WHAT WORKS TO PREVENT SEXUAL VIOLENCE AGAINST CHILDREN

Executive Summary

OAK FOUNDATION

THE EQUALITY INSTITUTE

Together for girls STRENGTH IN NUMBERS

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INTRODUCTION

The data is clear: Sexual violence affects girls and boys in every country around the world. For far too long it has been a silent pandemic, with little awareness of the scope, scale, and consequences of the problem or understanding of potential solutions. That silence has allowed violence against children to perpetuate.

However, there is hope. Recently, there has been a global awakening to the issue of sexual violence against children. While there has been little conversation around solutions to prevent sexual violence, this document intends to change that. By analyzing the best available research on existing strategies and identifying the most effective and promising solutions, we have created a resource for decision-makers, advocates, and program implementers, showcasing what works to prevent sexual violence in childhood and adolescence.

Building off the INSPIRE framework *"Seven Strategies to Prevent Violence Against Children,"* this evidence review looked at strategies specifically focused on preventing sexual violence. We then categorized these interventions as effective, promising, prudent, conflicting, no effect, or harmful. From school-based, safe-dating programs to community mobilization efforts, these evidence-based solutions showcase that there are practical, cost-effective programs that can help break the cycle of violence.

The evidence shows that sexual violence can — and must — be prevented. Now it's on us to bring these solutions to scale. Together, we can create a safer world for every child.

SYMBOL KEY

CASE STUDY
Detailed description of an intervention, policy, or program.

EXPERT'S TAKE
Expert perspective on a relevant issue, intervention, or challenge.

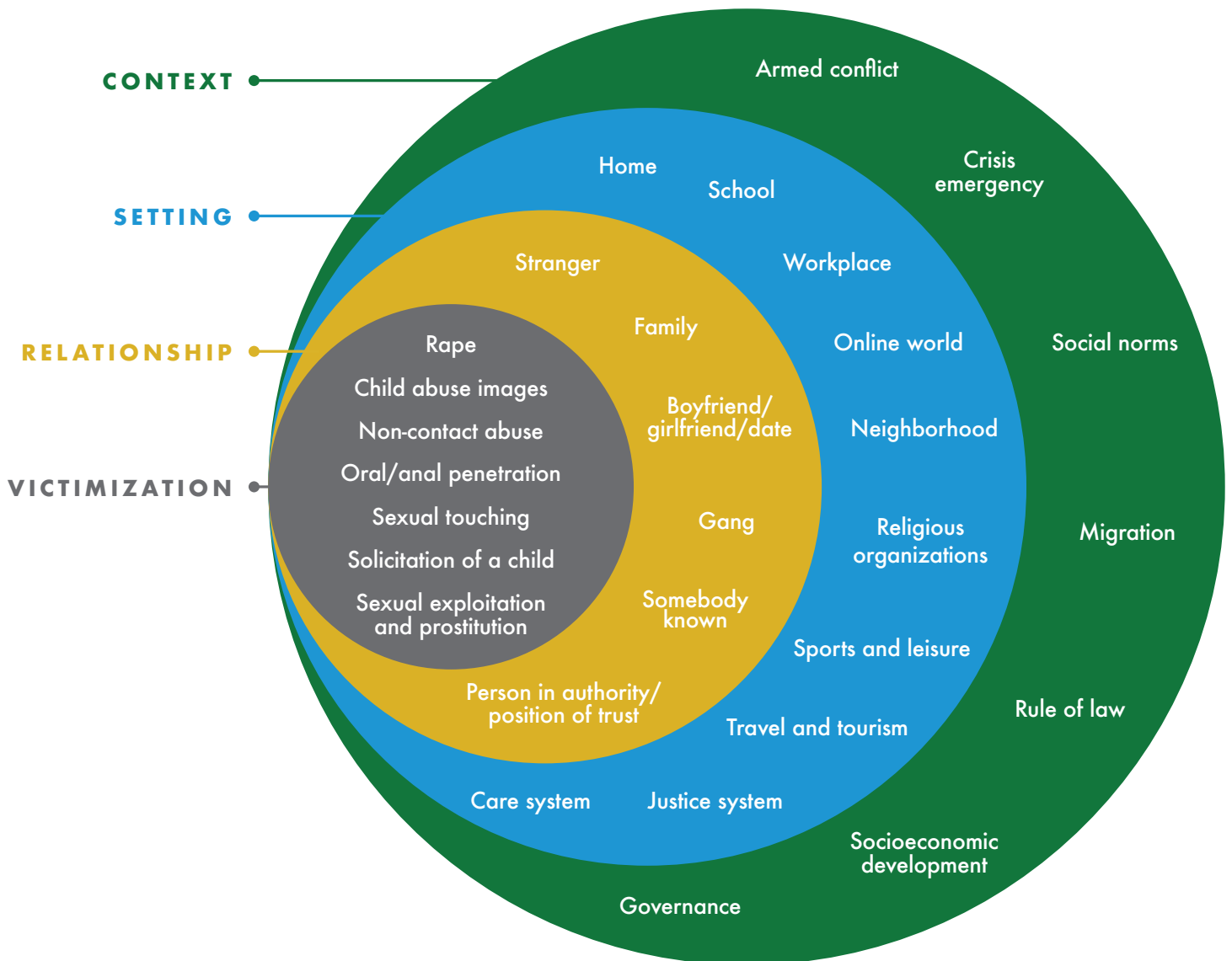**RESOURCE**
Additional resources and tools.

