Others may manipulate children by making them feel ashamed, or convince them that the interaction should be kept a secret. In all cases, however, abusers strategize about the children they will abuse, and the methods they will use to make sure that contact with the child is ongoing, and the abuse is kept hidden.

Can Abuse be Prevented?

The simple answer to whether abuse can be prevented is “yes, in some cases.” While there is no way to ensure that a child will never be abused, there are measures that can be taken to lower the chances that abuse will occur, and to ensure that any abuse is not ongoing. Parents and caregivers cannot be with their children all the time, which means that children have to be empowered to be able to protect themselves. Rather than feeling overwhelmed by this notion, parents can use the knowledge to their benefit and prepare children from a young age to protect their bodies.

Traditionally, fear is used as the most common technique to make children listen and follow instructions. For example, parents teach their children about “stranger danger” by telling them about the physical harm that can come to them if they talk to strangers or agree to go somewhere with a stranger. As discussed previously, however, most abusers are often known to the child they choose to abuse. Yet, because children have only been taught to be cautious of “strangers,” they are not necessarily equipped with the know-how to protect themselves from people who are familiar to them. Thus, parents must first educate themselves about abuse and protection before they can begin the process of helping their children.

Talking About Abuse:

Usually by age three, a child can begin to understand concepts of protection and this is a good age to start talking to children about abuse. Some parents worry that by talking about abuse, they will instill fear in their children of adults, make them incapable of trusting others, or rob them of their innocence. However, by speaking to children in a way which makes them feel in control, parents can actually empower them and make them feel more self-confident and capable, rather than helpless. The idea is to treat abuse prevention like any other safety strategy, and keep it simple and straightforward.

Getting Started: The Basics (Ages 3-5)

Start off the communication process by making children feel comfortable with their body. It is best to try and name body parts using real names so that children develop a healthy and respectful relationship with their body. However, if parents are finding this challenging, then other names can be used for the genitals as long as they are not derogatory or negative. By having a particular name for the genitals and other private areas of the body, children will be able to communicate their problems more effectively.

- Small children will have equal interest in, and curiosity about, all of their body parts. They will ask about their nose and eyes, as well as about their genitals. Not answering their questions, or making them feel ashamed for touching themselves out of curiosity can create negative and shameful feelings towards the private areas of the body. Later on, such feelings can result in a child not discussing an incident of abuse because he or she does not feel comfortable doing so.
- Parents tend to be concerned that the names they use for private parts with their children may be repeated to others and create embarrassing social situations. While children can be unpredictable, they are also capable of understanding the difference between information that is private and public. Parents can simply tell their child when discussing sensitive issues, that the information should not be repeated publicly; that while there is nothing shameful about it, it should only be discussed with them in a private space.

While giving names to body parts, it is vital that parents identify those parts that are private and clarify for children that the whole body is special and their own, which no one can touch against their will. The idea is to give children ownership over their bodies so that they feel empowered.

- Private parts can be described very easily by parents as those parts which only trusted adults can touch while changing or bathing a child, or perhaps a doctor may need to touch during a check up.
- For slightly older children, parents can even explain that private parts are those that we keep covered in public because they are our own and not for anyone else to see or touch. **No adult should have to handle a child's private parts unless it is for health or hygiene purposes.**



Discussing Touches: (Ages 5-9)

Once children have an understanding of the private areas of their body, and develop a sense of ownership over their body, it is important that parents start to discuss abuse prevention in more concrete terms with clear instructions and examples. All conversations with children should always take place in a safe, comfortable environment and should be conducted in a casual manner. For example, it is perfectly acceptable to talk to children while they are engaged in everyday activities like playing, bathing, coloring or even assisting with household chores.

