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INTEGRATIVE REVIEW ARTICLE

CHILD SEXUAL ABUSE PREVENTION: INTEGRATIVE REVIEW PREVENÇÃO DO ABUSO SEXUAL DA CRIANÇA: REVISÃO INTEGRATIVA PREVENCIÓN DE L ABUSO SEXUAL DEL NIÑO REVISIÓN INTEGRADORA

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ABSTRACT

Objective: assessing available scientific evidence in the literature to understand the importance and scope of constructive school-based education programs in preventing child sexual abuse with emphasis on programs that encompasses both children, adolescents, teachers, and parents. **Method:** it is an integrative literature of articles published between 2010 and 2017 written in English, Portuguese and Spanish. PsychINFO, PubMed/Medline databases, and SciELO were searched using descriptors: Sex Offences; Child; Adolescent; Primary prevention; Programs; Sexual education; Schools. **Result:** 18 eligible studies; of which 6 were developed in the USA, 2 studies each from Canada and Brazil, and 8 studies from 8 different countries. Selected studies revealed the importance of parents and teachers' involvement in early detection of sexual abuse in children and adolescents, positive increase in communication skills and increased self-esteem. **Conclusion:** This review indicates that the prevention programs could be effective if it is well planned and adequately executed. **Descriptors:** Sex Offences; Child; Adolescent; Primary Prevention; Sexual Education.

RESUMO

Objetivo: avaliar as evidências científicas disponíveis na literatura para entender a importância e o alcance de programas construtivos de educação escolar na prevenção do abuso sexual infantil com ênfase em programas que englobam crianças, adolescentes, professores e pais. **Método:** literatura integrativa de artigos publicados entre 2010 e 2017, escritos em inglês, português e espanhol. Os bancos de dados de PsychINFO, PubMed/Medline e SciELO foram pesquisados usando os descritores: Ofensas sexuais; Criança; Adolescente; Prevenção primária; Programas; Educação sexual; Escolas. **Resultado:** houve 18 estudos elegíveis; dos quais seis foram desenvolvidos nos EUA, dois no Canadá e dois no Brasil, e oito estudos em oito países diferentes. Estudos selecionados revelaram a importância do envolvimento dos pais e professores na detecção precoce de abuso sexual em crianças e adolescentes, aumento positivo das habilidades de comunicação e aumento da autoestima. **Conclusão:** esta revisão indica que os programas de prevenção podem ser efetivos se estiverem bem planejados e executados adequadamente. **Descritores:** Delitos Sexuais; Criança; Adolescente; Prevenção Primária; Educação Sexual.

RESUMEN

Objetivo: evaluar la evidencia científica disponible en la literatura para comprender la importancia y el alcance de los programas constructivos de educación escolar en la prevención del abuso sexual infantil, con énfasis en programas que abarcan a niños, adolescentes, maestros y padres. **Método:** literatura integradora de artículos publicados entre 2010 y 2017, redactados en inglés, portugués y español. Las bases de datos PsychINFO, PubMed/Medline, y SciELO fueron investigados con los siguientes descriptores: abusos sexuales; Niño; Adolescente; Prevención primaria; Programas; Educación sexual; Escuelas. **Resultado:** 18 estudios fueron elegibles; de los cuales 6 fueron desarrollados en los Estados Unidos, 2 estudios en Canadá y dos en Brasil y 8 estudios de 8 países diferentes. Algunos estudios revelaron la importancia de la implicación de los padres y profesores en la detección precoz del abuso sexual en niños y adolescentes, el aumento positivo en las habilidades de comunicación y el aumento de la autoestima. **Conclusión:** Esta revisión indica que los programas de prevención podrían ser eficaces si están bien planificados y ejecutados adecuadamente. **Descriptores:** Delitos Sexuales; Niños; Adolescente; Prevención Primaria; Educación Sexual.

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INTRODUCTION

Sexual violence remains a complex phenomenon in the global public health area regardless of age and gender. Child sexual abuse has been regarded as a life experience that can create a negative long impact in affected children and adolescents. The relationship between the victim and the offender can be a form of power imbalance that makes one overpower the other. The act of sexually abusing children and adolescents were considered rare and culturally tabooed with little or no importance attached to it some centuries back, but the rate of its increase and occurrences in recent time within the society, socioeconomic group, social class, religious group and ethnic group is alarming.¹⁻³ Therefore, it is important to understand the current trends of scientific information on child sexual abuse, its consequences and ways to avoid or reduce it.

