Mothers' Perception regarding Child Self-Protection against Sexual Abuse



Manar Safyeldeen Farag1, Sahar Mohamed Soliman2, Hanan Hamed Mohammed3

1B.Sc, Community Health Nursing Department, Faculty of Nursing, Mansoura University, Egypt 2Professor, Community Health Nursing Department, Faculty of Nursing, Mansoura University, Egypt 3lecturer, Community Health Nursing Department, Faculty of Nursing, Mansoura University, Egypt Corresponding auther: manar.safyeldeen@gmail.com

1.ABSTRACT

Background: Child sexual abuse (CSA) is a serious public health problem and worry all over the world. It leads to increase risk for physical, social, psychosocial and mental health problems across child span of life. Consequently, it is important to address mothers' perception of child sexual abuse influence their understandings of this problem and their actions to protect their children. The aim of this study is to explore the mothers' knowledge, subjective practice and attitudes regarding child sexual abuse. **Methodology:** Qualitative phenomenological research design was utilized in this study. This study was conducted at the different faculties affiliated to Mansoura University. A Purposive sampling technique was used to recruit the required samples of mothers who were composed of 60 working mother and have children less than ten years old. The researcher developed five tools for collecting the data of this study as the following: socio-demographic of mothers and their children, semi-structured interview tools to assess mothers' knowledge, subjective practice, others practice & attitude regarding child sexual abuse. **Results:** Four themes described mothers' perception regarding child self-protection against sexual abuse; most of mothers had lack of knowledge about child sexual abuse and its preventive practices. **Conclusion:** It is necessary to raise mother's awareness regarding child sexual abuse abuse is to involve parents mainly mothers into health educational programs as well as child in self-protection skills.

Keywords: Child sexual abuse, Children less than ten years old, Mothers, Perception

2.Introduction:

Child sexual abuse (CSA) is defined as the involvement of a "child in sexual activities for the child is developmentally unprepared and cannot give knowledgeable consent" (Ezekiel.et al 2017). Child by nature are particularly vulnerable to all types of abuse because of their temporary helplessness and dependence on adults and their inability to ask for help or report their abuse (Hitrec .G, 2015).

Child sexual abuse is a real global disaster that happens online and off line as well. The prevalence studies of child sexual abuse in Arab countries were limited because most of these crimes do not reach the court and are kept hidden due to cultural sensitivity, social stigma fearing and society reaction of this issue. Egypt is one of Arab countries and this issue doesn't receive the required attention despite the aggravation of the problem, most of the time CSA accidents delayed or never reported due to miss understood as fear of blaming and shame (CDC, 2020).

The impact of child sexual abuse is devastating for survivors. It leads to negative short term and long-term consequences that affect children's lives physically, psychologically, socially, and developmentally. The abused children are suffering from depression, panic disorder, and anxiety (Haileye, 2013), aggressiveness, suicidal thought, eating disorder, sexual behavior dysfunction, defensive avoidance, and social isolation that may persist into adulthood (American Psychological Association, 2014; Swea, Gordana & Dragana, 2013)

Child sexual abuse is a preventable adverse childhood experience and public health problem (CDC, 2019). International prevention efforts have focused on sexual abuse education for children through school – based programming which easy reach for a large number of children (Prescott et al., 2010). CSA prevention experts' emphasis that parents should be involved in prevention program (Mendelson and letourneau, 2015). Despite the important role they play in child protection, it is seldom to include in CSA prevention program (Rudolph et al., 2018).

Parents have a vital role to play in safeguarding and promoting the welfare of their children; like protecting children from maltreatment, preventing impairment of children's mental and Physical health or development. Ensuring that children grow up in circumstances consistent with the provision of safe and effective care, taking action to enable all children has the best outcomes by protecting them from CSA. (Working Together to Safeguard Children A guide to inter-agency working to safeguard and promote the welfare of children July 2018)

Aim of the Study

To explore the mothers' knowledge, subjective practice, and attitude regarding child self-protection against sexual abuse.

3. Methods

Design

Qualitative phenomenological research design was used throughout this study.

Setting

The study was carried out in the different faculties affiliated to Mansoura University as the following: Faculty of Engineering, Faculty of Agriculture, Faculty of Computing and information technology, technical nursing institute, Faculty of Commerce and Faculty of Nursing.

Participants

The available working mothers who have children less than ten years old from both genders. Studied mothers were selected from the abovementioned settings after informed with the purpose of the study.

Sampling

Purposive sampling technique was used to recruit the required samples of mothers.

Sample size

The required number of participants' mothers was calculated by using the principle of conducting focus group discussion (FGD). The sample size of mothers was 60 mothers.

Tools for Data Collection

After reviewing the relevant literature, the researcher developed five tools in this study for data collection.

Tool(I): Structured self-administered questionnaire to assess mothers' sociodemographic characteristics:

The researcher used this tool to assess sociodemographic data of participants such as age, occupation, educational level, residence, and marital status, number of children and gender of children.

Tool (II): Semi-structured interview tools to assess mothers' knowledge regarding child sexual abuse:

This tool was used to assess knowledge of mothers related to child sexual abuse and child selfprotection against sexual abuse.

- What do you know about sexual abuse?
- What is the difference between child sexual abuse and adult sexual abuse?
- What are the types of sexual abuse?
- What are the characteristics of child who in danger to be a victim?
- How can the abuser attract the child?

Tool (III): Semi-structured interview to assess mothers' subjective practice:

The researcher used this tool to explore mothers' subjective practice related to child sexual abuse and child self-protection against sexual abuse.

- -What do you do if you see the child is sexually abused?
- -What do you do to protect your child from sexual abuse?

Tool (IV):Semi-structured interview to assess mothers' opinion related to others practice related to child sexual abuse

The researcher used this tool to explore mothers' opinion related to others practice to child sexual abuse:

- What is the father practice for protecting his child?
- What are the country practices to prevent child sexual abuse?
- What does a child do when be sexually abused?
- What are the children's practices to protect themselves from sexual abuse?
- What is the expected behavior of the people surrounding the child victim of sexual abuse do?

Tool (V): Semi-structured interview to assess mothers' attitude related to child sexual abuse and child self-protection against sexual abuse:

The researcher used this tool to explore mothers' attitude related to child sexual abuse and child self-protection against sexual abuse as the following:

- What is your perspective in discussing sexual abuse with your child?

2

- From your point of view who is responsible for protecting child from sexual abuse and how?
- What is your feeling if someone you know and have sexual abuse?
- Does mother's role to protect her child from sexual abuse can be affected by her working?
- From your point of view what are the role of school for protecting children from sexual abuse?
- From your point of view what are the role of mass media of protecting children from sexual abuse?
- From your point of view what are the role of social media of protecting children from sexual abuse?

Procedure

Phase I: Preparatory phase

Administrative stage: An official letter from the head of the community health nursing department submitted to vice dean of postgraduate and research and the dean of Faculty of Nursing, Mansoura University to the appropriate authorities in the selected setting for obtaining permission and support during data collection.

Ethical consideration: The researcher obtained ethical approval from and the research ethics committee of the Faculty of Nursing, Mansoura University, and obtained informed verbal consent from all participants in this study, clarified the aim of the study, assured that their identities and response to the questionnaire is confidential.

