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Primary prevention of child sexual abuse: Child focused interventions

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Abstract

Sexual abuse is a problem affecting the psychosocial development of many children all over the world. Epidemiological studies have demonstrated that sexual abuse is spread across all demographic, ethnic and family groups, in both males and females, and perpetrators can include those outside the family circle as well as within it. In the last decade the whole new phenomenon of Internet-based sexual offending against minors has brought new challenges for those working in both the clinical and prevention fields. In the world today, most victims of child sexual abuse still remain silent, alone and without help. At the same time, most children and teens do not receive basic sex education, preventive information and life skills that they need to grow up healthy, safe and happy. And after the promotion of programmes targeting children, there is growing evidence that perpetrators also need to become a target for prevention. If they are detected, recognized and helped at an early stage of their abusing career, extinction of their sexual drive towards children can be promoted effectively and with positive long-term effects. This paper describes what has been done to date in the field of school-based primary prevention to decrease victimisation risks among the new generations. It discusses how primary prevention has been developed in the past and the new prevention needs of children and teens belonging to the “digital natives” generation. Despite the lack of clear evidence derived from studies of effectiveness to show that concerted action in schools is the best resource for primary prevention in this field, to date the available meta-analyses and guidelines confirm that this is one of the methods with the best potential for effectiveness in this field. In the light of these remarks, the article also discusses how the contribution of the neurosciences has made possible the promotion of new procedures for preventive activities with children and adolescents, with particular reference to the Life Skills Based Education (LSBE) model adopted by the World Health Organisation as the paradigm for the implementation of prevention projects aimed at children and adolescents.

Introduction

Sexual abuse is one of the most widespread yet underestimated social pathologies in the world. There is no unequivocal and universally recognised definition of child sexual abuse and this has created not a few problems in the prevention, clinical and epidemiological fields. Nevertheless, many specialists working in this area agree on the definition put forward by the American Medical Association, “the engagement of a

child in sexual activities for which the child is developmentally unprepared and cannot give informed consent” (AMA, 1992, p. 10).

In Europe, there is a legal definition Council of Europe member States in the Council of Europe Convention for the Protection of Children against Sexual Exploitation and Sexual Abuse (best known as the Lanzarote Convention) which states that

“Each Party shall take the necessary legislative or other measures to ensure that the following intentional conduct is criminalised:

- a. engaging in sexual activities with a child who, according to the relevant provisions of national law, has not reached the legal age for sexual activities;
- b. engaging in sexual activities with a child where:
 - use is made of coercion, force or threats; or
 - abuse is made of a recognised position of trust, authority or influence over the child, including within the family; or
 - abuse is made of a particularly vulnerable situation of the child, notably because of a mental or physical disability or a situation of dependence” (Council of Europe Treaty Series No. 201).

This definition gives each Party the responsibility to decide the age below which it is prohibited to engage in sexual activities with a child and is not intended to rule and govern consensual sexual activities between minors.

As both the AMA and the Council of Europe definitions clearly state, child sexual abuse is always characterized by the lack of informed consent on the part of the victim. But besides this, we know that the problem connected with nearly all cases of sexual abuse is also the inability of the victim to report the abuse. Higher reporting rates would help prevent further re-victimisation and at the same time potentially identify the perpetrator of the abuse and make him undergo clinical therapy as well as face legal proceedings.

The epidemiology of the phenomenon has been analysed and studied by numerous researchers. All the most recent meta-analyses, despite disparity of data, come to the same conclusion that child sexual abuse is a serious problem, as 7.9% of men (7.4% without outliers) and 19.7% of women (19.2% without outliers) have suffered some form of sexual abuse prior to the age of eighteen (Pereda, Guilera, Forns, & Gómez-Benito, 2009 a). The authors compared the international prevalence rates of child sexual abuse reported by Finkelhor (1994) with more recent publications. They concluded that in a 15-year period the prevalence rate had remained more or less constant, especially regarding cases of abuse towards women (Pereda, Guilera, Forns, & Gómez-Benito, 2009b).