II.

BACKGROUND: SEXUAL VIOLENCE AGAINST CHILDREN

BACKGROUND

Sexual violence against children, which includes anyone under the age of 18, occurs in countries at all levels of development and affects children of all ages. Sexual violence[1] 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. Child sexual abuse also includes acts that do not involve actual physical coercion or threat, but that can be perpetrated through the use of flattery, bribes, allegiance, status, authority, and misrepresentation of social norms. In some instances, the recipient may not even be aware of their own victimization.

THE DIFFERENT DIMENSIONS OF SEXUAL VIOLENCE AGAINST CHILDREN[2]

CONTEXT
SETTING
RELATIONSHIP
VICTIMIZATION

Armed conflict

Crisis emergency

Home
School

Stranger
Workplace

Family
Online world
Social norms

Rape
Child abuse images
Boyfriend/girlfriend/date
Neighborhood

Non-contact abuse
Oral/anal penetration
Sexual touching
Gang
Religious organizations
Migration

Solicitation of a child
Sexual exploitation and prostitution
Somebody known
Sports and leisure

Person in authority/position of trust
Travel and tourism
Rule of law

Care system
Justice system

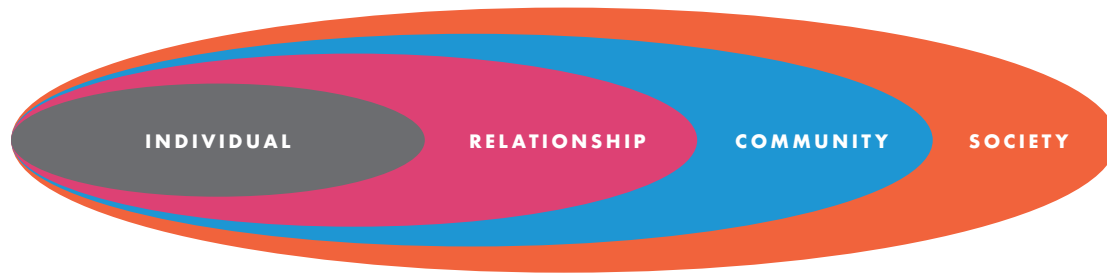Socioeconomic development

Governance

SEXUAL VIOLENCE IS COMPLEX

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[2] is widely used to understand the complex interactions of vulnerabilities and protective factors that contribute to the risk of both experiencing and becoming a perpetrator of violence, including the individual child, families and interpersonal relationships, communities, and the wider societal and political contexts.

