WHAT WORKS TO PREVENT SEXUAL VIOLENCE AGAINST CHILDREN

Evidence Review
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INTRODUCTION

WHY THIS REVIEW?

Sexual violence against children, which includes anyone under the age of 18, is one of the largest silent global pandemics of our time, occurring in countries at all levels of development and affecting children of all ages. Sexual violence consists of a range of sexual acts against a child, including but not limited to child sexual abuse, incest, rape, sexual violence in the context of dating/intimate relationships, sexual exploitation, online sexual abuse, and non-contact sexual abuse.\(^1\)

Until recently, very little was known about the true nature of sexual violence against children. However, over the last two decades, a growing number of research efforts to document and understand the dynamics and prevalence of sexual violence against children have started to shed light on its magnitude and consequences. Historically, a great deal of the research has focused on high-income countries (HICs), but significant progress has been made in low- and middle-income countries (LMICs). The evidence emerging demonstrates that prevention interventions can make a difference.

TAking a holistic and focused approach

Sexual violence against children and adolescents does not occur in isolation. It often intersects with other forms of gender-based violence and violence against children. Further, different forms of violence against children share common drivers and risk factors. Thus, holistic approaches that target all forms of violence are important to address these intersections, consider poly-victimization, and maximize the use of scarce resources. At the same time, the nuanced experiences of sexual violence also require focused interventions during specific points in the life course. Therefore, both holistic and focused approaches are important and should be complementary.

Together for Girls, in partnership with the Equality Institute and the Oak Foundation, has drawn on an extensive evidence base and the expert knowledge of civil society, practitioners, academics, and policymakers, with special attention to LMICs, to do the following:

- Present a user-friendly summary of the existing evidence of what works to prevent one specific form of violence against children and adolescents — sexual violence
- Highlight ongoing challenges and evidence gaps
- Share case studies across various sectors and regions of the world
- Showcase expert opinions on how to best prevent sexual violence against children
Finally, this evidence review is intended to be a knowledge springboard for further work to understand and prevent sexual violence against children. The primary audience includes decision-makers, advocates, and program implementers to help guide efforts and investments in policies and programs that have the potential to prevent and end sexual violence against children.

**TOPICS BEYOND THE SCOPE OF THIS EVIDENCE REVIEW**

Sexual violence includes a wide range of acts perpetrated in various contexts. Given the practical need to limit this review, the following forms of sexual violence were not included:

- **Sexual exploitation and prostitution, solicitation of a child, and sex trafficking.** The sexual exploitation and trafficking of children is a serious issue that affects children and adolescents globally.

- **Virginity inspections, female genital mutilation and cutting (FGM/C), and reproductive coercion.** These harmful practices are forms of violence that are sometimes considered to be sexual in nature and primarily affect girls and women.
THE INSPIRE FRAMEWORK AND AN INTERSECTIONAL APPROACH

This evidence review is grounded in existing frameworks to prevent and address sexual violence against children, and it does not intend to replace or replicate those existing models or resources. Rather, this review adds to and complements existing resources by intentionally focusing on identified gaps and ensuring a strong integration of two key intersections — age and gender — in sexual violence prevention strategies.

Building on the INSPIRE framework, which offers seven overarching strategies to prevent all forms of violence against children, this review has consolidated and categorized strategies focused solely on preventing sexual violence against children. Interventions were classified as “effective,” “promising,” “prudent,” “conflicting,” “harmful,” and “no effect.” While this review focuses on primary prevention interventions, we frame this in the understanding that effective primary prevention cannot exist without response services.

To help bring an end to all forms of violence against children, 10 agencies with a long history of galvanizing a consistent, evidence-based approach to preventing violence against children collaborated to develop INSPIRE — a group of strategies and technical guidance distilled from the best available evidence and with the greatest potential to prevent and respond to physical, sexual, and emotional violence against children.

To access the INSPIRE framework, visit: who.int/violence_injury_prevention/violence/inspire/en/

INSPIRE Framework

INSPIRE is a technical package. The seven strategies are based on the best available evidence.

- Implementation and enforcement of laws
- Norms and values
- Safe environments
- Parent and caregiver support
- Income and economic strengthening
- Response and support services
- Education and life skills
II. UNDERSTANDING THE PROBLEM
Sexual violence against children is complex, can take many forms, and is influenced by various factors. It can be perpetrated by both adults and peers, those known and previously unknown to the child, by individuals working alone or in groups and gangs, and in diverse settings inside and outside the home, school, and the wider community. Childhood sexual violence differs from other forms of violence, such as physical or psychological violence, as child development and the capacity to consent influence its recognition as a crime. The diversity of experiences of sexual violence in childhood means that different prevention strategies may be needed to ensure the safety of children of different ages and in different contexts. Additionally, a critical challenge to the field is the myriad terms, definitions, and frameworks used to describe sexual violence against children.³

The umbrella term “sexual violence” used in this review references various acts, including child sexual abuse. Although definitions vary, it is critical to note that child sexual abuse includes acts that do not involve actual physical coercion or threat, but it can often be perpetrated through the use of flattery, bribes, allegiance, status, authority, and misrepresentation of social norms. In some instances, the recipient may not be aware of their own victimization or that sexual violence has been perpetrated against them. Such acts are serious crimes with significant negative impacts on a child’s development and health.⁴

In addition, it can sometimes be hard to get victims of such offenses to report them, and to get family and authorities to take the violence seriously, because these dynamics don’t conform to their notion of what a sexual “assault,” or sexual “violence,” looks like. In many of these cases, victims fear they will be blamed, and families doubt that juries or other decision-makers will see the crime. As such, some advocates prefer the term “abuse” to the terms “assault” or “violence.” Moreover, to help them understand the dynamics of the crime, education and training for the police, the judicial system, policymakers, and the community at large are critical for effective prevention.

EXPERT’S TAKE

Understanding Child Sexual Abuse

Dr. David Finkelhor, Director of the Crimes Against Children Research Center and a Professor of Sociology at the University of New Hampshire, USA

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There has been much debate about the causes of violence against children and a growing understanding that no single factor can explain why it happens. In the area of violence prevention, the social-ecological framework is widely used to understand the complex interactions of vulnerabilities and protective factors at levels including the individual child, families and interpersonal relationships, communities, and the wider societal and political contexts that contribute to the risk of both experiencing and becoming a perpetrator of violence.

Understanding these risk and protective factors at various levels can help identify opportunities for prevention. For this review, we chose to adopt a social-ecological framework adapted specifically for childhood sexual violence — taking into account various dimensions from the individual to the societal context — as an effective way to understand both the problem and effective solutions.

The framework for understanding sexual violence in childhood incorporates research on the following:

Harmonization of Definitions

A continued challenge for the field is the harmonization of definitions for various forms of sexual violence against children. As an example, a harmonized definition of one form of sexual violence against children, child sexual abuse, is still lacking. A systematic review of risk and protective factors for re-victimization after child sexual abuse was conducted in 2017, which highlighted the need to agree on standardized definitions of child sexual abuse and re-victimization, ensure well-validated and consistent measurement, and include additional populations in future research. Currently, there is considerable variability in definitions of child sexual abuse, and consensus on this term has yet to be established within the field, specifically with respect to age, sexual maturity, and the ability to grant consent (which impacts statutory sex offenses). Outstanding questions include how researchers conceptualize age, which impacts the research; how data is collected; and how to evaluate approaches to understanding and responding to risk and protective factors, given the lack of consensus on the definition used in research inquiries. While these challenges for research and data collection are ongoing, recent systematic reviews show consistent and alarming rates of child sexual abuse, even as we understand that only about half of victims disclose experiences of child sexual abuse to anyone. (For the definitions used in this review, see Part 5, Annex.)
• Gender (including gender inequality and gender norms), both as a driver for sexual violence and with respect to the different, gendered experiences of boys and girls

• Age and power imbalances between adults and children as a driver of sexual violence

• Developmental differences in experiences of sexual victimization, as both young children and adolescents are at risk of sexual violence in the family, but adolescents are typically exposed to a wider range of perpetrators outside the family, including peers and intimate partners

• Developmental differences in the impact of sexual violence, especially in terms of trauma and coping responses

SOCIAL-ECOLOGICAL FRAMEWORK

CONTEXT

SETTING

RELATIONSHIP

VICTIMIZATION

Home
School
Workplace
Online world
Religious organizations
Neighborhood
Sports and leisure
Travel and tourism
Armed conflict
Crisis emergency
Social norms
Migration
Rule of law
Socioeconomic development
Governance
Care system
Justice system
Person in authority/ position of trust
Somebody known
Boyfriend/ girlfriend/date
Gang
Family
Stranger
Rape
Child abuse images
Non-contact abuse
Oral/anal penetration
Sexual touching
Solicitation of a child
Sexual exploitation and prostitution

Non-contact abuse
Child abuse images
Oral/anal penetration
Solicitation of a child
Socioeconomic development

Rape
Child abuse images
Non-contact abuse
Oral/anal penetration
Solicitation of a child
Sexual exploitation and prostitution
Drawing on research on violence against children, the diagram below illustrates some of the risk factors for sexual violence victimization and perpetration at each level of the social-ecological framework.

**INDIVIDUAL**
- **Victimization**
  - Gender
  - Age
  - Sexual orientation
  - Gender identity
  - Lack of education
  - Orphanhood
  - Alcohol and drug use
  - Social isolation
  - Physical or mental disabilities
- **Perpetration**
  - Alcohol and drug use
  - Delinquency
  - Lack of empathy
  - General aggressiveness and acceptance of violence
  - Early sexual initiation
  - Coercive sexual fantasies
  - Preference for impersonal sex and sexual risk-taking
  - Exposure to sexually explicit media
  - Hostility towards women
  - Adherence to traditional gender role norms
  - Hypermasculinity
  - Suicidal behavior
  - Prior sexual victimization or perpetration

**RELATIONSHIP**
- **Victimization**
  - Parental/family support
  - Family disintegration
  - Weak parent-child attachment
  - Lack of awareness (on behalf of the parents) of risks and vulnerabilities of children to sexual violence
  - Child maltreatment (re-victimization)
  - Association with sexually aggressive peers/groups
  - Involvement in crime (gangs)
- **Perpetration**
  - Family environment characterized by physical violence and conflict
  - Childhood history of physical, sexual, or emotional abuse
  - Emotionally unsupportive family environment
  - Poor parent-child relationships, particularly with fathers
  - Association with sexually aggressive, hypermasculine, and delinquent peers
  - Involvement in a violent or an abusive intimate relationship
  - Family honor considered more important than the health and safety of the victim
  - Strong patriarchal relationship or family environment

**COMMUNITY**
- **Victimization**
  - Violence in the community
  - Poor police service or response
  - Weak community sanctions against perpetrators of sexual violence
  - Poverty
  - Attitudes regarding age, development, and sexual behavior
  - Lack of awareness of risks and vulnerabilities of children to sexual violence
  - Weak institutional support from police and judicial systems and social welfare systems, including low levels of reporting sexual violence to authorities
  - Social tolerance of sexual violence in communities
- **Perpetration**
  - Poverty, disparities, and exclusion
  - Low socioeconomic status
  - Lack of employment opportunities
  - Lack of institutional support from police and judicial system
  - General tolerance of sexual violence within the community
  - Weak community sanctions against sexual violence perpetrators

**SOCIETY**
- **Victimization**
  - Poor economic development
  - Violence-supportive social norms
  - Weak legal sanctions and poor child protection systems
  - Acceptance of child labor
  - Armed conflict
  - Humanitarian crisis
  - Lack of recognition/acceptance of boys as potential victims under the law
  - Norms granting adults control over children
  - Lack of a safeguarding culture, and inherent societal trust in adults who serve children (schools, religious groups, youth-serving organizations)
- **Perpetration**
  - Societal norms that blame victims, promote silence, and exonerate perpetrators
  - Societal norms that support male superiority and sexual entitlement
  - Societal norms that maintain females’ inferiority and sexual submissiveness
  - Weak laws and policies related to sexual violence and gender equality
  - Gender inequality
  - High levels of crime and other forms of violence
  - Acceptance of violence as a way to solve conflict
  - Notion of masculinity linked to dominance, honor, or aggression
  - Inadequate provisions of services to children and women experiencing sexual violence

While many perpetrators of sexual violence against children are adults, children and adolescents under the age of 18 also perpetrate sexual violence against children/other children. Child and adolescent perpetrators are typically viewed as fundamentally different from adult perpetrators, and research in neuroscience and developmental criminology reinforces the understanding that there are profound differences among adults, children, and adolescents in terms of their capacity to regulate emotions, control their behavior, and weigh the costs and benefits of decisions.

The unique considerations of child development and the perpetration of child sexual violence by children and adolescents have significant implications for policy, practice, and, in particular, prevention efforts. It is critical to note that the perpetration of sexual offenses by children and adolescents is not necessarily indicative of an ongoing risk for future perpetration.

Despite the evidence that child and adolescent perpetrators are developmentally unique from adults, in some justice systems offenders under the age of 18 are treated as adults or perceived as having the potential to become adult offenders, despite evidence that disputes this assumption. This failure to distinguish between adult perpetrators and children and adolescents who perpetrate sexual violence can have severe consequences for children and adolescents, including increased risk of mental health issues and suicide. Effective prevention efforts must then recognize the unique developmental status of children and adolescents. 10

Frameworks focused on violence against children have generally excluded critical gender and age dimensions, often failing to capture specific types of sexual violence and effectively integrate a life-course approach. One example of this is violence that occurs in adolescent dating relationships — and how it is exacerbated by gender inequality. An intersectional approach 11 is necessary to understand and address the overlapping and intersecting risk factors for victimization. While the Convention on the Rights of the Child (CRC) has been instrumental in guiding progress over the decades to address violence against children, it does not offer a nuanced perspective related to age and gender, which is particularly problematic for the vulnerabilities experienced by adolescents, especially adolescent girls. Additionally, the issue of sexual violence in childhood and adolescence overlaps with many other areas of research and action, including intimate partner violence; child, early, and forced marriage; and others.
On the other hand, frameworks focused on violence against women and gender-based violence have not adequately integrated a developmental perspective and often lack a focus on the different needs and experiences of children and adolescents — including how violence against women impacts both boys and girls.

Article 1 of the CRC defines a child as a person below the age of 18, unless the laws of a country determine the legal age for adulthood to be younger. Because there are significant differences between children at different stages of development, there is a further distinction between various stages of childhood for this review. The term “adolescent” is not intended to replace the use of “children” but instead to provide an additional term to describe specific ages, maturation, and life stages of individuals aged 10-17. We understand that the terms “children” and “adolescents” take on different meanings in different contexts. However, UN organizations use different ranges to further divide age cohorts within childhood, with no broadly agreed-upon categorization. For this review, wherever possible, we differentiate among early childhood (0-4 years), childhood (5-9 years), early adolescence (10-14 years), and late adolescence (15-17 years).

While there are similar age-related vulnerabilities for children and adolescents, the settings and types of sexual violence experienced vary depending on a child’s age and gender. Both age and gender play a critical role in defining risk and protective factors, and prevention interventions and strategies must be framed within an understanding of the specific set of vulnerabilities experienced by boys and girls at different points in their development. Age also plays a critical role in establishing consent, which is addressed later in this review.

Research suggests that boys and girls have different risk factors for and experiences of sexual violence and can also experience different short- and long-term impacts. The nature of sexual violence and its impact can also be dependent on the context (e.g., in marital and non-marital or dating relationships, harmful practices such as female genital mutilation and/or cutting, or child, early, and forced marriage). Gender is complex and culturally constructed, with vast implications for the prevention of sexual violence. For example, gender inequality can influence access to resources, mobility, and agency in relationships, and gender norms that condone violence can help perpetuate impunity. Most research on preventing sexual violence against children does not examine the nuances associated with gender roles or gender identity. As such, wherever possible, given the nature of the available evidence, this review will examine the effectiveness of interventions for preventing sexual violence based on a child’s assigned sex (female or male) to ascertain whether an intervention is effective for boys, girls, or both.
Intersectionality is a term that was coined in 1989 by Kimberlé Crenshaw, a civil rights activist and legal scholar in the United States, as a way to help explain the specific oppression of African-American women. This concept has become more widely used as a tool to examine how experiences of structural inequalities based on race, gender, sexual orientation, age, and citizenship status intersect and compound experiences of oppression. We examined programs and practices that can support and prevent experiences of sexual violence among gender-diverse children and adolescents, those who identify as LGBTQI, as well as children with disabilities.

Overall, there is a significant lack of evidence on what works to prevent sexual violence when taking into account the forms of oppression against various marginalized populations where intersections occur; research in these areas is urgently needed.

PREVALENCE OF SEXUAL VIOLENCE AGAINST CHILDREN

All children can be the target of sexual violence, and data suggest that girls are generally at higher risk for it. Global estimates show that 120 million (or one in 10) girls under the age of 20 have experienced some form of forced sexual contact. Global estimates for boys are currently not available. However, an analysis of available data for 24 countries (primarily in high- and middle-income countries) showed that sexual violence in childhood ranged from 8% to 31% for girls and 3% to 17% for boys.

<table>
<thead>
<tr>
<th>Country</th>
<th>Girls</th>
<th>Boys</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>El Salvador</td>
<td>14%</td>
<td>3%</td>
</tr>
<tr>
<td>Eswatini</td>
<td>38% N/A</td>
<td></td>
</tr>
<tr>
<td>Haiti</td>
<td>26%</td>
<td>21%</td>
</tr>
<tr>
<td>Honduras</td>
<td>16%</td>
<td>10%</td>
</tr>
<tr>
<td>Kenya</td>
<td>32%</td>
<td>18%</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>7%</td>
<td>12%</td>
</tr>
<tr>
<td>Malawi</td>
<td>22%</td>
<td>15%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>25%</td>
<td>11%</td>
</tr>
<tr>
<td>Rwanda</td>
<td>24%</td>
<td>10%</td>
</tr>
<tr>
<td>Tanzania</td>
<td>27%</td>
<td>12%</td>
</tr>
<tr>
<td>Uganda</td>
<td>35%</td>
<td>17%</td>
</tr>
<tr>
<td>Zambia</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>33%</td>
<td>9%</td>
</tr>
</tbody>
</table>

Percentage of youth who experienced sexual violence prior to age 18

All data among 18- to 24-year-olds from the Violence against Children and Youth Surveys (VACS), led by the U.S. Centers for Disease Control and Prevention (CDC), as part of the Together for Girls partnership.
Two recent meta-analyses of global prevalence studies focused specifically on child sexual abuse have produced strikingly similar estimates. The first analysis included 65 articles involving 37 male and 63 female samples across 22 countries, totaling more than 10,000 individuals. Definitions of child sexual abuse in the studies varied, with an upper age limit ranging from 12 to 17 years and approximately two-thirds of the studies including non-contact child sexual abuse. The investigators reported a combined mean prevalence of child sexual abuse in 7.9% of males and 19.7% of females, with the highest rates occurring in Africa and the lowest in Europe. The second analysis included data from 331 studies representing nearly 10 million individuals. In this analysis, the total combined prevalence was 11.8%, with 7.6% of males and 18% of females reporting experiences of child sexual abuse. In this analysis, Asia reported the lowest combined prevalence for both boys and girls, while Africa had the highest prevalence for boys and Australia the highest prevalence for girls.

**CHILDREN WHO EXPERIENCE SEXUAL VIOLENCE ARE NOT GETTING THE SUPPORT AND SERVICES THEY NEED**

**GIRLS**

- Told someone about sexual violence: 57%
- Sought services for sexual violence: 73%
- Received services for sexual violence: 38%

**BOYS**

- Told someone about sexual violence: 53%
- Sought services for sexual violence: 51%
- Received services for sexual violence: 27%

- **UGANDA**
  - Told someone about sexual violence: 10%
  - Sought services for sexual violence: 16%
  - Received services for sexual violence: 5%

- **EL SALVADOR**
  - Told someone about sexual violence: 8%
  - Sought services for sexual violence: 15%
  - Received services for sexual violence: 4%

- **NIGERIA**
  - Told someone about sexual violence: 5%
  - Sought services for sexual violence: 10%
  - Received services for sexual violence: 2%

Youth who told someone about, sought services, and/or received services for sexual violence, among those who experienced sexual violence prior to age 18.
Over the last decade, significant efforts have been undertaken to improve data for LMICs through the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), and Violence Against Children and Youth Surveys (VACS). These have shown similar ranges.

Additionally, extensive research has documented that in HICs, as well as LMICs, children are most likely to experience sexual violence perpetrated by someone they know, including immediate family members such as parents and siblings, more distant relatives, family friends and other members of the household, or close and trusted individuals. Perpetrators of sexual violence also often include intimate partners of adolescents as well as community members such as teachers, coaches, and peers at school and others within the community, such as religious leaders. Adolescence is a period of increased vulnerability to sexual violence, especially for girls.
Sexual violence against children can be perpetrated anywhere, yet it is most commonly reported to be within familiar and known locations. Home, school, and community are all settings where children and adolescents face risk of sexual violence. The family or child’s home is the most frequently mentioned location for sexual assaults and rapes of children. Additionally, threats of sexual violence are rampant in the online environment. Recent research found that technology-facilitated sexual violence often co-occurred with “teen dating” violence (intimate partner violence) among adolescents.

INTERPOL’s International Child Sexual Exploitation (ICSE) image and video database has intercepted more than 1.5 million images and videos. Following the examination of random selection of videos and images in the ICSE database, INTERPOL and ECPAT International published a joint report in February 2018 entitled “Towards a Global Indicator on Unidentified Victims in Child Sexual Exploitation Material.” The study identified a number of alarming trends:

- The younger the victim, the more severe the abuse
- 84% of images contained explicit sexual activity
- More than 60% of unidentified victims were prepubescent, including infants and toddlers
- 65% of unidentified victims were girls
- Severe abuse images were likely to feature boys
- 92% of visible offenders were male

Workplace settings — especially in exploitive, isolated, or informal settings and including bonded domestic or forced labor — are especially precarious environments for children and adolescents. Religious organizations, youth-serving organizations, and competitive sports can often provide a context where children and adolescents are also vulnerable to physical, sexual, and psychological abuse from peers, mentors, leaders, and coaches. Alternative living settings, such as residential, foster care, or justice facilities, create additional vulnerability to sexual violence. In addition, the route to school and school settings are places where sexual violence against children and adolescents occurs.
Online Child Sexual Exploitation and Abuse

Online child sexual exploitation and abuse (CSEA) is an emerging area of intervention. Policy frameworks, justice systems, and law enforcement organizations struggle to keep pace with the increasing issue of online CSEA, as the internet and mobile devices become a bigger part of adolescents’ lives and a growing conduit for CSEA. For younger generations, who increasingly conduct much of their social and personal lives online, there exist unique risk factors that often constitute unfamiliar and uncharted territory for many adults and policy- and decision-makers. In fact, for most adolescents and young people, the divide between their offline and online lives and selves is an artificial construct.

In 2016, the Canadian Centre for Child Protection conducted a study reviewing close to 152,000 reports and examined 43,762 unique images and videos classified by Cybertip.ca as child sexual abuse material. The report highlights the serious prevalence of child sexual abuse material on the internet and the need for more to be done to identify the children portrayed in the images and videos, stop offenders, and reduce the availability and continued distribution of this content.
In the analyzed images, as the age of the children decreases, the sexual abuse and sexual exploitation acts become more intrusive. Key findings include the following:

- 78.3% of the images and videos assessed depicted very young, prepubescent children under 12 years old
- 63.4% of those children under 12 years old appeared to be under 8 years of age
- 6.7% of those children under 8 years old appeared to be babies or toddlers
- 80.4% of the children were girls
- 77.1% of the children’s faces were visible in the images and videos
- 50% of the images and videos involved explicit sexual activity/assaults and extreme sexual assaults
- 53.9% of the abuse acts against children under 12 years old involved explicit sexual activity/assaults and extreme sexual assaults
- 59.7% of the abuse acts against babies and toddlers involved explicit sexual activity/assaults and extreme sexual assaults
- 68.7% of the images and videos appeared to be in a home setting, of which 69.91% captured explicit sexual activity/assaults and extreme sexual assaults
- 83.4% of the adults visible in the images and videos were males
- 97.3% of the content involved explicit sexual activity/assaults and extreme sexual assaults when adult males were visible with the children in the images and video

In 2018, WePROTECT Global Alliance published an emerging threat assessment to better understand the scale of online CSEA and challenges in preventing and addressing it, which led to the development of the Model National Response to Preventing and Tackling CSEA, detailed on Page 46. Unfortunately, there is still very little evidence about the effectiveness of many interventions specific to preventing online CSEA. However, as the Model National Response indicates, several strategies and interventions detailed in this review can be helpful to prevent sexual violence both online and off.