World Health Organization estimated that over 150 million children and adolescents under 18 years old have experienced sexual violence in one form or another.⁴ Child sexual abuse is a global health and human right problem and has been reported to commonly affect girls more than boys; about 1 in 4 girls and 1 in 10 boys have experienced sexual violence.⁵⁻⁶ It is a gross violation of children's right with global realities across all countries and social groups describing it as a form of domestic terrorism which kills faster but silently than international terrorism.^{7,8}

Sexual violence in children and adolescents occur through two major behaviors; contact and non-contact behaviors such as sexual touch, attempted sex, pressured/coerced sex or forced sex, oral-genital contact, pornography, children exposure to adult sexual activities, child marriage and prostitution of young children.^{7,9} Diverse risk factors have been shown to increase sexual violence, such as gender, age, disabilities, socioeconomic status, race or ethnicity and family constellation.^{9,10} Its immediate and long term effect mentally, physically, psychologically, sexually, and in terms of social well-being cannot be over emphasized. Long term psychiatric conditions clinically associated with sexual abuse include depression, post-traumatic stress disorder, personality disorder, eating disorder and dissociative identity disorder. Also, there are links between sexualized behavioral problems and child sexual abuse, including overtly sexualized behavior, sexually transmitted diseases like HIV and unwanted pregnancies.

Other consequences include suicide and murder.^{5,11}

Prevention of child sexual abuse has taken different shapes and forms, advocated by health sectors and individuals in the society. It is believed that the responsibility of preventing child sexual abuse in the society should not only be the target of health sector but the target of everyone and all sectors including education, legal and media.¹² Different preventive programs have been used in spreading sexuality education include media awareness, house to house awareness, workshops, conferences on child sexual abuse, community-based programs, and school based programs. This is done with the aim of creating and improving skills, knowledge, and ability to identify and avoid sexual risk situations while eliminating reoccurrence of such situations. It also helps in creating autonomy in potential victims and bystanders.

This is a quasi-experimental study of an evidence-based adult education program about child sexual abuse is one of the recent educational programs developed to prevent child sexual abuse. The aim is to change adult behavior, increase their knowledge and attitude towards child sexual abuse. A comprehensive evidence-based education program involved 366 adults, 23 workshops, a 3-month follow up the program and a post-test. Appreciating the outcome of the education program, a pre-test measurement was conducted to test the attitude, behavior, and knowledge of selected adult about child sexual abuse and after which the program workshop was administered and then followed up by a 3-month follow-up session. The follow-up program was reported to be highly statistically significant in improving behavior, attitude and knowledge of child sexual abuse. There was increased percentage of participants who actively took steps to protect children, with a shift from 25% at baseline to 48% at follow-up, while subjects who will actively look for child sexual abuse evidence increased from 46% to 81%.¹³

Another study of 248 children who visited a museum showed an improvement in sexual abuse knowledge through administered questionnaire after visiting the museum than the administered questionnaire before visiting the museum. Many children responded yes to the question "I would say nothing or wouldn't tell anyone until later" when asked about disclosure of strange touch before entering the museum; while those administered questionnaires after visiting the museum were ready and willing to disclose any form of strange touch.¹⁴ Meta-analysis of 27 studies

also supported the fact that children who participated in school-based child abuse programs performed higher than the control group children in outcomes measured.¹⁵

However, irrespective of all the various approaches directed towards reducing and improving knowledge about child sexual abuse, there has been continuous surge in child sexual abuse cases within the society leading to the desire to provide pertinent answers to the questions like “what exactly are the impact of this school-based education programs in preventing child sexual abuse and promoting health among school-age children and adolescents”.

Therefore, this study aimed at assessing available scientific evidence in the literature to understand the importance and scope of constructive school-based education programs in preventing child sexual abuse with emphasis on programs that encompasses both children, adolescents, teachers, and parents.

METHOD

An integrative review is the most comprehensive methodological approach of evidence-based practice (EBP) with the inclusion of all study types for a better understanding of a phenomenon, synthesis of knowledge and better applicability of significant study results.¹⁶ This study is divided into six (6) stages. The stages used for the elaboration of the analysis are: 1. establishment of objective and research questions 2. Bibliography literature search 3. Categorization of data collected 4. Critical evaluation of selected studies 5 Analysis and

interpretation of the result 6. Presentation of the review.