Phase II: Operational phase

1- Literature Review

The researcher reviewed the current and past literature of national and international scientific published articles, internet search and textbooks from 2010 up to 2021 related to sexual abuse. This review was a guide for developing the study tools and the present booklet.

Developing the study tools, the researcher developed the following tools (I, II, III, IV and V)

Validity of the study tools:

A jury panel that involved five experts in the field of community health nursing and statistics are tested the content validity of the developed tools, and the researcher carried out the required modification.

The researcher selected 10% (n=6) of educated working mothers conveniently from the mentioned settings and were not included in this study as a pilot study to assess the face validity of the study tools and questions of the FGD. These

questions were translated from Arabic into English and vice versa to ensure the meaning consistency. The Arabic version of these questions were pilot tested to evaluate the clarity, applicability, and reliability, estimates the approximate time required for data collection, identifies the possible obstacles or problems that may hinder data collection and overcome measures.

Data collection

Once permission was granted to conduct the study, the researcher had initiated data collection from October 2019 to end of January 2020 in the available time at the end of clinical days. The researcher distributed the self-structured questionnaire to obtain socio-demographic and educational characteristics data of the participant mothers. The researcher moderated the focus group discussion to explore knowledge, subjective practice and attitude of the participant mothers.

At beginning of each focus group discussion, the researcher introduced herself determines appointment with participants according to their available time & explained the purpose of focus group discussion. Sessions were conducted in comfortable environment for mothers. Present rules of focus group discussion for participants such as participants' opinion should be respected by others and it is very important that everyone talk's one at a time to be voiced out clearly, write their answers included audio recording, some participants accepted, and others refused.

The researcher respected their opinions. Present the questions, discuss, and observe nonverbal action. Document the participants' responses & answer their inquiry.

The number of focus group discussion was 7 each one included from 6-10 participants according to (Stalmeijer, McNaughton, and Van Mook, 2014). The duration of each focus group ranged from 30- 45 minutes.

Data analysis

Thematic analysis was used to explore knowledge, subjective practice, and attitudes of the participant mothers. The interview transcripts were analyzed to search for common themes, similarities, and or variations among mothers' perception and views. Data were coded, identified under categories and subcategories, and organized together under common themes. The researchers met six times to discuss and review the findings to clarify the analysis of the emerging categories and themes.

4. Results

Table (1) represents the socio-demographic characteristics of studied mothers and their children. Regarding age, it was noticed that 46.7% of the studied mothers were in the age group ranged from (25 to less than 30 years) with a mean age of 28 (4.12) years old. Regarding qualification 58.3% are university graduate. Concerning residence, it clarified that 65% of mothers were living in urban areas, 50% had private apartment and 73.3% of mothers was married. The ages of 81.2 % of the studied children, ranged from 5 to less than 10 years with a mean age 5.88 (3.48) years old and 60% of them were female.

Based on the findings of the content analysis, the study results are presented by qualitative data and illustrated in the four themes as the following: -

I: Mothers' knowledge about child sexual abuse:

1. Concept of child sexual abuse.

- 2. Difference between adult and child sexual abuse.
- 3. Types of child sexual abuse.
- 4. Characteristic of child who is in danger to be a victim.
- 5. How can the abuser attract the child?

II: Mothers' subjective practice related to child sexual abuse:

- 1. What do you do if you see the child is sexually abused?
- 2. What do you do protect your child from sexual abuse?

III: Mothers' opinion related to others practice related to child sexual abuse.

- 1. What is the father practice for protecting his child?
- 2. What are the country practices to prevent child sexual abuse?
- 3. What does a child do when be sexually abused?
- 4. What are the children's practices to protect themselves from sexual abuse?

IV: Assessment of mothers' attitude related to child sexual abuse and child selfprotection against sexual abuse.

- 1.What is your perspective in discussing sexual abuse with your child?
- 2.From your point of view who is responsible of protecting child from sexual abuse and how?
- 3. What is your feeling if someone you know and have sexual abuse?

- 4.Do you think that mother's role to protect her child from sexual abuse can be affected by her working?
- 5.From your point of view what are the role of school for protecting children from sexual abuse?
- 6.From your point of view what are the role of mass media of protecting children from sexual abuse?
- 7.From your point of view what are the role of social media of protecting children from sexual abuse?

I. Mothers' knowledge about child sexual abuse and child sexual self-protection

Mothers' knowledge about child sexual abuse concept was illustrated in five subcategories as following

1. Concept of child sexual abuse:

The focus groups revealed that mothers who knew this concept presented as the following; more than half of mothers (n =33) FG1- FG2 number (1,2) - FG3 number 2,4- FG6 except participants (7,8) mentioned that CSA is exposing child to bad words and forcing child to undress and touching private body parts and forcing child to do shaming act as touching adult private body parts. And less than one quarter of mothers (n= 13) FG3 all participant except 2, 4 revealed that CSA is someone takes the child away from home or family and touch his body and private parts.

2. Difference between adult and child sexual abuse

The focus groups revealed that mothers who knew the difference between adult and child sexual abuse presented as more than one quarter of mothers n=17 presented in FG4 participant (2,3,4,5,7) -FG6 participant (2,3,4,5,6) and participant n. 2 in FG5 and all participant in FG7 except (5,6) revealed that children didn't know what is going like adults and think it's some sort of play. One quarter of mothers (n=15) presented in FG2 participant n (5,6) -FG3 n (6,7) -FG5 participant n (1,3,5) -FG1 reported that abusing is the same, but abuser of child can be older child or adult and abuser of adult always is adult. Only six of mothers presented in FG2 n (1,2,3,4) and FG3 participant n (4,5) reported that there is no difference between child and adult sexual abuse. Eight of mothers presented in FG5 participant n (6,7,8,9,10) and FG7 participant n (4,5,6) revealed that child ignore what is happening and cannot be defender and afraid of abuser, but adult can stop abusers and about one quarter of mothers didn't know the difference between adult sexual abuse and child sexual abuse.

3. Types of child sexual abuse,

The focus groups revealed that; more than half of mothers didn't know all the types of child sexual abuse. One third of mothers (n=20) FG2 n (1,2,3) - FG4 n(6,7,8,9,10) -FG5 n (1,2,3,4,5) – FG6 n (1,2,3,4) and mothers participant in FG7 n (4,6) reported that there are two types of child sexual abuse verbal sexual words and physical by touching private body parts, and only five mothers FG 6 participant n (8,9,10) - FG7 n (1,2) revealed that seeing sexual photos or sexual pictures.

4. Characteristic of child victim

The focus groups revealed that; more than one third of mothers (n=23) participants in FG3, FG4 and - FG6 participant (2,5,6) mentioned that younger children who stay at street long time or stay with strangers is more liable to be a victim. Only 10 mothers presented in FG2 except n5 and FG7 except n3 reported that younger children who are living with stepfather or stepmothers and without supervision are more susceptible to be a victim, while ten mothers revealed that child who is nearing to adolescent age and get out alone in public places is more liable to abuse. These participants showed in FG5 (3,4,6,7,9) - FG6 (1,3,8) - FG2 n (5) and - FG7 n (3).