The full report is available at weprotect.org/
Sexual violence against children is shrouded in silence and stigma. As a result, many victims never disclose their experiences or seek help. The reasons for this are varied but can include fear of retaliation, guilt, shame, confusion, lack of confidence in the abilities or willingness of others to help, and lack of knowledge of available support services. We know that sexual violence occurs at alarming rates, often within familiar settings and perpetrated by someone known to them, yet children often do not disclose their experiences of sexual violence and seek help, and instead live and suffer in silence. It is critical to understand that sexual violence against children is a silent epidemic; therefore, if we consider it only from the response side and through the lens of prevalence data, we see only the tip of the iceberg and miss a clear majority of the cases and, as a result, a broader understanding of what works to prevent it.
Young survivors who disclose their experience often share with someone with whom they are close

% of females and males who told a friend or neighbor, intimate partner, or family member/relative about any incident of sexual violence, among those who experienced sexual violence prior to age 18

Even when boys and girls do disclose sexual violence, very few receive services due to stigma and fear of consequences

% of females and males who received services after experiencing sexual violence, among those who experienced sexual violence prior to age 18

*Estimate may be unreliable
MOST COMMON REASONS FOR NOT SEEKING SERVICES AFTER EXPERIENCING SEXUAL VIOLENCE, AMONG THOSE WHO EXPERIENCED SEXUAL VIOLENCE PRIOR TO AGE 18

**GIRLS**
- Did not want/need services or did not think it was a problem: 31%, 58%, 62%
- Afraid of causing more violence or getting in trouble: 42%, 14%, 13%
- Embarrassment for self or family: 11%, 8%, 15%

**BOYS**
- Did not want/need services or did not think it was a problem: 85%, 65%, 56%
- Afraid of causing more violence or getting in trouble: 8%, 9%, 12%
- Embarrassment for self or family: 5%, 3%, 19%

*Estimate may be unreliable*
FOCUSING ON SOLUTIONS — WHAT WORKS TO PREVENT SEXUAL VIOLENCE AGAINST CHILDREN AND ADOLESCENTS?
The INSPIRE framework offers an effective, evidence-based way to organize and categorize prevention interventions. These seven strategies in INSPIRE were selected based on existing evidence to address both risk and protective factors for preventing violence against children using the social-ecological model and its four levels — individual, relationship, community, and society. The strategies are as follows:

- Implementation and enforcement of laws
- Norms and values
- Safe environments
- Parent and caregiver support
- Income and economic strengthening
- Response and support services
- Education and life skills

As with INSPIRE, this evidence review is aligned with the 2030 Sustainable Development Goals (SDGs), 17 transformative and ambitious goals to be achieved by 2030 in order to improve the human condition and sustainability of our planet. SDG 16.2 specifically seeks to “End abuse, exploitation, trafficking and all forms of violence against and torture of children.” Preventing and addressing violence against children is key to achieving many of the SDGs.
The research process for this evidence review involved a rigorous and comprehensive review of available academic literature as conducted through PubMed/EBSCO databases and grey literature, including reports produced by relevant UN entities, governments, NGOs, and research institutes. Initial keyword searches focused on the types of violence identified in our framework for understanding the problem (detailed in Part 2: Understanding the Problem) and interventions that target each level of the social-ecological model components and INSPIRE strategies. In addition, numerous consultations were undertaken with stakeholders and experts to capture case studies, expert opinions, challenges, and gaps.

**RESOURCE**

**Economist Intelligence Unit’s Out of the Shadows Index**

The Out of the Shadows Index is a benchmarking index developed by the Economist Intelligence Unit to cast a spotlight on how 40 countries are addressing sexual violence against children. The Out of the Shadows Index does not attempt to measure the scale of the problem in each country and does not provide information on the prevalence of sexual violence against children. Rather, it serves as a tool to show how child sexual abuse and exploitation are being prioritized at the national level, highlighting areas for advancement against the UN’s Sustainable Development Goals, which include a target to end all forms of violence against children by 2030 (SDG 16.2).

An overview of key findings of the index and additional research conducted in its development include the following:

- Child sexual abuse and exploitation are ubiquitous and pressing concerns for both wealthy and poor countries alike
- Data to measure and understand the scale of the problem are lacking
- Girls are the primary victims, and boys are overlooked
- Social norms and attitudes toward sex, sexuality, and gender matter
- Country action has been most pronounced on the legal framework, while performance varies greatly on government commitment and capacity
- Combating child sexual abuse and exploitation is becoming a priority in many countries, and progress is possible even in the face of limited resources

For more information, visit [outoftheshadows.eiu.com](http://outoftheshadows.eiu.com/)

**METHODOLOGY**

The research process for this evidence review involved a rigorous and comprehensive review of available academic literature as conducted through PubMed/EBSCO databases and grey literature, including reports produced by relevant UN entities, governments, NGOs, and research institutes. Initial keyword searches focused on the types of violence identified in our framework for understanding the problem (detailed in Part 2: Understanding the Problem) and interventions that target each level of the social-ecological model components and INSPIRE strategies. In addition, numerous consultations were undertaken with stakeholders and experts to capture case studies, expert opinions, challenges, and gaps.
INCLUSION CRITERIA

• Completed reviews or individual studies, including randomized control trials, quasi-experimental studies, cohort evaluations, qualitative studies with pre- and post-test design, and case studies

• Studies focusing on primary prevention interventions, with some consideration of secondary prevention, along with any evidence that shows effective outcomes around sexual violence prevention

• Studies from all countries were included, with a focus on LMICs, with some consideration also given to include select studies from HICs with potential for applicability in LMICs

• No time limit

• Only articles in English were included
## Classifications Used in This Evidence Review

In this review, interventions were classified as “effective,” “promising,” “prudent,” “conflicting,” “no effect,” and “harmful” based on the following criteria, adapted from the INSPIRE framework.

<table>
<thead>
<tr>
<th>Classification</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Effective</strong></td>
<td>At least two high- or moderate-quality impact studies using randomized controlled trial and/or high-quality quasi-experimental designs have found favorable, statistically significant impacts in one or more sexual violence against children domains (e.g., child sexual abuse (CSA), intimate partner/dating violence); the intervention is deemed recommended based on high-quality meta-analyses and systematic reviews of findings from evaluations of multiple interventions.</td>
</tr>
<tr>
<td><strong>Promising</strong></td>
<td>At least one quality quasi-experimental study has found favorable, statistically significant impacts in one or more sexual violence against children domains (e.g., CSA, intimate partner/dating violence); at least one high- or moderate-quality impact study using randomized controlled trial and/or high-quality quasi-experimental designs has found favorable, statistically significant impacts for one or more risk or protective factors for sexual violence against children (such as positive parenting skills, communication between parents and children about effective strategies for avoiding exposure to violence, increased disclosure, increased knowledge of protective behaviors).</td>
</tr>
<tr>
<td><strong>Prudent</strong></td>
<td>Clinical experience, descriptive studies, reports of expert committees, respected authorities, or global treaties/resolutions have determined the intervention as critical for preventing sexual violence against children.</td>
</tr>
<tr>
<td><strong>Conflicting</strong></td>
<td>Evidence from different high-quality studies shows conflicting results on one or more sexual violence against children domains (e.g., some are found to be effective and some are found to have no effect, cause harm, or increase risk). Evidence is drawn from two comparable studies (where studies meet one of the above criteria).</td>
</tr>
<tr>
<td><strong>No Effect</strong></td>
<td>At least two high- or moderate-quality impact studies using randomized controlled trial and/or high-quality quasi-experimental designs have not found statistically significant impacts in one or more sexual violence against children domains.</td>
</tr>
<tr>
<td><strong>Harmful</strong></td>
<td>Evidence from at least two high- or moderate-quality studies shows that this intervention can cause unintended harm or increase risk.</td>
</tr>
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The following sections present the results of the review of the effectiveness of interventions as they apply to different age groups of boys and girls and highlight the geographic source of the evidence (HICs or LMICs). The INSPIRE framework is the basis for how the interventions are classified and presented.

**FINDINGS**

The following sections present the results of the review of the effectiveness of interventions as they apply to different age groups of boys and girls and highlight the geographic source of the evidence (HICs or LMICs). The INSPIRE framework is the basis for how the interventions are classified and presented.

**DATA GAP**

The Impact of Combined Interventions and Addressing Predictors

Several of the interventions described in this review fall neatly within a given category. However, there are a few that combine multiple interventions. As described in the introduction, given the high rates of poly-victimization, more research is needed on how certain interventions can affect multiple types of violence against children (a holistic approach), and more research is needed to ascertain the combined effect of various types of interventions to prevent one or multiple forms of violence. For example, Lucie Cluver and colleagues have found that combining two interventions listed in INSPIRE (cash transfers and positive parenting) had a much stronger effect on reducing HIV risk behavior among adolescents when delivered together than on their own. Similar studies examining the effects of intervention combinations on sexual violence against children are needed. In addition, more and better research is needed to understand context- and country-specific risk factors and to ascertain how addressing risk factors or enhancing protective factors can help reduce sexual violence against children. As an example, in South Africa, longitudinal predictors of child sexual abuse against girls include experiencing child sexual abuse, dropping out of school, and witnessing community physical violence. The study found there were no clear predictors of child sexual abuse for boys. Theoretically, ensuring fewer girls drop out of school could therefore be an effective strategy for preventing child sexual abuse among girls.
IMPLEMENTATION AND ENFORCEMENT OF LAWS
OVERVIEW/RATIONALE OF INTERVENTIONS

International and domestic laws play a role in establishing and coordinating protection, prosecution, and recovery responses for child and adolescent victims of sexual violence, and they provide an enabling environment for prevention. Laws are important at different levels and stages of intervention. At the international level, laws and legal frameworks offer guidance on the substance and implementation of domestic legislation. At the domestic level, laws are broadly important for at least two reasons: First, they provide the framework and appropriate tools to punish offenders and protect victims through the criminal justice and child protection systems; second, laws can serve as protective measures for children and adolescents by deterring would-be perpetrators of sexual violence. Overall, ensuring a strong legal framework, implemented alongside a strong child protection system, is a critical foundation for prevention.28 As summarized by David Finkelhor, “The most elemental thing the criminal justice system can do about a crime is to increase its detection and disclosure and the likelihood that the offender will be arrested and prosecuted.”29

RATIFYING INTERNATIONAL TREATIES, FRAMEWORKS, AND LEGISLATION

There are several international legal frameworks that address forms of sexual violence against children and adolescents.30 However, they are primarily focused on sexual exploitation. The single most relevant international framework is the Convention on the Rights of the Child (CRC).31 The 41 standards included in the CRC constitute the first legally binding international instrument regarding the rights of children,32 and in 2002, the signatory states reaffirmed their commitment by adopting the “A World Fit for Children” UN General Assembly resolution.33 Despite the ongoing commitment among signatory states, early reviews of the CRC highlighted challenges for its implementation at the domestic level, citing the need to involve the judicial systems in the process.34

SUMMARY OF INTERVENTIONS: IMPLEMENTATION AND ENFORCEMENT OF LAWS

<table>
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<tr>
<th>How it aligns with key SDGs</th>
<th>Relevant stakeholders</th>
</tr>
</thead>
</table>
| 5.c: Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels | • Civil society organizations  
• Community leaders  
• Criminal justice system |
| 16.3: Promote the rule of law at the national and international levels and ensure equal access to justice for all | • Government  
• Law enforcement  
• Youth at risk of sexual violence |

Summary or rationale: Laws provide the framework for the protection, prosecution, and support mechanisms for child and adolescent victims of sexual violence

Effects: • The establishment of mechanisms to enable access to justice and support for victims of sexual violence  
• Potential reduction in sexual offenses against children and adolescents

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IMPLEMENTING AND ENFORCING LAWS THAT CRIMINALIZE VARIOUS FORMS OF SEXUAL VIOLENCE AGAINST CHILDREN AND ADULTS

International laws, treaties, and frameworks (including those put forward by regional bodies) are important because they provide the foundation for domestic legislative responses to child and adolescent sexual violence. There is a range of guidance on the implementation of child protection laws, but the most fundamental features are the enforcement mechanisms. However, the adoption of specific legislation demonstrates that there is political will to address the issue, with research highlighting that the adoption of legislation is often accompanied by a series of preventative efforts, including increased awareness-raising.41 Research in HICs indicates that the adoption of legislation, combined with the establishment of strong partnerships with civil society organizations and awareness-raising initiatives, is important for social change to ensure both women’s and children’s rights are upheld.42

In addition, it is critical that legislation protect all children — both boys and girls — from victimization. However, boys are often overlooked. In a review of over 60 countries, the Out of the Shadows Index developed by the Economist Intelligence Unit found that boys who are victims of sexual violence are largely overlooked, with almost half of the analyzed countries lacking protection for boys in their rape laws.43

Measuring the impact of domestic legislation is challenging. For criminal justice law, evidence of effectiveness often relies on the number of victim and offender identifications, prosecutions, and convictions. Measuring the social change that is associated with the adoption and enforcement of laws, however, is complex, and there is little research that explicitly identifies the impact of domestic legislation directed at reducing child and adolescent sexual violence. This is not to suggest that there is no impact, but rather that laws need to be adopted alongside additional preventive measures and the impact of adoption further evaluated.
CASE STUDY

NetClean and VidaNyx

NetClean is a company focused on developing technology solutions to protect children by equipping multinational corporations and other businesses, government agencies, and public sector organizations with the tools to detect child sexual abuse material.

NetClean ProActive technology works similarly to an anti-virus program, but instead it detects images and videos that law enforcement agencies have classified as child sexual abuse material. When material is found, information is provided to law enforcement, increasing the likelihood of identifying and rescuing children experiencing sexual abuse and exploitation.

Since 2015, NetClean has issued a yearly report on child sexual abuse with data collected from law enforcement organizations specializing in child sexual abuse crimes, contributing to the global knowledge base on the incidence and nature of child sexual abuse, as well as the responses mounted by law enforcement and employers.

For more information, visit netclean.com/

VidaNyx is a sustainable social enterprise that offers a cloud-based video management solution (SaaS) for forensic interviews to protect victims of child sexual abuse and support child advocacy centers. Child advocacy centers using VidaNyx can reduce their core operating costs related to processing forensic interviews by up to 95% and case processing time by 67%. The savings enable these centers to devote more resources to prevention and community outreach.

From a system change point of view, the aggregated data will help advance the speed at which the sector learns about best practices related to minimizing post-traumatic stress disorder in victims.

For more information, visit vidanyx.com

This intervention was categorized as **PRUDENT**

The implementation and enforcement of laws that criminalize various forms of sexual violence against children and adults (including child sexual abuse, child marriage, marital rape, online sexual violence, and sexual exploitation) is a critical step in establishing a strong legal framework for both prevention and response. Criminalizing certain acts creates the necessary legal frameworks for prosecution of offenders and justice for victims, supports a child’s right to recovery and reintegration, and creates an enabling environment for other prevention strategies.

An example is the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse, also known as “the Lanzarote Convention,” which requires criminalization of all kinds of sexual offenses against children. It sets out that states in Europe and beyond shall adopt specific legislation and take measures to prevent sexual violence, to protect child victims, and to prosecute perpetrators.44
Similarly, in recent years, federal, state, and territory governments in Australia have taken a series of unprecedented and important steps related to the prevention of child sexual abuse, such as updating their legal and policy frameworks and emphasizing prevention through organizational policy, screening, codes of conduct, monitoring implementation, safe environments, education/training, and responding and reporting.45

The Australian government convened a Royal Commission into Institutional Responses to Child Sexual Abuse to respond to widespread child sexual abuse in child- and youth-serving organizations (CYSOs) and the need to create better prevention, case identification, and responses.46 Through case studies, research, and over 8,000 individual consultations, the Royal Commission identified weaknesses in CYSO prevention and made recommendations for reform of law, policy, and practice to enhance child sexual abuse prevention in CYSOs. These recommendations included a focus on external regulation and oversight, recognizing that compliance by CYSOs with sound prevention measures is best supported by legislation.47

The Royal Commission recommended implementation of 10 Child Safe Standards in CYSOs. These standards are consistent with the social science and situational crime prevention literature.48 These models emphasize prevention through organizational policy, screening, codes of conduct, monitoring implementation, safe environments, education/training, and responding and reporting.49 The Royal Commission recommended that CYSOs adopt the 10 Child Safe Standards to better prevent, identify, and respond appropriately to child sexual abuse. It recommended that governments across the nation should implement these measures through legislation.

In condensed form, Recommendations include the following:

- All institutions should uphold the rights of the child and act with the best interests of the child as the primary consideration; to achieve this, institutions should implement the Child Safe Standards

**EXPERT’S TAKE**

**Results of the Australian Royal Commission into Institutional Responses to Child Sexual Abuse**

Dr. Ben Mathews, Queensland University of Technology, Australia

The Australian government convened a Royal Commission into Institutional Responses to Child Sexual Abuse to respond to widespread child sexual abuse in child- and youth-serving organizations (CYSOs) and the need to create better prevention, case identification, and responses.46 Through case studies, research, and over 8,000 individual consultations, the Royal Commission identified weaknesses in CYSO prevention and made recommendations for reform of law, policy, and practice to enhance child sexual abuse prevention in CYSOs. These recommendations included a focus on external regulation and oversight, recognizing that compliance by CYSOs with sound prevention measures is best supported by legislation.47

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- All institutions should uphold the rights of the child and act with the best interests of the child as the primary consideration; to achieve this, institutions should implement the Child Safe Standards
The Child Safe Standards should be adopted in the new National Principles for Child Safe Organisations and endorsed by the Council of Australian Governments.

State and territory governments should require all institutions engaging in child-related work to meet the Child Safe Standards.

Legislative requirements to comply with the Child Safe Standards should cover all institutions providing education, health, religious, childcare, coaching, and residential functions, as well as multiple other designated services and activities.

State and territory governments should ensure there is an independent oversight body to monitor and enforce the Child Safe Standards.


Although still legal in many societies, child marriage presents a significant risk of intimate partner abuse and sexual abuse for girls in many nations due to the strong correlation between age disparity and intimate partner abuse, and the privileging of male status and power that often exists where child marriage is widespread. A review examining the impact of minimum-age-of-marriage laws in 115 LMICs found that countries with strict laws setting the minimum age of marriage at 18 experienced the most dramatic reduction in rates of child marriage and accompanying adolescent fertility. Trends in countries that set the minimum age of marriage at 18 but allowed exceptions (for example, marriage with parental consent) were indistinguishable from countries that had no such minimum-age-of-marriage law. Thus, policies that adhere strictly to global norms are more likely to elicit desired outcomes.

### Laws on Child, Early, and Forced Marriage

One third of girls in the developing world are married before the age of 18 and 1 in 9 are married before the age of 15. If present trends continue, 150 million girls will be married before their 18th birthday over the next decade. That’s an average of 15 million girls each year. While countries with the highest prevalence of child marriage are concentrated in Western and Sub-Saharan Africa, due to population size, the largest number of child brides reside in South Asia.

This practice is exacerbated by gender inequality, poverty, and conflict, and it can have life-long consequences. In South Asia, more than one-third (24 million) of women between 20 and 24 years old reported being married before they turned 18.

Non-governmental organizations working in this space emphasize that a key component of responding to child, early, and forced marriages is a strong legal framework.
For example, Girls Not Brides recommends the following:

- National laws that reflect international and regional human rights standards
- Robust legal frameworks against child, early, and forced marriage are adopted that set the minimum legal age for marriage at 18 and protect women’s and girls’ rights
- Government develops a supportive policy framework with adequate resources
- Strengthened civil registration systems for birth and marriage
- Increased accountability for monitoring of national, regional, and community institutions

There are several recent examples of promising legislative change in areas known for a high prevalence of child, early, and forced marriage:

- In 2017, the UN Special Rapporteur annual report outlined the efforts made by the Malawi government to address child, early, and forced marriage and associated harmful practices, such as the violence inherent in sexual initiation ceremonies, through a broad, holistic policy agenda. In 2015, the government introduced the Marriage, Divorce and Family Relations Act, which increased the minimum age of marriage to 18 years.
- In 2017, the government of India strengthened its child marriage legislative framework by ruling the age of consent for “all purposes” to be 18 years. Child marriage is criminalized under the Prohibition of Child Marriage Act. Prior to this, while the law regarded the legal age of consent as 18, there was an exception when intercourse was between a man and his wife who was between the ages of 15 and 18 years. Despite this, an analysis of the most recent census data indicated that while child marriage had declined in rural areas, urban areas in India witnessed a 0.7% increase between 2001 and 2010.

This intervention was categorized as **PRUDENT**

**NOTIFICATION AND SEX OFFENDER REGISTRATION LAWS**

In HICs, domestically focused preventative legal measures tend to be grounded in laws that require registration, notification, vetting, and barring, as well as criminal record checks of offenders. England has a strong sex offender management system, which includes not just vetting, barring, registration, and notification, but also disruption policies and active identification and prosecution policies.

The United States has adopted a notification system via Megan’s Law, which ensures public access to information about registered sex offenders, also known as sex offender registration and notification (SORN), with an emphasis on informing the public if a sex offender is living in the area. The evidence suggests that SORN policies were not a significant predictor of recidivism.
Sex offender registration and public notification policies were intended to assist in the prevention and early detection of child sexual abuse, either by reducing the likelihood of sexual offense recidivism or preventing first-time sex crimes. Four studies examined the impact of federal and several state juvenile registration policies on sexual and violent recidivism, and failed to find any effect on sexual or violent recidivism rates. Three studies evaluated the effects of registration on the prevention of first-time sex crimes and failed to find any primary prevention effect. The collateral consequences associated with these policies are extremely negative. Treatment providers overwhelmingly perceive negative consequences associated with juvenile registration and notification. Worse, juvenile registration is associated with increased risk of attempting suicide, being approached by adults for sex, and experiencing sexual assault victimization.

However, it is also important to differentiate between adults and children who offend, as there is evidence that registering children adjudicated for sex crimes committed prior to age 18 is not effective and that it can in fact expose these children to further violence, as well as increase the risk for suicide and depression, as further detailed below.

**EXPERT’S TAKE**

**Juvenile Sex Offender Registration and Public Notification Policies**

*Dr. Elizabeth Letourneau, Director, Moore Center for the Prevention of Child Sexual Abuse, Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, USA*

Sex offender registration and public notification policies were intended to assist in the prevention and early detection of child sexual abuse, either by reducing the likelihood of sexual offense recidivism or preventing first-time sex crimes. Four studies examined the impact of federal and several state juvenile registration policies on sexual and violent recidivism, and failed to find any effect on sexual or violent recidivism rates. Three studies evaluated the effects of registration on the prevention of first-time sex crimes and failed to find any primary prevention effect. The collateral consequences associated with these policies are extremely negative. Treatment providers overwhelmingly perceive negative consequences associated with juvenile registration and notification. Worse, juvenile registration is associated with increased risk of attempting suicide, being approached by adults for sex, and experiencing sexual assault victimization.

Children who engage in problematic sexual behavior — including serious behavior that has harmed others — typically desist from such behaviors upon detection and present a low likelihood of recidivism. Without question, it is important to recognize the harm caused to victims by such behaviors and to ensure that such behaviors are not repeated. There are several well-validated, evidence-based interventions for youth with problematic sexual behavior. Juvenile SORN are not among these effective interventions.²²
IMPLEMENTING AND ENFORCING LAWS THAT MANDATE REPORTING OF SEXUAL VIOLENCE AGAINST CHILDREN BY DESIGNATED PROFESSIONALS

Because child sexual abuse is often difficult to detect, and in order to enhance the identification of cases, several countries and communities have enacted mandatory reporting laws requiring designated professionals (most often police, teachers, doctors, nurses, and social service providers) to report suspected cases to government child welfare agencies. The legislation’s aim is to enable early detection of cases of harm to children that might otherwise escape the notice of relevant authorities or helping agencies. It also reinforces the moral obligation on every adult citizen to care for and protect all children from abuse and harm and helps to create a culture that is more child-centered and less and less tolerant of abuse of children.