Understanding these risks 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.
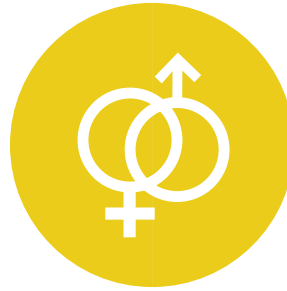
RISKS FOR SEXUAL VIOLENCE AGAINST CHILDREN[3]

INDIVIDUAL	RELATIONSHIP	COMMUNITY	SOCIETY
Victimization	**Victimization**	**Victimization**	**Victimization**
• Gender	• Parental/family support	• Violence in the community	• Poor economic development
• Age	• Family disintegration	• Poor police service or response	• Violence-supportive social norms
• Sexual orientation	• Weak parent-child attachment	• Weak community sanctions against perpetrators of sexual violence	• Weak legal sanctions and poor child protection systems
• Gender identity	• Lack of awareness (on behalf of the parents) of risks and vulnerabilities of children to sexual violence	• Poverty	• Acceptance of child labor
• Lack of education	• Child maltreatment (revictimization)	• Attitudes regarding age, development, and sexual behavior	• Armed conflict
• Orphanhood	• Association with sexually aggressive peers/groups	• Lack of awareness of risks and vulnerabilities of children to sexual violence	• Humanitarian crisis
• Alcohol and drug use	• Involvement in crime (gangs)	• Weak institutional support from police and judicial systems and social welfare systems, including low levels of reporting sexual violence to authorities	• Lack of recognition/ acceptance of boys as potential victims under the law
• Social isolation		• Social tolerance of sexual violence in communities	• Norms granting adults control over children
• Physical or mental disabilities			• Lack of a safeguarding culture, and inherent societal trust in adults who serve children (schools, religious groups, youth-serving organizations)
Perpetration	**Perpetration**	**Perpetration**	**Perpetration**
• Alcohol and drug use	• Family environment characterized by physical violence and conflict	• Poverty, disparities, and exclusion	• Societal norms that blame victims, promote silence, and exonerate perpetrators
• Delinquency	• Childhood history of physical, sexual, or emotional abuse	• Low socioeconomic status	• Societal norms that support male superiority and sexual entitlement
• Lack of empathy	• Emotionally unsupportive family environment	• Lack of employment opportunities	• Societal norms that maintain females' inferiority and sexual submissiveness
• General aggressiveness and acceptance of violence	• Poor parent-child relationships, particularly with fathers	• Lack of institutional support from police and judicial system	• Weak laws and policies related to sexual violence and gender equality
• Early sexual initiation	• Association with sexually aggressive, hypermasculine, and delinquent peers	• General tolerance of sexual violence within the community	• Gender inequality
• Coercive sexual fantasies	• Involvement in a violent or abusive intimate relationship	• Weak community sanctions against sexual violence perpetrators	• High levels of crime and other forms of violence
• Preference for impersonal sex and sexual risk-taking	• Family honor considered more important than the health and safety of the victim		• Acceptance of violence as a way to solve conflict
• Exposure to sexually explicit media	• Strong patriarchal relationship or family environment		• Notion of masculinity linked to dominance, honor, or aggression
• Hostility towards women			• Inadequate provisions of services to children and women experiencing sexual violence
• Adherence to traditional gender role norms			
• Hypermasculinity			
• Suicidal behavior			
• Prior sexual victimization or perpetration			

AGE AND GENDER ARE CRITICAL

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 gendered and life-course approach. 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.

An intersectional approach is necessary to understand and address the overlapping 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 specific set of vulnerabilities experienced by girls and boys at different points of their development. In addition, new data is starting to show that other individual-level variables such as disability, sexual orientation, and gender identity also increase a child's risk for victimization.