So, in view of the extent of the problem worldwide and the risk that it poses to the development and wellbeing of children all over the world, child sexual abuse represents a subject of enormous importance in the field of public health and it is therefore essential to develop the most effective prevention strategies.

This article takes stock of what has so far been learnt about primary prevention of child sexual abuse, what has been done and what needs to be done, particularly regarding new

technologies and the increase in so-called web-based child sexual abuse cases. This article focuses in particular on primary prevention, that is, those strategies aimed at the healthy population.

The context of prevention

By primary prevention we intend all those strategies developed in order to prevent a health problem arising within a specific population group. It is aimed at the healthy population and is usually universal (aimed at the entire population) or selective (aimed at the at-risk population).

Prevention strategies include a combination of providing information (for example, defining CSA and how it is underestimated in every society), building skills (for example, what to do to prevent it, what children should know to stop and leave at-risk situations, whom to talk to) and providing resources (for example hotlines, trained personnel in schools, resources enabling people to stop any form of potential abuse before it happens).

Historically, primary prevention of child sexual abuse has been realised through two well-defined approaches, described in the literature and implemented on a large scale in many areas of the world.

The first approach is based on the organisation and management of programmes directed at schoolchildren (and at their teachers and parents) and aimed at increasing the ability of potential victims of sexual abuse to recognise and avoid at-risk situations and seeking help from attachment figures.

The second preventive approach is based on the idea that it is adults who should bear responsibility for the prevention of child sexual abuse, and that it is to them and only to them that public health authorities and specialists in prevention should turn to reduce the number and frequency of cases. This approach has characterised the work of *Stop It Now*, an organisation that since 1992 has aimed to help adults, families and communities by taking actions that keep children safe – especially before they are ever harmed. It is the responsibility of adults to create safe environments for children and to understand the warning signs of risky situations or behaviour that might indicate an individual is at risk of sexually abusing a child.

This article concentrates on preventive strategies aimed directly at children. Consequently, we will not pursue the topic of prevention directed at adults, including abusers or potential abusers. From this point on we shall analyse the work directed at minors as potential victims of sexual abuse.

School-based primary prevention

Since the end of the 1970s, a specific procedure for preventive action has been promoted in schools, especially in the United States. This was based on evidence (Finkelhor & Browne, 1985) that most victims of sexual abuse, in their individual experience as victims, presented five characteristic features:

- a) Silence in the face of the abuser, despite the presence of clear signs of emotional discomfort, signs that function as warnings to help the victim realize that what is happening has to be interpreted as both danger and aggression;
- b) The victim's confusion as to what was taking place, considering that most victims never received any information about child sexual abuse before their victimization;
- c) Emotional ambivalence towards the abuser, who in many cases is someone the victim knows well and often loves
- d) Keeping secret what has happened, a condition that automatically permits the abuser to carry out further abuse (perhaps also on the same victim who did not report the occurrence);
- e) No request for help and no intervention on the part of a specialist able to reduce the level of the victim's traumatization or to reduce the impact of possible short-medium- and long-term clinical consequences.

The minor, once traumatized, finds him/herself alone, often burdened by a feeling of impotence and shame, and feels unable to ask an important attachment figure for help. It is precisely for this reason that the educational approach, based on programmes to be offered in primary school (in the first place) but also in the first classes of secondary school, has sought to teach children three basic skills:

- a) To recognise at-risk situations, by trusting their inner feeling so as to be able to differentiate good touch and bad touch
- b) To react in a concrete and active way in such situations, resisting the attempt at abuse, saying 'no', going elsewhere and informing a trusted adult about it;
- c) To understand that the minor who is the victim of sexual abuse is in no way to blame nor has any responsibility for such situations, and is always the injured party who needs protection and appropriate help.