- The easiest way to start discussing abuse prevention in more concrete terms is to describe **“good” and “bad” touch**. All discussions should try to include examples for children to relate to, so that they can start to connect specific feelings evoked with the touches mentioned.
- For example, **good touches can be defined as those touches that make us feel happy, loved, and comforted**, such as hugs from parents, or an encouraging pat on the back from a teacher.
- Bad touches, however, are ones that either cause us physical pain or make us feel uncomfortable in any way. If someone hits us, pushes us, or tickles us to the point of discomfort, that can be considered a bad touch. As with good touches, help children to make a connection between the touch and the feelings it creates within them. **Be careful not to use only physically hurtful examples as children may start to think that bad touches are only those that cause pain (which is not always the case when it comes to child sexual abuse as it is very common for children to experience no physical injury).**
- Once the positive and negative feelings associated with good and bad touches respectively are established, parents can move on to discuss how if someone touches the private areas, or any part of our body that makes us feel uncomfortable, that is also a bad touch. Children, particularly below the age of 7, have a hard time understanding how a touch that does not cause pain can be hurtful to them, which is why it is vital that parents be as specific as possible, by naming exact parts that should not be touched, or identifying the only people who are allowed to touch the child.
- If parents feel confident enough, they can make this conversation into a story for children to help clarify how someone feels when they experience a good touch or a bad touch. Stories are often easy to refer back to in later circumstances because a caregiver can always say, “Remember what happened in the story about...”
- Similarly, role plays work very well with children since it gives them something concrete to relate to at a later time. Parents can try to enact real scenarios with children to help them understand the subtlety of how child abuse often works. In these situations, parents can bring up questions such as, “The person tells you not to tell anyone what they are doing, what should you do?” **The chances that a child will be able to follow instructions and protect themselves improve if he or she has practiced being in the situation from beforehand.**

Developing Decision Making Skills: (Age 4 onwards)

By age four, children will have developed a sense of independence and want to make decisions for themselves from time to time. Parents can encourage children to develop analytical thinking skills by helping them to make well thought-out decisions about simple day-to-day activities. Although this particular area of prevention is more subtle and indirect, it is very important for parents to recognize that a number of harmful situations for children can be avoided if they are able to make well thought out decisions based on possible consequences. For example, in the case of abuse, abusers often tell their victims to keep their secret and not to tell anyone about their relationship. A child with more capable decision making skills will be better able to conclude that deciding not to keep the secret and to tell a trusted adult is the safer decision to make (given that the child has been exposed to the idea of not keeping secrets from beforehand).

- Assisting children in learning how to make good decisions is a slow process that improves with age and mental development. However, even a child as small as two years of age wants to make certain decisions, such as what to play with, eat, or wear.
- Parents can start helping children to learn how to make good decisions by allowing them to make some decisions for themselves, and assisting them with information and guidance rather than simply instructing them or making choices for them all the time.
- For example, if a child insists on playing with something that is not extremely dangerous, but can potentially hurt them, a parent can help them to make the decision to stop by explaining how they may get hurt. The objective is to try and make the child understand for themselves that what they are doing is potentially harmful, and actively make the decision to stop. Such skills can be practiced in many day-to-day activities, such as deciding what to wear ("If you don't wear something warm then you might get sick"). **Again, the idea is to get the child to understand the reasoning behind the right decision based on the consequences of deciding otherwise.**
- While this may be a difficult process for parents because children can be stubborn about their decisions, with time their mental development will allow them to start linking decisions to outcomes and better enable them to think critically. If children are simply accustomed to listening to instructions all the time without thinking through the consequences themselves, they will be more susceptible to the instructions that an abuser gives them.

Building Communication Skills for Prevention:

Young children below the age of 7 have a great deal of difficulty understanding the idea that they cannot trust everyone, particularly when it comes to people they are close to, or direct relatives. One reason that child sexual abuse causes such extensive emotional scarring in children is because they are often betrayed by someone that they care about and trust. The frequent emotional involvement of children with their abusers means that even **stronger communication between children and caregivers is essential** so that children feel comfortable enough to talk to someone if they are being mistreated in anyway.

- Children should be encouraged to tell trusted adults anything that may be bothering them, even if it is intimidating or frightening.
- Children should be reminded that keeping secrets that seem wrong can have negative effects, as abusers often ask children to keep their actions a secret from caregivers.
- Parents should keep in mind that open communication is a give and take process, and children respond positively to approachable, honest adults.

Children often need to be encouraged to trust their feelings, which is also a product of self-confidence. Often, when children are being abused or mistreated, they have a sense that something is wrong, but do not act on it out of fear or apprehension that adults should not be questioned because they are supposed to know better than children. Parents can encourage their children to trust their inner feelings, which usually indicate when something is amiss.