However, little research has explored the effects of mandatory reporting laws on the number of reports made and the outcomes of those reports for children. A 2016 study examined the impact of a new mandatory reporting law on reporting and identification of child sexual abuse over seven years in the state of Western Australia. As a result of the law, the number of notifications increased by a factor of 3.7, the number of investigated reports increased threefold, and the number of substantiated reports doubled — indicating that twice as many sexually abused children were being identified.

Similar research in Canada has also shown that mandatory reporting legislation significantly increases the number of children suspected of experiencing child sexual abuse that come in contact with child protection organizations. However, when reporting increases, the capacity of response services must also increase — as these studies found that as the number of referrals grew, it was not initially matched with the capacity to cope with the increased number of cases. Additionally, it is not clear whether increased reporting as a result of the implementation of mandatory reporting laws has improved overall well-being and health outcomes for children.

However, there is emerging concern that together with statutory rape laws and their enforcement, mandatory reporting laws can prevent adolescents who are engaged in consensual sexual relationships from seeking confidential sexual and reproductive health care (see Challenge Box: Establishing Consent). Mandatory reporting laws can take away agency of choice from adolescents; discourage them from seeking health services, including sexual and reproductive health services; and ultimately can violate their rights to health and privacy.

For example, in 2012, the Parliament of India passed the Protection of Children from Sexual Offences Act. According to the act, every crime of child sexual abuse should be reported. If a person who has information on any abuse fails to report it, they may face imprisonment up to six months, may be fined, or both. Many children’s rights and women’s rights organizations have criticized this provision for depriving children of agency. There may be many survivors who do not want to go through the trauma of the criminal justice system, but this provision does not differentiate. Furthermore, mandatory reporting may also hinder adolescents’ access to confidential sexual and reproductive health services.
The law presumes that all sexual acts with children under the age of 18 are sexual offenses. Therefore, two adolescents who engage in a consensual sexual act may also be punished under this law. This is especially a concern where an adolescent is in a relationship with someone of the same sex, a different caste, or a different religion. Parents have filed cases under this act to “punish” relationships of which they do not approve. 69, 70

There have been calls from the UN Committee on the Rights of the Child for governments to ensure that health care providers keep adolescents’ medical information confidential, and the UN Committee on the Elimination of Discrimination Against Women recognizes that lack of confidentiality deters women and girls from seeking health services, specifically sexual and reproductive health services, in instances of physical or sexual violence. 71 There is discord among human rights bodies on the balance between guaranteeing adolescents access to the reproductive health care that is their right and protecting them from perceived or actual instances of physical or sexual violence. 72 There is also concern that such laws can prevent abusers from seeking psychological treatment and victims from disclosing their own experiences of abuse in the context of mental health treatment. 73 Ultimately, mandatory reporting for children is a prudent practice, but for adolescents it has conflicting evidence and creates barriers to accessing health and other services.

**CHALLENGE**

**Establishing Consent**

Defining a legal age of consent to engage in sexual activity, including consent to share a sexual image, is critical to protecting children from sexual violence and abuse. As such, many countries have adopted statutory rape laws, which criminalize any sexual activity in which one of the individuals is below the age of consent. However, attitudes and beliefs about the age at which it is developmentally appropriate for children to engage in sexual intercourse vary across different cultures, and the legal age of consent ranges from age 12 to 18. A younger age of consent may expose children to a greater risk of sexual abuse and exploitation. Setting the age of consent too high can criminalize the behavior of many young people and expose them to increased risk in sexual relationships because advice on safe sex and contraception is also often denied them.

The concept of “evolving capacities” set out in Article 5 of the CRC recognizes that children acquire different competencies at different rates, and as they acquire enhanced capacities they
are more able to make their own decisions and have less need for adults to make decisions on their behalf.\textsuperscript{24} The development of capacities varies in different cultural contexts; children will be exposed to different life experiences (such as working for survival), and shared societal “norms” about what children can or cannot do will vary cross-culturally.

Laws that determine the age of consent can pose challenges for balancing children’s right to protection with respect for these evolving capacities. While some adolescents at age 14 can be capable of making informed choices about whether to have a sexual relationship with a person of their own or a similar age, others may not be ready to take this step. A particularly difficult situation arises if there is an age disparity or the adolescent has been manipulated or coerced and does not believe they are being sexually exploited.

Legal protection from sexual abuse and exploitation needs to take into consideration the situations where a child is unable to consent freely to sex. These situations should include threats of violence, grooming, power imbalances, intoxication, and being under the influence of drugs. Historically, sexual violence from males towards females, especially in intimate partner or dating relationships, has typically been the most difficult to get recognized and prosecuted as criminal behavior.\textsuperscript{25}


\textbf{ESTABLISHING VICTIM-SENSITIVE STANDARDS AND SPECIALIZED SERVICES FOR POLICING AND JUSTICE}

Establishing victim-sensitive standards for policing and justice is also an essential building block for effective prevention. A victim-centered approach is defined by a systematic focus on the needs and concerns of a victim to ensure the compassionate and sensitive delivery of age-appropriate services. A victim-centered approach seeks to minimize re-traumatization associated with the criminal justice process by providing the support of victim advocates and service providers, ensuring age-appropriate protections, and empowering victims as engaged participants in the process, where developmentally appropriate. Research in the United Kingdom has shown that specialized sexual violence services play particularly crucial roles through the use of approaches that can be characterized as flexible and that non-specialized services are unable to provide similarly targeted responses, to the detriment of victims of sexual violence.\textsuperscript{26}

For example, the number of times a child has to recount their victimization through the act of testifying can be detrimental to the child’s well-being and recovery. A study in the United States found that all children between the ages of 6 and 14 who had been the victims of child sexual abuse and testified showed significant improvement in mental health over time, but the group who testified more than once showed higher levels of emotional distress two years after the initial assessment.\textsuperscript{27}

Data from International Justice Mission’s (IJM) program in Guatemala suggests that a criminal justice response to sexual violence against children can be improved significantly, leading to an increase in sexual violence crimes reported to the authorities. Along with community-based awareness of the crime, consistent apprehension and punishment of perpetrators of sexual violence against children (SVAC) can have a beneficial influence on cultural norms.

From 2005 to 2017, IJM provided support to 465 victims of sexual violence against children and their families. In partnership with the public ministry (prosecution service) and the national police, more than 287 individuals were arrested and accused, contributing to the achievement of convictions against 267 individuals in the project area. IJM has provided training and mentoring for Guatemalan prosecutors and members of the designated police unit specializing in sexual assault.

IJM conducted a baseline and endline study of the Guatemalan government’s response to child sexual assault reports, evaluating case files from the period 2008-2012, and repeating the study for the period 2013-2017. The study found a 136% increase in the number of SVAC complaints filed.
Many key informants attributed the increase to a more prevalent reporting culture and more available information for victims and their families. Changes include:

- The criminal justice system substantially increased its use of victim-sensitive practices when gathering victim testimony. Whereas the use of victim-friendly spaces for gathering victims’ testimonies was uncommon at baseline (30% of cases), it became nearly universal at endline (98% of cases). The greatest improvement was seen in the use of Gesell Chambers (designated, trauma-informed facilities for victims to provide testimony outside the courtroom), which was non-existent at baseline (0 cases) but commonplace at endline (77% of cases).

- The volume of SVAC indictments increased 157% (1,560 at baseline vs. 4,002 at endline), but because there was also a rise in reporting, this represented only a moderate increase in the percentage of SVAC complaints reaching indictment (9.8% at baseline vs. 10.8% at endline).

This intervention was categorized as PRUDENT
In the valley of Cochabamba, Bolivia, A Breeze of Hope Foundation (ABH) is giving an unprecedented and life-changing voice of support to victims of childhood sexual violence. This center is the first of its kind in Bolivia, providing comprehensive services for children and adolescents. ABH ensures access to physical and psychological health services, as well as legal assistance. Founded by lawyer, activist, and survivor Brisa de Angulo, ABH is grounded in the experiences of those who have lived through sexual violence and uses an innovative model aligned with global best practices. ABH pursues three broad goals:

1. Restoring the rights and lives of child survivors of sexual violence: ABH offers professional psychological support, comprehensive legal accompaniment, and wide-ranging social services to survivors and their families.


3. Promoting healthy childhood development: ABH breaks the generational cycle of violence by advancing a positive, non-violent, feminist, and rights-based vision to nurture children into healthy adulthood.
This comprehensive model of care, legal assistance, and prevention has generated significant results for young Bolivian people and their families, who are able to use ABH services free of charge. Most notably, since its founding in 2004 through 2016, ABH has done the following:

- Achieved and maintained a conviction rate of 96% in the oral trials in which they have participated, as compared to the 2% conviction rate before ABH existed
- Provided free, comprehensive services to more than 1,500 victims of child and adolescent sexual violence
- Trained more than 100,000 participants in conferences, workshops, and postgraduate courses
- Created the Youth Network Against Sexual Violence in 2016, in which young people themselves lead advocacy and media outreach, as well as peer-to-peer contact at schools, community events, and fairs

This intervention was classified as **PRUDENT**

**LAWS THAT LIMIT ALCOHOL MISUSE**

Laws that address the risks of sexual violence are also important. Heavy alcohol consumption is a clearly established risk factor for most forms of violence against and among children, including sexual violence among male and female adolescents and intimate partner violence. Globally, 17% of male and 6% of female adolescents 15-19 years old are estimated to be heavy drinkers (i.e., consumed 60 grams/2.1 ounces or more of pure alcohol at least once in the past month). Laws and policies limiting children’s access to and adults’ and children’s misuse of alcohol can therefore play an important role in preventing violence against children.
A review of scientific studies published between 1950 and 2015 concluded that increasing the price of alcohol, restricting the days of sales, and limiting the clustering of alcohol outlets are all associated with substantial reductions in the perpetration of interpersonal violence.\(^8\) The review further notes that even modest policy changes, such as 1% increases in alcohol price, one-hour changes to closing times, and limiting alcohol outlet densities, substantially reduce violence. Furthermore, minimum age purchase limits are effective in reducing alcohol consumption among youth,\(^8\) and setting age limits that are higher is more likely to deter youth drinking than younger age limits.\(^8\) Most countries’ laws set the legal age limit for the purchase of alcohol at 18 years, although there is considerable variation in the extent to which such limits are enforced.\(^8\)

**ELIMINATING STATUTES OF LIMITATIONS FOR SEXUAL VIOLENCE CRIMES**

As previously mentioned, evidence from around the world reveals that many children who experience sexual violence never disclose their experiences. The reasons for this are varied but can include fear of retaliation, guilt, shame, confusion, lack of confidence in the abilities or willingness of others to help, or lack of knowledge of available support services.\(^8\) There is also evidence that many survivors come forward later in life, sometimes decades after the abuse has occurred. In the United Kingdom, a study showed that victims wait an average of 22 years before coming forward.\(^8\)\(^8\) A study in the United States by Childhood USA has found that of those who do disclose child sexual abuse, the average age is at 52 years old.\(^8\) However, around the world, the statute of limitations for bringing forward a case varies dramatically, with some countries allowing for very limited windows of time for criminal or civil lawsuits.

There is emerging evidence that eliminating or extending the statute of limitations can lead to greater reporting and increased convictions. In the United States, where there is no federal law regarding a statute of limitations for sexual crimes against children, many individual states do have statutes of limitation. In recent years, over 20 states have reformed their laws, leading to an increase in the number of reports.\(^9\)\(^0\)\(^0\) As a result, several organizations aimed at reducing sexual violence and protecting the rights of survivors are now calling for a nationwide elimination of the statute of limitations for all sexual crimes.\(^9\)

**HARMONIZED GLOBAL AND DOMESTIC IMPLEMENTATION AND ENFORCEMENT OF LAWS SPECIFIC TO ONLINE SEXUAL EXPLOITATION AND ABUSE**

With the advent of the internet and the rapid growth of online platforms and technologies, online child sexual abuse has continued to grow at staggering rates.\(^9\) A 2018 comprehensive assessment by the WePROTECT Global Alliance found that online sexual violence against children is the most insidious form of modern cybercrime and one of the most challenging forms of sexual violence to prevent and address.\(^9\) In response, strong legislation, dedicated law enforcement, and a specialized judiciary serve as a critical foundation for effective prevention and response.

The UN Committee on the Rights of the Child is undertaking a review of its provisions insofar as they impact matters connected with children and the internet, including online CSEA.
A major conference is scheduled to take place in London in October 2019 and associated processes will continue and likely conclude at the end of 2020. This has potentially far-reaching implications for the response of UN Member States to the issue of online CSEA.

Since 2006, the International Centre for Missing and Exploited Children (ICMEC) has analyzed child sexual abuse material (CSAM) legislation in 196 countries, and offers a “menu” of concepts to be considered when drafting anti-CSAM legislation. First released in April 2006, the report is currently in its 9th edition. The latest edition’s findings show that since inception, 150 countries have refined or implemented new anti-CSAM legislation, 140 countries criminalize simple CSAM possession, 125 countries define CSAM, and only 32 countries require Internet Service Providers reporting of suspected CSAM.

Comprehensive and effective legislation can enable law enforcement to proactively investigate and prosecute child sex offenders and identify and protect more victims. This is particularly important for online offenses where there is no evidence that contact sexual abuse has taken place; this ensures all sexual offenses against children can be prosecuted. In addition, when investigating online sexual abuse, there is a delicate balance between online data privacy and crime prevention.

**RESOURCE**

WePROTECT Global Alliance Model National Response to Preventing and Tackling Online Child Sexual Exploitation and Abuse

A comprehensive assessment by the WePROTECT Global Alliance from 2018 found that online child sexual exploitation and abuse (CSEA) is the most insidious form of modern cybercrime and one of the most challenging forms of CSEA to prevent and address. In response to the growing issue of online CSEA, WePROTECT Global Alliance engaged in a consultative process with an array of stakeholders across sectors to develop the Model National Response to Preventing and Tackling CSEA (MNR), which details the capabilities required across all stakeholders — government, law enforcement agencies, industry, and civil society — to coordinate the development of comprehensive national action.
The MNR articulates key capabilities and outcomes across six arenas and constituencies, including policy and governance, criminal justice, victims, society, industry, and media and communications. Taken as a whole, these capabilities address the spectrum of intervention, from prevention efforts focused on awareness-raising and education to service provision to response, conviction, and offender management.

In addition to detailing best practices and approaches and desired outcomes, the MNR describes the “enablers” required as a foundation for success, including cross-sector, multidisciplinary collaboration; adequate financial and human resources; a supportive reporting environment with adequate training and awareness-raising for service providers; and legal and policy frameworks undergirded by a functioning justice system.

For more information on the WePROTECT Global Alliance’s Model National Response to Preventing and Tackling CSEA, visit weprotect.org/the-model-national-response/

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**RESOURCE**

*Regulating Sexual Violence Perpetrated by UN Peacekeepers During Conflict*

There is an emerging trend of promulgating laws to criminalize and prevent sexual violence against local women and girls perpetrated by peacekeeping and military troops deployed to disaster and conflict zones. It was not until 2004 that the issue of sexual violence committed by UN peacekeepers was addressed by the UN, with the “Comprehensive Strategy to Eliminate Future Sexual Exploitation and Abuse in United Nations Peacekeeping Operations” released a year later recommending the adoption of rules and codes of conduct; investigative processes; organizational, managerial, and command responsibility; and individual disciplinary, financial, and criminal accountability measures. While there has yet to be any assessment on the effectiveness of this approach, it is recognized as a first step.
## IMPLEMENTATION & ENFORCEMENT OF LAWS

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratifying international treaties, frameworks, and legislation</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Provides framework for adoption and implementation of domestic legislation</td>
<td>Often not enforced</td>
<td>UN protocols and conventions such as the United Nations Convention on the Rights of the Child (CRC)</td>
</tr>
<tr>
<td>Implementing and enforcing laws that criminalize various forms of sexual violence against children and adults</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Criminalizing certain acts creates the necessary legal frameworks for prosecution of offenders and justice for victims, creates an enabling environment for other prevention strategies, and can serve as a deterrent and have a positive impact on reducing recidivism. Minimum age for marriage (set at age 18) can result in a reduction in rates of child marriage.</td>
<td>Measuring effectiveness of prevention is challenging</td>
<td>Minimum age of marriage laws (18 years of age); laws that criminalize child sexual abuse, marital rape, online sexual abuse, and sexual exploitation (e.g., European Union Lanzarote Convention)</td>
</tr>
<tr>
<td>Establishing victim-sensitive standards and specialized services for policing and justice</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Can minimize re-traumatization of victims; provides an essential building block for effective prevention; can increase reporting</td>
<td>N/A</td>
<td>The International Association of Chiefs of Police’s model policy for police response to sexual violence against women and children; the US National Child Traumatic Stress Network’s trauma-informed systems; UN Office on Drugs and Crime’s Guidance on Justice in Matters Involving Child Victims and Witnesses of Crime (provides a model of a trauma-informed criminal justice process for child victims); International Justice Mission’s criminal justice response to sexual violence program in Guatemala; A Breeze of Hope model in Bolivia; US Child Advocacy Centers</td>
</tr>
<tr>
<td>Laws that limit alcohol misuse</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Can address risk factors associated with sexual violence victimization and perpetration, such as excessive alcohol use and binge drinking</td>
<td>N/A</td>
<td>Laws that increase the price of alcohol, restrict the days of sales, limit the clustering of alcohol outlets, and set a minimum age of purchase</td>
</tr>
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</table>
### IMPLEMENTATION & ENFORCEMENT OF LAWS

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<tbody>
<tr>
<td>Eliminating statute of limitations for sexual violence crimes</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Emerging evidence indicates that eliminating (or extending) the statute of limitations can lead to greater reporting and increased convictions</td>
<td>Considerable variations in laws across countries/states</td>
<td>Multiple examples of laws in countries/states that eliminate statute of limitations for sexual violence crimes</td>
</tr>
<tr>
<td>Harmonized global and domestic implementation and enforcement of laws specific to online sexual exploitation and abuse</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Strong legislation, dedicated law enforcement, and a specialized judiciary serve as a critical foundation for effective prevention and response; comprehensive and effective legislation can enable law enforcement to proactively investigate and prosecute CSA offenders and identify and protect more victims</td>
<td>When investigating online sexual abuse, there is a delicate balance between privacy and crime prevention</td>
<td>Laws on sexting, online grooming, and image-based sexual violence</td>
</tr>
<tr>
<td>Implementing and enforcing laws that mandate reporting of sexual violence against children by designated professionals (e.g., police, teachers, social service providers)</td>
<td>Age: Early childhood and childhood</td>
<td>PRUDENT</td>
<td>Increases reporting and substantiating of cases</td>
<td>Measuring effectiveness on prevention is challenging, and increased number of reports needs to be matched with increased service provision</td>
<td>Laws in multiple jurisdictions and countries (e.g., State of Western Australia and Canada)</td>
</tr>
<tr>
<td></td>
<td>Gender: All</td>
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<tr>
<td></td>
<td>Age: Early and late adolescence</td>
<td>CONFLICTING</td>
<td>May increase reporting of cases</td>
<td>Creates significant barriers for accessing safe, confidential sexual and reproductive health services; limits agency and choice</td>
<td>2012 Protection of Children From Sexual Offences Act (India)</td>
</tr>
<tr>
<td></td>
<td>Gender: All</td>
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<tr>
<td>Notification and sex offender registration laws for adult sex offenders</td>
<td>Age: All</td>
<td>CONFLICTING</td>
<td>Envisioned to deter would-be offenders and protect from recidivism</td>
<td>Not shown to reduce recidivism</td>
<td>Megan’s Law (US) and various Sex Offender Registration Notification (SORN) laws</td>
</tr>
<tr>
<td></td>
<td>Gender: All</td>
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<tr>
<td>Notification and sex offender laws for juveniles who sexually offend</td>
<td>Age: All</td>
<td>HARMFUL</td>
<td>Envisioned to deter would-be offenders and protect from recidivism</td>
<td>Not shown to reduce recidivism; increases risk of suicide and being approached by adults for sex or sexual victimization</td>
<td>Various SORN laws for juveniles who sexually offend</td>
</tr>
</tbody>
</table>
NORMS AND VALUES
**SUMMARY OF INTERVENTIONS: NORMS AND VALUES**

<table>
<thead>
<tr>
<th>How it aligns with key SDGs</th>
<th>Relevant stakeholders</th>
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</table>
| **4.7:** By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship, and appreciation of cultural diversity and of culture's contribution to sustainable development | • Teachers  
• Social/child protection systems  
• Health services |
| **5.1:** End all forms of discrimination against all women and girls everywhere | |

**Summary or rationale**
Social norms programs seek to alter the deeply engrained social and cultural attitudes, beliefs, and behaviors that can facilitate and justify sexual violence

**Effects**
• Shifts in norms that accept sexual violence  
• Shifts in norms that accept gender and age inequality  
• Reductions in child, early, and forced marriage  
• Increased bystander intervention behaviors  
• Reductions in family and intimate partner sexual violence

**OVERVIEW/RATIONALE OF INTERVENTIONS**

Often, norms and attitudes are utilized or discussed interchangeably, but they are different concepts that may influence an individual’s behavior. In this context, a “norm” is a shared, collective belief about what is considered typical and appropriate behavior in a given setting and social group. An “attitude” is an individually held belief that assesses whether something is good, bad, sacred, taboo, or otherwise. “Behavior” are actions carried out by individuals.

This distinction is important because attitudes and behaviors sometimes match and reflect norms but are sometimes different, such as an instance in which an individual disagrees with an accepted social norm. For example, a man may believe that using physical violence to discipline his wife and children is harmful, despite a community-held norm that justifies a husband beating his wife or using violence to discipline his children under specific circumstances. His chosen behaviors might therefore be different from the social norm.
Social Norms

**DEFINITION**

A shared belief about what is typical within a reference group. For example:

- It is common for the men in my community to beat their wives
- Among my group of friends, women are typically the primary breadwinners in their households

A shared belief about what is appropriate within a reference group. For example:

- In my community, it is acceptable for a man to beat his wife if she disobeys him
- My friends think that women should be the primary breadwinners in the household

Attitudes and behaviors that can exacerbate the risk for or facilitate acts of sexual violence against adolescents and children are grounded in broad social norms that accept, among other behaviors, gender-based violence, violence against women and children, violence more generally, as well as the broader implications of patriarchal social values. Another definition of a social norm is a “collectively held belief about what others in the group actually do (what is typical) or what others in the group ought to do (what is appropriate).” The social norms that allow impunity require interventions that challenge these values in a holistic manner and modify the deeply engrained attitudes and behaviors that normalize and sometimes justify violence.

Norms can vary significantly depending on geography, social group, or other factors. However, some of the norms that perpetuate sexual violence against children and adolescents are universal in nature. These include the following:

**Norms that limit disclosure of sexual violence**

- Sexual violence is shameful
- For girls: Experiencing sexual violence decreases a girl’s value and desirability
- For boys: Men cannot be victims of sexual violence — it makes them less manly
- Victims of sexual violence caused or incited the violence
- People don’t talk about sexual violence
- Children lie and cannot be believed
Interventions that challenge social norms broadly target problematic attitudes as a way to influence behavior change and raise awareness about sexual violence against children that enables children to tell someone and get help. These programs include national awareness-raising campaigns, working with men and boys, and community mobilization programs. All school-based approaches are discussed in the Education and Life Skills section of this review.

**SUMMARY OF AVAILABLE EVIDENCE**

Interventions that challenge social norms broadly target problematic attitudes as a way to influence behavior change and raise awareness about sexual violence against children that enables children to tell someone and get help. These programs include national awareness-raising campaigns, working with men and boys, and community mobilization programs. All school-based approaches are discussed in the Education and Life Skills section of this review.