The research question was established using the SPIDER (S - Sample, PI- Phenomenon of Interest, D- Design, E- Evaluation and R- Research type) strategy. SPIDER strategy is an alternative search strategy tool to PICO (Population, Intervention, Comparison and Outcome) but having the same adaptation method. It was chosen because of its suitability of accommodating both qualitative and mixed research methods addressing health behaviors and interventions in a more timely and sensitive manner.¹⁷ However, the guided question for the review was “what is the impact of school-based sexuality education programs in preventing sexual abuse and promoting health among school age children and adolescents?” In this scenario, Sample ‘S’ is school children and adolescents, parents and school-teachers; Phenomenon of Interest ‘PI’ is school-based sexual education program; Design ‘D’ is all research designs; Evaluation ‘E’ is the impact of this program and the study; Research type ‘R’ is all research types.

Inclusion and Exclusion criteria of selected articles are clearly stated in Figure 1 below including the search terms used. Selected scientific articles included in the full-text format available in PsychInfo, PubMed/Medline databases and SciELO - Scientific Electronic Library Online while articles’ survey was done in May 2017.

Search Terms	
Child sexual abuse Adolescents sexual abuse sexual abuse prevention Sexual abuse education programs School-based sexual abuse programs	
Inclusion Criteria	Exclusion Criteria
Research study published between January 2010 and May 2017	Not related to identifying victims e.g. adult victims of any form of sexual violence
Written in English, Portuguese, and Spanish	Study focus on prevalence and sequelae of child sexual abuse
With the purpose of preventing and reducing sexual abuse in children and adolescents	Reviewed articles and Grey literature and unpublished reports e.g dissertations
No country restriction so far it meets language criteria	Of different study purpose of sexual education program such as preventing sexually transmitted diseases
All field of study	

Figure 1. Inclusion and exclusion criteria. Ribeirão Preto (SP), 2017, Brazil.

Selection of eligible studies was done using a 4 stages flowchart: (1) Identification of studies (2) Selection (3) Eligibility (4) Final inclusion (Figure 1).

The articles were selected and a validated data collection instrument was used to critically appraise the selected articles.¹⁸ The level of evidence of the articles were

classified into 7 categories: I - systematic reviews or meta-analysis of relevant clinical trials; II - evidence derived from at least one well-delineated randomized controlled trial; III - well-delineated clinical trials without randomization; IV - well-delineated cohort and case-control studies; V - systematic review of descriptive and qualitative studies;

VI - evidence derived from a single descriptive or qualitative study and VII - opinion of authorities or expert committee's reports.¹⁹ The selected articles were thereafter arranged in a Figure under the following headings: author, title/year, data collection method, type of study/research method, objective/result and level of evidence.

RESULTS

A total of 18 published articles met the inclusion criteria and were analyzed accordingly. Descriptive analysis of the articles which explored the structure, research methods, and analysis of the data used was first completed. A qualitative analysis which explored the research question content using a validated critical appraisal tool for questions summarization and classification was thereafter carried out.