- For very small children, who might have an easier time understanding concrete terms, parents can explain inner feelings using examples. Children will be able to relate to the “butterfly” feeling they get in their stomach when they are nervous or scared.
- Children often get nervous feelings when they are being mistreated. Parents can help children better understand such inner feelings by explaining to them that their feelings usually mean something is bothering or scaring them, and they should trust their feelings and express their concerns to an adult.
- It is important for caregivers to remember that **child sexual abuse can be very confusing for children because while it can create feelings of fear and discomfort, it can also make a child feel appreciated, cared for, or even induce feelings of pleasure.** It is vital then that children be encouraged to tell someone when they experience any feelings of discomfort, even if there are other feelings mixed in as well.

Children learn to say “no” very early on, and often use the word prolifically, much to their parents distaste. However, **“no” can be a very strong word and a great source of protection to children, if they can be taught how to use the word effectively.** Research suggests that abusers often prey on children who are shy, insecure and naïve, simply because they are less likely to tell anyone about the abuse. A strong deterrent to abusers, then, is a child who knows they are being mistreated, and can tell the abuser to stop what they are doing. Parents need to encourage children that it is ok to say “no” anytime they feel uncomfortable or someone touches their private body parts inappropriately.

- Again role plays and specific instructions can help children in this area of prevention. Refusing someone’s touch is a skill that needs to be put into practice repeatedly before a child can be expected to do so if a real situation occurs.

- Teaching children to say “no” effectively requires consistency on the part of the parent. If children do not like the way they are being handled by a relative or family friend, they should be able to say they do not want to be kissed, or hugged without facing punishment or anger from their parents.
- If messages do not remain consistent on the part of parents and elders, then children can become confused. In the case that they are abused by an adult they know, they might be too scared of the consequences to say “no.”

Beyond all else, parents should try to reinforce to their child during discussion sessions that if they are ever mistreated, it is not their fault and they should not feel responsible for someone else’s actions. Children can feel an enormous amount of guilt and confusion for having allowed the abuse to occur, not having told anyone, or even, at times, having enjoyed their relationship with the abuser. However, child abuse is never anyone’s fault other than that of the abuser.

Protection Strategies for Parents:

Empowering children to protect themselves is essential, however in some cases, they may still not be able to deal with an adult who has greater physical strength, mental capability, and is using manipulative tactics. In addition, as mentioned previously, some children will enjoy the attention that abusers give them which makes them less likely to report the incidents. Apart from developing skills in children, there are some strategies parents can take as well to assist in preventative measures:

- ⇒ **Limit time that a child spends alone with an adult one-on-one.** Since most abuse occurs when an adult and child are left alone, it is a good idea to have your child do as many activities as possible in groups when you cannot be there to supervise, whether it be going to school or taking extracurricular activities. In certain cases where children are left alone with adults, such as tutors, *maulvis*, or other caregivers, try to unexpectedly check in from time to time on the interaction taking place.
- ⇒ **Pay attention to your child’s mood if it changes before they see someone in particular.** If a certain adult makes a child uncomfortable then there is often a reason behind the child’s discomfort.
- ⇒ In the end one of the best preventative measures is to **trust, and act on your instincts** if a certain adult makes you uncomfortable around your child.



Suspected Abuse:

Preventative measures unfortunately do not always work, which means that caregivers also need to be aware of signs of abuse so that they can be clued in if their child is being mistreated and is not being able to tell anyone about it. **Obvious signs that child abuse is occurring often do not exist because there are usually far fewer physical symptoms than emotional ones.** However, children who are being abused, or are survivors of abuse do often exhibit certain characteristic symptoms that caregivers should keep in mind:

- Poor self-esteem, self-confidence, or body image
- Fear of certain adults or certain places
- Avoid going home after school, avoid going to school, or avoid going to a certain house/location
- Sleep disturbances, sleepwalking or nightmares
- Appetite disturbances
- Use new words for private body parts that have not been taught at home
- Become excessively aggressive, or display intense rage or anger
- Refer to “secrets” that he/she has with an adult, which cannot be shared with anyone else
- Act out sexually or have inappropriate knowledge of sexual content and behaviour
- Become self-destructive, self-abusive or suicidal
- Become sad, passive, withdrawn, or depressed
- Lack interest in school performance
- Regress to certain behaviours, such as bed-wetting or thumb-sucking
- Have difficulty trusting adults or forming new relationships
- Have frequent or constant stomach illnesses without any particular reason
- Torn or stained clothing
- Vaginal or rectal bleeding, pain or itching
- Abuse substances as an adolescent (drugs, alcohol, etc.)
- Cut her/himself as an adolescent (self-mutilation)