### Awareness-raising campaigns (National)

Overall, the effectiveness of broad awareness-raising initiatives or campaigns is often limited to an increase in knowledge, with little impact on subsequent behavior. In addition, a few mass campaigns focused on child sexual abuse specifically have shown that knowledge gains are temporary and tend to disappear at follow-up. There are, however, examples of campaigns in both HICs and LMICs that have demonstrated both an increased level of awareness and changes to specific types of behavior, but these have included subsequent additional engagement of individuals. There are several campaigns in LMICs that target gender-based violence through broader programs, such as HIV prevention initiatives and broader relationship programs.
The One Man Can campaign in South Africa\textsuperscript{100} and Program H\textsuperscript{101} in Brazil both demonstrated positive outcomes. While evaluations are limited, research suggests that successful and effective media-based interventions are those that subsequently engage their audience in the development of an intervention.\textsuperscript{102}

Inherent challenges exist in evaluating efforts to change the social norms and attitudes that undergird the acceptability and magnitude of sexual violence against children in many communities and societies, including the assumption that a social norm is directly related to the prevalence of sexual violence against children. The trajectories of social norms change are often long-term and multi-faceted, rooted in community-based activism and increasingly within community social movements that address sexual violence.

**WORKING WITH MEN AND BOYS**

There are also lessons to be learned from prevention programs that target late adolescence and young adults. There has been an emphasis on engaging men specifically in sexual violence and abuse prevention initiatives, based largely on early evidence that highlights the importance of men in influencing one another’s behavior.\textsuperscript{103}

Interventions such as the Mentors in Violence Prevention program encourage young men to challenge the stereotypes associated with violence-justifying or violence-accepting norms.\textsuperscript{104} While bystander programs have typically been gender-specific,\textsuperscript{105} there has been an argument made that there are benefits to sexual violence prevention programs that target both men and women concurrently.\textsuperscript{106} The two-pronged approach includes preventative efforts that target male offending and information and risk-reduction skills for women within the same community (e.g., a college or residence hall). In an evaluation of such a program in the United States, results identified positive changes among men who participated in the program compared to the control group, including a reported decrease in associating with sexually aggressive peers and engaging in sexually explicit media. The men who participated in the program also reported that their friends would likely intervene if they witnessed inappropriate behavior. However, there was no indication that those who participated would be more likely to intervene, a finding that reinforces the influence of peers in sexually violent behaviors\textsuperscript{107} and the need to design the program to influence actual behavior change. While women-only interventions that focus on empowering women to resist violence and protect themselves are important, in isolation they tend to deflect responsibility from perpetrators.\textsuperscript{104} This research therefore further supports the argument for concurrent interventions for both men and women.
A growing field of engaging men and boys in gender-based and sexual violence prevention has emerged in the past 20 years. Gender norms and gender power imbalances mean that girls and women are more frequently the victims of sexual violence, even as studies have confirmed that boys are also victims and that boys’ experiences of sexual violence may be even less likely to be reported in some settings than sexual violence against girls. Research also affirms that the majority of perpetrators of sexual violence against girls and boys are men or boys. As work with men and boys in violence prevention expands, there are some key considerations:

- Programs engaging men and boys for sexual violence prevention should be accountable to women’s rights principles and dialogue with key women’s rights partners that have long worked to advocate and build the evidence base on ending violence against women. See the MenEngage accountability principles for ideas on this: menengage.org/accountability/

- Programs engaging men and boys in violence prevention should be gender transformative; that is, the program should not simply enjoin men and boys to intervene when they see violence or teach boys that “violence is wrong” but to question norms related to masculinity. For a review of the evidence base of gender-transformative programs with men and boys, see who.int/gender/documents/Engaging_men_boys.pdf

- Some programs in sexual violence prevention with men and boys include only men and boys; others include women and girls together with men and boys. Evidence finds that both approaches can work when they include a clear focus on rights, when they carry out appropriate formative research on salient norms, and when they keep a focus on questioning power. For more information, see https://www.icrw.org/publications/gender-equity-male-engagement/
• Social norms change with men and boys related to sexual violence should not reinforce negative or inequitable manhood. For example, saying that “real men don’t buy sex” can inadvertently reinforce the idea that there is such a thing as a “real man,” a social norm that can also, for example, promote homophobia.

• Programs engaging men and boys in prevention should recognize their own victimization. This in no way excuses any man’s use of violence but rather confirms that one of the largest drivers of men’s use of sexual violence against women and girls (and against other men and boys) is men’s own childhood experiences of being a survivor of sexual violence. Psychosocial programs and group education that acknowledge men’s potential survivorship of sexual violence can be important components of breaking the cycle of violence and of effective healing work with survivors and accountability processes for perpetrators.

**CASE STUDY**

**Coaching Boys Into Men (CBIM)**

Several studies have provided promising evidence on the feasibility, acceptability, and effectiveness of adapting programs for men and boys across ages and cultures. The CBIM program was established in the United States and then adapted for India. Both programs have been evaluated and demonstrated significant impacts on bystander intentions and behaviors, as well as attitudes towards gender.¹⁰⁹

The CBIM program recognizes that athletics and coaches play a unique and influential role in the lives of boys, rendering coaches uniquely positioned to impact positive attitudes and behaviors. The program provides coaches with resources to promote positive attitudes and behaviors among athletes and to help prevent abuse, harassment, and assault. The CBIM curriculum consists of trainings that illustrate approaches to model respect and promote healthy relationships, and to integrate themes of teamwork, fair play, integrity, and respect into athletes’ day-to-day habits and choices.¹¹⁰

This intervention was classified as **PROMISING**
COMMUNITY MOBILIZATION PROGRAMS

The other common type of social norms change programs aims to address bystander behaviors. These programs can be effective in addressing sexually aggressive behaviors. However, the success of programs that target bystanders is often predicated on a broad recognition of the problem of sexual violence to begin with in a given community. Media campaigns that target sexual violence remain largely unevaluated, and there is limited qualitative evidence to highlight their effectiveness in changing social norms. The available evidence suggests, however, that when media or social mobilization campaigns are combined with more targeted support services and programs, they can contribute to an increase in reporting of violence and the enactment of laws and policies that criminalize specific forms of violence and related acts. We still need significant research in this arena to understand how these programs are structured and if they are effective in contributing to the prevention of sexual violence against children.

CASE STUDY

SASA!

The SASA! initiative in Uganda is one example of a social norms community mobilization program, widely considered a good practice for social norms interventions. SASA! seeks to change community attitudes, norms, and behaviors around gender, violence, and the risk of, and vulnerability to, HIV infection among women. Premised on the ecological model of violence, the program incorporates activism and then action at the community level. A cluster-randomized evaluation sought to identify changes in attitudes toward, and acceptance of, gender inequality and intimate partner violence, changes in the prevalence of intimate partner violence, improvements in responses to women experiencing violence, and decreases in high-risk sexual behaviors. The evaluation found that there was a clear shift in behaviors, with the experience and perpetration of physical intimate partner violence significantly decreasing in intervention communities.

While SASA! targeted primarily adults’ experiences of physical and sexual intimate partner violence, the approach provides direction for broad community mobilization strategies that focus on children and adolescents specifically.

Lessons From SASA! on the Intersection Between Violence Against Women and Children

Research by Guedes, Bott, Garcia-Moreno, and Colombini found that there are several shared risk factors between violence against women and children, many of which are supported by broader social norms.
Child maltreatment and abuse often occur within the same household in which intimate partner violence is occurring, and there is significant evidence that both can have intergenerational consequences. Additionally, violence against women and violence against children intersect during adolescence, when individuals are considered highly vulnerable to different kinds of violence. This all points to the need for more integrated and early interventions, particularly among adolescents.

Studies of the SASA! program reinforce that there are significant intersections between violence against women and children. A more recent study in Kampala, Uganda, found that the patriarchal family structures can create an environment that normalizes, and therefore facilitates, all forms of violence against women and children simultaneously. Drawing on participant experiences, the authors suggest that intimate partner violence and violence against children intersect within the family, which has a range of consequences, including the sustaining of cycles of emotional and physical abuse, bystander trauma, negative role modeling, ongoing victimization, and aggression. This intervention was categorized as **EFFECTIVE**

CASE STUDY

Preventing Child, Early, and Forced Marriage

The Integrated Project for Empowering Adolescent Girls is based in Aurangabad and Jalna Districts in the state of Maharashtra in India. The project is for married and unmarried adolescent girls and offers support and protection from the consequences of child, early, and forced marriage; pregnancy; and sexual and domestic violence. It does this by offering girls at risk of early marriage (namely those with low self-esteem and agency) access to the life skills program that takes place over six months. The program covers topics on their rights and health, including sexual and reproductive health. In addition, the program includes participation in an adolescent Girls Club and leadership training for older girls to take their knowledge back to their communities. The project also includes programming for young men in the community on masculinity and gender norms.

The program was evaluated by the International Center for Research on Women, and in areas where the program was operating, there was an increase in the median age of marriage from 16 to 17 years, and the proportion of girls being married prior to turning 18 had reduced from 80.7% to 61.8%. The success of the program highlights three key features for similar programs:

1. Adopt an integrated, holistic approach
2. Record the adaptation process and successes to inform further evidence-based policy and program development
3. Have a plan to scale up the program from its inception

This intervention was categorized as **PRUDENT**
**NORMS AND VALUES**

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
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<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mobilization programs to change attitudes, norms, and behaviors with direct intervention at the community level</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Evaluations in LMICs have shown that such programs can contribute to reductions in intimate partner violence, “including sexual violence in dating relationships” and shifting attitudes towards violence more broadly; evaluation of SASA! implementation indicated that there were explicit benefits for children</td>
<td>More research needed to assess the impact of community mobilization programs for specific age groups and for sexual violence against children and adolescents</td>
<td>SASA!</td>
</tr>
<tr>
<td>Working with men and boys to challenge stereotypes, toxic masculinity, and norms that justify violence</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>PROMISING</strong></td>
<td>Promising evidence from specific programs that model respectful, non-violent relationships among young boys; evaluations have shown that such programs can contribute to a reduction in perpetration of dating violence</td>
<td>Evaluations needed of other models of this approach, specifically with different age groups and in various settings; further research needed on whether programs are more effective when targeting both boys and girls</td>
<td>Coaching Boys Into Men; Men Can Stop Rape; Mentors in Violence Prevention</td>
</tr>
<tr>
<td>Awareness-raising campaigns (national)</td>
<td>Age: All Gender: All</td>
<td><strong>NO EFFECT</strong></td>
<td>Limited evidence shows gains in knowledge among broad population about sexual violence and abuse of children and adolescents; can contribute to increases in reporting of sexual violence when combined with targeted support services and outreach</td>
<td>No evidence to support ongoing or sustained behavior change on their own</td>
<td>Various generic and short-lived national-level campaigns that are not complemented with direct intervention or follow-up</td>
</tr>
</tbody>
</table>
SAFE ENVIRONMENTS
SUMMARY OF INTERVENTIONS: SAFE ENVIRONMENTS

<table>
<thead>
<tr>
<th>How it aligns with key SDGs</th>
<th>Relevant stakeholders</th>
</tr>
</thead>
</table>
| **11.1:** By 2030, ensure access for all to adequate, safe, and affordable housing and basic services, and upgrade slums | • Teachers  
• Parents |
| **11.7:** By 2030, provide universal access to safe, inclusive, and accessible green and public spaces, in particular for women and children, older persons, and persons with disabilities | • Local community |

**Summary or rationale**
The aim of interventions in this category is to create and modify environments to enhance and strengthen the protective factors that can help prevent sexual violence.

**Effects**
Reductions in experiences of sexual violence outside the home, in schools, and in other public spaces

OVERVIEW/RATIONALE OF INTERVENTIONS
Interventions that create safe environments aim to modify social and physical environments to enhance and strengthen protective factors. There is evidence that highlights five key community or environmental interventions that can help prevent sexual violence:

- Manipulation of physical environment (school)
- Situational prevention strategies through designated safe spaces and environmental modifications (humanitarian displacement settings)
- Adoption of policies and practices to prevent sexual violence (school)
- Adoption of safeguarding policies and procedures (child- and youth-serving organizations)
- Awareness-raising about online child sexual abuse and exploitation

There is some evidence that supports different elements of a situational crime prevention approach in preventing sexual offenses against women in particular, many of which could be applied to strategies that aim to prevent sexual offending and violence against children and adolescents. Evaluations of programs that target children and adolescents specifically are extremely limited. The aim of this approach is to prevent crime by reducing opportunities to offend and mitigating the factors that can increase the risk of crime.\(^\text{115}\) Research has found that manipulating the environment, such as through the introduction of increased monitoring or surveillance by capable guardians, can decrease the risk of completed sexual offenses against non-consenting victims.\(^\text{116}\)
Other monitoring or surveillance-based approaches, such as the installation of CCTV, have been shown to increase the detection of crime against a person, but they did not have any deterrent impact.\textsuperscript{117} Importantly, research shows that these approaches are highly context- and location-specific and would not be appropriate for use in private dwellings. In lieu of this, other elements of a situational crime prevention approach, such as “target hardening” (i.e., improving potential victims’ self-protection skills), have also shown some promise, with studies citing a decrease in the likelihood of sexual offense completion and increases in assertiveness, control, and confidence in individuals’ ability to protect themselves.\textsuperscript{118}

The effects of these interventions can be linked to the following:

- Reduced risk of sexual violence in schools and the community
- Reductions in bullying and related violence
- Reductions in dating violence

**SUMMARY OF AVAILABLE EVIDENCE**

**MANIPULATION OF PHYSICAL ENVIRONMENT (SCHOOL)**

Studies in LMICs highlight that unsafe school environments can lead to parents withdrawing their children, particularly girls, from school.\textsuperscript{119} The aim of school-based safe environment approaches is to modify environments in ways that support increased monitoring and ultimately safety both during school and in transit to and from it.\textsuperscript{120} Although the evaluation literature is limited, there is emerging evidence that highlights positive outcomes of a situational crime prevention approach to prevent girls from being subjected to sexual violence on the way to and from school.\textsuperscript{121} These approaches include not only modification of the physical environment, but also enhancement of the policies and practices that address both the causes of and risks associated with sexual violence in and around school premises. A combined approach of both environmental modification and policy has been shown to reduce sexual and dating violence.

In the United States, Shifting Boundaries is a school-based intervention that incorporates modifications to the school environment and revisions of school protocols for identifying and responding to dating violence and sexual harassment.\textsuperscript{122} Shifting Boundaries includes temporary building-based restraining orders to reinforce boundaries between victims and perpetrators, a poster campaign, and increased staff monitoring of known “hotspots.”\textsuperscript{123} A random assignment evaluation of more than 30 schools (and over 2,500 students) found that the program contributed to an overall reduction in sexual and dating violence and related behaviors. The modification to the environment made a significant impact on the frequency of sexual harassment perpetration and victimization. However, the prevalence of sexual harassment victimization had increased at the six-month post-treatment assessment. While the iatrogenic findings were not discussed in length, it can be assumed that increased monitoring may result in increased identification reporting.
MANIPULATION OF PHYSICAL ENVIRONMENT (HUMANITARIAN SETTINGS)

During complex humanitarian emergencies, such as armed conflict and natural disasters, there is often resulting large-scale displacement. In displacement settings, children are often separated from families, little to no privacy is available, and traditional learning environments and public spaces do not exist. There is an increased risk of sexual violence against children during humanitarian emergencies, and strategies in place to prevent this, yet there has not been extensive research showing the results of these interventions.

Child-friendly spaces are safe spaces where communities create nurturing environments in which children can access free and structured play and learning activities. Child-friendly spaces sometimes provide educational and psychosocial support and other activities that restore a sense of normality and continuity for children whose lives have been disrupted by a humanitarian emergency. They are generally designed and operated in a participatory manner, often using existing physical spaces and seeking to connect to local community resources and activities. They may serve a specific age group of children or a variety of age ranges.

Even though they are one of the most widely used interventions in emergencies for child protection and psychosocial support, little evidence documents their outcomes and impacts. The analysis of a structured evidence review of child-friendly spaces conducted by World Vision International suggests the following:

- Greater commitment to documentation and measurement of outcomes and impacts is required
- More standardized and rigorous measurement of processes, outputs, outcomes, and impacts is necessary
- Evaluation designs need to more robustly address assessment of outcomes without intervention
- There is a need to sustain engagement of children within the context of evaluations
- Long-term follow-up is critical to establishing evidence-driven interventions

In addition, modifications to the physical environment, such as placing lights and locks on sanitation facilities, are recommended by humanitarian actors, and the Inter-Agency Standing Committee has developed extensive guidelines for prevention and risk reduction related to gender-based violence in emergency and displacement settings, yet again with little evidence to support the prevention of sexual violence against children. Overall, there is agreement among humanitarian actors that these considerations and modifications to the physical environment are necessary to keep women and children safer during displacement. There is less of a consensus on what this would entail for other settings.
DATA GAP

Sexual Violence and Water, Sanitation, and Hygiene

The global community of water, sanitation, and hygiene (WASH) researchers, practitioners, and policymakers has to date inadequately addressed the challenge of vulnerability to violence in relation to access to water and sanitation in development and humanitarian emergency contexts, including for children. Reasons may include the lack of valid and reliable documentation of children’s experiences of violence while accessing water and/or sanitation facilities; the sensitivity of the topic, with secrecy around individuals’ experiences of violence and their sanitation needs further hindering the collection of reliable data; the complexity of understanding the gendered dimensions of vulnerability to violence, with girls and women at least anecdotally reported to be more likely to experience violence in relation to WASH; and the likelihood that many WASH practitioners lack violence prevention training, affecting their ability to deliver adequate programming and evaluation. A review of the existing evidence and practice was conducted by Sommer and colleagues and found the need for more systematic, reliable, and ethically conducted monitoring and learning on this topic to build a more solid evidence base, while also refining key principles for improved policy and programming.

ADOPTION OF POLICY AND PRACTICES TO PREVENT SEXUAL VIOLENCE (SCHOOL)

A child-friendly spaces evaluation highlighted that one of the key benefits of modifying the physical environment was that it involved few resources in terms of teacher and class time. A more recent evaluation found that the impact on behaviors was not distinct to either girls or boys, with positive outcomes identified among both.127

School-based environmental interventions also include policies and practices that relate to the prevention of and response to sexual violence and abuse. These include zero tolerance, notification, and anti-harassment training for staff. Many of these interventions are included in a whole-of-school approach, which targets staff, students, and administration. Based on an ecological model — whereby what is learned in the classroom is then reinforced in other aspects of children’s lives — whole-of-school approaches engage students, parents, teachers, and other staff, as well as the wider community, to reinforce change across multiple levels and platforms.128

While independent evaluations of domestic violence-focused whole-of-school approaches are largely not available, a randomized controlled trial of an anti-bullying program delivered to all students by teachers found that the program moderated peer-reported victimization, self-reported aggression, and bystander behaviors compared to control schools.129
Effectiveness of a whole-of-school approach is hard to measure, and studies are limited. However, evidence that does exist suggests that there are benefits to this approach.\textsuperscript{130} This evidence highlights the importance of strong policies and establishment of a positive school culture that promotes gender equality. Where there are barriers associated with discussing issues related to sexual and gender-based violence, there is a need for ongoing training and the facilitation of open discussion among all staff.\textsuperscript{131}

Research consistently highlights the link between alcohol abuse and sexual violence and suggests that the location and concentration of alcohol outlets can have negative implications for feelings of safety and can exacerbate the risk of victimization. One effective intervention is increased alcohol prices. There is, however, mixed evidence on the efficacy of decreasing the number of late-night venues and reduced density of alcohol outlets/stores. It is important to recognize that alcohol is not a cause of sexual violence; rather, it is a factor that can exacerbate the likelihood and severity of different types of violence, including sexual violence.

**ADOPTION OF SAFEGUARDING POLICIES AND PROCEDURES (CHILD- AND YOUTH-SERVING ORGANIZATIONS)**

Safeguarding is the process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children to have optimum life chances and enter adulthood successfully.\textsuperscript{132} Safeguarding within child- and youth-serving organizations (CYSOs) can include various policies, procedures, and practices that organizations can implement to both prevent child sexual abuse from happening and ensure a swift response when abuse is reported or identified. These can include the following:

- Mandatory background checks for managers, staff, and volunteers
- Mandatory training of managers, staff, and volunteers on a regular basis
- Codes of conduct
- Immediate mandatory reporting requirements
- Mechanisms for reporting abuse — including anonymously (e.g., hotlines)
- Procedures to investigate reported cases
- Mandatory yearly safety assessments
- Safety policies (e.g., supervision, eliminating private one-on-one contact, transportation)
- Ongoing monitoring and evaluation of safeguarding policies
- Safety committees

Although there is still a dearth of evidence on the overall effectiveness of safeguarding measures to prevent sexual violence against children, there is general agreement that this is an important step in ensuring the safety and well-being of children. In the last two decades, a number of governments, organizations, and institutions have adopted safeguarding policies and procedures in an effort to reduce sexual violence against children.\textsuperscript{133, 134, 135}
A growing body of evidence indicates that participation in sports may have inherent threats for a child’s well-being — including the experience of sexual violence. The subject of safeguarding children in sports has seen an increase in scientific study in recent years. In particular, there is increasing emphasis on identifying who is involved in abuse, the context in which it occurs, and the identification of the various forms of abuse that take place in the sporting domain.\textsuperscript{136}

The recent formalization and internationalization of safeguarding in sports has made the issue increasingly significant for organizations that work with child athletes. The work has been driven by the International Safeguarding Children in Sport Founders Group. Working with more than 50 organizations, the group developed the “International Safeguards for Children in Sport.”\textsuperscript{137} These safeguards set out the actions that all organizations working in sports should have in place to ensure children are safe from harm.

Over a year-long piloting phase, data were collected from a range of sources, including interviews with the safeguarding lead of each organization, online group discussions, and feedback from the Founders Group. Based on this data, eight key pillars were identified that underpin the successful implementation of the safeguards; they have been given the acronym “CHILDREN.” These pillars have relevance not only for safeguarding in sports, but also for a broader audience of child- and youth-serving organizations:

<table>
<thead>
<tr>
<th>PILLAR</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultural Sensitivity</td>
<td>The safeguards need to be tailored to the cultural and social norms of the context</td>
</tr>
<tr>
<td>Holistic</td>
<td>Safeguarding should be viewed as integrated into all aspects of an organization as opposed to being an additional element</td>
</tr>
<tr>
<td>Incentives</td>
<td>There needs to be a clear reason for individuals and an organization to work towards the safeguards</td>
</tr>
<tr>
<td>Leadership</td>
<td>The safeguards need to have strong support from those working in key leadership roles</td>
</tr>
<tr>
<td>Dynamic</td>
<td>Safeguarding systems need to be continually reviewed and adapted to maintain their relevance and effectiveness</td>
</tr>
<tr>
<td>Resources</td>
<td>The implementation of the safeguards needs to be supported by appropriate resources (e.g., human, time, and financial)</td>
</tr>
<tr>
<td>Engaging Stakeholders</td>
<td>A democratic approach should be adopted that invites and listens to the voices of those in and around the sport (e.g., parents, coaches, community leaders)</td>
</tr>
<tr>
<td>Networks</td>
<td>An organization’s progress towards the safeguards will be strengthened by developing networks with other organizations</td>
</tr>
</tbody>
</table>
An area of frequent intervention that is underevaluated is the implementation of policies and procedures to prevent child sexual abuse in child- and youth-serving organizations (CYSOs). This area of situational crime prevention as it relates to child sexual abuse is relatively new, and so the evidence base is limited. Tools like the U.S. Centers for Disease Control and Prevention’s “Preventing Child Sexual Abuse Within Youth-Serving Organizations: Getting Started on Policies and Procedures” manual provide organizational leadership with guidelines for recruitment, training of employees and volunteers, setting standards for behavior, ensuring safe environments, and responding to inappropriate behavior, violations of policy, and allegations or suspicions of child sexual abuse.  