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 that are not always present within the existing body of resources: *age and gender.*

SEXUAL VIOLENCE AGAINST CHILDREN IS WIDESPREAD

All children can be the target of sexual violence, and data suggests 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.[4] 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.[5]

Over the last decade, significant efforts have been undertaken to improve data for low- and middle-income countries through the Demographic and Health Surveys (DHS) Program, Multiple Indicator Cluster Surveys (MICS), and Violence Against Children and Youth Surveys (VACS).[6] VACS in particular have shed new light on the magnitude and consequences of sexual violence in low-and middle-income countries (LMICs) around the world.

EXPERT'S TAKE
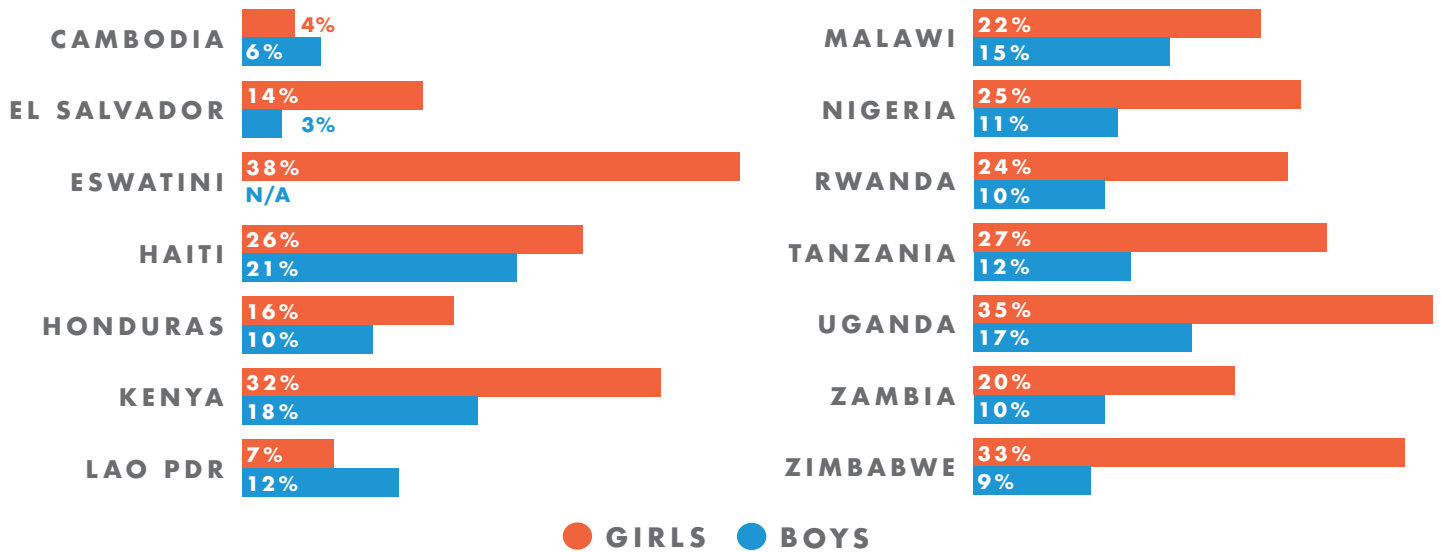
Understanding Child Sexual Abuse

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

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, and 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.

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.

SEXUAL VIOLENCE AMONG CHILDREN

	GIRLS	BOYS
CAMBODIA	4%	6%
EL SALVADOR	14%	3%
ESWATINI	38%	N/A
HAITI	26%	21%
HONDURAS	16%	10%
KENYA	32%	18%
LAO PDR	7%	12%
MALAWI	22%	15%
NIGERIA	25%	11%
RWANDA	24%	10%
TANZANIA	27%	12%
UGANDA	35%	17%
ZAMBIA	20%	10%
ZIMBABWE	33%	9%