5. The ways the abusers using for attracting child

The focus groups revealed that, about two thirds of mothers (n=40) presented in FG1 participant except n (5,8) - FG2 n (3,4) - FG3 -FG4 n (4,5,7,8) - FG5 except n (1,3,7)- FG6 except n (3,5,6) and - FG7 except n (3,6) revealed that it easy to attract child by candy, chocolate, toys, money or telling a story. While only 10 mothers presented in FG1 n (5,8) - FG2 n (1,2,5,6) - FG4 n (3,6,9,10) reported that abuser can use another child to attract him, and five mothers presented in FG1 n (5,8) - FG2 n (1,2,5,6) - FG4 n (3,6,9,10) mentioned that abuser can call child by name as a friend of child family or threatening.

II- Mothers' subjective practice related to child sexual abuse:

Regarding to mothers' subjective practice related to see the child is sexually abused, the focus groups revealed that; less than one quarter of mothers (n=14) are presented in FG 4 participants except n (7,8,9) and FG5 participant n (3,9,10) reported that they don't interfere due to fearing of harm. Near half of mothers (n=28) presented in FG1 participant except n (5,6,7) - FG2 participant n (1,2,3) - FG3 and - FG6 reported that they will provide help and reporting about abuser to debunking him while less than one quarter of mothers (n=12) presented in FG1 n (5,6,7) - FG2 n (4,5,6) - FG4 n (7,8,9) and - FG7 n (1,3,6) mentioned that they will asking for others help as screaming and shouting loudly, helping and protecting child and notify the police or authorities as child helping hot line.

Regarding to mothers' subjective practice related to protect her child, the focus groups revealed that: One quarter of mothers (n=15) on FG2 n (1,2,6) - FG3 n (3,5,6,7) and - FG4 except n (4,5) stated that providing awareness as instruct him about personal safety as instruct child do not let anyone touch his body and not let anyone touch his body, continuous monitoring and do not let my child with strangers without supervision, only about 10 mothers on FG1 and - FG7 n (3,4) reported that I will be friendly with my child that helping him always talks freely and child didn't get out alone. Furthermore, more than half of mothers (n=35) on FG2 n (3,4,5) - FG3 except n (3,5,6,7) -FG4 n (4,5) - FG5 - FG6 and - FG7 n (1,2,5,6) mentioned they didn't do anything and didn't imagine that it supposed to talk with child about this sensitive topic.

III-Mothers' opinion related to others practice related to child sexual abuse.

The mothers' opinion related to others practice with child sexual abuse was illustrated in five subcategories as following: -

1. Mothers' opinion related to fathers practice for protecting his child from sexual abuse

One quarter of mothers on FG2 except n (6) - FG3 n (3,7,8,9) and - FG5 except n (2,4,5,9)reported that father has no role and one quarter of mothers on FG3 except n (3,7,8,9) - FG2 n (6) and - FG1 didn't know if he has role or not, while 10 of mothers on FG4 n (3,4,6,9,10) and - FG6 n (3,4,8,9,10) mentioned that most of fathers think he is the source of money, mother always with child, so she is most effective than father. Father role starting when mother is busy.

2.Mothers' opinion related to the country practices related to prevent child sexual abuse

The focus groups revealed that: Less than half of mothers (n=25) FG1 except n (1,2) - FG2 n (2,3,4) - FG3 n (5,6,7,8) -FG5 n (1,2,3,4,5) and FG6 except n (2,3,4) revealed that country has no role, one quarter of mothers mentioned that state enacts strict law, rules and regulation which prevent CSA occurrences. And one third of mothers on FG3 except n (5,6,7,8) - FG4 except n (3,4,5) - FG5 n (6,7,8,9,10) and - FG7 n (3,4) reported that supporting street children and providing safe shelter for them.

3. Mothers' opinion related what child do when be sexually abused

The focus groups revealed that about one third of mothers (n=20) on FG1- FG2- FG3 n (4,7,9) - FG4 n (3,5,6) thought that child may stand without doing anything due to ignorance of what happen or fear from abuser, furthermore less than one third of mothers (n=18) on FG4 n (9,10) - FG5 and -FG7 said they didn't know what child can do / can't imagine what child can do in this situation.

4. Mothers' opinion related to what are the children's practices for protecting themselves from sexual abuse

The focus groups revealed that half of mothers on FG1 - FG2 - FG5 and - FG7 mentioned that child scream in danger situation if he afraid. More ever one quarter of mothers on FG3 n (2,3,4,9,10) - FG4 n (1,2,3,5,8) and - FG6 (1,3,4,6,10) mentioned that child shouting and try to defend of himself and push a person away, running kicking him.

5. Mothers' opinion about expected behavior of people surrounding the child victim of sexual abuse do.

More than one third of mothers (n=25) on FG1 n (2,3,7) - FG2 n (4,5) - FG3 n (6,7,9,10) - FG4 n (3,5,6,9,10), FG5 except n (6,8,9,10) - FG6 n (1,2,3,5) and - FG7 n (3) reported that do not blame/punish child as he is a victim. One quarter of mothers (n=15) on FG1 participant except n (2,3,7) - FG2 participant except n (4,5) - FG3 except n (6,7,9,10) mentioned that do not know how can behave in this situation. Did not know the right way to help him, while 10 mothers on FG 5 participant n (6,8,9,10) and - FG6 participant except n (1,2,3,5) reported that the family should provide emotional support and family support, consult experts.

IV: Assessment of mothers' attitude related to child sexual abuse and child self-protection against sexual abuse.

Mothers' attitude related to child sexual abuse and child self-protection against sexual abuse was illustrated in seven sub categories as following:-

1.Mothers' perspective in discussing sexual abuse with their child

The focus groups revealed that: less than half of mothers participant (n=25) participant on FG1 - FG3 except n (3,4,8,9) - FG5 except n (1,4,6,9) and - FG4 n (2,3,7,8,10) mentioned that is an important and vital topic for discussing this issue with a child as it helps in preventing harm and protecting child from abuse. One third of mothers(n=20) on FG2 n (1,2,4) - FG5 n (4,6) -FG4 n (1,4,5,6,9) - FG6 except n (1,2,3) and - FG7 n (3,4,6) are thought it is a sensitive topic that is difficult to discuss it with child as child may be too young to understand this information and unable to explain that subject in right way to the child, while a few mothers (n=5) on FG2 n (3,5,6) and - FG5 n (1,9) mentioned that Child may misunderstand any behavior of adult.

2. Mothers' point of view about this topic who is responsible of protecting child from sexual abuse and how

The focus groups revealed that less than half of mothers mentioned that feel extreme sad and sorry for the child while less than half of mothers (n=25) on FG1 - FG5 and - FG6 participant except n (5,7,8) revealed sadness; anger and shocked, and 10 mothers FG3 n (3,5,6,7,8) and - FG4 n (1,2,3,4,5) had agitated feelings. All of mothers revealed that they will provide support to child and his family as they can.