In brief, we can assert that children involved in these programmes learn how to identify an at-risk situation, how to react if approached by an older person who has sexual intentions towards them and what to do in the aftermath of abuse, should it happen. Achieving the goals set by these educational projects has, in the vast majority of cases, involved the differentiation of activities and teaching directed at three distinct target groups:

- a) Children, intended as the end users of all preventive teaching built into the programme;
- b) Schoolteachers, so that they are able to speak to children about sexual abuse and to provide them with preventive tools through activities and teaching within school programmes;
- c) Parents, so that they are able to help their children while growing up with appropriate sex and emotional education, which also includes and incorporates information and tools connected with the principles of preventing sexual abuse.

The spread of projects such as these has been growing, particularly since the 1980s and 1990s. The diffusion and penetration in American schools was researched by Finkelhor, Asdigian & Dziuba-Leatherman (1995) and Finkelhor & Dziuba-Leatherman (1995). These studies reported that a majority of school systems and two thirds of children had

been subject to such programmes, which can thus be considered a universal prevention strategy.

It is difficult to measure efficacy of preventative programmes. In fact the scientific literature has never been able to arrive at a clear position as to their validity and considerable criticism has been raised, especially in relation to possible negative effects on children, including anxiety, failure to comply with the authorities, false reports, increased risk of physical harm by the victimizer and development of sexual problems (Wurtele & Miller-Perrin, 1992; Wurtele, Kast, Miller-Perrin & Kondrick, 1989; Binder & McNeil, 1987; Nibert, Cooper & Ford, 1989).

However, despite these criticisms and the lack of reliable evaluative data, the diffusion of these projects continues. This is most probably a sign that they have been well received by local communities and that they have been able to satisfy a need for knowledge and skills concerning this subject, otherwise difficult to obtain. At the same time, David Finkelhor, after a meticulous analysis aimed at identifying all the studies published on this subject, concluded that “it is worth providing children with high-quality prevention-education programs” (Finkelhor, 2007, p. 644) for many reasons. In fact, according to Finkelhor’s conclusions, research shows that children acquire preventive concepts and some research suggests that children involved are better able to disclose their victimisation. Moreover, single studies were able to find lower rates of victimisation for children involved in these programmes and a lesser degree of self-blame if they were victimised. This led Finkelhor to state that “no alternative prevention strategy has as much positive evidence in its favor as prevention education. It would be a mistake to abandon a strategy that has a tentative but inconclusive evaluation record, including some positive results, for other strategies that have little or no empirical evidence in their favor yet, however appealing they may sound in theory” (Finkelhor, 2007, p. 644).

A Cochrane Review dedicated to the analysis of school-based education programmes for the prevention of child sexual abuse reached more or less the same conclusions. This was based on evidence revealed by 15 randomised controlled trials. In its conclusions, it asserted that all the studies showed “significant improvements in knowledge, measures and protective behaviour, though further investigation of the best forms of presentation and optimal age of programme delivery is required” (Zwi, Woolfenden, Wheeler, O’Brien, Tait & Williams, 2007).

In actual fact, the literature currently lacks the description of which characteristics an ideal programme should possess in terms of format, duration, structure and typology of the educational activities it includes. There are numerous differences between the available programmes including variations in the duration of work with students (from two hours to more than ten with each class involved), the way the course is run (form teachers or external specialists, or external specialists working with form teachers) and methodologies involved (lectures, group work, games, discussion of excerpts from videos and films, and so on).

Anyhow, considerable resources continue to be made available for the organisation of educational programmes for students in compulsory education and aimed at achieving

the preventive goals described above. Some of these programmes seem particularly promising and have already been widely used.

For example, the “Words Not Said” programme (Pellai, 2013), created in Italy in 1999 and illustrated in a handbook which contains detailed description of all the educational activities offered to students over the past 13 years, has received wide attention, not only in its country of origin. It has since been replicated and adapted in all schools in Italian-speaking Switzerland thanks to the preventive action of ASPI, (the Swiss Association for the Protection of Childhood. It has also been replicated and adapted in four other countries (Slovakia, Spain, the UK and the Netherlands) thanks to the Daphne project of the European Union. The originality of this programme consists in the fact that the pupils who are involved learn preventive skills by means of body and team games, and through the use of many active educational methods focusing on the resources offered by the class, such as circle time and role-play. Finally, every educational session of this project ends with a period of bodily relaxation, allowing the children to experiment within the teaching environment that the body is and must be a source of wellbeing, unlike in situations of sexual abuse. This project has been the object of numerous independent appraisals at a local level but not published. More information on this project and the related educational materials can be found at: <http://www.porcospiniproject.eu/>