● GIRLS ● BOYS

Percentage of youth who experienced sexual violence prior to age 18

GIRLS AND BOYS EXPERIENCE SEXUAL VIOLENCE THROUGHOUT CHILDHOOD AND ADOLESCENCE

	BOYS			GIRLS		
	13 or under	14-15	16-17	13 or under	14-15	16-17
CAMBODIA	73%	4%	23%	26%	12%	62%
HONDURAS	30%	27%	43%	55%	16%	29%
NIGERIA	29%	16%	55%	20%	32%	48%
ZAMBIA	34%	15%	51%	28%	21%	51%

● 13 OR UNDER   ● 14-15   ● 16-17
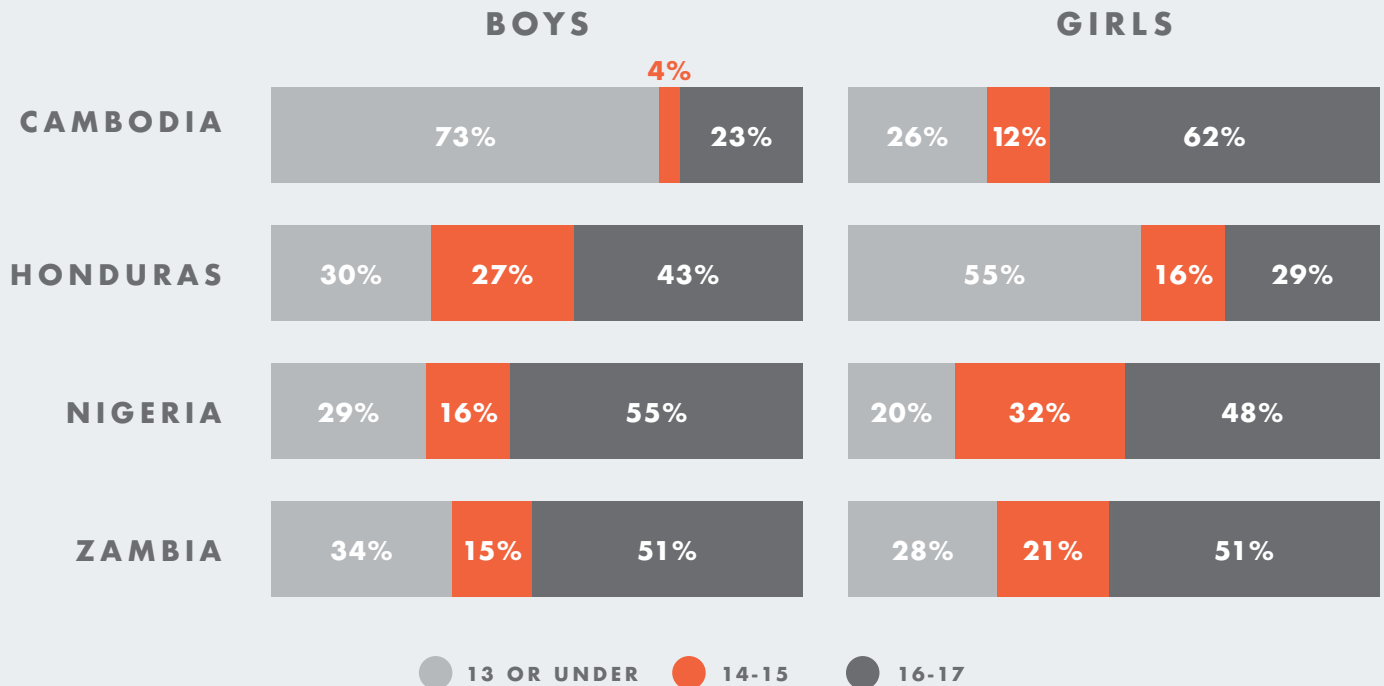
Age of first incident of sexual violence among males and females who experienced sexual violence prior to age 18