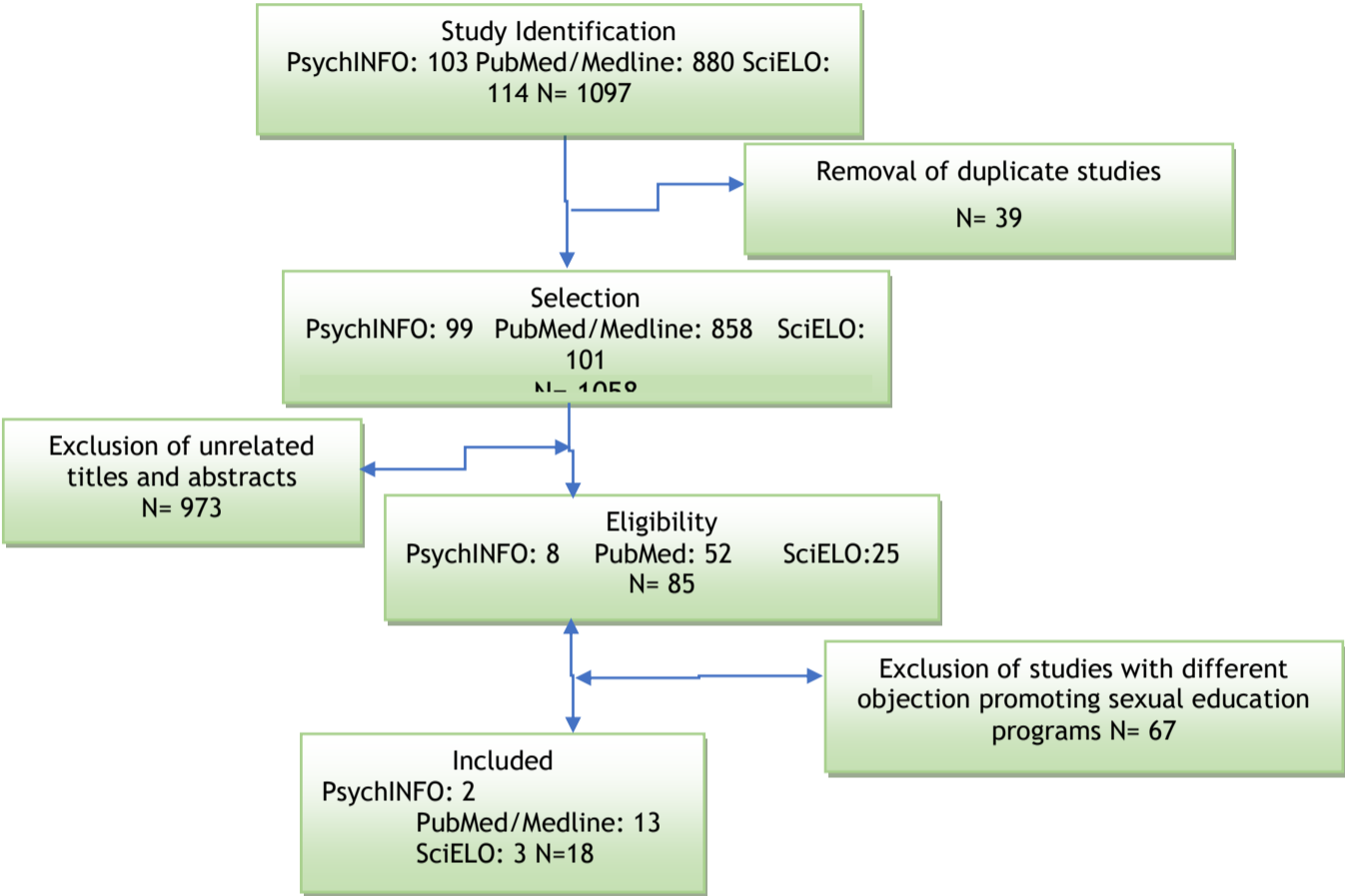


Figure 2. Flowchart for the revised corpus's construction process. PsychINFO, PubMed/Medline, SciELO. Ribeirão Preto (SP), 2017, Brazil.

Of the 18 selected articles, 12 were published in English, 2 in Portuguese and 4 in Spanish. The highest number of publication (5) was in 2014, followed by year 2015 and 2012 with 3 articles each, 2016, 2013 and 2011 have 2 articles each while 2010 has the least number of articles (1). However, no article published in 2017 was included as none of the studies met the inclusion criteria. Out of 11 countries where studies were conducted, United State of America has the majority number of studies (6), Canada and Brazil have 2 articles each and other 8 countries have 1 article each. Meanwhile, the only study conducted in Sub-Sahara Africa involved 5 countries namely: Swaziland, Namibia, Kenya, Nigeria, and Senegal. Figure 2 summarizes the selected study characteristics while Figure 3 gives an overview of the methodological aspects and summary of the studies.

Characteristics	Number of occurrences
Year of Publication	
2016	2
2015	3
2014	5
2013	2
2012	3
2011	2
2010	1
Country of study	
Canada	2
Sub-Sahara Africa	1
USA	6
El-Salvador	1
Brazil	2
Australia	1
Netherlands	1
Iran	1
Spain	1
Mexico	1
Colombia	1
Language	
English	12
Portuguese	2
Spanish	4
Research type	
<i>Quantitative approach</i>	
Quasi experimental design	9
<i>Qualitative approach</i>	
Descriptive-survey design	5
Mixed	4
Theoretical Framework	
Behavioral change theory	6
Social cognitive theory	2
Social learning theory	1
Hierarchy Model	1
Combined theories (>1)	2
Not described	6
Sources of Data	
Primary data	18
A - Students/children/Adolescents	9
B - Parents/Teachers	7
Both A & B	2
Data collection instrument	
Questionnaire	9
Interview	4
Narrative	1
More than one type of instrument	4
Number of participants	
<50	2
51-1000	13
1001-2000	1
>2000	1
Not included	1

Figure 2. General characteristics of selected studies. Ribeirão Preto (SP), 2017, Brazil.