3.Mothers' feeling if someone they know exposed to sexual abuse

Regarding to mothers' point of view about this topic who is responsible of protecting child from sexual abuse and how: the focus groups revealed that One third of mothers(n =20) on FG3 except n (3,7,8,9) - FG5 except n (4,5,6,7,9) - FG6 n (3,4,10) and - FG7 thought it is responsibility of society as a whole, one quarter of mothers on FG1 -FG2 and - FG4 n (6) mention that it is a common role between family, society and the state. Also, another quarter of mothers on FG4 except n (2,3,4,6) - FG3 n (3,7,8,9) - FG5 n (9) and FG6 n (1,2,5,6) reported that this is the mother main role, while 10 mothers stated that it is the family role.

4. Mothers' perspective of protecting her child from sexual abuse can be affected by her working

The focus groups revealed that half of mothers on FG2 except n (5,6) - FG3 n (1,2,3,8) - FG4 - FG5 n (1,2,5,7) - FG6 n (3,9) and - FG7 mentioned that work is not affected on her protection to their child as she left him in safe place or left him with my family. While one third of on FG1 except n (7,8) - FG3 n (4,5,6) - FG5 n (3,4,6) and - FG6 except n (3,9) reported that works will affect child protection and may exposed child to be at risk for abusing and danger. Also, only 10 of mothers didn't know; they were confused if their work may affect child protection, or it depends on the surrounding consistencies.

5. Mothers' perspective according school role

The focus group revealed that less than two third of mothers (n=35) on FG1 except n (2,3) -FG2 n (3,5,6) - FG3 n (3,6,9) - FG4 except n (2,3,4,5) - FG5 n (3,4,5,8) - FG6 except n (4,5,6) and FG7 mentioned that continuous super vision and reduce gender desegregation in education, Separate between male and female sittings in classes, School administration should hire trusted people after exposed to some sort of psychological investigations and provide consultation to children by specialized people. While one quarter of participants mothers on FG1 n (2,3) - FG2 n (1,2,4) - FG3 except n (3,6,9) and - FG5 n (7,9,10) reported that school can provide sessions to child in the school about sexual self-protection skills. But a few mothers (n=10) on FG4 n (2,3,4,5) - FG5 n (1,2,6) - FG6 n (4,5,6) stated that school had no role and does not provide any help for child protection, School may be source of danger as child stay long time in and be contact with many persons.

6. Mothers' perspective toward mass media role.

The focus group revealed that less than half of mothers (n=25) on FG1 n (1, 2,6) - FG4 - FG5 and - FG6 n (1,2) mentioned that mass media has big role in this topic as don't spread lies, provide advice and public information. while one quarter of

mothers reported that media role is in announcing of hot lines for supporting and publishing new laws, one third of mothers (n=15) on FG2 n (3,4,5) - FG3 and - FG6 n (5,6) thought that mass media is responsible for providing ongoing awareness to parents by providing media for illiterate people or short movie or video to help them.

7. Mothers' perspective toward social mass media role

The focus group revealed that; less than half of mothers (n=25) had negative attitude; presented on FG1 n (1,2,3) - FG2 except n (1,2) - FG3 except n (4,5,6) - FG4 except n (1,2,5) had negative attitude; mentioned that spread of sexual abuse due to opening of the child to internet in young age without super vision exposing them to bad things, while 10 of mothers had positive attitude reported that media helps in by providing video materials related to child protection, social mass media can help in publish positive examples. One third of mothers on FG4 n (1,2,5) - FG5 n (1,2,3,7) - FG6 n (1,2,4) thought CSA is big problem need policy makers to prevent it does not mass media or social mass media. And a few mothers (n=5) had neutral attitude FG6 n (3, 5,7) and - FG7 n (1,2) reported that it has no role because many of people did not use mass media or did not know how to use it.

 Table 1:Socio-demographic characteristics of mothers & their children:

Items	No (60)	%
Characteristics of studied mothers		
Age (years) 20 < 25		
	17	28.3
25 < 30	28	46.7
30 & more	15	25
X (SD)	28 (4.123)	
Level of education:	35	
University graduate Intermediate (2years) institute	25	58.3
Intermediate (2years) institute	23	41.7
Residence		
Urban	39	65
Rural	21	35
Type of residence		
Private	30	50
Shared	30	50
Marital status		
Married	44	73.3
Divorced	10	16.7
Widow	6	1
Characteristics of studied children		
Gender	50	40
Males	75	60
Females		50
Age of children:	45	36
Î<5	80	64
5 < 10		-

5. Discussion

Children are uniquely vulnerable to the potential health effects in the society as sexual abuse. Child sexual abuse is considered a hidden crime is often referred as a "silent crime". Child sexual abuse is a social stigma for Arabic families over the time. Arabic families prefer to secrecy and denial this crime to protect their reputation; therefore they didn't ask for help rather than ask for revenge. In Egypt CSA is under reported due to social norms and culture like all Arabic country that's taboo to talk about sex-related issues (Vivancos et al., 2013). In addition to (Abu Farah, 2015) study who reported that most of people kept it secret and hidden they didn't reach court as fear of social stigma and parents kept it secret and didn't report due to feeling of shame. Oualitative approaches are the best suited to counter the challenges presented by diversities as they are inherently emic in nature (Matter and Vogel, 2014) and provide an inductive means for the identification of cultural factors (Choudhary, et al, 2019).

Understanding the concept of child sexual abuse is often marked by the ability to define it and know general knowledge about it. **Regarding the knowledge of mothers toward CSA concept**, the current study revealed that most of mothers had inadequate knowledge about CSA concept. This may be due to our Arabic culture; this finding is in the same line with (Kaushik A, et al 2017) study who revealed that most of mothers had inadequate knowledge regarding CSA.

Regarding to mothers' knowledge about difference between adult and child sexual abuse, more than one quarter of the studied mothers revealed that children didn't know what is going like adults and think it's some sort of play. Regarding mothers' knowledge about types of child sexual abuse, more than half of mothers mentioned that abuser may use touching private body parts of child and one third of them reported that there are two types of child sexual abuse verbal sexual words and physical by touching private body parts. The result is consistent with part of CDC, WHO, 2018 report related to abusing behavior but added that adult know his perpetrator and mentioned that sexual assault such as rape (including sodomy), and sexual penetration with an object, sexual exploitation, and sexual grooming as online chat room. On the other hand, Morris et al., 2019 documented that sexual abuse is contact and non-contact child abuse as pornography sexual grooming.

Regarding to mother's knowledge about characteristic of child victim and the ways the abusers using for attracting child, two thirds of the studied mothers mentioned that the child victim be in circumstances making easy for abuser to attract him while using gifts, money or cheating the child as be street alone, live with sub family, stay with stranger, or had a problem. This finding is in the same line with (Xie, Q., et al., 2015) study who mentioned that the main risk of child to be a victim of sexual abuse that poverty, problem in families, parents didn't pay attention for their children and left- behind children. Also similar to (Harun, R. 2015, Nurrahmi, H. 2015, Handayani, D., et al. 2016, Mulya, R, 2017, Julva A., 2017, Annisa F., 2017) results revealed that the main risk of child to be a victim is lack of parental supervision which put the prevention on parents responsibility. Mothers can play an important role in child sexual abuse prevention through monitoring, reduction of risk factors, guidance and education about prevention strategies. They provide their children with warnings, teaching about dangerous situations, and how to handle the incidents of CSA (Walsh, Cross & Jones, 2012).