**CASE STUDY**

The Redwoods Group — Online Training for Child Sexual Abuse Prevention

The Redwoods Group, a B-corporation and social enterprise, is a specialty insurance company focused on child-serving nonprofits such as YMCAs, Jewish Community Centers, Boys and Girls Clubs, and nonprofit residential camps. The company offers online training to all customers on a variety of safety topics, including child sexual abuse prevention. In 2018, over 42,000 individuals completed a 60-minute online workshop on child sexual abuse prevention offered through Redwoods Institute’s online training. Additional training is provided on appropriate touch, which teaches staff how to appropriately interact with children and to teach them about appropriate touch. Redwoods also covers the topics of peer-to-peer and adult-to-child sexual abuse in detail, teaching employees how to identify the warning signs of abuse and structure youth programs around protecting children.

A specific training on child sexual abuse at camp is also available that covers how to identify red flags and warning signs of abuse and methods to protect campers from both peer-to-peer and adult-to-child sexual abuse. Finally, Redwoods offers 60-minute training on social media and technology, featuring topics such as grooming for sexual abuse, cyberbullying, and sexual harassment.

For more information, visit [redwoodsgroup.com/safety-resources/redwoods-institute/](http://redwoodsgroup.com/safety-resources/redwoods-institute/)

This intervention was categorized as PRUDENT
In addition, there are emerging efforts to prevent child sexual abuse and exploitation by engaging the private sector to create safe spaces where sexual abuse and exploitation are likely to occur. For example, The Code 143 is a multi-stakeholder initiative that seeks to prevent child sexual abuse and exploitation in hotel facilities.

**CASE STUDY**

**Preventing Institutional Abuse**

A series of systematic reviews across HICs (including Australia, Belgium, Germany, the Netherlands, the United Kingdom, and the United States) where institutional child sexual abuse has occurred (including in the Catholic Church) found that individual risks cannot be used to prevent potential abusers from accessing children, but that situational prevention initiatives may work better. The following factors were found to be relevant in organizations where children had been sexually abused:

- Privacy and the offender being alone with the child
- Persons in positions of trust having little supervision or monitoring
- Lack of safeguarding policies
- Failure to report or sanction offenders
- A culture where abuse is normalized
- A hierarchical organization where it is difficult for junior staff to disclose
- Lack of an adequate system for filing abuse complaints or disclosing violence
- Lack of safe space for children who are victimized to tell anyone about the issue and to have their abuse acted on appropriately

As evidenced by the array of factors contributing to incidences of child sexual abuse, preventing institutional sexual abuse in organizations requires significant changes in the policies, norms, and culture of the organization.

This intervention was categorized as **PRUDENT**

In addition, there are emerging efforts to prevent child sexual abuse and exploitation by engaging the private sector to create safe spaces where sexual abuse and exploitation are likely to occur. For example, The Code 143 is a multi-stakeholder initiative that seeks to prevent child sexual abuse and exploitation in hotel facilities.
The Code is a multi-stakeholder initiative with the mission to provide awareness, tools, and support to the tourism industry to prevent the sexual exploitation of children.

The sexual exploitation of children in travel and tourism encompasses a broad spectrum of exploitation of children, including in prostitution and pornography, for the production of online child abuse material, and in the sale and trafficking of children in all forms. Volunteer and humanitarian tourism, orphanage tourism, and large-scale sporting events are all examples wherein offenders can easily access and exploit children. Many offenders take advantage of hotel facilities to commit crimes against children, providing an opportunity through the engagement of the travel and tourism industry to keep children safe and end the impunity of offenders.

The Six Criteria of The Code to Protect Children

When a tourism company joins The Code, it commits to taking six essential steps to help protect children, the “six criteria” of The Code, including to:

1. Establish a policy and procedures against the sexual exploitation of children
2. Train employees in children’s rights, the prevention of sexual exploitation, and how to report suspected cases
3. Include a clause in contracts through the value chain stating a common repudiation and zero tolerance policy of sexual exploitation of children
4. Provide information to travelers on children’s rights, the prevention of sexual exploitation of children, and how to report suspected cases
5. Support, collaborate, and engage stakeholders in prevention of sexual exploitation of children
6. Report annually on implementation of the six criteria

The Code’s team and Local Code Representatives provide support, guidance, best practice examples, and online tools to make these actions as easy and effective as possible.

For more information, visit thecode.org/
There has been increased focus on the role that technology and the internet play in the perpetration of sexual violence and abuse. To date, many programs are school-based and aim to raise awareness among teachers, parents, and students about the risks associated with technology and the internet. Safer Surfer is a program that can be utilized to protect children utilizing the internet by blocking specific sites and preventing exposure to predatory online behavior. While largely based in HICs, a pre- and post-test evaluation showed that children who used the Safer Surfer program showed significant improvements in their knowledge about safety and risks associated with talking to people in chat rooms.144
## SAFE ENVIRONMENTS

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manipulation of physical environment in school settings (e.g., safe spaces for</td>
<td>Age: Early</td>
<td>PROMISING</td>
<td>Increased hot spot monitoring in schools shown to decrease risk of sexual victimization (dating violence and sexual harassment) and</td>
<td>Manipulating the physical environment alone does not change violence, as it must be complemented by supportive behaviors and norms; these interventions need to be complemented by policy changes and behavior change programs</td>
<td>Shifting Boundaries</td>
</tr>
<tr>
<td>play, school staff to monitor violence-prone hot spots identified by students)</td>
<td>adolescence</td>
<td></td>
<td>reduce prevalence and frequency; more cost-effective and less resource-intensive intervention than classroom-based programs</td>
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<td></td>
<td>Gender: All</td>
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<tr>
<td>Adoption of policy and practices to prevent sexual violence in the school (e.g.,</td>
<td>Age: All</td>
<td>PROMISING</td>
<td>Available evidence suggests this can moderate peer-reported victimization, self-reported aggression, and aggressive bystander behaviors</td>
<td>Needs to be complemented by active social change in the school environment; whole-of-school approach hard to evaluate, so evidence is limited; evidence does support different elements of the approach</td>
<td>Doorways III; Good School Toolkit</td>
</tr>
<tr>
<td>zero-tolerance policies for sexual violence, notification, and anti-harassment</td>
<td>Gender: All</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>training for staff)</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>Adoption of safeguarding policies and procedures for child- and youth-serving</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Includes the adoption of a wide range of policies and procedures to safeguard children from CSA, all of which have been theorized to</td>
<td>Limited evidence on the impact of safeguarding to prevent sexual violence against children</td>
<td>Various policies and procedures from across sectors (e.g., International Safeguards for</td>
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<tr>
<td>organizations (e.g., mandatory background checks for staff, mandatory reporting,</td>
<td>Gender: All</td>
<td></td>
<td>protect children</td>
<td></td>
<td>Children in Sport; Redwoods Group Training; Australian Royal Commission into Institutional Responses to Child Sexual Abuse)</td>
</tr>
<tr>
<td>codes of conduct, yearly safety assessments, anonymous mechanisms for reporting</td>
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<tr>
<td>abuse)</td>
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<td></td>
</tr>
<tr>
<td>Awareness-raising of online child sexual abuse and exploitation for students,</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Aim to raise awareness among teachers, parents, and students about the risks associated with technology and the internet; block specific</td>
<td>Need for additional evidence on the impact and effectiveness of this approach</td>
<td>Safer Surfer</td>
</tr>
<tr>
<td>parents, and teachers</td>
<td>Gender: All</td>
<td></td>
<td>sites and apps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manipulation of physical environment in humanitarian settings (e.g., lighting,</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>General agreement among humanitarian actors that modifications to the physical environment are necessary to keep women and children</td>
<td>Lack of strong evidence to document the impact of this strategy</td>
<td>Child-Friendly Spaces (CFS)</td>
</tr>
<tr>
<td>latrines, child-friendly spaces for play)</td>
<td>Gender: All</td>
<td></td>
<td>safer during displacement</td>
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</table>
PARENT AND CAREGIVER SUPPORT
SUMMARY OF INTERVENTIONS: PARENT AND CAREGIVER SUPPORT

<table>
<thead>
<tr>
<th>How it aligns with key SDGs</th>
<th>Relevant stakeholders</th>
</tr>
</thead>
</table>
| **1.3:** Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and vulnerable | • Parents/caregivers  
• Health services  
• Social welfare agencies |
| **4.2:** By 2030, ensure that all girls and boys have access to quality early childhood development, care, and pre-primary education so that they are ready for primary education |  |

Summary or rationale

Ensuring that parents, caregivers, and families are aware of the risks of sexual violence, understand the impact that it can have, and know how to support children if they are victimized. Further, the family unit can play a fundamental role in the establishment of positive and healthy views on relationships, gender, and violence.

Effects

• Development of healthy and positive relationships among children and adolescents  
• The establishment of safe and supportive environments for children and adolescent victims of sexual violence  
• Reduction in victimization

OVERVIEW/RATIONALE OF INTERVENTIONS

Evaluations of parent and caregiver support programs have demonstrated significant and lasting positive effects on outcomes related to physical violence, parent-child relationships, and other risk behaviors. However, no evaluation to date has assessed whether these programs are effective at reducing sexual violence against children (except for sexual violence experienced by adolescents in the context of dating relationships). Although parents can sometimes be the perpetrators of sexual violence, they also have an important role to play as a resource in safeguarding children from a wide range of perpetrators in the home, the community, and in positions of trust.

Categories of interventions for parent and caregiver support include home visiting programs, parenting programs to prevent teen dating violence, and parenting programs to improve parent-child communication.

Evaluations of these interventions have shown the following:

• Reductions in proven child maltreatment cases and referrals to child protection services
• Reductions in abusive, negative, or harsh parenting, especially in relation to discipline
• Reductions in bullying and being bullied
• Reductions in physical, emotional, or sexual violence victimization by partners or peers (for adolescents)
• Reductions in aggression and delinquency during adolescence
• Increases in positive parent-child interactions
• Increases in parental monitoring of child and youth safety

Evidence-based programs that support parents and caregivers can strengthen relationships, caregiving, and the health, safety, and resilience of children and families. These dynamics help prevent all types of violence throughout children’s lives, from infancy to adulthood. In addition, evidence shows that a strong relationship with trusted adults, particularly one’s mother, is an important protective factor for experiencing child sexual violence — a strong and open relationship between a child and parents is also a strong protective factor against the perpetration of sexual violence. 145,146

**SUMMARY OF AVAILABLE EVIDENCE: HOME VISITING PROGRAMS**

In recent years, there has been an increase in the popularity of home visiting programs as a means of addressing risk factors for child maltreatment. The evidence supporting the effectiveness of these programs from several meta-analyses, however, is mixed. One potential explanation for this inconsistency explored in the current study involves the manner in which these programs were implemented. A 2016 meta-analysis reviewed 156 studies associated with nine different home visiting program models targeted to caregivers of children between the ages of 0 and 5. 147 Results revealed that several implementation factors, including training, supervision, and fidelity monitoring, had a significant effect on program outcomes, particularly child maltreatment outcomes. Study characteristics, including the program’s target population and the comparison group employed, also had a significant effect on program outcomes. However, most of these programs do not specifically examine sexual violence against children as an outcome.

The Nurse-Family Partnership in the United States is a proven program in supporting families, with randomized control trials showing that home visits by registered nurses to low-income families in the first two years of their children’s lives contributed to lower childhood injuries, fewer unplanned pregnancies, and a 48% reduction in child abuse and neglect in a 15-year follow-up. 148 In the Netherlands, the program showed lower levels of reports to a child protection agency for participating families and long-term improvements in the family environment. 149 In the United Kingdom, the intervention did not show any effect. 150 The program is being trialed in Australia and Canada.
PARENTING PROGRAMS TO PREVENT TEEN DATING VIOLENCE

Studies show that programs focused on helping adolescents manage dating and relationships can build healthy relationship skills and decrease some of the associated risks. Evidence indicates that families have a significant and persistent influence on adolescents and that the family unit is where adolescents primarily acquire relationship skills, knowledge, and values.\footnote{151} There is a significant role that parents can play in preventing sexual violence and abuse.

For example, the aim of Families for Safe Dates, a family-based safe dating program, is to motivate and facilitate the conversation between adolescents and their caregivers about dating violence. This approach to prevention is grounded in the social-ecological approach and does not intervene with adolescents directly. Rather, it promotes change through the family context, ideally to reinforce positive values and behaviors learned about in other spheres (e.g., school). Evaluation of this program through randomized control trials in the United States found increased caregiver perceptions of the severity of dating abuse, increased response efficacy for preventing dating abuse and self-efficacy for talking about dating abuse, increased knowledge of dating abuse, decreased acceptance of dating abuse, and increased communication skills with the adolescent. In addition, participation in the program was significantly associated with less physical dating abuse victimization.\footnote{152}

PARENTING PROGRAMS TO IMPROVE PARENT-CHILD COMMUNICATION

Adapted from the U.S. program Parents Matter!,\footnote{153} and the Families Matter! program,\footnote{154} (FMP) is an evidence-based, parent-focused HIV and violence prevention intervention designed to promote positive parenting and effective parent-child communication about sexuality and sexual risk reduction, including risk for child sexual violence and gender-based violence. FMP is a seven-session program delivered over seven weeks by trained and certified facilitators; it is designed for parents or caregivers of 9- to 14-year-olds and 15- to 19-year-olds and provides direct linkages to health and community resources. FMP has been adapted and delivered in 13 African countries and Haiti. FMP recognizes that many parents and guardians may need support to effectively convey values and expectations about sexual behavior and communicate important HIV, STI, and pregnancy prevention messages to their children. The goal of FMP is to reduce sexual risk behaviors among adolescents, including delaying the onset of sexual debut, by using parents to deliver primary prevention to their children. FMP is tailored to include specific protective strategies against child sexual violence and harmful gender norms that may lead to violence.

The FMP curriculum has been shown to have acceptable and age-appropriate content surrounding these topics. By raising awareness of and highlighting parents’ roles in helping their children to prevent both child sexual violence and gender-based violence, FMP promotes reflection, dialogue, and action across the broad spectrum of issues that contribute to these problems. Capacity-building and technical support continues for implementation and evaluation activities in eight African countries — Botswana, Côte d’Ivoire, Kenya, Mozambique, South Africa, Tanzania, Zambia, and Zimbabwe — and in 15 languages.\footnote{155} Additional workshops to help equip key community members to address a variety of topics, including gender-based violence and child sexual violence, include “Faith Matters,” “Teachers Matter,” and “Communities Matter.”
## Parent and Caregiver Support

### Intervention Type

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting programs to prevent teen dating violence</td>
<td>Age: Early and late adolescence</td>
<td>EFFECTIVE</td>
<td>Evidence suggests that multi-component education programs delivered to staff, students, and their parents on sexual health, risky sexual behaviors, and early pregnancy are effective in reducing high-risk sexual activities among high school-aged adolescents and decreasing physical violence in dating relationships</td>
<td>Limited information on impact of these interventions on multiple forms of sexual violence within dating relationships</td>
<td>Families for Safe Dates in high-income countries</td>
</tr>
<tr>
<td>Home visiting programs</td>
<td>Age: Expecting parents/ early childhood</td>
<td>PROMISING</td>
<td>Studies in the United States have shown that registered nurses visiting homes of low-income families in the first two years of the child’s life contributed to lower childhood injuries and unplanned pregnancies as well as an increase in parents’ awareness of child sexual violence</td>
<td>Limited information on impact of these interventions on preventing child sexual abuse in early childhood or childhood/adolescent experiences of sexual violence later in life; some conflicting evidence on impact depending on the fidelity of implementation</td>
<td>Nurse-Family Partnership</td>
</tr>
<tr>
<td>Parenting programs to improve parent-child communication</td>
<td>Age: Early and late adolescence</td>
<td>PROMISING</td>
<td>Raises awareness by highlighting parents’ roles in helping their children to prevent both child sexual violence and gender-based violence, and promoting reflection, dialogue, and action</td>
<td>Additional research needed on actual reductions in sexual violence victimization</td>
<td>Families Matter! Program</td>
</tr>
</tbody>
</table>
INCOME AND ECONOMIC STRENGTHENING
OVERVIEW/RATIONALE OF INTERVENTIONS

Community-level poverty is among the risk factors for sexual violence against children. Social safety nets (SSNs) are policy tools to address poverty and vulnerability, improving children’s health outcomes.

Income and economic empowerment in this context is largely in relation to the family structure or older adolescents who are in a position to work. Empowering the family via financial support ensures that children can attend school and are not put in low-skilled, dangerous jobs, which can increase their risk for all forms of violence. It is well established that rates of sexual violence are lower in countries with higher levels of education and employment, particularly among women. Income support programs and systems that increase financial stability (particularly for women in the family) not only increase a family’s social and economic status, but can help prevent abuse and neglect of children and adolescents. These include cash transfer programs and comprehensive programs that include mentoring and microfinance training.

SUMMARY OF INTERVENTIONS:
INCOME AND ECONOMIC STRENGTHENING

How it aligns with key SDGs

1.3: Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030, achieve substantial coverage of the poor and vulnerable

1.4: By 2030, ensure that all men and women, in particular the poor and vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology, and financial services, including microfinance

5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including tracking and sexual and other types of exploitation

5.3: Eliminate all harmful practices such as child, early, and forced marriage and female genital mutilation

10.2: By 2030, empower and promote the social, economic, and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion, or economic or other status

Summary or rationale | Effects | Relevant stakeholders
---|---|---
Empowering the family via financial support ensures that children can attend school and are not put in low-skilled, dangerous jobs, which can increase their risk of all forms of violence | • Reductions in all forms of violence
• Reduction in child, early, and forced marriage
• Shift in social and cultural norms that approve intimate partner and sexual violence | • Local community
• Social welfare agencies
• Parents/caregivers

OVERVIEW/RATIONALE OF INTERVENTIONS

Community-level poverty is among the risk factors for sexual violence against children. Social safety nets (SSNs) are policy tools to address poverty and vulnerability, improving children’s health outcomes.

Income and economic empowerment in this context is largely in relation to the family structure or older adolescents who are in a position to work. Empowering the family via financial support ensures that children can attend school and are not put in low-skilled, dangerous jobs, which can increase their risk for all forms of violence. It is well established that rates of sexual violence are lower in countries with higher levels of education and employment, particularly among women. Income support programs and systems that increase financial stability (particularly for women in the family) not only increase a family’s social and economic status, but can help prevent abuse and neglect of children and adolescents. These include cash transfer programs and comprehensive programs that include mentoring and microfinance training.
CASH TRANSFER PROGRAMS

Much of the evidence around the benefits of income support and strengthening are broadly associated with all forms of child abuse and neglect, as opposed to specific forms of sexual violence. Cash transfer programs, for example, are shown to increase school enrollment and completion, which in turn can contribute to reductions in intimate partner violence witnessed by children and the risk that they will become either victims or perpetrators.

One study that reviewed evidence on the linkages between non-contributory SSNs and the experience of childhood emotional, physical, and sexual violence in LMICs found promising evidence related to sexual violence among female adolescents in Africa. There is less clear evidence of significant impacts in other parts of the developing world and on outcomes among young children. Findings highlight that traditional SSNs are never designed with violence prevention as primary objectives and thus should not be considered as standalone interventions to reduce risks for childhood violence. However, SSNs, particularly within integrated protection systems, appear to have potential to reduce violence risk.

Malawi’s Social Cash Transfer Program delayed sexual debut among youth, as did Kenya’s Cash Transfer for Orphans and Vulnerable Children. A study on the impact of South Africa’s Child Support Grant (CSG), an unconditional cash transfer program, suggests that the CSG may play an important role in reducing adolescent risky behaviors, particularly early sexual debut among girls.
A recent review of social safety nets, including cash transfers, and childhood violence found only 11 completed rigorous evaluations examining these linkages, analyzing unique impacts on diverse violence indicators. Among these impacts, approximately one in five, or 20%, represented significant protective impacts on childhood violence, with the most promising evidence originating from impacts on sexual violence among female adolescents in Africa. These included 29 measures of sexual violence (20 indicators of sexual exploitation, including transactional sex, and nine indicators of sexual abuse, including age-disparate sex), among which two out of five or 40% showed protective effects. For example, evaluations of Kenya’s Cash Transfer for Orphans and Vulnerable Children and South Africa’s Child Support Grant found reductions in transactional sex among female adolescents, while the latter and the Zomba Cash Transfer Program, an NGO-implemented cluster randomized trial in Malawi, found reductions in age-disparate sex.

In the year since the review was conducted, two additional studies examining sexual violence among female adolescents or youth in Kenya and Tanzania have been released. The Kenya study examined a bundled cash transfer program (as part of the Adolescent Girls Initiative), conditional on schooling paired with community dialogues on violence and girl-specific health and wealth creation components; it found reductions in combined past-year emotional, physical, or sexual violence from boys in the Kibera study site but not the Wajir study site. The Tanzania study examined the government’s Productive Social Safety Net program and found no reductions in sexual violence among youth from multiple perpetrators. Despite the limited number of studies and variable impacts, a mixed-method review of the effects of cash transfers on adult women’s experiences of intimate partner violence found robust reductions as a result of programming via reductions in poverty-related stress, intra-household conflict, and women’s empowerment. Combined with select promising impacts in Africa for adolescent girls, this suggests that positive mechanisms exist; however, they are far from automatic or universally tested. To date, studies on adolescent boys, in other regions, and among younger groups of children are lacking. Future research should investigate the potential of cash transfer programs, as well as design features that may promote stronger linkages to child protection outcomes, including adolescent-focused and bundled programming.
COMPREHENSIVE PROGRAMS THAT INCLUDE MENTORING AND MICROFINANCE TRAINING

The Empowerment and Livelihood for Adolescents (ELA) program offers adolescent girls (between the ages of 14 and 20) access to mentorship and microfinance training. Established by BRAC in Bangladesh, ELA combines both livelihood and life skills with economic empowerment. The training is provided through an adolescent club rather than schools, which means that youth who are not in school can also access the program. Based on a peer mentoring model, the program provides information on rights, conflict resolution, health, gender issues (including sexual and reproductive health), and financial literacy training (including business planning and budget management). 168

ELA is now being implemented in multiple countries. In Uganda, where 60% of the population is under 20 years old, the intervention aimed to relax human capital constraints that adolescent girls face by simultaneously providing them vocational training and information on sex, reproduction, and marriage. A rigorous evaluation by the World Bank has found lasting results. At four years post-intervention, adolescent girls in treated communities were five times more likely to engage in income-generating activities, corresponding to a 48% increase over baseline levels, an impact almost entirely driven by their greater engagement in self-employment. Teen pregnancy fell by a third, and early entry into marriage or cohabitation also fell rapidly. Strikingly, the share of girls reporting sex against their will dropped by close to a third and aspired ages at which to marry and start childbearing moved forward. The results highlight the potential of a multifaceted program that provides skills transfers as a viable and cost-effective policy intervention to improve the economic and social empowerment of adolescent girls over a four-year horizon. 169

Finally, there needs to be consideration for how such programs impact the risk of violence among specific groups. Evidence from a quasi-experimental study in Uganda showed that girls who have access to economic assets may be at higher risk of experiencing sexual harassment and violence by men. 170 As a result, additional research into the unintended consequences of economic empowerment for adolescent girls in various settings is needed.
## Income and Economic Strengthening

<table>
<thead>
<tr>
<th>Intervention Type</th>
<th>Age Group/Gender</th>
<th>Effectiveness</th>
<th>Strengths</th>
<th>Limitations</th>
<th>Examples of Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash transfers</td>
<td>Age: Early and late adolescence&lt;br&gt;Gender: Female</td>
<td><strong>PROMISING</strong></td>
<td>Strong evidence that cash transfers can empower women and girls economically and provide resources to continue their education and reduce sexual debut; reductions in child, early, and forced marriage and forced/unwanted sex</td>
<td>There is robust evidence for reductions in physical and sexual violence against adult women, but there is limited evidence for children and adolescents, which is primarily on outcomes of early marriage and transactional and age-disparate sex</td>
<td>UNICEF Malawi Social Cash Transfer Program</td>
</tr>
<tr>
<td>Comprehensive programs that include mentoring and micro-finance training (e.g., information on rights, conflict resolution, sexual and reproductive health, gender equality and financial literacy training—including business planning and budget management)</td>
<td>Age: Early and late adolescence&lt;br&gt;Gender: Female</td>
<td><strong>PROMISING</strong></td>
<td>Multifaceted programs that affect multiple outcomes, including employment, reductions in child marriage, early pregnancy, and forced/coerced sex</td>
<td>Because of the comprehensive nature of these programs, it is difficult to ascertain the direct impact of economic empowerment interventions in isolation of the other components of the program</td>
<td>Empowerment and Livelihood for Adolescents Program</td>
</tr>
</tbody>
</table>
RESPONSE AND SUPPORT SERVICES
SUMMARY OF INTERVENTIONS: RESPONSE AND SUPPORT SERVICES

How it aligns with key SDGs

3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all

16.3: Promote the rule of law at national and international levels and ensure equal access to justice for all

Relevant stakeholders

- Victim support services
- Social welfare agencies
- Health services
- Local community
- Parents/caregivers
- Criminal justice system

Summary or rationale

It is vital that children and adolescent victims of sexual violence have access to health and welfare services, as well as the criminal justice system, to reduce the long-term impact of violence

Effects

- Reduced long-term impact of violence
- Reduced long-term symptoms of trauma
- Reduction in re-victimization

OVERVIEW/RATIONALE OF INTERVENTIONS

When children have suffered sexual violence, it is crucial to identify, help, and protect them from further harm. Coordination among child- and adolescent-centered social services, health, and justice systems can promote safety, provide appropriate care, and prevent re-victimization. This is true for any form of violence against children and therefore is not specific to sexual violence. Although this evidence review is focused on prevention, decades of learning have shown that prevention and response are intricately related and that effective response services provide an enabling environment for more effective prevention efforts.