The sample size ranged from 20 participants to 2,877 participants, with an average of approximately 1448.5. Precisely, 2 studies had a sample size below 50, 13 studies between 51 and 1000 participants, 1 study between 1001 and 2000, and 1 study above 2000 while 1 study did not indicate the sample. Few studies specify the gender of participants while others only described the population such as students, parents, and teachers. Among the 4-theoretical framework identified in the studies, behavioral change theory has the highest number of 6, followed by social cognitive theory with 2 studies, social learning theory and hierarchy model have 1 study each, 2 studies used more than

one theory and the rest of the studies reviewed did not specify the theoretical aspect. All selected studies used primary data, with majority data collected with a questionnaire (9 studies), interview (4 studies), narrative method (1 study) and 4 studies used more than one data collection method.

With the results presented, 7 articles showed their level of evidence to be qualitative or descriptive study, 5 studies were of controlled trial without randomization, 3 studies were categorized under the systematic review of qualitative or descriptive studies, 2 articles were of randomized controlled trial and the study with

the least of evidence level was case control or cohort study. 100% of the studies recognize child sexual abuse as a violence and

preventing measures were identified as important in reducing and avoiding it.

N o	Author/Year	Title	Data collection Method	Type of study	Objective/Result	Level of Evidence
1	Martin, E. K., & Silverstone, P. H. (2016)	An Evidence-Based Education Program for Adults about Child Sexual Abuse ("Prevent It!") That Significantly Improves Attitudes, Knowledge, and Behavior.	Questionnaire	Longitudinal	Described the development of an evidence-based education program for adults about child sexual abuse (CSA), called Prevent It! The results suggest it is highly effective and support its widespread use.	IV
2	Miller, K. S., Winskell, K., Pruitt, K. L., & Saul, J. (2015)	Curriculum Development Around Parenting Strategies to Prevent and Respond to Child Sexual Abuse in Sub-Saharan Africa: A Program Collaboration Between Families Matter! and Global Dialogues.	Narrative-self report	Cross-sectional	It described the enhancement of a new Family Matter Program (FMP) session on CSA. It resulted in an interactive curriculum that is grounded on contextually-relevant and emotionally-compelling scenario.	VI
3	Letourneau, E. J., Nietert, P. J., & Rheingold, A. A. (2016)	Initial Assessment of Stewards of Children Program Effects on Child Sexual Abuse Reporting Rates in Selected South Carolina Counties.	Reported cases	Cross-sectional	Determined whether the Stewards of Children prevention program is associated with increased CSA reporting. The findings suggest that the Stewards prevention intervention may be associated with increased CSA allegations	III
4	Pulido, M. L., Dauber, S., Tully, B. A., Hamilton, P., Smith, M. J., & Freeman, K. (2015)	Knowledge Gains Following a Child Sexual Abuse Prevention Program Among Urban Students: A Cluster-Randomized Evaluation.	Questionnaire	Longitudinal	Evaluated a school-based child sexual abuse (CSA) prevention program, Safe Touches, in a low-socioeconomic status, racially diverse sample. A significantly greater improvement was shown in the intervention group than control group.	II
5	Healey, G. (2014)	Inuit parent perspectives	Interview	Cross-sectional	Explored Inuit parent	VI