Regarding to the mothers' subjective practice related to see the child is sexually abused, the current study revealed that there is difference in mothers' answers related to their believable; around half of mothers provide help and reported that act is stop abuser, less than one quarter of mothers reported they don't interfere due to fear of harm and six of mothers do not know. On the other hand, one guarter of mothers didn't know what they must do. This may be due to mothers' socio-cultural norms or ethnic background and life circumstances. Regarding protect children; one quarter of mothers revealed that teaching personal safety as instruct child do not let anyone touch your body, continuous monitoring and do not let my child with strangers without supervision. This result is in the same line with (Wiley J., 2010) study who reported that protective behaviors and strangers are the key topics of parents' discussion not let someone touch their genitals and telling trusted adult if happened also not keep secret with others. On the other hand, more than half of mothers mentioned they didn't do anything and didn't imagine that it supposed to talk with child about this sensitive topic. These findings are consistent with (Thomas et al., 2006, Chen et al., 2007) results who revealed that parents from a variety of background who had trouble in talking to children due to feeling of scaring them or

misunderstanding and make up stories which lead to accused innocent adults.

Regarding to the mothers' opinion about expected behavior of people surrounded of the child victim of sexual abuse do, more than one third of the studied mothers mentioned they do not blame or punish child as he is a victim, ten of the studied mothers reported that family should provide emotional support and consult experts, and another ten of mothers revealed educating victim selfdefense or sexual self-protection. This result is in the same line with (Abu baker, 2013) results who revealed that Arabic families who exposed to CSA and about eleven families supported the victim child and believe his story and seek help unlike seven families in the same study suppressed the victim complaints, refuse to discuss and asking the child to get past immediately.

Regarding to mothers' point of view about the responsibility of protecting child from sexual abuse and how, one quarter of the studied mothers mentioned that the family role as a whole: father, mother and everyone live with child. By continuous observation of child, provide support and secure to child, prevent any harm and don't make child get out alone, teach him self-defense and scream when he felt danger. The result is consistent with (Wurtele & Kenny, 2010) study who revealed that parents are a strong position to discuss child sexual abuse with their children; and quite similar with (Wiley J.2010) study who reported some parents practiced other protective strategies in addition talking to children. Regarding to mothers' feeling if someone they know and have sexual abuse, less than half of the studied mothers revealed that feel extreme sad, anger, shocked and sorry for the child / bad feelings and all of mothers revealed that they will provide support to child and his family as they can .This finding in the same line with (Abu- baker, 2013) results in which parents reported that immediate reaction was anger, shock, trauma and mourning. But there was other group would help the victim child to forget and erase the unpleasant incident by encouraging silence and digging deeply the details of abused.

As regards to mothers' perspective of protecting her child from sexual abuse can be affected by her working, one third of the studied mothers revealed that working affect where the mother is part time. This result is similar with (Livingston et al., 2020) study revealed that working mothers forced to leave their children in the care of someone deemed untrustworthy or not have affordable options for childcare. Schools are effective because they can implement school-based education programs for prevention of child sexual abuse, tailored to different ages and cognitive levels. The aim of these programs should be to prevent child sexual abuse by providing students with knowledge and skills to recognize and avoid potentially sexually abusive situations and with strategies to hinder sexual approaches by offenders, in schools it is important that staff are aware that any health problem can be an indicator that a child at risk of suffering abuse, neglect or exploitation. While school staff are well placed to observe children day to day and identify who be at risk (Working Together to Safeguard Children A guide to inter-agency working to safeguard and promote the welfare of children July 2018).

Regarding to mothers' perspective according to school role, less than two thirds of the studied mothers revealed that school provide continuous supervision and reduce gender desegregation in education as separate between male and female sittings in classes. This finding in the same line with (Wurtele, Mathews & Kenny, 2019) study who reported that policy and procedures which implemented in educational organization help in improving and safeguarding practices which enhance safety for our children. The current study also found that school administration should hire trusted people after exposed to some sort of psychological investigations and provide consultation to children by specialized people. This finding is in the same line with (Fraser, Mathews, Walsh, Chen & Dunne, 2010) study who argued that staff working in school with positive attitude toward their roles in identifying, reporting, and supporting victim will be helpful.

Social media has a core role in increasing society's awareness and responses to child sexual abuse. In relation to mothers' positive attitude toward social media role for protecting children from sexual abuse, the current study revealed that a few numbers of studied mothers agreed that social media helps in raising awareness related protection children from sexual abuse by providing video materials. The result is consistent with (Horsman, 2018) study who reported that it provides video and films on internet or as using web- smart phone- based application like MASAP (mobile application for sexual abuse prevention), (Moon et al., 2017), done to protect children by providing care giver with their location and a hybrid technology (lee et al., 2016). Or by using online help center as STOP IT NOW (2010).

Regarding to mothers' negative attitude toward social media role, the studied mothers revealed that social media may be the causative factor of spreading sexual abuse by exposing them to bad things due to opening of the child to internet in young age without supervision. This finding in the same line with (Mitchell et al., 2010) study who revealed that social media had been involved in internet sex crimes against children. Furthermore, others study (Europol, 2013) pretended that the real risk that the self-produced sexual content of children through social media and mobile applications such as Facebook incidents.

6. Conclusion

The researcher conclude that child sexual abuse is still shame topic to discuss or talk about it in our culture; therefore, the majority of mothers had inadequate knowledge about child sexual abuse, its prevention practices and most of the mothers had negative in discussing this topic.

7. Recommendations

Based on the views of the study group and conclusions drawn from the study, the researcher recommends the following:

- 1. Health education campaign in countryside and urban to increase the mothers' awareness about sexual abuse & child sexual abuse self-protection which help in changing social norms.
- 2. Develop health educational booklet for mothers about child self-protection against sexual abuse.
- 3. Establishing school-based education programs for prevention of child sexual abuse.

8.Acknowledgments

Appreciation, greetings, and support to all the mothers who participated in the study. All thanks to the supervisors for their efforts.

Part 2:- Mothers' knowledge about child sexual abuse and child sexual self-protection:

1. Concept of child sexual abuse:

- Someone takes the child away from home or family and touch his body and private parts.
- Exposing child to bad words.
- Forcing child to undress clothes and touching his body parts.
- Forcing child to do shaming act as touching adult private body parts.
- Forcing child to watch sexual relation between adults
- Participating in sexual relationship with older person.

- Expose child to sexual photo or shaming picture.
- Did not know about the concept of child sexual abuse.

2. Difference between adult and child sexual abuse:

- Child didn't know what is going like adults and think it's some sort of play
- Abusing is the same, but abuser of child can be older child or adult and abuser of adult is always adult.
- Child ignoring what is happening and cannot be defender and afraid of abuser, but adult can stop abusers.
- Some said there is no difference between child and adult sexual abuse; there is a victim and abuser. The victim fears and can't stop abuser or cannot be defender.
- Did not know the difference between adult and child sexual abuse.

3. Types of child sexual abuse:

The abuser uses one or more type of the following

- Exposing child to hearing bad words (sexual words)
- Asking child to repeat these words
- Touching body parts.
- Touching private body parts of child
- See sexual photos or picture.
- Didn't know the types.