CHILD PROTECTION SYSTEMS AND ASSOCIATED RESPONSE SYSTEMS

As described in the “INSPIRE Handbook,” an effective and comprehensive response and support strategy addresses both acute and ongoing service needs in the following ways:

- Providing children and adolescents who have experienced or are at risk of violence with appropriate, timely, child-friendly, and gender-sensitive care and services that address their safety, health, and social needs and ensure access to justice

- Preventing or reducing harmful effects of violence on physical and mental health, risk-taking behavior, and future perpetration or victimization among victims, witnesses, or alleged offenders
Where these services are available, including counseling and broader social services, evidence suggests that they can help break the cycle of violence. Responses to child and adolescent sexual violence need to be integrated into the broader national child protection, health, and justice systems. Evidence consistently underpins that key government agencies, including health and social welfare, child protection services, police, and health care service providers, need to be involved to ensure all needs of victims are met. 172

Within these systems, there needs to be a range of victim-centered and trauma-focused services available for victims. It is also critical to work with children who have perpetrated sexual violence. All of these services need to be child-friendly and gender-sensitive. Prevention services also need to be supported and scaled.

**DEFINITION**

Child-Friendly and Gender-Sensitive Services

“Child-friendly” describes systems, services, and processes designed specifically for children and adolescents. Another common term is “child- and adolescent-centered,” which acknowledges that younger children and adolescents have different needs. 173 The “INSPIRE Handbook” uses “child-friendly” while highlighting that this includes the age-appropriate needs of all individuals under the age of 18.

**Child-friendly systems and services recognize children’s right to:**

- Be treated with dignity and compassion
- Have age-appropriate information they can understand
- Be heard and responded to in a non-judgmental way
- Have timely and convenient access to services and procedures
- Choice in how care or service is delivered
- Participate actively in decision-making processes
- Have the opportunity to give informed consent at each step of the care process
- Have procedures adapted for their age and capacity
- Have procedures conducted in a child-friendly environment
- Have their privacy, confidentiality, integrity, and safety ensured

In addition to being child-friendly, “gender-sensitive” systems and services respond to the different issues faced by boys and girls. They recognize and actively seek to overcome gender inequality in access to services and in power, status, and norms or attitudes that influence how girls or boys who experience violence are treated.
Violence-related services and procedures that are child-friendly and gender-sensitive help avoid secondary victimization — harm caused through inadequate response of institutions and individuals to the child.

**Secondary victimization happens when:**

- First-line responders are dismissive, judgmental, or skeptical of the child’s story
- The child is asked to describe the incident repeatedly while receiving services and accessing justice
- A child’s privacy and confidentiality are not protected
- A child must invest excessive time and effort accessing services and justice

Secondary victimization is different from re-victimization, which refers to a victim’s repeated experience of violence.174

**Elements of system strengthening for child protection include the following activities:**175

- Sufficiently funded legal and policy frameworks to provide mandates to response service sectors
- Establishing or strengthening structures and processes for child protection
- Strengthening the workforce
- Effective coordination and collaboration among sectors and services (including state and non-state)
- Robust data collection and information management
The uptake of health services by child survivors of violence is a growing challenge, especially in sub-Saharan Africa. A major factor contributing to this is the inability of health care workers to provide extra support in facilitating referral to, and linkage of, the child survivors across the various service delivery points. LVCT Health, a civil society organization in Kenya, sought to explore the acceptability of using lay health workers, trained as case advocates, to escort child survivors of violence to various referral points within two public health facilities in Kenya.

Best Practices/Promising Program

The case advocates were identified by the hospital administration from a pool of interns (university students and recent graduates) who were attached to each health facility. They were taken through a three-day training, aimed at equipping the case advocates with basic information on violence against children, including types: the guiding principles for providing services to a child survivor of violence, how to communicate with children, and how to provide supportive referrals.

Post-training, the case advocates were stationed at the outpatient departments and tasked with escorting all child survivors and their caregivers through the various service delivery points. Each case worker was attached to an LVCT mentor for continued support, offered during monthly face-to-face meetings. Perceptions of the usefulness of case advocates were assessed using in-depth interviews with the children, as well as interviews and focus groups with caregivers.
Results

The use of case workers to support child survivors of violence was acceptable to children, caregivers, and health workers. Caregivers and child survivors reported that the case advocates were useful in fast-tracking access to services, easing the movement through health facilities, and helping them communicate their issues to the different service providers.

Health workers reported improved timeliness, and completeness of services, due to the involvement of the case advocates. Overall, the intervention led to an increase in the number of child survivors who received comprehensive services from the two health facilities during the study period.

Key considerations for improving access to comprehensive services by child survivors of violence are as follows:

• Identification of individuals who can work as escorts for child survivors across the different service delivery points

• Training and continuous mentorship of the lay workers

COUNSELING AND THERAPEUTIC APPROACHES

Victim-centered services include support groups, crisis interventions, medical and legal advocacy, and community resources, as well as the therapeutic approach to interventions, such as cognitive-behavioral treatments. It is important to note that these interventions and treatments are often designed for specific populations, and while there are intersections between risks and program types, each needs to be tailored to be age- and gender-appropriate, as well as culturally sensitive.

Trauma-focused cognitive behavioral therapy (TF-CBT) is an evidence-based treatment for children, which also incorporates (non-offending) partners or caregivers. In HICs, this approach to treatment has shown reductions in symptoms associated with many forms of childhood trauma, with promising evidence coming from LMICs, such as Zambia. A randomized control trial of children in Zambia found that TF-CBT was effective in reducing trauma symptoms and functional impairment among trauma-affected youth overall, and it was particularly effective for survivors of child sexual abuse, decreasing both overall measures of trauma and increasing functioning subsequent to the intervention. There was no significant moderator effect found by gender, age, number of trauma types, school status, or caregiver participation in treatment, showing that TF-CBT can be effective for a wide range of children who have experienced sexual abuse.

The Child and Family Traumatic Stress Intervention has also been shown to reduce symptoms associated with traumatic events, including the disclosure of sexual violence. This program is intended for children aged 7 to 18 and is a strengths-based approach that seeks to enhance protective factors while at the same time improving communication between the child and the (non-offending) caregiver or parent.
MULTISYSTEMIC THERAPY FOR CHILD/YOUTH OFFENDERS

Addressing problematic or at-risk behavior among children and adolescents is also important, particularly where it has involved sexual offending. Approaches and interventions that target these behaviors focus on the youth’s ecology that can exacerbate the risk of being subject to sexual violence. One example is Multisystemic Therapy – Problem Sexual Behavior, which seeks to reduce a parent’s or caregiver’s and the child’s denial about sexual offending and the associated consequences, addressing the child’s views and perspectives on age-appropriate sexual experiences and relationships and the attitudes that contribute to the offending.\textsuperscript{181} There are also several other psychological trauma-focused therapies that have been shown to reduce symptoms of post-traumatic stress disorder (PTSD), including cognitive processing therapy and prolonged exposure therapy. However, these have primarily been evaluated with adult survivors of sexual violence.\textsuperscript{182}

Understanding what works in preventing reoffending among offending children has been historically challenging, with many concluding that “nothing works.”\textsuperscript{183} There is, however, continually building evidence that supports the underlying feature of prevention programs with this cohort: They must address the complex causes of offending and “be delivered with ecological validity.”\textsuperscript{184} Multisystemic Therapy has been found to capture these elements, with effectiveness in addressing these behaviors.\textsuperscript{185,186}

While there are several treatment approaches available for adults who perpetrated sexual harm, Cognitive behavioral therapy (CBT) is the most commonly used; studies have shown that when CBT is used, offenders were significantly less likely to reoffend than those who did not participate in treatment or who received non-CBT treatment.\textsuperscript{187} Other treatment options include cognitive restructuring, anger management, empathy-building, and for clients with deviant sexual interests, arousal reconditioning procedures.\textsuperscript{188} Studies have concluded that effective treatments are indeed available for perpetrators of sexual abuse, and recent meta-analyses demonstrate significant reductions in sexual recidivism. Unfortunately, this field of research is limited by the lack of randomized controlled trials, a research design considered the “gold standard” for validating intervention effectiveness, and critics warn that the results of systematic reviews and meta-analyses are insufficient for determining that CBT is an effective intervention.\textsuperscript{189,190}

In general, clinical treatment of people who have engaged in violent behavior of any kind is more effective at reducing the risk of future violent behavior when the treatment addresses the risks, needs, and responsiveness of the particular individual client.\textsuperscript{191} To be effective, treatment interventions must target both risk and protective factors known to influence the likelihood of engaging in sexually abusive behavior with children. Relative to adults, children influenced by different risk and protective factors, are less likely to reoffend (and therefore need less intensive intervention), and differ with respect to their developmental needs and strengths, so interventions must reflect these differences.

There is growing evidence suggesting that thoughtful community after-care and management strategies may significantly reduce the recidivism of sex offenders. Although not considered a treatment intervention per se, Circles of Support and Accountability (CoSA) is a program developed specifically to support the success of people returning to their communities after having served prison terms for sexual crimes.
Trained volunteers collaborate with professionals to “circle” the client (known as the “core member”) to provide friendship, support, and additional supervision aimed toward successful community reintegration. Several studies, including randomized trials, support the effectiveness of CoSA in reducing sexual recidivism.\textsuperscript{192, 193}

The same treatment for adults is prescribed for youth who have engaged in harmful sexual behavior, which is not necessarily developmentally appropriate. Fortunately, there is growing recognition of the importance of developmentally appropriate treatment and, in particular, the essential inclusion of parents in the treatment. This has resulted in a shift toward more effective and family-focused interventions.

Several randomized control trials present that a central assumption of these interventions is that parents (or other caregivers) are the key to achieving and sustaining positive youth behavioral change. More specifically, evidence-based interventions teach children and youth the specific skills of coping and self-control in situations where sexual behavior could occur. At the same time, in parallel with the focus on the child is a focus on directly engaging parents and other caregivers to improve child behavior management; to lead sex education of their children, parents, and other caregivers to address managing child behavior; to enhance sex education; to gain knowledge of abuse prevention strategies; and to assist parents in setting clear sexual behavior rules that work for their specific family.\textsuperscript{194} Finally, these evidence-based interventions take place in non-forensic community settings and/or the family’s home.\textsuperscript{195}

The vast majority of people who engage in harmful sexual behavior and are caught do not reoffend again. This is true both for adults\textsuperscript{196} and children.\textsuperscript{197} Just as important, there are effective interventions that help children and adults return to a path of pro-social, law-abiding behavior.

\textbf{DATA GAP}

\textbf{Medical and Psychological Interventions for Adults who Sexually Offend Against Children}

Numerous meta-analyses and reviews have been conducted on the effectiveness of psychological treatment of sexual offenders in reducing recidivism, but few studies have focused specifically on adults who sexually offend against children. Studies on the effectiveness of current medical and psychological interventions to prevent known sexual offenders against children from reoffending have found that evidence is insufficient to establish any effect of treatment.\textsuperscript{198, 199}
FOSTER CARE INTERVENTIONS INVOLVING SOCIAL WELFARE SERVICES

There are three main types of alternative care to residential or institutional care (such as orphanages): foster care, enhanced foster care, and kinship care.

- Foster care operates within a formal alternative care system and places children with authorized care providers in their own homes
- Enhanced foster care adds a broader range of services and support to this home-based care system, which is often under-resourced
- Kinship care is provided by relatives or other caregivers close to the family and known to the child

Informal kinship care is common in most countries, though some countries are formalizing these placements with kinship foster care. This allows children and families to access any resources, services, and support available through a foster care system. Evidence shows that foster care supported by social services (enhanced foster care) has better outcomes for children and reduces their risks of experiencing violence compared to other types of alternative care. Many countries are seeking to move away from institution-based care towards family-based alternatives such as enhanced foster care and kinship care. The “UN Guidelines for the Alternative Care of Children” contain principles and recommendations for protecting children’s rights and well-being in alternative care settings, and several organizations have tools to help operationalize the guidelines and strengthen alternative care systems.

Potential outcomes include improved long-term health and mental health outcomes, reduction in child behavioral problems and caregiver stress, and increased chances of parent/child reunification and fewer moves to other foster homes or group homes.

SCREENING IN HEALTH CARE SETTINGS

There is conflicting evidence about the benefits of implementing screening procedures in health care settings as a way to identify victims of sexual violence in the violence against women literature. However, evidence drawn from different program evaluations has sometimes demonstrated effectiveness when adopted by pediatricians to identify specific types of violence and maltreatment among children, including sexual violence. In an article that addresses the screening of children for Adverse Childhood Experiences (ACEs), David Finkelhor suggests that there needs to be effective interventions in place when there is a positive ACE screening and that the potentially negative outcomes and costs need to be considered in the broader screening regime. The “INSPIRE Handbook” now recommends “clinical inquiry combined with interventions” as opposed to general screening for violence. Protocols and training for service providers to recognize and ask about signs and symptoms of violence in order to refer victims to services and support can be beneficial. Examples include the United Kingdom’s National Institute for Health and Care Excellence guidelines for identifying child maltreatment.


Many countries, including LMICs, have established one-stop centers for both children and adults who have experienced violence and abuse (including sexual violence). The concept is to have multiple services (health, justice, social protection) in a single location to maximize the quality of care for individuals. An evaluation of Malawi’s Chikwanekwanes centers (the word means “everything under one roof”) found that families and patients were overall very satisfied with the level of medical care, but one quarter were not satisfied with the law enforcement response. In South Africa, Thuthuzela Care Centers (the Xhosa word means “comfort”) follow a similar model with multiple services for post-rape care in one location, aiming to reduce secondary trauma for the victim, improve perpetrator conviction rates, and reduce the lead time for trying cases. However, none of these approaches has been thoroughly evaluated to show the impact of this model on a variety of short- and medium-term outcomes. More research is needed, particularly in resource-limited settings.
## RESPONSE AND SUPPORT SERVICES

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling and therapeutic approaches for survivors</td>
<td>Age: All Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Demonstrated to reduce symptoms associated with traumatic events, including the disclosure of sexual violence</td>
<td>Should be implemented in conjunction with other response and support services</td>
<td>Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)</td>
</tr>
<tr>
<td>Multisystemic therapy for child/youth offenders</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Addresses the child’s views and perspectives on age-appropriate sexual experiences and relationships, as well as the attitudes that contribute to the offending</td>
<td>Should be implemented in conjunction with other response services</td>
<td>Multisystemic Therapy – Problem Sexual Behavior; Cognitive Behavioral Therapy (CBT); Circles of Support and Accountability (CoSA)</td>
</tr>
<tr>
<td>Child protection systems and associated response systems (e.g., health sector, education sector, social welfare, child protection services)</td>
<td>Age: All Gender: All</td>
<td><strong>PRUDENT</strong></td>
<td>Where services are available, including counseling and broader social services, evidence suggests that access to services and targeted interventions can help break the cycle of violence; responses to child and adolescent sexual violence need to be integrated into the broader national child protection systems, with evidence consistently outlining that key agencies, such as health and welfare government departments, child protection, police, and health care service providers, need to be involved to ensure all needs of victims are met</td>
<td>While these systems are absolutely vital, on their own they are not enough to prevent sexual violence against children and adolescents; they need to be seen as part of a broader set of strategies that include prevention</td>
<td>Multiple examples from around the world (e.g., the National Child Protection Register in South Africa; MARAC in Brazil; A Breeze of Hope in Bolivia)</td>
</tr>
<tr>
<td>Foster care interventions, including social welfare services</td>
<td>Age: All Gender: All</td>
<td><strong>PRUDENT</strong></td>
<td>Alternative care programs where foster and kinship families are supported by a range of services, improving outcomes for children</td>
<td>Should be implemented in conjunction with other response services</td>
<td>Enhanced Foster Care</td>
</tr>
<tr>
<td>Screening in health care settings</td>
<td>Age: All Gender: All</td>
<td><strong>CONFLICTING</strong></td>
<td>Can increase identification of victims and access to treatment when combined with follow-up interventions; should be done as part of a clinical inquiry combined with interventions</td>
<td>Must be combined with effective interventions when screening is positive to avoid negative consequences</td>
<td>NICE Guidelines</td>
</tr>
</tbody>
</table>
EDUCATION AND LIFE SKILLS
SUMMARY OF INTERVENTIONS: OF EDUCATION AND LIFE SKILLS

How it aligns with key SDGs

4.4: By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs, and entrepreneurship

4.7: By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship, and appreciation of cultural diversity and of culture’s contribution to sustainable development

4.a: Build and upgrade education facilities that are child, disability, and gender sensitive and provide safe, non-violent, inclusive, and effective learning environments for all

5.1: End all forms of discrimination against all women and girls everywhere

<table>
<thead>
<tr>
<th>Summary or rationale</th>
<th>Effects</th>
<th>Relevant stakeholders</th>
</tr>
</thead>
</table>
| Formal education and life skills and vocational training programs can help establish protective skills that prevent children and adolescents from being sexually victimized and protect them against associated consequences, such as early pregnancy and STIs | • Increase in academic achievements and outcomes  
• Reductions in child, early, and forced marriage  
• Increased empowerment of girls  
• Reductions in alcohol and drug use | • Education system  
• Teachers  
• Parents/caregivers |

OVERVIEW/RATIONALE OF INTERVENTIONS

Evidence indicates that education programs implemented in schools, community centers, or similar spaces that work with children — both in and out of school — can help prevent the experience of childhood sexual violence, as well as broader forms of violence and their consequences. Programs that seek to improve education and life skills among children and adolescents offer an opportunity for targeted interventions, as well as broader modeling of pro-social behaviors by teachers and education personnel.

SUMMARY OF AVAILABLE EVIDENCE

adolescent intimate partner violence prevention programs

Programs focused on preventing intimate partner violence among adolescents have proved effective. A randomized control trial of Safe Dates, a program from the United States aimed at reducing intimate partner violence among unmarried adolescents in romantic relationships, found 60% less sexual violence perpetration among participating boys and girls aged 12-14.
Similar programs aimed at university students or athletes, while slightly outside the age bracket this review addresses, have shown more disapproving attitudes towards date rape, as well as reductions in self-reported perpetration of sexual violence. Programs promoting healthy relationships have been found to be more effective if they are interactive, are delivered over multiple sessions, use local data on sexual violence and culturally specific and relevant information in the curriculum, and aim to change attitudes rather than solely to provide information. 212

The group intervention Stepping Stones is a 50-hour program that aims to improve sexual health by using participatory learning approaches to build knowledge, risk awareness, and communication skills, and to stimulate critical reflection. A cluster-randomized control trial was implemented with women and men aged 15-26 who were mostly attending schools in the Eastern Cape province of South Africa. The evaluation showed a reduction in men’s perpetration of intimate partner violence and transactional sex but no effects on violence experienced by women, who also reported more transactional sex at 12 months. 213

Stepping stones was also evaluated with out of school youth (mostly aged 18-30) in South Africa using a shortened interrupted time series of two baseline surveys and at 28 and 58 weeks post-baseline, and found a significant reduction in women’s experience of the combined measure of physical and/or sexual intimate partner violence in the prior three months from 30.3% to 18.9%. This was not seen for men. However both men and women scored significantly better on gender attitudes and men significantly reduced their controlling practices in their relationship. 214

There are several school-based prevention programs specific to child sexual violence that aim to improve children’s knowledge about sexual violence and how to protect themselves against it. Some of these programs have been tested experimentally, primarily in HICs, and have shown promising findings in terms of strengthening protective factors; more research into whether they prevent sexual violence is needed. 215

It is important to note that interventions focused on “target hardening” that put the onus on children to understand and navigate the risk of child sexual abuse are controversial. However, there is also a need to educate and empower children to recognize and disclose violence when it occurs. A balance should be achieved between teaching children to take self-protective measures and bolstering children’s resilience by developing the protective factors that make them less vulnerable, including interventions that focus on safe environments, a nurturing home environment that instills confidence, and the provision of services to families that may be at risk or insecure. 216

A more recent randomized controlled study of the same intervention showed no effect for girls in the 12-14 age group, potentially due to the risky environments that surround them. There was also concern that self-defense interventions might give girls confidence disproportionate to their physical abilities and, as a result, that they might neglect more established safety behaviors such as seeking safety in numbers. 217 The evidence of the effectiveness of this intervention is conflicting, and additional research is needed.
A more recent randomized controlled study of the same intervention showed no effect for girls in the 12-14 age group, potentially due to the risky environments that surround them. There was also concern that self-defense interventions might give girls confidence disproportionate to their physical abilities and, as a result, that they might neglect more established safety behaviors such as seeking safety in numbers. The evidence of the effectiveness of this intervention is conflicting, and additional research is needed.

**SCHOOL-BASED EDUCATIONAL PROGRAMS TO PREVENT CHILD SEXUAL ABUSE**

One prevention strategy for child sexual abuse involves educational programs delivered to children in the school environment. There is some indication that children’s knowledge of abuse and protective behaviors improves after involvement with school-based sexual abuse prevention programs. The integrative review by Fryda and Hulme found an improvement in children’s knowledge about sexual abuse in 20 of 23 evaluations of prevention programs reviewed. The knowledge assessed included awareness of different types of abuse, body ownership, grooming, safe and unsafe situations, saying “no” and assertiveness, telling adults, keeping secrets, and distinguishing different types of touching. Two of the 23 evaluations also reported changes in children’s ability to identify risk. The changes are mostly knowledge based, and evidence of impact on actual disclosure rates is somewhat limited. This review found just two out of the 23 studies on child sexual abuse prevention looked at changes in disclosures. These both found positive associations between program exposure and disclosure of sexual abuse.

Walsh et al. conducted a review of 24 studies, with a total of 5,802 participants in primary (elementary) and secondary (high) schools in China, Germany, Spain, Taiwan, Turkey, and the United States. This review found evidence that school-based sexual abuse prevention programs were effective in increasing participants’ skills in protective behaviors and knowledge of sexual abuse prevention concepts. In addition, children exposed to a child sexual abuse prevention program had greater odds of disclosing their abuse than children who had not been exposed, and knowledge gains were not significantly affected one to six months after the intervention for either intervention or control groups. However, studies have not yet adequately measured the long-term benefits of programs in terms of reducing the incidence or prevalence of child sexual abuse. A study of the Tweenees program in the United Kingdom found that 65 disclosures were made in class but only two were about child sexual abuse, with seven subsequent calls about child sexual abuse to a helpline. A study in Dublin found increased disclosures following Stay Safe compared with the control group. However, data from a national survey of childhood victimization to investigate disclosures made by children aged 5-17 exposed to violence prevention programs in the United States found no effect. Disclosures of peer victimization or conventional crime (such as theft) to authorities were found to be more common for young people who had been exposed to high-quality violence prevention programs in schools.