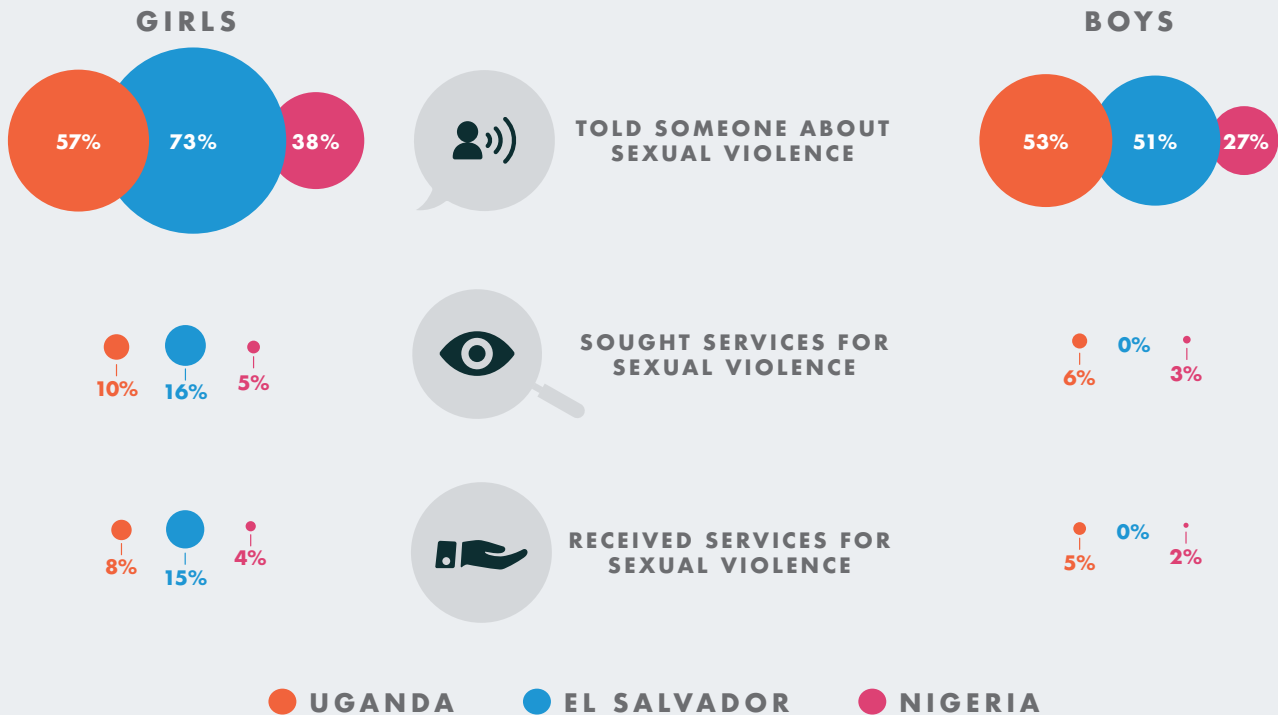All data among 18- to 24-year-olds, from the VACS, led by CDC as part of the TfG partnership