		on sexual health communication with adolescent children in Nunavut: "it's kinda hard for me to try to find the words".			perspectives on sharing knowledge with teenage children about sexual health and relationships. Findings show that they desired to share their knowledge but need emotional support to achieve it.	
6	Hurtado, A., Katz, C. L., Ciro, D., Gutfreund, D., & Nosike, D. (2014)	Children's knowledge of sexual abuse prevention in El Salvador.	Questionnaire	Cross-sectional	Evaluated the effectiveness of a child sexual abuse (CSA) prevention exhibit at a children's museum. Children's knowledge scores on CSA prevention significantly improved after visiting the exhibit	III
7	Costa, M. C. O., Carvalho, R. C. D., Santana, M. A. O. D., Silva, L. M. S. D., & Silva, M. R. D. (2010)	Evaluation of the National Program of Integrated and Referential Actions (PAIR) to confront the child and adolescent's sexual violence, in Feira de Santana, Bahia State, Brazil.	Interview	Cross-sectional	Presented the evaluation of PAIR actions implemented in Feira de Santana city, Brazil. The results of the three segments of the community suggest the need for a social Network integration as strategies to face the sexual violence in Feira de Santana	V
8	Banfield, M., McGorm, K., & Sargent, G. (2015)	Health promotion in schools: a multi-method evaluation of an Australian School Youth Health Nurse Program.	Interview/ Questionnaire/ record analysis	Cross-sectional	Described the evaluation of a pilot School Youth Health Nurse (SYHN) Program, which aims to integrate a Registered Nurse into school communities to deliver health promotion through group education and individual sessions. Findings suggest that the program was feasible and accepFigure to the students and schools involved in the pilot.	VI
9	Schutte, L., Meertens, R. M., Mevissen,	Long Live Love. The implementatio	Questionnaire	Cross-sectional	Studied factors that promote or impede each	V

	F. E., Schaalma, H., Meijer, S., & Kok, G. (2014)	n of a school-based sex-education program in The Netherlands.			stage of the diffusion process in the school setting using the sex education program Long Live Love (LLL). Results showed that teacher curriculum-related beliefs were associated with all stages of the diffusion process.	
10	Markham, C. M., Peskin, M. F., Shegog, R., Baumler, E. R., Addy, R. C., Thiel, M., ... & Tortolero, S. R. (2014)	Behavioral and psychosocial effects of two middle school sexual health education programs at tenth-grade follow-up.	Interview	Cross-sectional	Examined whether school sexual education randomized controlled trial of 9 th -grade students can be extended into 10th grade of two middle. Additional high school sexual education was suggested to delay sexual initiation and reduce other sexual risk behaviors in later high school years.	II
11	Javadnoori, M., Roudsari, R. L., Hasanpour, M., Hazavehei, S. M. M., & Taghipour, A. (2012)	Female adolescents' experiences and perceptions regarding sexual health education in Iranian schools: A qualitative content analysis.	Interview/ focus group discussion	Cross-sectional	Investigated Iranian female adolescents' experiences and perceptions with respect to Sexual Health Education. Result revealed great dissatisfaction with Sexual Health Education in schools.	VI
12	Morrison-Beedy , D., Passmore, D., & Carey, M. P. (2013)	Exit interviews from adolescent girls who participated in a sexual risk-reduction intervention: implications for community-based health education promotion for adolescents.	Interview	Longitudinal	Described the experiences and program characteristics of a gender-specific, sexual risk-reduction intervention. The experience was described as a positive benefit.	V
13	García, G. M., Cañadas-de la Fuente, G. A., González-Jiménez, E., Fernández, C. R., & García-García, I. (2011)	[Education about healthy sexual behaviors among high school students].	Group dynamic/Questionnaire	Cross-sectional	Described the knowledge of students about sexuality and the implementation of a sexual education project. It improved the practical	VI

					knowledge of students about sexual behavior.	
14	Baker, C. K., Naai, R., Mitchell, J., & Trecker, C. (2014)	Utilizing a train-the-trainer model for sexual violence prevention: Findings from a pilot study with high school students of Asian and Pacific Islander descent in Hawai'i.	Questionnaire	Longitudinal	Implemented and evaluated a culturally grounded school-based sexual violence prevention curriculum. Results showed that students in the intervention school significantly increased their knowledge of sexual violence, decreased their victim-blaming attitudes, and increased their bystander self-efficacy compared with students in the comparison school	III
15	Senn, C. Y. (2013)	Education on resistance to acquaintance sexual assault: the preliminary promise of a new program for young women in high school and university.	Questionnaire	Longitudinal	Presented a development of a theoretically driven sexual assault resistance program. The program shows promise for young women and is now being evaluated for long term effectiveness of key outcomes.	III
16	Higareda-Almaraz, M. A., Higareda-Almaraz, E., Higareda-Almaraz, I. R., Barrera-de León, J. C., Gómez-Llamas, M. A., & Benites-Godínez, V. (2011)	Parental aptitude to prevent child sexual abuse after a participatory education intervention	Questionnaire	Longitudinal	Evaluated the aptitude of parents regarding the educational impact of equity education for children to prevent child sexual abuse. Result found statistically significant differences in the parents' responses before and after the educational intervention,	III
17	Mantilla Uribe, B. P., Hakspiel Plata, M. C., Rincón Méndez, A. Y., Smith Hernández, D., & Hernández Quirama, A. (2012)	Promotion of sexual and reproductive rights in adolescents of Bucaramanga, Floridablanca and Lebrija - Colombia.	Interview/ focus group discussion	Cross-sectional	Implementation of teachers' program to promote sexual and reproductive health in teenagers. It was found favorable changes in teachers and students in their knowledge of	VI