**SCHOOL-BASED SAFE DATING PROGRAMS**

Some of the programs that specifically target problematic norms and values among adolescents often focus on safe dating and healthy relationships.
There have been several adaptations of safe dating programs implemented across HICs and increasingly in LMICs with promising outcomes. The aim of these programs is to address gender norms and equality. However, much of the evidence suggests that although many such programs demonstrate positive changes to attitudes, there is little evidence to suggest an impact on behavior change. Safe Dates is one program that has been rigorously evaluated with positive results on behaviors. Primarily designed for middle and high school students in the United States (ages 11-18), the program challenges violence-supportive norms, improves and encourages help-seeking knowledge and behaviors, and enhances healthy relationship skills. Evaluations of this program identified reductions in violence and sexual abuse for up to four years after completion of the program. Another evaluation found that young people who had completed the Safe Dates program reported between 56% and 92% less dating violence victimization and perpetration compared to control groups. Additional research found that the program also supported a reduction in peer victimization and weapon-carrying behavior one year after the interventions. This body of research identified similar effects across gender and racial groups.

**SCHOOL-BASED BEHAVIOR CHANGE PROGRAMS (BYSTANDER)**

There has also been significant effort in changing the behavior of bystanders. For example, the Tweenees program sought to increase awareness among students of potentially abusive situations and increase reporting behaviors. The program involves a series of lessons on abusive situations, including bullying, physical and sexual abuse, domestic violence, gender issues, and problematic power structures and their impacts. A pre- and post-test evaluation found that the program contributed to only small knowledge and skills gains among adolescents. The outcomes, however, differed among year levels; students in grade 6 made a substantial number of disclosures compared to students from grades 7 and 8. This finding highlights the importance of program design specific to child development stages and the sensitivity of normative assessment measures for adolescents. Experimental evaluations show that Bringing in the Bystander and the Green Dot Bystander Intervention program resulted in lower incidences of sexual victimization, harassment, and stalking on campuses where the program was implemented. A cluster-randomized control trial of the Green Dot Bystander Intervention in 26 high schools in Kentucky found that the intervention significantly decreased not only sexual violence perpetration but also sexual violence victimization, sexual harassment, stalking, and dating violence perpetration and victimization.

The aim of both of these programs was to empower young people to intervene in situations of dating violence. Evaluations of bystander programs from LMICs have also demonstrated promising outcomes.

**SAFE AND ENABLING SCHOOL ENVIRONMENT (WHOLE-OF-SCHOOL APPROACH)**

Evidence suggests that a whole-of-school approach is most promising in preventing sexual violence — several of these interventions were discussed previously in the Safe Environments section. This approach includes ensuring that inclusive and equitable school policies and protocols are in place, engaging school leadership, and developing curricula and pedagogical approaches that are sensitive to social and gender norms and inequalities.
Examples of such approaches include The Good School Toolkit in Uganda, Respectful Relationships Education in Australia, and Doorways III in Malawi and Uganda. While the evidence so far has found favorable impacts on physical violence and corporal punishment, as well as risk and protective factors for sexual violence, there is not yet demonstrated evidence of a reduction in rates of sexual violence; more evidence is needed. Programs that take a holistic, interactive approach to enhancing both education levels and life skills can help prevent sexual violence against children and adolescents. These approaches, however, need to account for and address the broader issues around access to the programs and education writ large. This can be achieved through policies that ensure that children and adolescents enroll in school and complete their education. One intervention (not named in the study) that took this approach was evaluated in Zimbabwe. The intervention offered girls access to material support (school fees, school supplies, and uniforms) to attend school. The evaluation found that among those who received this support, there was a significant reduction in early marriage and school drop-outs. It is also important to focus on children outside of the school environment. A randomized control trial of a teacher’s diploma program in Zambia that focused on the psychosocial support needs of orphaned and vulnerable children found the program to be effective in increasing students’ willingness to seek help for and respond to sexual violence.

Programs also need to consider their targeted participants’ stage of development. A program that accounted for development in its design was the ESPACE workshop for children in Quebec, Canada. The program was a French-language adaptation of the Child Assault Prevention Project for elementary school children, which involved 90-minute workshops led by community workers who used role-playing, guided discussion, behavior modeling, and rehearsals to increase children’s knowledge about their rights, self-assertion skills, and appropriate responses to instances of violence.

ESPACE also aims to prevent verbal and physical violence through role-plays, where children are invited to negotiate different potentially abusive situations such as peer-bullying, a potentially abusive situation by a stranger, and a sexual request by a known adult. An evaluation of ESPACE indicated that children participating in the prevention program showed greater preventive knowledge and skills relative to children not participating. Follow-up data showed that knowledge gains were maintained, while the preventive skill gains may attenuate. However, while global skill scores decreased between post-test and follow-up, children still showed greater preventive skills at follow-up than before the program. Effects of these interventions include the following:

- Increase in school attendance
- Reductions in child, early, and forced marriage
- Reductions in sexual violence (including in the context of intimate partner situations)
- Empowerment of young people to protect themselves, including increases in self-efficacy
- Improved attitudes related to gender and violence
These interventions did now show specific effects on actual sexual victimization, but they show promise by raising awareness and shifting norms related to violence.

**Good School Toolkit**

A whole-of-school violence prevention approach that has been piloted in Uganda and does not address sexual violence explicitly but rather in the context of broader violence perpetration. The Good School Toolkit is effective in reducing staff violence against children in Ugandan primary schools. A secondary analysis of cluster-randomized trial data was conducted to investigate intervention effects on school operational culture and on normative beliefs and violence against children from caregivers outside of school. Students and staff completed cross-sectional surveys at baseline in 2012 and follow-up in 2014. Statistically significant intervention effects were observed for aspects of school operational culture, including students’ greater perceived emotional support from teachers and peers, students’ greater identification with their school, students’ and staffs’ lower acceptance of physical discipline practices in school, and students’ and staffs’ greater perceived involvement in school operations.

Outside the school, the intervention was associated with significantly lower normative beliefs accepting the use of physical discipline practices in schools, based on aggregated caregiver reports. No differences between groups were observed in past-week violence against children at home.

**Doorways III**

A teacher training manual on school-related gender-based violence prevention and response is being implemented in Ghana and Malawi that covers attitudes among young people regarding gender, violence, human rights, safe and supportive classroom environments, responses to gender-based violence, and action planning.

Surveys conducted at the beginning and end of the pilot phase of the Safe Schools program in Ghana and Malawi revealed statistically significant changes in student and teacher attitudes and knowledge concerning gender-based violence. Results include the following:

- The percentage of students believing they had the right not to be hurt or mistreated increased from an initial 5% to 70% by the end of the program in Ghana
- In Malawi, the percentage of students who believed teachers did not have the right to shout at, insult, or call students names increased from 7% to 93%
• Prior to the program, 44% of teachers in Malawi knew how to report a violation of the code of conduct; afterwards, 83% knew how to report violations.

• Initially, in Ghana 32% of teachers agreed that sexual harassment of girls occurred in schools; after the program, 79% agreed that girls could experience sexual harassment in school.

This intervention was classified as PRUDENT.

EDUCATION FOR ADULTS WHO INTERACT WITH CHILDREN

There is emerging evidence that education programs that target adults who interact with children may help raise awareness about child sexual abuse, therefore increasing recognition and intervention behaviors by adults. Examples of such interventions include Darkness to Light’s Stewards of Children, which was evaluated using a multi-site randomized control trial that found that the training affected attitudes, knowledge, and self-reported preventive behaviors to protect children from child sexual abuse. In addition, a study of nursing students who underwent the Stewards of Children training found a significant increase in the knowledge level of undergraduate nursing students on how to prevent, recognize, and react responsibly to child sexual abuse. Students also reported a high level of confidence in how to prevent abuse and react skillfully when child sexual abuse had occurred. In addition, other efforts, such as those by the Child Safety Pledge, are working to educate parents and caregivers to raise awareness about child sexual abuse and to encourage them to become advocates on the issue. However, to date no assessment of these interventions has shown an impact on the actual victimization for children.
Darkness to Light offers an adult-focused, evidence-informed child sexual abuse prevention education program called Stewards of Children. The two-hour curriculum improves child sexual abuse prevention, recognition, and intervention behaviors in adults. To date, more than 1,700,000 people, including more than 500,000 educators in the United States, have completed the Stewards of Children program.

In October 2015, Darkness to Light conducted a one-year follow-up survey of 79,544 Texas educators who completed the Stewards of Children training online, either as a solo education training or coupled with the state mandatory reporter training, during the fall of 2014. The purpose of this survey was to determine if educators increased their reports of previously unrecognized child sexual abuse to authorities.

The survey found that in the year following training, educators increased their reports of child sexual abuse to authorities by 283% as compared with career-averaged reports in the year prior to training. Texas Department of Family and Protective Services (DFPS) data was obtained to corroborate the results. Additionally, an analysis of 2011-2015 data from DFPS demonstrated the possibility that educators increased reporting of previously unrecognized abuse cases from 2014 to 2015. More children were also substantiated as sexually abused during this time period.

Finally, while not primary prevention, the effectiveness of Stewards of Children can be evaluated by whether more children received intervention services as a result of that program. This is important, as intervention services have been shown to mitigate many of the negative effects of child sexual abuse. The data allowed for the possibility that more children received intervention services in 2014 and 2015 as a result of the Texas Educator Initiative, implying that the Stewards of Children program, either alone or in tandem with Texas Mandated Reporter training, may be effective in creating positive outcomes for children on the prevention spectrum.
An effective response to child and adolescent sexual violence requires a collaborative approach that incorporates the education, health, justice, and social services sectors, along with civil society, academic institutions, and other NGOs. Though stakeholders in many countries are working to eliminate violence against children, their efforts are not always well coordinated and supported, and few are undertaken at a large scale. Coordination mechanisms are therefore essential, as no single sector can deliver the full package of interventions and no individual government can tackle the growing threats to its children that now transcend national borders. Efforts to implement a comprehensive response should therefore encourage cooperation and learning both within and among countries.

**National mechanisms:** Ultimate responsibility for coordination lies with governments, and mechanisms for the leadership and coordination of violence prevention and response activities — including legal and law enforcement institutions — should be established or strengthened where they are non-existent or weak. Systems for the exchange of information between sectors should be reviewed for the extent to which they focus on preventing violence in order to optimize the delivery of response services. Ideally, these mechanisms should include forums that periodically convene representatives of relevant sectors to discuss the latest available data on violence with a view to identifying emerging problems (and their underlying risk factors) so that appropriate and timely interventions can be made.

**International mechanisms:** Internationally, there are several forums and partnerships for countries to come together to explore the most effective strategies for ending violence against children. These include the WHO Milestones of a Global Campaign for Violence Prevention meetings that take place every other year, where the state of violence prevention science and its uptake at national levels are reviewed and strategies for increasing uptake developed. In addition, Together for Girls is a partnership that convenes five UN agencies, multiple agencies of the U.S. government, the government of Canada, the private sector, and partner governments to promote a data-driven multisectoral approach to violence prevention and response; it is now active in 22 countries. Lastly, the Global Partnership to End Violence Against Children is an overarching initiative that unites these separate mechanisms behind the shared goal of ending violence against children.
Following the launch of the 2011 National Violence Against Children Survey, Tanzania emerged as a leader in preventing and responding to violence against children, including sexual violence. This led to the launch of the country’s first-ever “Multi Sector National Plan of Action to Prevent and Respond to Violence Against Children 2013-2016.” As a result of the plan, reporting of violence against children, including sexual violence, increased nearly forty-fold in four districts. Other accomplishments included the following:

- National expansion of a pilot program establishing multi-sector child protection teams at the district level
- Pre-service training for police, social workers, and health care providers on violence against children
- In-service trainings for over 6,000 frontline workers in child protection to enhance violence prevention and response, reaching over 700,000 children
- Establishment of national hotline and communication campaigns

A new National Plan of Action to End Violence against Women and Children (NPA-VAWC) for 2017-2022, which for the first time joined the violence against children and violence against women agendas, was launched in late 2016. This significant country-level progress also contributed to global learning, as the lessons learned are shared globally. In addition, Tanzania recently became one of the first Pathfinder countries as part of the Global Partnership to End Violence Against Children.
## EDUCATION AND LIFE SKILLS

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent intimate partner violence prevention programs that focus on healthy relationships</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Programs promoting healthy relationships have been found to be more effective if they are interactive, delivered over multiple sessions, use local data on sexual violence and culturally specific and relevant information in the curriculum, and aim to change attitudes rather than solely to provide information</td>
<td>Additional evidence needed to examine the long-term impacts on behavioral change.</td>
<td>Safe Dates; Stepping Stones (also includes adults)</td>
</tr>
<tr>
<td>School-based safe dating programs</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Substantial body of research supports the intervention’s effectiveness in reducing peer-victimization, sexual violence, and disrupting violence-supportive norms</td>
<td>Needs to be age- and gender-specific, as well as culturally and socially appropriate; programs should ideally address behaviors of girls and boys concurrently</td>
<td>Safe Dates program (implemented and evaluated in HICs and LMICs); Tweens program</td>
</tr>
<tr>
<td>School-based behavior change programs focused on bystander intervention</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Experimental evaluations show that bystander programs can result in lower incidences of sexual victimization, harassment, and stalking; promising results from LMICs as well, and from programs where sexual violence is addressed</td>
<td>No evidence to support ongoing or sustained behavior change</td>
<td>Bringing in the Bystander; Green Dot Violence Prevention Program</td>
</tr>
<tr>
<td>Empowerment and self-defense training</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Several studies have shown reductions in sexual violence following completion of the program</td>
<td>Additional research on effectiveness in various contexts needed.</td>
<td>“No Means No”; IMpower</td>
</tr>
<tr>
<td>School-based education programs to prevent child sexual abuse</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>PROMISING</strong></td>
<td>Some indication that children’s knowledge of abuse and protective behaviors improves after involvement with school-based sexual abuse prevention programs</td>
<td>More research needed to assess the impact on prevalence and incidence, different age groups, and disclosure of different types of abuse</td>
<td>Tweenees; Stay Safe; Speak Up, Be Safe (formerly Good Touch, Bad Touch)</td>
</tr>
<tr>
<td>Safe and enabling school environment (“whole-of-school approach”) to ensure that school policies and protocols are in place</td>
<td>Age: All Gender: All</td>
<td><strong>PRUDENT</strong></td>
<td>Ensures that inclusive and equitable school policies and protocols are in place, engages school leadership, and develops curricula and teaching approaches that are sensitive to social and gender norms and inequalities</td>
<td>Additional evidence needed to assess the impact on preventing sexual violence</td>
<td>Good School Toolkit; Doorways III</td>
</tr>
<tr>
<td>Education and awareness-raising for adults who interact with children</td>
<td>Age: All Gender: All</td>
<td><strong>PRUDENT</strong></td>
<td>May help raise awareness about child sexual abuse, therefore increasing recognition and intervention behaviors by adults</td>
<td>Additional evidence needed to assess the impact on the prevention of sexual abuse</td>
<td>Darkness to Light’s Stewards of Children Training</td>
</tr>
</tbody>
</table>
SUMMARY OF ALL AVAILABLE EVIDENCE
### Implementation & Enforcement of Laws

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratifying international treaties, frameworks, and legislation</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Provides framework for adoption and implementation of domestic legislation</td>
<td>Often not enforced</td>
<td>UN protocols and conventions such as the United Nations Convention on the Rights of the Child (CRC)</td>
</tr>
<tr>
<td>Implementing and enforcing laws that criminalize various forms of sexual violence against children and adults</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Criminalizing certain acts creates the necessary legal frameworks for prosecution of offenders and justice for victims, creates an enabling environment for other prevention strategies, and can serve as a deterrent and have a positive impact on reducing recidivism. Minimum age for marriage (set at age 18) can result in a reduction in rates of child marriage.</td>
<td>Measuring effectiveness of prevention is challenging</td>
<td>Minimum age of marriage laws (18 years of age); laws that criminalize child sexual abuse, marital rape, online sexual abuse, and sexual exploitation (e.g., European Union Lanzarote Convention)</td>
</tr>
<tr>
<td>Establishing victim-sensitive standards and specialized services for policing and justice</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Can minimize re-traumatization of victims; provides an essential building block for effective prevention; can increase reporting</td>
<td>N/A</td>
<td>The International Association of Chiefs of Police’s model policy for police response to sexual violence against women and children; the US National Child Traumatic Stress Network’s trauma-informed systems; UN Office on Drugs and Crime’s Guidance on Justice in Matters Involving Child Victims and Witnesses of Crime (provides a model of a trauma-informed criminal justice process for child victims); International Justice Mission’s criminal justice response to sexual violence program in Guatemala; A Breeze of Hope model in Bolivia; US Child Advocacy Centers</td>
</tr>
<tr>
<td>Laws that limit alcohol misuse</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Can address risk factors associated with sexual violence victimization and perpetration, such as excessive alcohol use and binge drinking</td>
<td>N/A</td>
<td>Laws that increase the price of alcohol, restrict the days of sales, limit the clustering of alcohol outlets, and set a minimum age of purchase</td>
</tr>
</tbody>
</table>
## IMPLEMENTATION & ENFORCEMENT OF LAWS

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
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<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eliminating statute of limitations for sexual violence crimes</td>
<td>Age: All; Gender: All</td>
<td>PRUDENT</td>
<td>Emerging evidence indicates that eliminating (or extending) the statute of limitations can lead to greater reporting and increased convictions</td>
<td>Considerable variations in laws across countries/states</td>
<td>Multiple examples of laws in countries/states that eliminate statute of limitations for sexual violence crimes</td>
</tr>
<tr>
<td>Harmonized global and domestic implementation and enforcement of laws specific to online sexual exploitation and abuse</td>
<td>Age: All; Gender: All</td>
<td>PRUDENT</td>
<td>Strong legislation, dedicated law enforcement, and a specialized judiciary serve as a critical foundation for effective prevention and response; comprehensive and effective legislation can enable law enforcement to proactively investigate and prosecute CSA offenders and identify and protect more victims</td>
<td>When investigating online sexual abuse, there is a delicate balance between privacy and crime prevention</td>
<td>Laws on sexting, online grooming, and image-based sexual violence</td>
</tr>
<tr>
<td>Implementing and enforcing laws that mandate reporting of sexual violence against children by designated professionals (e.g., police, teachers, social service providers)</td>
<td>Age: Early childhood and childhood; Gender: All</td>
<td>PRUDENT</td>
<td>Increases reporting and substantiating of cases</td>
<td>Measuring effectiveness on prevention is challenging, and increased number of reports needs to be matched with increased service provision</td>
<td>Laws in multiple jurisdictions and countries (e.g., State of Western Australia and Canada)</td>
</tr>
<tr>
<td>Notification and sex offender registration laws for adult sex offenders</td>
<td>Age: All; Gender: All</td>
<td>CONFLICTING</td>
<td>Envisioned to deter would-be offenders and protect from recidivism</td>
<td>Not shown to reduce recidivism</td>
<td>Megan’s Law (US) and various Sex Offender Registration Notification (SORN) laws</td>
</tr>
<tr>
<td>Notification and sex offender registration laws for juveniles who sexually offend</td>
<td>Age: All; Gender: All</td>
<td>HARMFUL</td>
<td>Envisioned to deter would-be offenders and protect from recidivism</td>
<td>Not shown to reduce recidivism; increases risk of suicide and being approached by adults for sex or sexual victimization</td>
<td>Various SORN laws for juveniles who sexually offend</td>
</tr>
</tbody>
</table>
### NORMS AND VALUES

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
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<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mobilization programs to change attitudes, norms, and behaviors with direct intervention at the community level</td>
<td>Age: Early and late adolescence Gender: All</td>
<td>EFFECTIVE</td>
<td>Evaluations in LMICs have shown that such programs can contribute to reductions in intimate partner violence, “including sexual violence in dating relationships” and shifting attitudes towards violence more broadly; evaluation of SASA! implementation indicated that there were explicit benefits for children</td>
<td>More research needed to assess the impact of community mobilization programs for specific age groups and for sexual violence against children and adolescents</td>
<td>SASA!</td>
</tr>
<tr>
<td>Working with men and boys to challenge stereotypes, toxic masculinity, and norms that justify violence</td>
<td>Age: Early and late adolescence Gender: All</td>
<td>PROMISING</td>
<td>Promising evidence from specific programs that model respectful, non-violent relationships among young boys; evaluations have shown that such programs can contribute to a reduction in perpetration of dating violence</td>
<td>Evaluations needed of other models of this approach, specifically with different age groups and in various settings; further research needed on whether programs are more effective when targeting both boys and girls</td>
<td>Coaching Boys Into Men; Men Can Stop Rape; Mentors in Violence Prevention</td>
</tr>
<tr>
<td>Awareness-raising campaigns (national)</td>
<td>Age: All Gender: All</td>
<td>NO EFFECT</td>
<td>Limited evidence shows gains in knowledge among broad population about sexual violence and abuse of children and adolescents; can contribute to increases in reporting of sexual violence when combined with targeted support services and outreach</td>
<td>No evidence to support ongoing or sustained behavior change on their own</td>
<td>Various generic and short-lived national-level campaigns that are not complemented with direct intervention or follow-up</td>
</tr>
</tbody>
</table>
## Safe Environments

<table>
<thead>
<tr>
<th>Intervention Type</th>
<th>Age Group / Gender</th>
<th>Effectiveness</th>
<th>Strengths</th>
<th>Limitations</th>
<th>Examples of Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manipulation of physical environment in school settings (e.g., safe spaces for play, school staff to monitor violence-prone hot spots identified by students)</td>
<td>Age: Early adolescence Gender: All</td>
<td>PROMISING</td>
<td>Increased hot spot monitoring in schools shown to decrease risk of sexual victimization (dating violence and sexual harassment) and reduce prevalence and frequency; more cost-effective and less resource-intensive intervention than classroom-based programs</td>
<td>Manipulating the physical environment alone does not change violence, as it must be complemented by supportive behaviors and norms; these interventions need to be complemented by policy changes and behavior change programs</td>
<td>Shifting Boundaries</td>
</tr>
<tr>
<td>Adoption of policy and practices to prevent sexual violence in the school (e.g., adoptions of zero-tolerance policies for sexual violence, notification, and anti-harassment training for staff)</td>
<td>Age: All Gender: All</td>
<td>PROMISING</td>
<td>Available evidence suggests this can moderate peer-reported victimization, self-reported aggression, and aggressive bystander behaviors</td>
<td>Needs to be complemented by active social change in the school environment; whole-of-school approach hard to evaluate, so evidence is limited; evidence does support different elements of the approach</td>
<td>Doorways III; Good School Toolkit</td>
</tr>
<tr>
<td>Adoption of safeguarding policies and procedures for child- and youth-serving organizations (e.g., mandatory background checks for staff, mandatory reporting, codes of conduct, yearly safety assessments, anonymous mechanisms for reporting abuse)</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Includes the adoption of a wide range of policies and procedures to safeguard children from CSA, all of which have been theorized to protect children</td>
<td>Limited evidence on the impact of safeguarding to prevent sexual violence against children</td>
<td>Various policies and procedures from across sectors (e.g., International Safeguards for Children in Sport; Redwoods Group Training; Australian Royal Commission into Institutional Responses to Child Sexual Abuse)</td>
</tr>
<tr>
<td>Awareness-raising of online child sexual abuse and exploitation for students, parents, and teachers</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>Aim to raise awareness among teachers, parents, and students about the risks associated with technology and the internet; block specific sites and apps</td>
<td>Need for additional evidence on the impact and effectiveness of this approach</td>
<td>Safer Surfer</td>
</tr>
<tr>
<td>Manipulation of physical environment in humanitarian settings (e.g., lighting, latrines, child-friendly spaces for play)</td>
<td>Age: All Gender: All</td>
<td>PRUDENT</td>
<td>General agreement among humanitarian actors that modifications to the physical environment are necessary to keep women and children safer during displacement</td>
<td>Lack of strong evidence to document the impact of this strategy</td>
<td>Child-Friendly Spaces (CFS)</td>
</tr>
</tbody>
</table>
# Parent and Caregiver Support