Many of the behaviours and psychological reactions listed above can be a result of emotional upheavals that children inevitably experience during their development. The death of a loved one, divorce, problems at school or with personal relationships can make children or adolescents exhibit complex symptoms, which do not necessarily mean that they are being abused. However, if several of the symptoms from the list above are noticed by those who are close to the child, then it is important to investigate further whether any abuse has taken place.

How to Communicate about an Incidence of Abuse:

If symptoms or behaviours discussed above do suggest that your child or a child you know is being abused, it is important to take immediate action, by talking to the child and asking him or her to explain what happened in his or her own words. It is important that parents remain calm and try not to over-react when they find out about a case of sexual abuse. It is easy for children to blame themselves for the occurrence of abuse, or become scared that their parents will be upset and angry with them, and thus hide details or valuable information.

If a parent or caregiver suspects abuse:

- ⇒ The first step is to **address the problem and not hope that it will simply go away**. Ask the child for an account of what happened without pushing them for too many details (children may want to discuss their experience or feelings at a different time; try not to force them into talking). Simple questions that do not lead the child such as “When did this occur?” and “Is this still happening?” are okay to ask.
- ⇒ **Children may reveal details about the abuse in stages**. For example, they may begin by relating a story and then saying they forget the details of what happened. Later, the child may relate the same story, but say that it happened to someone else, such as one of their friends, or they may change the details of what happened. It is important for parents to keep in mind that children are aware of the significance of abuse, and thus, they may take their own time in revealing the true nature of the abuse.
- ⇒ It is **not a good idea to question the authenticity of the child’s story** by saying things such as “Are you sure that is what happened?” or “Are you really telling me the truth.”
- ⇒ No matter how the child decides to relate the story, as a parent, it is essential that you reassure the child that you are happy they came to you and that **discussing the incident/s was the correct thing to do** for their safety.
- ⇒ **If you think that your child might have an injury, it is essential that they be examined by a health care professional** preferably someone they are used to seeing.
- ⇒ **Reassure the child that they are not responsible for what occurred**. Many children feel a sense of guilt that they were somehow responsible for the abuse.
- ⇒ Try to **refrain from saying negative comments about the abuser**, as the person may be someone who is close to the child.
- ⇒ **Psychological help is strongly recommended if possible** as children may have a difficult time speaking about the incident. Psychologists and counselors are trained to use strategies that help children to talk through play and art therapy. In addition to helping children discuss the incident so that they can be protected in the future, mental health professionals can also assist children in recovering from the abuse.
- ⇒ **Your feelings as a parent or caregiver are also very important**. You may feel guilt because you were not able to protect your child, or extreme anger at what has occurred. Keeping your emotions in check and remaining calm, however, is very important, as the child will be looking at how you are reacting to determine how much information they should continue to give you. Along with the abused child, you may need time to heal from what has occurred and often the assistance of a counselor or trained mental health professional can help the process.

Recovery after Abuse:

The degree to which abuse will affect a child varies depending on a number of factors, such as the age of the child, the abuser, how long the abuse went on for, the degree of abuse and whether violence was used during the abuse. Often children who have been abused by an adult they trust, such as a direct relative, and who have experienced the abuse over the course of some time will carry the most emotional scarring and require the most assistance during recovery. However, even in the most extreme cases, if survivors of abuse seek professional assistance, **it is possible to heal** slowly from the experience, learn to cope with what has occurred, and go on to have healthy relationships of their own in the future.

Conclusion

Many parents shy away from discussing child abuse because it is a frightening subject to think about and to accept as a realistic problem. Moreover, gathering the confidence to talk to a child about such a sensitive issue, especially when it is not very openly discussed in society can make it even more daunting. However, it is important to keep in mind that the more one normalizes the topic of abuse, the more they are equipping their child with the tools they need for self-protection. Along with parents, the community needs to take the responsibility and initiative to work on issues of abuse in family settings, school classrooms, religious institutions and youth centers to help educate and protect parents and children. In the end, children will be faced with dangers and cannot always physically be protected by caregivers and loved ones. By recognizing and anticipating the dangers, however, **we can equip children with information and skills that can help them to ensure their own protection.**

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Referrals:

NOTE: Aahung has ensured that all addresses, phone numbers and timings are correct at the time of publication (April, 2007), however, it is possible that individuals or organizations change their contact information at a later date. For further referral information, the Aahung office can be contacted between 9:30am-5:30pm, Monday – Friday.