					sexuality, sexual and reproductive rights	
18	Baumfeld, T. S., Sá, R. B., Santos, D. F. D., Monteiro, O. M., Ferreira, M. B., Silva, E. M. V., ... & Bonolo, P. D. F. (2012)	Self-reliant Care: Dialogue on Emotions and Sexuality with Adolescents Through the Educational Program for Health Work	Questionnaire/interview	Longitudinal	Aimed at integration between teaching and the health service, the development of self-reliant care, establishment of ties, and exchange of knowledge with the adolescents. Result revealed that the program highly served its purpose	VI

Figure 2. General characteristics of selected studies. Ribeirão Preto (SP), 2017, Brazil.

DISCUSSION

Prevention of child sexual abuse is strategic in nature and needs an organized procedure because of the characteristics of the subjects mostly involved in this type of sexual abuse. Children and adolescent can be easily controlled and managed if right and correct steps are taken. As such a well-articulated child sexual abuse prevention program could go a long way in attenuating both the menace and the long term psychological effects of the act.

In the selected articles, prevention programs are mostly school-based focusing on not only the students (children or adolescents) but also focused on the teachers.²⁰⁻²¹ Majority of the prevention programs also identified the place of parents and community in promoting sexual health of children and adolescents.^{13, 20}

Reducing the risk of child sexual abuse needs the intervention of public health, with the aim of targeting the population and addressing warning signs or red flags to look for in any strange situation. Prevention strategies are classified into 3 which are discussed below.

Primary Prevention: is any intervention that prevents sexual abuse before its occurrence. It involves understanding signs and taking actions before a sexual assault occur. This teaches children to respect the physical boundaries of others and refrain from unwanted touching. In this part, children are made to understand the part of their body and how it functions in relation to sexual abuse and red flags or warning signs. Critical review of preventive educational programs shows a clear evidence of improved safety skills, promote disclosure, reduce self-blame and increase the knowledge of children about sexual abuse.²¹⁻²² A clustered-randomized evaluation of 492 elementary school children

shows an increase in children’s knowledge of inappropriate touch after a preventive program.²³

Secondary Prevention: approach is regarded as the immediate response to put a stop to an abuse after its occurrence and to respond to its short-term consequences.²⁴ Due to the previous occurrence of sexual abuse, victims are prone to fall victim of such risk again or even become an offender “abusing other people”. However, this approach offers intervention in a non-stigmatizing way, to help solve victim’s problem by letting them know that the abuse wasn’t their fault; helping them to exercise the power to say NO, talk and report abuse cases, get rid of shame and guilt after an abuse, and build confidence and self-esteem. A quasi-experimental study of “steward of children” child sexual abuse program in 6 selected South Carolina counties did report efficiency in increasing knowledge, positive child protective change behavior and increase in sexual abuse allegation reports over time in the selected counties.²⁵

Tertiary Prevention: is a strategy that tackles long term response to sexual abuse by addressing its lasting consequences.²⁴ It engages all sectors around the victim in healing and treatment process, promotes child rights to psychosocial well-being, development, protection, and care. Desai²⁶ reported some tertiary prevention approaches for psychosocial intervention. They include advocative interventions for restorative justice, case management for children and their families and psycho-educational group work for children and abusers.

School-based Sexuality Education Program is a potential intervention to reduce sexual abuse of children and adolescents by introducing sex education program for school age children and adolescents. Sexuality educational programs involve processes used

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in promoting health both in school and at home. These strategies are mostly carried out by educators, health professionals, parents, and guardians by directly teaching school children and school adolescent to identify and respond to potential abuse situations and build up the courage to inform trusted adults around. It creates an opportunity to develop reinforce skills, increase knowledge and understand nature of sexual abuse, favors the development of high self-esteem while helping to build a positive personal power and a changed community attitude towards sexual abuse.²⁷

Attitude change and behavioral change are the major targets of sexuality education because education can change the attitude or increase sexual knowledge. The result of this decreases falling sexual abuse victims or offenders. However, it also helps in the prevention of other health problems among school-age children and adolescent by promoting communication and human rights.