4. Characteristic of a child who is in danger to be a victim of sexual abuse:

- Younger child, who is living in the street (homeless child) and child who is living in shelter.
- Child who is younger and get out alone without supervision.
- Child who stays with stranger for a long time.
- Child who separates from family for any reason as divorce or died parents.
- Child without adult supervision,
- Child who is living with stepfather or stepmothers or sub family.
- Introversive child or had problem or disturbed and handicapped.
- Child who is nearing to adolescent age and had problem with family and without super vision.

• Did not know.

5. How can the abuser attract the child?

Abuser can:

- Using money, candy, toy, and chocolate.
- Telling a story or make story as game with child.
- Using another child to attract him with chocolate or play game with him.
- Knew what a child love from other children to attract him.
- Threating child that he will heart his family or heart him.
- Call child by name as a friend of child family.
- Telling lies about his parents
- Telling lies like his mother sent abuser to bring him back home and abducting him.
- Did not know.

Part 3: Mothers' subjective practice related to child sexual abuse:

1.What do you do if you see the child is sexually abused?

- Screaming, shouting to get help from people or others who in the street.
- Some mothers reported if she was alone, fearing to get help because the abuser may harm her or her family /don't interfere due to fearing of harm.
- Helping and protecting child and notify the police or authorities as child helping hot line to prevent recurrent of this bad event
- If abuser is an older child I can help the abused child, prevent / stop abuser.
- Explaining to abuser child this is bad act and reported this act for his family if I know them.
- I will be shocked, and I do not know what I must do/ what to do.

2. What do you do protect your child from sexual abuse?

- Prevent playing in the street.
- Continuous monitoring
- Do not let my child with strangers or people without supervision.
- Playing with friends with adult supervision as a mother.
- Teaching him about personal safety as:
- Instruct child do not let anyone touch his body.

- Instruct child do not trust strangers and do not talk with them.
- It's forbidden to take off clothes in front of anyone.
- I will be friendly with my child that helping him always talks freely.
- Child did not get out alone.
- Didn't imagine that it supposed to talk with child about this sensitive topic.
- Don't do anything.

Part 4: Mothers' opinion related to others practice related to child sexual abuse

1. What is the father practice for protecting his child?

- Father has no role ; he is working all daytime and did not stay with children as mothers, cannot tolerate him and he didn't notice if any change happens in child behaviors
- Most of fathers think he is the source of money.
- Didn't know if he has role or not as in the surrounding.
- Mother always with child, so she is most effective than father. Father role starting when mother is busy.
- Father can be a friend of boy child, provide control and give support for child life, give him sense of secure and prevent any harm of family.
- Father can protect child from strangers, continuous observing of child behaviors and continuous monitoring the child.

2. What are the country practices to prevent child sexual abuse?

- Has no role.
- State enacts strict law, rules and regulation which prevent CSA occurrences, and government agencies make continue monitoring and execution of laws.
- Enforcement of laws and execution of a deterrent penalty.
- Supporting street children and providing safe shelter for them.
- Continuous monitoring of children in schools.
- Intensified continuous monitoring of places where children found as schools, shelters, and nursery schools.
- Easy reach to child helps hot lines.

3. What does a child do when be sexually abused?

- He may shout, screaming and runway from place. Searching for someone can help him.
- Child reports about the abuser person to his mother or his family.
- Child may stand without doing anything due to ignorance of what happen or fear from abuser.
- Some said they did not know what child can do / can't imagine what child can do in this situation.

4. What are the children's practices for protecting themselves from sexual abuse?

- Scream in danger situation if he afraid.
- Shouting and try to defend of himself and push a person away.
- Running kicking him.
- Didn't do anything.

5. What is the expected behavior of people surrounding the child victim of sexual abuse?

- The family should provide emotional support and consult experts.
- Do not blame/punish child as he is a victim
- Educating victim self-defense or sexual self-protection
- Do not know how can behave in this situation. She did not know the right way to help him.

Part 5: Assessment of mothers' attitude related to child sexual abuse and child selfprotection against sexual abuse.

1. What is your perspective in discussing sexual abuse with your child?

2. From your point of view who is responsible of protecting child from sexual abuse and how?

3. What is your feeling if someone you know and have sexual abuse?

- 4. Do you think that mother's role to protect her child from sexual abuse can be affected by her working?
- 5. From your point of view what are the role of school for protecting children from sexual abuse?
- 6. From your point of view what are the role of mass media of protecting children from sexual abuse?
- 7. From your point of view what are the role of social media of protecting children from sexual abuse?

9.References:

- Abo-Seria, M., AbdelRahman, A., Mostafa, H., & Farag, H. (2019). Study of child sexually abused cases in Cairo governorates in the period from (2012) to (2016). *Ain Shams Journal of Forensic Medicine and Clinical Toxicology*, 32(1), 31-39.
- Allen, B., Timmer, S. G., & Urquiza, A. J. (2016). Parent–Child Interaction Therapy for sexual concerns of maltreated children: A preliminary investigation. *Child Abuse & Neglect*, 56, 80-88.
- Allen, K. P., Livingston, J. A., & Nickerson, A. B. (2020). Child sexual abuse prevention education: A qualitative study of teachers' experiences implementing the Second Step Child Protection Unit. *American Journal of Sexuality Education*, 15(2), 218-245.
- Alzoubi, F. A., Ali, R. A., Flah, I. H., & Alnatour, A. (2018). Mothers' knowledge & perception about child sexual abuse in Jordan. *Child abuse & neglect*, 75, 149-158.
- Andari, I. D., Woro, O., & Yuniastuti, A. (2019). The effect of knowledge, attitude, and parents behavior towards sex education parents with sexual violence incident. *Public Health Perspective Journal*, 4(2).
- Babatsikos, G. (2010). Parents' knowledge, attitudes and practices about preventing child sexual abuse: a literature review. *Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect, 19*(2), 107-129.
- Babatsikos, G., & Miles, D. (2015). How parents manage the risk of child sexual abuse: A grounded theory. *Journal of child sexual abuse*, 24(1), 55-76.
- Baker, C. K., Gleason, K., Naai, R., Mitchell, J., & Trecker, C. (2013). Increasing knowledge of sexual abuse: A study with elementary school children in hawai 'i. *Research on Social Work Practice*, 23(2), 167-178.
- Blakemore, T., Herbert, J. L., Arney, F., & Parkinson, S. (2017). The impacts of institutional child sexual abuse: A rapid review of the evidence. *Child abuse & neglect*, 74, 35-48.
- Boney-McCoy, S., & Finkelhor, D. (1995). Prior victimization: A risk factor for child sexual abuse and for PTSD-related symptomatology among sexually abused youth. *Child abuse & neglect*, *19*(12), 1401-1421.