Organizations with available counseling services/drop-in centers:

Alleviate Addiction Suffering Trust (AAS) – (92-21) 6682739, 4226185

Plot No. 251

Haji Sokhio Goth, Malir

Karachi

Nilofer Ismail (counselor with AAS) – Residence: (92–21) 2250974, and available on Tuesdays and Thursdays at AAS Adolescent Children’s Treatment and Rehabilitation Center – (92-21) 4226185

Aangan - Rozan – (92-51)-2215368

Rozan, Street 25, House 68B, F-10/1, Islamabad

P.O. Box #2237

Email: aangan@mail.comsats.net.pk

Jeet Healing Center, Sahil – (92-51) 2260636, 2856950

Office No 13, First floor, Al-babar center,

F-8 Markaz, Islamabad, Pakistan

Email: info@sahil.org

Psychologists available at Jeet: Mr. Raffiullah Khalil; Ms. Rashda Niazi; Ms. Saiqa Ashraf

Sahil Referral Units:

Abbottabad: Makhdoom Colony, Nari Road Mandian

Purana Ayub Medical College, Abbottabad, NWFP – (92-992) 383880

Sukkur: Sindhi Muslim Housing Society, Airport Road Sukkur, Sindh – (92-71) 5633615

Jaffarabad: Khosa Muhalla, Near Civil Hospital Tehsil Road, Dera Allah Yar, Jafferabad, Balochistan – (92-838) 510912

Konpal Child Abuse Prevention Society – Dr. Aisha Mehnaz, chairperson – (92-21) 4552220

4/N Block -6

PECHS, Karachi

Email: konpal@yahoo.com

Madadgaar – (92-21) 5685824, 5219902

Lawyers for Human Rights and Legal Aid (head office)

D1, 1st Floor, Court View Apartment, Opp. Sindh Assembly Building,

Fax: (92-21) 5685938

Website: www.lhrfa.sdnpc.org

Email: lhr@fascom.com

Walk-in-center: 202-204 Second floor, Panorama Center 1, Zaib-un-nissa Street, Sadder, Karachi

Helpline: (92-21) 111-911-922

Protection and Help of Children Against Abuse and Neglect (Pahchaan) –
(92-42) 5762612
H-9, St-38, Canal Park
Gulberg II, Lahore - 54660

War Against Rape (WAR) – (92-21)-5373008
102, Pearl Crest 18 C, 4th Commercial Lane Zamzama Blvd
Phase V, D.H.A
Karachi
Email: war@super.net.pk

Child Psychiatrists and Counselors:

Dr. Ehsanullah Syed – child psychiatrist, Karachi Aga Khan University, psychiatry department – (09-92) 4930051

Dr. Rubina Sial – child and adolescent psychiatrist, Clifton Consulting Clinic, Karachi; Tuesday 3-5pm, Friday & Saturday 10am-5pm – (09-92) 5372183

Imrana Zuhaire – counseling services, Karachi – 0300 8245799

Zohreen Murad – private counseling services for ages 6+, Karachi – 0300 3564531; zdem@hotmail.com

Aahung is a non-profit organization that has been working to improve the sexual and reproductive health and rights of the people of Pakistan since 1995. Aahung's programs for youth and children focus on developing life skills that enable children to better protect and care for themselves, build self esteem and confidence, challenge gender stereotypes, enhance body image, and improve communication skills and assertive behaviour.



of the information science community. The journal has been successful in this regard, and has been able to attract a wide range of authors and topics. The journal's success can be attributed to its focus on the interdisciplinary nature of information science, and its commitment to publishing high-quality research.

The journal's success can also be attributed to its commitment to publishing research that is both theoretically and practically significant. The journal has been able to attract a wide range of authors and topics, and has been able to publish research that is both theoretically and practically significant.

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