Other aims of sexuality education target creation of a positive personal power in each child and adolescent. Positive personal power is used by an educator in building strong self-esteem in children and adolescents and educating school children and adolescents on how to protect themselves against possible future occurrence of sexual abuse. It helps to set personal boundaries, recognize danger (red flags), identify warning signs of unsafe situations, and create confidence and the power to say "NO". In addition, knowing when to get help and raise a voice when something goes wrong is included in sexuality education strategy. Another element of sexuality education is making the children and adolescents to understand communication styles and connecting it to personal safety. Because child and adolescent sexual abuse occur in all social-economic levels, teaching young children the ability to protect themselves with personal power before help comes from others is of great advantage.

The place of school is very important in promoting health especially for spreading sexual abuse prevention programs. This is because the school is a conducive teaching environment with the ability to reach as many as possible children and adolescent at a time as well as giving autonomy to school age children and adolescent. With its mission to develop teaching and learning processes, it also plays a fundamental role in the children's performance and formation in all areas of social life. World Health Organization argued in support of school health promotion by developing the concept and initiating the

plans. It is believed to be a multifactorial approach that involves the development of competence in the classroom in addition to the transformation of the physical and social environment of the school.²⁸ In school activities, the use of videos, in-classroom activities, video games and parent education material will generally be of great advantage. The involvement of parents with school programs will increase communication and good working relationships between parents, guardians and school teachers.

The school based sexuality program should incorporate intersectoral and interdisciplinary style of promoting positive health in the sense that all party that can make a positive impact in the sexuality program should be involved, including school students (both children and adolescents), out of school adolescents as they have high impact in influencing their peers, parents and guardians, and teachers of the school age children and adolescent. This will generally help to strengthen and increase their knowledge, motivate them to protect and educate children on sexual abuse, improve parental awareness, increase child's disclosure of sexual abuse and lowers the high rate of such crime in the society. In addition, some other strategies that can be included in the school-based sexual education program are:

Child education program solely focuses on children skills of understanding what a risk situation is, the ability to improvise a self-protective response and taking right steps in getting the necessary help from adults.

Parenting educational classes is one of the most important programs that can be very effective in reducing and avoiding the risk of sexual abuse among children and adolescents. Due to the nature of the relationship between parents and children, parents can detect strange behavior and decode when their children are in danger. The skills acquired during such classes will strengthen protection against the abusive act and identify when a potential future offender is growing. A non-randomized control study of long term effect of combined intervention of parent education, teachers training, and social competence training on reducing violence and risk behavior showed a positive influence in reducing violent behavior.²⁹

Home visiting programs approach works together or separately with parent educational classes by improving skills and knowledge of parents who are at risk or overwhelmed with sexual abuse issues. If it is well planned and managed, it can help in identifying new cases since most sexual abuse

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in children and adolescent occurs victims' neighborhood.³⁰ The strategy creates confidence in victims and helps potential future offenders seek help in time.

Teacher Training sessions are important because of the teaching-learning relationship between teachers and students, school children easily abide with most instructions given to them by their teachers. High-quality teacher's training session may play an important role in primary prevention of child and adolescent sexual abuse.

Finally, after the successful completion of a school-based sexual education program, evaluation is of importance in measuring the result of a training program. This is with a view to assessing the impact of training and provide an avenue to have feedbacks on other ways of improving such training strategies.

CONCLUSION

This review provided a critically appraised integrative review of selected child sexual abuse prevention studies. Currently, there is an inadequate representation of child sexual abuse prevention programs globally, especially in the under-developed and developing countries, therefore a need of more evidence-based research in these areas will be of great advantage to the field of public health. The result of this review indicates that the prevention programs could be effective if it is well planned and adequately executed. This review lays the foundation for a wide array of unanswered questions that remain regarding child sexual abuse prevention programs. However, future investigations should pay more attention to both genders because most studies concentrated more on young girls and adolescent's girls, and in recent times, male victims of child sexual abuse are becoming more rampant in the society. Also, consideration should be given to methodological procedures for investigating such cases.

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