A 2013 ISPCAN ‘Denver Thinking Space’ seminar on *Working with Men and Boys* focussed on the situation regarding primary preventive strategies, including those based on educational support action. It is a reference document for all those who are currently involved in planning preventive activities of this kind (http://c.ymcdn.com/sites/www.ispcan.org/resource/resmgr/events/phase_2_final_report.pdf).

Further proof of the importance of publicising this type of activity is represented by the report National Sexuality Education Standards: Core Content and Skills, K-12 (Future of Sex Education Initiative, 2012). This provides teachers, schools, school districts and state education agencies with a new national standard – the minimum they need to teach to set students on a path to sexual health and responsible adulthood. Among the seven main topics considered as minimum essential content and skills for K–12 education, there are two (“healthy relationships” and “personal safety”) with educational goals that entirely overlap those for years included in primary sex-abuse prevention programmes. Through this report, therefore, there is further confirmation, on an educational level, of the fundamental importance of this kind of concerted educational activity during childhood and adolescence.

The importance of providing children with good quality preventive educational programmes is clearly stated and underlined also in the Council of Europe Convention for the Protection of Children against Sexual Exploitation and Sexual Abuse (Council of Europe Treaty Series - No. 201), which in Paragraph 6 states that:

“Each Party shall take the necessary legislative or other measures to ensure that children, during primary and secondary education, receive information on the risks of sexual exploitation and sexual abuse, as well as on the means

to protect themselves, adapted to their evolving capacity. This information, provided in collaboration with parents, where appropriate, shall be given within a more general context of information on sexuality and shall pay special attention to situations of risk, especially those involving the use of new information and communication technologies”.

Internet-based child sexual abuse

All the actions directed at children so far described are aimed at preventing abuse of minors by older people in real life. But over the past twenty years, a new kind of sexual abuse has spread which can be called Internet-based child sexual abuse. It includes various forms of abuse towards minors, such as creating, depicting and/or distributing sexual images of children online, stalking, grooming and/or engaging in sexually-explicit behaviour with children online. This form of abuse can be seen as a natural result of the diffusion in epidemic proportions of the new technologies and their use by the younger generations, not for nothing described as Digital Natives (Pransky, 2001). In the last two decades, many of the activities that characterise childhood infancy and adolescence have transferred to online platforms, which are also used to explore topics and content that have to do with the sphere of sexuality – so vital in these formative years. For this reason, parents, teachers and those professionally involved with childhood have found that more and more children and teens increasingly use websites to explore their sexual curiosities, to become aroused and to indulge in sexual fantasies. By so doing, it happens more and more frequently that via the Internet children and teens get in touch with older people and so become actively involved in sexual conversations and online activities dealing with sexuality. At the same time, nowadays the socio-cultural environment amplifies the number of risk-factors increasing the vulnerability of children to child sexual abuse.

The epidemiology of the phenomenon shows that sexual abuse perpetrated against minors through the use of digital devices is increasing steadily. The most important longitudinal study implemented so far is known as “Youth Internet Safety Surveys” (YISSs). It involves three American cross-sectional representative telephone surveys of 4,561 Internet users aged 10 to 17 years, in 2000, 2005 and 2010 and it shows an increase in youth online harassment from 6% in 2000 to 11% in 2010, driven primarily by a rise in indirect harassment (someone posting or sending comments to other users about them online). Girls made up an increasing proportion of victims: 69% of victims were girls in 2010 compared with 48% in 2000. Furthermore, over this ten-year period there was an increase in incidents of harassment from school friends or acquaintances on social-networking sites.