SEXUAL VIOLENCE OFTEN OCCURS IN FAMILIAR LOCATIONS

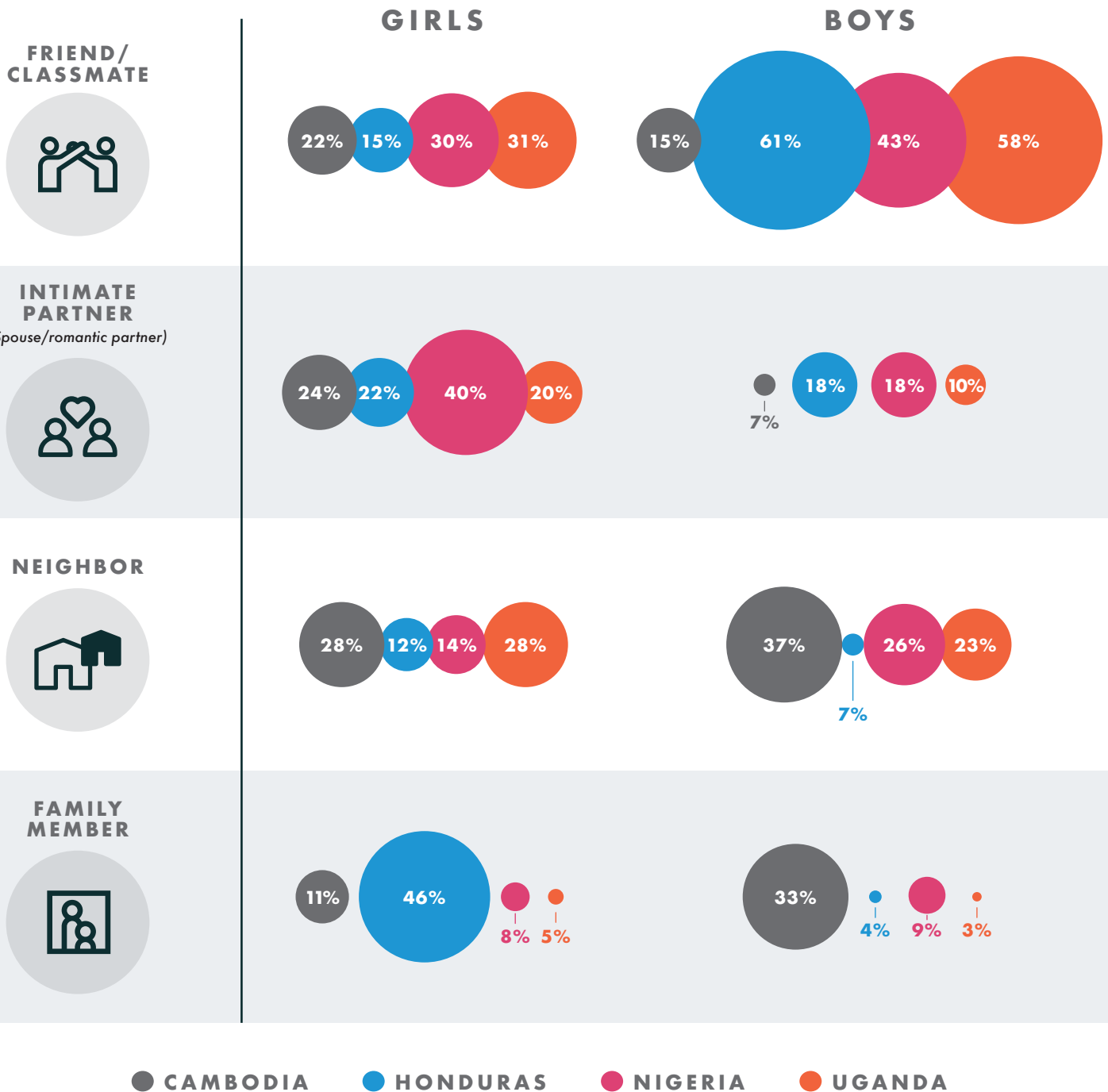Location of first incident of sexual violence experienced by youth prior to age 18