- Caroline, S. (2017). Childbirth and sexual abuse during childhood. In *The Social Context of Birth* (pp. 251-270). Routledge.
- Chen, J. Q., & Chen, D. G. (2005). Awareness of child sexual abuse prevention education among parents of Grade 3 elementary school pupils in Fuxin City, China. *Health education research*, 20(5), 540-547.
- Chen, Q., Sun, X., Xie, Q., Li, J., & Chan, K. L. (2019). The impacts of internal migration on child victimization in China: A metaanalysis. *Trauma, Violence, & Abuse, 20*(1), 40-50.
- Choudhary, V., Satapathy, S., & Sagar, R. (2019). Qualitative study on the impact of child sexual abuse: perspectives of children, caregivers, and professionals in Indian context. *Journal of child sexual abuse*, *28*(4), 489-510.
- Citak Tune, G., Gorak, G., Ozyazicioglu, N., Ak, B., Isil, O., & Vural, P. (2018). Preventing child sexual abuse: Body safety training for young children in Turkey. *Journal of child sexual abuse*, 27(4), 347-364.
- Collins, M. E. (1996). Parents' perceptions of the risk of child sexual abuse and their protective behaviors: Findings from a qualitative study. *Child Maltreatment*, 1(1), 53-64.
- Daigneault, I., Hébert, M., & McDuff, P. (2009). Men's and women's childhood sexual abuse and victimization in adult partner relationships: A study of risk factors. *Child abuse* & *neglect*, *33*(9), 638-647.
- Deblinger, E., Mannarino, A. P., Cohen, J. A., Runyon, M. K., & Heflin, A. H. (2015). Child sexual abuse: A primer for treating children, adolescents, and their nonoffending parents. Oxford University Press.
- Devgun, M., Roopesh, B. N., & Seshadri, S. (2021). Breaking the silence: Development of a qualitative measure for inquiry of child sexual abuse (CSA) awareness and perceived barriers to CSA disclosure. *Asian Journal of Psychiatry*, 57, 102558.
- Douglas, E. M., & Finkelhor, D. (2005). Childhood sexual abuse fact sheet. *Retrieved from*.
- Elgazzar, F., Abdelaziz, M., & Khalifa, H. (2020). Prevalence and Factors Related to Delayed Disclosure of Child Sexual Abuse in Benha region, Egypt during the Period 2016-2018. *Ain Shams Journal of Forensic*

Medicine and Clinical Toxicology, *35*(2), 14-22.

- Elrod, J. M., & Rubin, R. H. (1993). Parental involvement in sexual abuse prevention education. *Child abuse & neglect*, 17(4), 527-538.
- Ezzat, R. E. S. E. B. (2019). Effect of Educational Protocol to Improve Mothers' Knowledge, Practice and Attitude about Child Abuse.
- Ezekiel. M., I.H., M., F., K., R., M., A., A., & S.R., K. (2017). Factors associated with child sexual abuse in Tanzania: Aqualitative study. Tanzania Journal of Health Research, 19(2), no pagination. Retrieved from <u>https://www.ajol.info/index.php/thrb/article/</u> <u>download/149066/144</u>
- Fang, X., Fry, D. A., Ji, K., Finkelhor, D., Chen, J., Lannen, P., & Dunne, M. P. (2015). The burden of child maltreatment in China: a systematic review. *Bulletin of the World Health Organization*, 93, 176-185C.
- Finkelhor, D. (2007). Prevention of sexual abuse through educational programs directed toward children. *Pediatrics*, *120*(3), 640-645.
- Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2015). Prevalence of childhood exposure to violence, crime, and abuse: Results from the national survey of children's exposure to violence. JAMA pediatrics, 169(8), 746-754.
- Fry, D., Fang, X., Elliott, S., Casey, T., Zheng, X., Li, J., ... & McCluskey, G. (2018). The relationships between violence in childhood and educational outcomes: A global systematic review and meta-analysis. *Child abuse & neglect*, 75, 6-28.
- Guo, S., Chen, J., Yu, B., Jiang, Y., Song, Y., & Jin, Y. (2019). Knowledge, attitude and practice of child sexual abuse prevention among parents of children with hearing loss: a pilot study in Beijing and Hebei Province, China. *Journal of child sexual abuse*, 28(7), 781-798.
- Hunt, R., & Walsh, K. (2011). Parents' views about child sexual abuse prevention education: A systematic review. *Australasian Journal of Early Childhood*, 36(2), 63-76.
- Jerman, P., & Constantine, N. A. (2010). Demographic and psychological predictors of parent-adolescent communication about sex: A representative statewide

analysis. Journal of youth and adolescence, 39(10), 1164-1174.

- Ji, K., Finkelhor, D., & Dunne, M. (2013). Child sexual abuse in China: A meta-analysis of 27 studies. *Child abuse & neglect*, 37(9), 613-622.
- Jin, Y., Chen, J., & Yu, B. (2019). Parental practice of child sexual abuse prevention education in China: Does it have an influence on child's outcome?. *Children and Youth Services Review*, *96*, 64-69.
- Jin, Y., Chen, J., Jiang, Y., & Yu, B. (2017). Evaluation of a sexual abuse prevention education program for school-age children in China: a comparison of teachers and parents as instructors. *Health* education research, 32(4), 364-373.
- Kaushik, A., & Danie, S. (2017). Knowledge and attitude of mothers regarding prevention of child sexual abuse. *International Journal of Nursing & Midwifery Research*, 4(4), 42-48.
- Kenny, M. C., & Wurtele, S. K. (2012). Preventing childhood sexual abuse: An ecological approach. *Journal of child sexual abuse*, 21(4), 361-367.
- Kiser, L. J., Stover, C. S., Navalta, C. P., Dorado, J., Vogel, J. M., Abdul-Adil, J. K., ... & Briggs, E. C. (2014). Effects of the child– perpetrator relationship on mental health outcomes of child abuse: It's (not) all relative. *Child abuse & neglect*, 38(6), 1083-1093.
- Latif, F., Sultana, I., & Khan, F. (2020). Cultivating Realities through Media: Coverage of Child Sexual Abuse in News and its Impact on Women of Lahore. *sjesr*, *3*(1), 227-235.
- Letourneau, E. J., Brown, D. S., Fang, X., Hassan, A., & Mercy, J. A. (2018). The economic burden of child sexual abuse in the United States. *Child abuse & neglect*, *79*, 413-422.
- Levenson, J. S., Willis, G. M., & Prescott, D. S. (2015). Adverse childhood experiences in the lives of female sex offenders. *Sexual Abuse*, 27(3), 258-283.
- Livingston, J. A., Allen, K. P., Nickerson, A. B., & O'Hern, K. A. (2020). Parental Perspectives on Sexual Abuse Prevention: Barriers and Challenges. *Journal of Child* and Family Studies, 29(12), 3317-3334.
- Lovett, J., Coy, M., & Kelly, L. (2018). Deflection, denial and disbelief: Social and

political discourses about child sexual abuse and their influence on institutional responses: A rapid evidence assessment.