The dangers connected with online solicitation and victimization of children by “virtual predators” have led to the development of numerous preventive activities designed to help children not to act naively when online so as not to get trapped in at-risk situations. But “Internet sex crimes involving adults and juveniles more often fit a model of statutory rape – adult offenders who meet, develop relationships with and openly seduce underage teenagers – than a model of forcible sexual assault or paedophilic child molesting” (Wolak, Finkelhor, Mitchell & Ybarra, 2008, p. 111). Since the dynamics of online abuse are unlike those of abuse in real life, there is a need for preventive approaches and messages, different from those available nowadays, emphasising

parental control and the dangers of divulging personal information. Parents and children should be receiving information and skills that acknowledge and validate normal adolescent interest in romance and sex on the one hand, but that on the other provide target audiences with awareness and avoidance skills and educate older youths about the pitfalls of sexual relationships with adults and their criminal nature. Particular attention should be paid to higher risk youths, including those with histories of sexual abuse, sexual orientation concerns and patterns of off- and online risk taking. Moreover, teachers and professionals working in the field of prevention and public health need information about the dynamics of this problem and the characteristics of victims and offenders because they are likely to encounter related issues in a variety of contexts. It is very important that all people working with minors know that though “crimes by online-meeting offenders should not be treated as different or more dangerous than those by know-in-person/online offenders who use online sexual communications. Rather, prevention efforts should educate about the nature of statutory rape and related noncontact offenses. The primary message should be that it is criminal for adults to make sexual overtures to minors, online or offline, no matter what their relationship to the youth” (Wolak & Finkelhor, 2013, p. 736). We should also integrate in our prevention programmes information and skills related to what has been asserted by the researchers in charge of the YISS study: “The increase in online harassment can likely be attributed to changes in how youth are using the Internet, especially a disproportional increase in online communication with friends by girls, providing more opportunity for offline peer conflicts to expand to this environment. School-based prevention programs aimed at improving peer relationships and reducing bullying are recommended to reduce online harassment” (Jones, Mitchell, Wolak & Finkelhor, 2013, p. 53).

The contribution of the neurosciences to the field of child sexual-abuse prevention

At this point it is important to integrate some information derived from the world of neuroscience, which can help those who plan preventive action to structure it according to the true characteristics of the way the brain functions during childhood and adolescence. In this way educational programmes will be based on what we know about how information and skills are assimilated and elaborated by the brain. Moreover, during the last twenty years the neurosciences have proved fundamental in the development of activities directed at the very young, in educational, preventive and clinical environments. It is thanks to innovative techniques of neuroimaging that the neurosciences have discovered what happens to the human brain during childhood and adolescence. We now understand why, especially in adolescence, young people indulge in heightened risk-taking and how we can make prevention work effectively for minors and teens. The child’s and adolescent’s brain finds it very difficult to integrate messages coming from its limbic area, which is very sensitive to social and emotional stimuli – such as those dealing with sexuality, excitement, fear and arousal (all factors involved in situations like sexual abuse by a seductive older person or sexting through ICT) – with those coming from the prefrontal cortex (PFC), where most of the cognitive processes take place aimed at decision-making, problem-solving and critical thinking (skills needed to be able to assess risk and prevent it). During childhood, pre-adolescence and adolescence the brain is much more developed in its limbic area, while it is still immature in its PFC area.

Around puberty, the brain's socio-emotional system that leads to increased reward-seeking, especially in the presence of peers, is almost more in control of what a minor does than the brain's cognitive control system, which controls an individual's capacity for self-regulation. While puberty and early adolescence are times of development more focused on reward-seeking, later adolescence is based more on self-regulatory competence, which occurs gradually and is not complete until the mid-20s (Steinberg, 2008). This explains why most minors between 10 and 16 can show a heightened vulnerability to risky and reckless behaviour.