<table>
<thead>
<tr>
<th>Intervention Type</th>
<th>Age Group / Gender</th>
<th>Effectiveness</th>
<th>Strengths</th>
<th>Limitations</th>
<th>Examples of Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting programs to prevent teen dating violence</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>EFFECTIVE</strong></td>
<td>Evidence suggests that multi-component education programs delivered to staff, students, and their parents on sexual health, risky sexual behaviors, and early pregnancy are effective in reducing high-risk sexual activities among high school-aged adolescents and decreasing physical violence in dating relationships.</td>
<td>Additional research needed on the impact of these interventions on multiple forms of sexual violence within dating relationships.</td>
<td>Families for Safe Dates in high-income countries</td>
</tr>
<tr>
<td>Home visiting programs</td>
<td>Age: Expecting parents/ early childhood Gender: All</td>
<td><strong>PROMISING</strong></td>
<td>Studies in the United States have shown that registered nurses visiting homes of low-income families in the first two years of the child’s life contributed to lower childhood injuries and unplanned pregnancies as well as an increase in parents’ awareness of child sexual violence.</td>
<td>Limited information on impact of these interventions on preventing child sexual abuse in early childhood or childhood/adolescent experiences of sexual violence later in life; some conflicting evidence on impact depending on the fidelity of implementation.</td>
<td>Nurse-Family Partnership</td>
</tr>
<tr>
<td>Parenting programs to improve parent-child communication</td>
<td>Age: Early and late adolescence Gender: All</td>
<td><strong>PROMISING</strong></td>
<td>Raises awareness by highlighting parents’ roles in helping their children to prevent both child sexual violence and gender-based violence, and promoting reflection, dialogue, and action.</td>
<td>Additional research needed on actual reductions in sexual violence victimization.</td>
<td>Families Matter! Program</td>
</tr>
</tbody>
</table>
### INCOME AND ECONOMIC STRENGTHENING

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash transfers</td>
<td>Age: Early and late adolescence Gender: Female</td>
<td>PROMISING</td>
<td>Strong evidence that cash transfers can empower women and girls economically and provide resources to continue their education and reduce sexual debut; reductions in child, early, and forced marriage and forced/unwanted sex</td>
<td>There is robust evidence for reductions in physical and sexual violence against adult women, but there is limited evidence for children and adolescents, which is primarily on outcomes of early marriage and transactional and age-disparate sex</td>
<td>UNICEF Malawi Social Cash Transfer Program</td>
</tr>
<tr>
<td>Comprehensive programs that include mentoring and micro-finance training (e.g., information on rights, conflict resolution, sexual and reproductive health, gender equality and financial literacy training—including business planning and budget management)</td>
<td>Age: Early and late adolescence Gender: Female</td>
<td>PROMISING</td>
<td>Multifaceted programs that affect multiple outcomes, including employment, reductions in child marriage, early pregnancy, and forced/coerced sex</td>
<td>Because of the comprehensive nature of these programs, it is difficult to ascertain the direct impact of economic empowerment interventions in isolation of the other components of the program</td>
<td>Empowerment and Livelihood for Adolescents Program</td>
</tr>
</tbody>
</table>
## RESPONSE AND SUPPORT SERVICES

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
<th>EFFECTIVENESS</th>
<th>STRENGTHS</th>
<th>LIMITATIONS</th>
<th>EXAMPLES OF INTERVENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling and therapeutic approaches for survivors</td>
<td>Age: All</td>
<td>EFFECTIVE</td>
<td>Demonstrated to reduce symptoms associated with traumatic events, including the disclosure of sexual violence</td>
<td>Should be implemented in conjunction with other response and support services</td>
<td>Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)</td>
</tr>
<tr>
<td>Multisystemic therapy for child/youth offenders</td>
<td>Age: Early and late adolescence</td>
<td>EFFECTIVE</td>
<td>Addresses the child’s views and perspectives on age-appropriate sexual experiences and relationships, as well as the attitudes that contribute to the offending</td>
<td>Should be implemented in conjunction with other response services</td>
<td>Multisystemic Therapy – Problem Sexual Behavior; Cognitive Behavioral Therapy (CBT); Circles of Support and Accountability (CoSA)</td>
</tr>
<tr>
<td>Child protection systems and associated response systems (e.g., health sector, education sector, social welfare, child protection services)</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Where services are available, including counseling and broader social services, evidence suggests that access to services and targeted interventions can help break the cycle of violence; responses to child and adolescent sexual violence need to be integrated into the broader national child protection systems, with evidence consistently outlining that key agencies, such as health and welfare government departments, child protection, police, and health care service providers, need to be involved to ensure all needs of victims are met</td>
<td>While these systems are absolutely vital, on their own they are not enough to prevent sexual violence against children and adolescents; they need to be seen as part of a broader set of strategies that include prevention</td>
<td>Multiple examples from around the world (e.g., the National Child Protection Register in South Africa; MARAC in Brazil; A Breeze of Hope in Bolivia)</td>
</tr>
<tr>
<td>Foster care interventions, including social welfare services</td>
<td>Age: All</td>
<td>PRUDENT</td>
<td>Alternative care programs where foster and kinship families are supported by a range of services, improving outcomes for children</td>
<td>Should be implemented in conjunction with other response services</td>
<td>Enhanced Foster Care</td>
</tr>
<tr>
<td>Screening in health care settings</td>
<td>Age: All</td>
<td>CONFLICTING</td>
<td>Can increase identification of victims and access to treatment when combined with follow-up interventions; should be done as part of a clinical inquiry combined with interventions</td>
<td>Must be combined with effective interventions when screening is positive to avoid negative consequences</td>
<td>NICE Guidelines</td>
</tr>
</tbody>
</table>
## EDUCATION AND LIFE SKILLS

<table>
<thead>
<tr>
<th>INTERVENTION TYPE</th>
<th>AGE GROUP / GENDER</th>
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</tr>
</thead>
</table>
| Adolescent intimate partner violence prevention programs that focus on healthy relationships | Age: Early and late adolescence  
Gender: All | EFFECTIVE | Programs promoting healthy relationships have been found to be more effective if they are interactive, delivered over multiple sessions, use local data on sexual violence and culturally specific and relevant information in the curriculum, and aim to change attitudes rather than solely to provide information | Additional evidence needed to examine the long-term impacts on behavioral change. | Safe Dates; Stepping Stones (also includes adults) |
| School-based safe dating programs | Age: Early and late adolescence  
Gender: All | EFFECTIVE | Substantial body of research supports the intervention’s effectiveness in reducing peer-victimization, sexual violence, and disrupting violence-supportive norms | Needs to be age- and gender-specific, as well as culturally and socially appropriate; programs should ideally address behaviors of girls and boys concurrently | Safe Dates program (implemented and evaluated in HICs and LMICs); Tweens program |
| School-based behavior change programs focused on bystander intervention | Age: Early and late adolescence  
Gender: All | EFFECTIVE | Experimental evaluations show that bystander programs can result in lower incidences of sexual victimization, harassment, and stalking; promising results from LMICs as well, and from programs where sexual violence is addressed | No evidence to support ongoing or sustained behavior change | Bringing in the Bystander; Green Dot Violence Prevention Program |
| Empowerment and self-defense training | Age: Early and late adolescence  
Gender: All | EFFECTIVE | Several studies have shown reductions in sexual violence following completion of the program | Additional research on effectiveness in various contexts needed. | “No Means No”; IMpower |
| School-based education programs to prevent child sexual abuse | Age: Early and late adolescence  
Gender: All | PROMISING | Some indication that children’s knowledge of abuse and protective behaviors improves after involvement with school-based sexual abuse prevention programs | More research needed to assess the impact on prevalence and incidence, different age groups, and disclosure of different types of abuse | Tweenees; Stay Safe; Speak Up, Be Safe (formerly Good Touch, Bad Touch) |
| Safe and enabling school environment (“whole-of-school approach”) to ensure that school policies and protocols are in place | Age: All  
Gender: All | PRUDENT | Ensures that inclusive and equitable school policies and protocols are in place, engages school leadership, and develops curricula and teaching approaches that are sensitive to social and gender norms and inequalities | Additional evidence needed to assess the impact on preventing sexual violence | Good School Toolkit; Doorways III |
| Education and awareness-raising for adults who interact with children | Age: All  
Gender: All | PRUDENT | May help raise awareness about child sexual abuse, therefore increasing recognition and intervention behaviors by adults | Additional evidence needed to assess the impact on the prevention of sexual abuse | Darkness to Light’s Stewards of Children Training |
IV.

IMPLICATIONS
Broadly, there are several factors that are consistently raised as being important in preventing sexual violence against children, regardless of the type of intervention, including the following:

- National response integrated into broader protection systems for children and adolescents
- Programs that are holistic and address the multiple factors that contribute to violence-supporting norms and behaviors
- Programs that are developmentally appropriate or age- and gender-specific
- Programs targeting children that are delivered over several sessions, physically interactive, and participatory

Findings from the 2017 Global Early Adolescent Study reinforced the importance of working with adolescents to prevent the perpetration and experience of sexual violence. A mixed-method systematic review that formed part of the project also reinforced this, highlighting that young adolescents (aged 10-14) in different cultural and social settings commonly endorse problematic social norms, many of which are linked to poor sexual and reproductive health outcomes, and attitudes that can reinforce broad social gender inequalities. Based on this and other evidence, the review concludes that programs need to start early and be tailored to the subpopulations of boys and girls (namely, culture, age, and socioeconomic status).

**DATA GAP**

**Opportunities for Additional Research**

**Age**

The experience of sexual violence, while prevalent across the life span, is more likely among adolescents. It is well established that sexual violence prevention programs need to be age appropriate. However, the literature that examines programs that target specific age groups is limited. There is, for example, very little clarity about what works for young children versus adolescents. It would be beneficial to establish more specific criteria for different age cohorts, as evidence suggests that there can be different outcomes for older and younger children. This requires further research.

**Gender, Gender Identity, and Sexual Orientation**

To date, evidence indicates that girls are more likely to experience sexual violence than boys, noting that prevalence studies that include boys are still less common. The effects of sexual violence among girls are also better documented, with evidence highlighting the risks associated with early pregnancy, STIs, HIV, ongoing mental health issues, and school drop-out. Additional research on boys regarding the associated consequences of sexual violence is needed. In addition, there is also a need to better understand the different types of sexual violence that boys and girls may be more vulnerable to in different contexts.
Evidence identified in this review shows that some interventions focused exclusively on girls can be impactful. However, research in the United States indicates that while female-only interventions that focus on empowering girls and women to resist violence are important, in isolation they tend to deflect responsibility from the perpetrators. This supports emerging evidence that calls for the implementation of a two-pronged intervention that provides behavior change programs concurrently to both girls and boys. This is especially critical given the role that norms about masculinity play in influencing the development of boys and in perpetuating cycles of violence. In addition, further research is needed to assess the impact of gender with age-specific interventions and programs in different settings.

Finally, there is limited information on effective interventions for LGBTQI and gender-diverse children and adolescents. While there is evidence that highlights a higher risk of victimization more broadly as compared to non-LGBTQI young people, the current research does not address the specific experience of sexual violence and effectiveness of programs that seek to address it among this cohort.

**Conflict/Post-Conflict/Humanitarian Settings**

The UN has recently introduced a suite of policies and practices to prevent sexual violence against women and girls by humanitarian and military troops deployed to disaster zones. It was not until 2004 that the issue of sexual violence by UN peacekeepers was addressed by the UN, with “A Comprehensive Strategy to Eliminate Future Sexual Exploitation and Abuse in United Nations Peacekeeping Operations,” released a year later, recommending the adoption of rules and codes of conduct; investigative processes; organizational, managerial, and command responsibility; and individual disciplinary, financial, and criminal accountability measures. However, there is not sufficient evidence focused on examining the impact of such policies.

**Online Sexual Violence**

The two most common interventions to date have involved online education programs and legislation. While there is some evidence to suggest that online education programs serve to raise awareness about the risks of online interactions, there is almost no evidence on the effectiveness of such approaches on the actual experience of online sexual violence. As detailed previously, WePROTECT Global Alliance’s Model Nation Response to Preventing and Tackling CSEA offers a comprehensive, multi-sector model based on available evidence of best practices and approaches. However, a great deal of additional research is needed on the effectiveness of interventions, which is particularly challenging given the rapid evolution of technologies.

**Intersections Between Violence Against Children and Violence Against Women**

There is growing global evidence on the intersections of violence against children (VAC) and violence against women (VAW), including shared risk factors, common social norms, co-occurrence, and the intergenerational cycle of violence. Both VAC and VAW are directly linked to significant negative outcomes, such as unintended pregnancy, HIV, suicide, interruptions in education, and economic disempowerment.
Fortunately, substantial evidence on what works to prevent and respond to both VAC and VAW has been collected in the last 20 years, and we now know a great deal about solutions and support for trauma and healing. It has become clear that effectively preventing VAC and VAW requires addressing masculinity and promoting gender equality. There is need for greater effort and investment in collaboration and alignment of services, resources, and strategies in these fields.

THE TIME IS NOW

Much remains to be understood about the most impactful, cost-effective, and practical approaches to preventing sexual violence against children. Yet, as this evidence review of the best possible existing evidence demonstrates, we have enough knowledge and understanding, as well as an overwhelming ethical and moral imperative, to act now in the face of a preventable global pandemic that affects hundreds of millions of children and adolescents. We have the tools and resources to act; what is further required is engagement at every level — local, national, and global — to generate the political will and resources necessary for achievable, large-scale social change for children everywhere.
ANNEX
## Key Terms and Definitions

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescence</td>
<td>Defined as the period between ages 10 and 19. It is part of a continuum of development in a person’s physical, cognitive, behavioral, and psychosocial spheres.</td>
</tr>
<tr>
<td>Adolescent</td>
<td>Any person between the ages of 10 and 19.</td>
</tr>
<tr>
<td>Adult</td>
<td>Any person 18 years and older.</td>
</tr>
<tr>
<td>Caregiver</td>
<td>This term describes a person who is exercising day-to-day care for a child or children. The person is a parent, relative, family friend, or other guardian; it does not necessarily imply legal responsibility. This may apply to foster parents, including those who “adopt” a child spontaneously as well as those who do so formally.</td>
</tr>
<tr>
<td>Child</td>
<td>Any person under the age of 18.</td>
</tr>
<tr>
<td>Child pornography (Optional Protocol to the CRC, Article 2c)</td>
<td>Now more commonly referred to as “child sexual abuse material,” any representation, by whatever means, of a child engaged in real or simulated explicit sexual activities or representations of the sexual parts of a child, the dominant characteristics of which are depicted for a sexual purpose.</td>
</tr>
<tr>
<td>Child sexual abuse</td>
<td>Contacts or interactions between a child and an older or more knowledgeable child or adult (a stranger, sibling, or person in a position of authority, such as a parent, stepparent, or caretaker) when the child is being used as an object of gratification for an older child’s or adult’s sexual gratification.</td>
</tr>
<tr>
<td>Child survivor</td>
<td>A person under the age of 18 who has experienced any form of gender-based violence.</td>
</tr>
<tr>
<td>Exploitation of a child in prostitution (Optional Protocol to the CRC, Article 2b)</td>
<td>The use of a child in sexual activities for remuneration or any other form of consideration.</td>
</tr>
<tr>
<td>TERM</td>
<td>DEFINITION</td>
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<tr>
<td><strong>Gender-based violence</strong></td>
<td><strong>(IASC 2005)</strong></td>
</tr>
<tr>
<td></td>
<td>An umbrella term for any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (gender) differences between males and females. While men and boys can be survivors of some types of gender-based (particularly sexual) violence, around the world gender-based violence has greater impact on women and girls.</td>
</tr>
<tr>
<td><strong>Grooming</strong></td>
<td><strong>(Council of Europe 2007b)</strong></td>
</tr>
<tr>
<td></td>
<td>The deliberate perpetration of a child for sexual abuse or sexual exploitation, motivated by the desire to use the child for sexual gratification. It may involve the befriending of a child, drawing the child into discussing intimate matters, and gradually exposing the child to sexually explicit materials in order to reduce resistance or inhibitions about sex.</td>
</tr>
<tr>
<td><strong>Humanitarian emergency</strong></td>
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<tr>
<td></td>
<td>Any circumstance where humanitarian needs are sufficiently large and complex to require significant external assistance and resources, and where a multi-sectoral response is needed, with the engagement of a wide range of international humanitarian actors.</td>
</tr>
<tr>
<td><strong>Intimate partner sexual violence</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Any behavior within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship.</td>
</tr>
<tr>
<td><strong>Non-partner sexual violence</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Any physical and/or sexual abuse to another known person that does not take place within an intimate romantic or sexual relationship. The violence in this category also includes physical violence towards the genitals (e.g., being kicked, punched, etc.).</td>
</tr>
<tr>
<td><strong>Online sexual abuse</strong></td>
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<tr>
<td></td>
<td>The use of online/phone messaging services to sexually harass someone, or use of the service to coerce someone into performing or engaging in a sexual act they would otherwise refuse (e.g., sextortion). This does not include the distribution of sexually explicit images for the benefit of a third party (e.g., sexting, revenge pornography, or child pornography).</td>
</tr>
<tr>
<td><strong>Parent</strong></td>
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<tr>
<td></td>
<td>The child’s biological mother or father. Note that in some societies it is common for girls and boys to spend time with other members of their extended family and sometimes with unrelated families. Throughout this review, the term “parent” generally refers to the biological parent. In some cases, it may refer to the person or persons who assume the child’s care on a permanent basis, such as, for example, foster or adoptive parents or extended family members providing long-term care.</td>
</tr>
<tr>
<td>TERM</td>
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<tr>
<td><strong>Perpetrator</strong></td>
<td>A person who directly inflicts or supports violence or other abuse inflicted on another against their will.</td>
</tr>
<tr>
<td><strong>Prevention</strong></td>
<td>Definition used is based on the World Health Organization definition of “primary prevention”: “stopping child sexual abuse and exploitation before it occurs.”</td>
</tr>
<tr>
<td><strong>Sexting</strong></td>
<td>Sending sexual images or sexual texts via cell phone and other electronic devices.</td>
</tr>
</tbody>
</table>
| **Sexual violence** | The World Health Organization’s definition of sexual violence captures a range of non-consensual sexual acts against another person, including (but not limited to) completed or attempted sexual acts, sexual harassment, and non-contact sexual abuse. The U.S. Centers for Disease Control and Prevention includes the following types within the definition of sexual violence: 
  
  - Completed or attempted forced penetration of a victim
  - Completed or attempted alcohol-/drug-facilitated penetration of a victim
  - Completed or attempted forced acts in which a victim is made to penetrate a perpetrator or someone else
  - Completed or attempted alcohol-/drug-facilitated acts in which a victim is made to penetrate a perpetrator or someone else
  - Non-physically forced penetration that occurs after a person is pressured verbally or through intimidation or misuse of authority to consent or acquiesce
  - Unwanted sexual contact
  - Non-contact unwanted sexual experiences |
<p>| <strong>Solicitation of a child for sexual purposes (Article 23, Lanzarote Convention)</strong> | Intentional proposal, through information and communication technologies, of an adult to meet a child who has not reached the legal age for sexual activities, for the purpose of engaging in sexual activities or the production of child pornography. |</p>
<table>
<thead>
<tr>
<th>TERM</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Survivor/Victim</strong></td>
<td>A person who has experienced gender-based violence. The terms “survivor” and “victim” can be used interchangeably, although “survivor” is generally preferred in the psychological and social support sectors, and “victim” is generally preferred in the legal and medical sectors. Throughout this review, we use both.</td>
</tr>
<tr>
<td><strong>“Teen dating” sexual violence</strong></td>
<td>A range of sexually abusive behaviors that pre-adolescents, adolescents, and young adults experience in the context of a past or present romantic or dating relationship.</td>
</tr>
<tr>
<td><strong>Violence Against Children (Article 19, CRC)</strong></td>
<td>The UN Convention on the Rights of the Child defines violence against children as “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.”</td>
</tr>
</tbody>
</table>
REFERENCES

1. Sexual violence is used as an umbrella term that includes multiple forms of contact and non-contact sexual acts, including but not limited to child sexual abuse, incest, rape, sexual violence in the context of dating/intimate relationships, sexual exploitation, online sexual abuse, and non-contact sexual abuse.


12. There are many classifications of age based on different global agreements and frameworks. This is a combined definition from the International Rescue Committee’s “Caring for Child Survivors of Sexual Abuse Guidelines” for health and psychosocial service providers in humanitarian settings, along with the Convention on the Rights of the Child.

13. The Violence Against Children and Youth Surveys (VACS), led by the U.S. Centers for Disease Control and Prevention as part of the Together for Girls partnership, are nationally representative household surveys of males and females ages 13 to 24. They are designed to measure the prevalence, past 12-month incidence, and circumstances surrounding sexual, physical, and emotional violence in childhood, adolescence (before age 18), and young adulthood (before age 24). The surveys also identify risk factors, protective factors, and consequences of violence. To access more information or country-specific VACS, go to togetherforgirls.org/about-the-vacs/


19. VACS are led by national governments and CDC as part of the Together for Girls partnership.


REFERENCES


30 Key international legal frameworks include: the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW); the International Covenant on Civil and Political Rights (ICCPR); the International Covenant on Economic, Social and Cultural Rights (ICESCR); the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (CAT); the Convention on the Rights of Persons with Disabilities (CRPD); and the Declaration on the Elimination of Violence against Women and Elimination of Violence against Children, 2013.


39 For more information, visit nctsn.org/trauma-informed-care/creating-trauma-informed-systems


41 UN General Assembly Human Rights Council. (2013). Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development.


REFERENCES


54 International Center for Research on Women (ICRW). Estimate based on Demographic and Health Surveys. icrw.org/child-marriage-facts-and-figures/


28 For more information on the International Justice Mission, visit ijm.org/quatemala


37 National Association for People Abused in Childhood (NAPAC). For more information, visit npac.org.uk


39 Childhood USA. childusa.org/law


41 ChildhoodUSA. childusa.org/law

42 For more information, visit rainn.org

43 This section summarizes recommendations and evidence from: WePROTECT Global Alliance. (2016). Preventing and tackling child sexual exploitation and abuse (CSEA): A model national response. For more information, visit weprotect.org/the-model-national-response/


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For more information on Coaching Boys Into Men, visit futureswithoutviolence.org/engaging-men/coaching-boys-into-men/.


For the United Kingdom government’s definition of safeguarding and policies, england.nhs.uk/safeguarding/about/

For the United Kingdom government’s definition of safeguarding and policies, england.nhs.uk/safeguarding/about/

For the YMCA of Australia’s child safeguarding policy, visit ymcawa.org.au/who-we-are/safeguarding-children

For the Boys & Girls Clubs of America’s safeguarding policy, visit bgca.org/kids-in-need/child-safety


For more information, visit thecode.org/


150 For more information, visit cdc.gov/globalaids/publications/fmp-2-pager-final-jan-2014.pdf


163 For more information, visit brac.net/search/item/723-empowerment-and-livelihood-for-adolescents


For more information, visit childsafetypledge.org/pledge-and-protect/families-individuals/


For more information, visit end-violence.org/

‘Global Early Adolescent Study’, last modified 2017, access study here: geastudy.org/


The following people contributed to this review. We are grateful for their time, expertise, and input.

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Jennifer Hegle
Lori Heise
Susan Hillis
Florence Jacot
Rachel Jewkes
Kelly Shawn Joseph
Keith Kaufman
Berit Kieselbach
Elizabeth J. Letourneau
Daniela Ligiero
Bernadette J. Madrid
Greta Massetti
Catherine Maternowska
Ben Mathews
Shanaaz Mathews
Jim Mercy
Kim Miller
Amber Peterman
Lorraine Radford
Vidya Reddy
Robin Rennells
Erika Rowell
Joanna Rubinstein
Lauren Rumble
Simone dos Santos
Lemos Fernandes
Ramya Subramanian
Sandie Taylor
Alexandra Thomas
Andre Verani
Kerryanne Walsh
Executive Summary