- Manda, D. (2020). Sexual Abuse (A Study of Child Sexual Abuse in Poleang District Bombana Regency). PalArch's Journal of Archaeology of Egypt/Egyptology, 17(2), 232-240.
- Mathews, B., & Collin-Vézina, D. (2019). Child sexual abuse: Toward a conceptual model and definition. *Trauma, Violence, & Abuse, 20*(2), 131-148.
- Mathews, B., Lee, X. J., & Norman, R. E. (2016). Impact of a new mandatory reporting law on reporting and identification of child sexual abuse: a seven year time trend analysis. *Child Abuse & Neglect*, 56, 62-79.
- Mathoma, A. M., Maripe-Perera, D. B., Khumalo, L. P., Mbayi, B. L., & Seloilwe, E. S. (2006). Knowledge and perceptions of parents regarding child sexual abuse in Botswana and Swaziland. *Journal of pediatric nursing*, 21(1), 67-72.
- Mendelson, T., & Letourneau, E. J. (2015). Parent-focused prevention of child sexual abuse. *Prevention Science*, *16*(6), 844-852.
- Menut, L., Bessagnet, B., Khvorostyanov, D., Beekmann, M., Blond, N., Colette, A., ... & Vivanco, M. G. (2013). CHIMERE 2013: a model for regional atmospheric composition modelling. *Geoscientific model development*, 6(4), 981-1028.
- Mitchell, K. J., Finkelhor, D., & Wolak, J. (2005). The Internet and family and acquaintance sexual abuse. *Child maltreatment*, 10(1), 49-60.
- Mlekwa, F. M., Nyamhanga, T., Chalya, P. L., & Urassa, D. (2016). Knowledge, attitudes and practices of parents on child sexual abuse and its prevention in Shinyanga district, Tanzania. *Tanzania Journal of Health Research*, 18(4).
- Morawska, A., Walsh, A., Grabski, M., & Fletcher, R. (2015). Parental confidence and preferences for communicating with their child about sexuality. *Sex Education*, *15*(3), 235-248.
- Nair, P. (2019). Child Sexual Abuse and Media: Coverage, Representation and Advocacy. Institutionalised Children Explorations and Beyond, 6(1), 38-45.
- Ogunfowokan, A. A., & Fajemilehin, R. B. (2012). Impact of a school-based sexual

abuse prevention education program on the knowledge and attitude of high school girls. *The Journal of School Nursing*, 28(6), 459-468.

- Ogunjimi, A. I., de Oliveira, W. A., de Vasconcelos, E. M. R., & Silva, M. A. I. (2017). Child sexual abuse prevention: Integrative review. *Journal of Nursing UFPE* on line, 11(11), 4469-4482.
- Pan, Y., Lin, X., Liu, J., Zhang, S., Zeng, X., Chen, F., & Wu, J. (2020). Prevalence of childhood sexual abuse among women using the childhood trauma questionnaire: a worldwide meta-analysis. *Trauma, Violence,* & *Abuse*, 1524838020912867.
- Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009). The international epidemiology of child sexual abuse: A continuation of Finkelhor (1994). *Child abuse & neglect*, 33(6), 331-342.
- Prikhidko, A., & Kenny, M. C. (2021). Examination of parents' attitudes toward and efforts to discuss child sexual abuse prevention with their children. *Children and Youth Services Review*, *121*, 105810.
- Rudolph, J. (2018). Parents as Protectors: Reviewing the Focus of Child Sexual Abuse Prevention to Include Parenting (Doctoral dissertation, Griffith University).
- Rudolph, J., & Zimmer-Gembeck, M. J. (2018). Parents as protectors: A qualitative study of parents' views on child sexual abuse prevention. *Child Abuse & Neglect*, 85, 28-38.
- Rudolph, J., & Zimmer-Gembeck, M. J. (2018). Reviewing the focus: A summary and critique of child-focused sexual abuse prevention. *Trauma*, *Violence*, & *Abuse*, 19(5), 543-554.
- Rudolph, J., Zimmer-Gembeck, M. J., Shanley, D. C., & Hawkins, R. (2018). Child sexual abuse prevention opportunities: Parenting, programs, and the reduction of risk. *Child maltreatment*, 23(1), 96-106.
- Silverman, W. K., Ortiz, C. D., Viswesvaran, C., Burns, B. J., Kolko, D. J., Putnam, F. W., & Amaya-Jackson, L. (2008). Evidence-based psychosocial treatments for children and adolescents exposed to traumatic events. *Journal of Clinical Child & Adolescent Psychology*, 37(1), 156-183.
- Tang, K., Qu, X., Li, C., & Tan, S. (2018). Childhood sexual abuse, risky sexual

behaviors and adverse reproductive health outcomes among Chinese college students. *Child abuse & neglect*, *84*, 123-130.

- Thangavelu, S. N. (2016). Assess the level of knowledge regarding child abuse among the mothers in selected areas at Latur. *J Child Adolesc Behav*, 4(271), e10002171.
- Van Ham, K., Brilleslijper-Kater, S., van der Lee, H., van Rijn, R., van Goudoever, H., & Teeuw, R. (2020). Validation of the Sexual Knowledge Picture Instrument as a diagnostic instrument for child sexual abuse: study protocol. *BMJ pediatrics open*, 4(1).
- Walsh, K., & Brandon, L. (2012). Their children's first educators: Parents' views about child sexual abuse prevention education. *Journal of Child and Family Studies*, 21(5), 734-746.
- Walsh, K., Berthelsen, D., Nicholson, J. M., Brandon, L., Stevens, J., & Rachele, J. N. (2013). Child sexual abuse prevention education: A review of school policy and curriculum provision in Australia. Oxford Review of Education, 39(5), 649-680.
- Walsh, K., Brandon, L., & Chirio, L. (2012). Mother-child communication about sexual abuse prevention. *Journal of Child Sexual Abuse*, 21(4), 399-421.
- Walsh, K., Zwi, K., Woolfenden, S., & Shlonsky, A. (2018). School-based education programs for the prevention of child sexual abuse: A Cochrane systematic review and metaanalysis. *Research on social work practice*, 28(1), 33-55.
- Whittle, H., Hamilton-Giachritsis, C., Beech, A., & Collings, G. (2013). A review of online grooming: Characteristics and concerns. Aggression and violent behavior, 18(1), 62-70.
- Wurtele, S. K., & Kenny, M. C. (2010). Partnering with parents to prevent childhood sexual abuse. Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect, 19(2), 130-152.
- Wurtele, S. K., Kast, L. C., & Melzer, A. M. (1992). Sexual abuse prevention education for young children: A comparison of teachers and parents as instructors. *Child Abuse & Neglect*, 16(6), 865-876.
- Xie, Q. W., Qiao, D. P., & Wang, X. L. (2016). Parent-involved prevention of child sexual

abuse: a qualitative exploration of parents' perceptions and practices in Beijing. *Journal* of Child and Family Studies, 25(3), 999-1010.

- Xie, Q. W., Sun, X., Chen, M., Qiao, D. P., & Chan, K. L. (2017). What prevents Chinese parents from reporting possible cases of child sexual abuse to authority? A holisticinteractionistic approach. *Child abuse & neglect*, *64*, 19-31.
- Zhang, W., Chen, J., Feng, Y., Li, J., Liu, C., & Zhao, X. (2014). Evaluation of a sexual abuse prevention education for Chinese

preschoolers. *Research on Social Work Practice*, *24*(4), 428-436.

- Zhang, W., Chen, J., Feng, Y., Li, J., Zhao, X., & Luo, X. (2013). Young children's knowledge and skills related to sexual abuse prevention: A pilot study in Beijing, China. *Child abuse* & neglect, 37(9), 623-630.
- Zhang, W., Ren, P., Yin, G., Li, H., & Jin, Y. (2020). Sexual abuse prevention education for preschool-aged children: Parents' attitudes, knowledge and practices in Beijing, China. Journal of child sexual abuse, 29(3), 295-311.