We have been discussing Internet-based child sexual abuse towards minors, where often it is the minors themselves who look for excitement or act urged on by irrational or strongly emotional reasons (like in a situation when a minor uses the online platform to post material with sexual content or to obtain it from a peer). Taking into account all this, we can conclude that the insight provided by the neurosciences must be given overriding consideration in the preparation of prevention projects aimed at this age group. Prevention must provide young people with the skills to use and integrate the two sides of the brain (the emotional and the cognitive) in a cooperative and pro-active way, in all situations where problem-solving is very much needed and the emotional brain tries to trap the potentially defensive contribution of the cognitive brain. As Dahl notes, "For some adolescents, this tendency to activate strong emotions and this affinity for excitement can be subtle and easily managed. In others these inclinations toward high-intensity feelings can lead to emotionally-charged and reckless adolescent behaviors and at times to impulsive decisions by (seemingly) intelligent youth that are completely outrageous" (Dahl, 2004, p.8).

So, risk-taking during adolescence can be understood and explained as the product of interaction between the socio-emotional and cognitive control networks. Young adolescents do a lot of risk-taking associated with sensation seeking and their vulnerability towards many forms of sexual victimization is strongly connected with the way young adolescents' brains function. As a consequence, we are in need of prevention education that is able to further integrate between the emotional and the cognitive parts of the adolescent's brain by means of a series of proposals and activities not simply based of the acquisition of factual information, so much as on the acquisition of concrete skills to be used when experiencing high-risk situations and when in need of self-protection. We believe that the so-called Life Skills-Based Education is ideal for this purpose because it aims at developing knowledge, attitudes and skills using a variety of learning experiences, with an emphasis on participatory methods. Life skills are abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life (Mangrulkar, Whitman & Posner, 2001; World Health Organisation, 2004). Life Skills-Based Education (LSBE) is being adopted as a means to empower children and adolescents in challenging and at-risk situations. The content of the life skills-based education modules must include relevant, gender-sensitive learning materials, created at appropriate developmental levels, from pre-school through early adulthood, allowing young people to engage in learning experiences that help them prevent situations and risks that can put their physical, social and emotional wellbeing in danger. The prevention educational model suggested in the LSBE approach can be a perfect starting point for the

development of future prevention programmes targeting the problem of child sexual abuse.

Conclusions

There is a never-ending need for preventive action to stop child sexual abuse epidemics and to empower children and adolescents to help protect them from becoming victims of sexual abuse.

Primary prevention is needed by all children all over the world and must become a universal practice, with no limitations whatsoever (neither cultural, nor religious nor political). Since minors are nowadays digital natives and grow up in a media-saturated world, they also need to possess the skills to surf the web safely.

Parents, teachers and all professionals working with minors should also become specific targets for prevention purposes so as to allow them to provide children with all the help, skills and support they need to grow up as healthy individuals in such a complex and fast-changing world. One of the major problems is the lack of clear data from studies that provide definitive assessments of what works and what is not effective in this field. At the same time, all those working in the field are aware that child sexual abuse is a major and never-ending challenge, due to the fact that we are still trying to measure the real extent of the phenomenon which in many countries is still underestimated and covered by stigma resulting from shame and fear. For this reason, too, promoting primary prevention activities in schools remains a way to help communities to reflect on the phenomenon, and to take action that in the future will result in the implementation of a more complete and effective public health agenda to solve it.

To reach these goals governments all over the world should put child sexual abuse prevention at the top of their child protection policies and welfare agendas. Without strong political commitment, there is the risk that the difficult topic of child sexual abuse will not receive the attention it requires, potentially impacting the well being and the future of thousands of children in every country. The Council of Europe has been in the forefront in Europe in tackling sexual abuse through both campaigning and by putting in place a legal framework and a monitoring mechanism which is going to assist countries to evaluate how their legal measures are being implemented. The Council of Europe Convention for the Protection of Children against Sexual Exploitation and Sexual Abuse must be considered a “milestone” document that should move all European countries to promote political, educational and social changes so as to realize all the changes and the innovations described in it. Non European countries could take inspiration from this same document so as to promote a child protection strategy aimed at reducing child sexual abuse, by pursuing an effective theory-rooted and practice-oriented strategy allowing minors to grow up in a sex abuse-free world.

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