GIRLS

HOME*
- 52% Cambodia
- 58% Zambia
- 52% Uganda
- 50% Malawi

ON A ROAD
- 12% Cambodia
- 13% Zambia
- 21% Uganda
- 16% Malawi

SCHOOL
- 17% Cambodia
- 12% Zambia
- 18% Uganda
- 20% Malawi

SOMEONE ELSE'S HOME
- 11% Cambodia
- 11% Zambia
- 11% Uganda
- 4% Malawi

BOYS

HOME*
- 49% Cambodia
- 67% Zambia
- 34% Uganda
- 44% Malawi

ON A ROAD
- 21% Cambodia
- 10% Zambia
- 14% Uganda
- 18% Malawi

SCHOOL
- 13% Cambodia
- 11% Zambia
- 31% Uganda
- 14% Malawi

SOMEONE ELSE'S HOME
- 11% Cambodia
- 6% Zambia
- 5% Uganda
- 11% Malawi

● CAMBODIA ● ZAMBIA ● MALAWI ● UGANDA

*Respondent's and/or perpetrator's home

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

GIRLS

TOLD SOMEONE ABOUT SEXUAL VIOLENCE
- 57% Uganda
- 73% El Salvador
- 38% Nigeria

SOUGHT SERVICES FOR SEXUAL VIOLENCE
- 10% Uganda
- 16% El Salvador
- 5% Nigeria

RECEIVED SERVICES FOR SEXUAL VIOLENCE
- 8% Uganda
- 15% El Salvador
- 4% Nigeria

BOYS

TOLD SOMEONE ABOUT SEXUAL VIOLENCE
- 53% Uganda
- 51% El Salvador
- 27% Nigeria

SOUGHT SERVICES FOR SEXUAL VIOLENCE
- 6% Uganda
- 0% El Salvador
- 3% Nigeria

RECEIVED SERVICES FOR SEXUAL VIOLENCE
- 5% Uganda
- 0% El Salvador
- 2% Nigeria

● UGANDA ● EL SALVADOR ● NIGERIA

Youth who told someone about, sought services and/or received services for sexual violence among those who experienced sexual violence prior to age 18

PERPETRATORS OF SEXUAL VIOLENCE ARE OFTEN SOMEONE KNOWN TO THE CHILD OR ADOLESCENT

	GIRLS	BOYS
FRIEND/ CLASSMATE	22% 15% 30% 31%	15% 61% 43% 58%
INTIMATE PARTNER *(Spouse/romantic partner)*	24% 22% 40% 20%	7% 18% 18% 10%
NEIGHBOR	28% 12% 14% 28%	37% 7% 26% 23%
FAMILY MEMBER	11% 46% 8% 5%	33% 4% 9% 3%

● **CAMBODIA**   ● **HONDURAS**   ● **NIGERIA**   ● **UGANDA**

Most common perpetrators of first incidents of sexual violence
among those who experienced sexual violence prior to age 18

ONLINE SEXUAL VIOLENCE

Online child sexual exploitation and abuse (CSEA) is an emerging area of concern. Policy frameworks, justice systems, and law enforcement organizations struggle to keep pace with the rapid growth of this type of abuse. INTERPOL's Child Sexual Exploitation (ICSE) image and video database has intercepted more than 1.5 million images and videos.[7] Additionally, the National Center for Missing & Exploited Children noted that they received an increase of 8.2 million reports from 2017—2018.

- 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**

III.

THE EVIDENCE REVIEW: WHY AND HOW

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.

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. While this review focuses on prevention interventions, we frame this in the understanding that effective prevention cannot exist without response services.

As with INSPIRE, this evidence review is aligned with the 2030 Sustainable Development Goals (SDGs), which include a set of 17 transformative and ambitious goals to be achieved by 2030 in order to improve the human condition, and the sustainability of our planet. Ending violence against children is key to achieving several of the SDGs, especially Target 16.2: End abuse, exploitation, trafficking, and all forms of violence against and torture of children.

Drawing on an extensive evidence base and the expert knowledge of civil society, practitioners, academics, and policymakers, and with special attention to LMICs, the purpose of this evidence review is to:

- Present a summary of the **existing evidence** on what works to prevent sexual violence against children and adolescents

- **Share case studies** from various sectors and regions of the world

- **Highlight ongoing challenges** and evidence gaps

- Showcase expert opinions on how to best **prevent sexual violence against children**

This review is intended for decision-makers, advocates, and program implementers to help guide efforts and investments in policies and programs that have the potential to end sexual violence against children. This review complements existing resources, including the new Economist Intelligence Unit's Out of the Shadows Index, and UNICEF's Promising Programmes to Prevent and Respond to Child Sexual Abuse and Exploitation (2015).[8]

WHO IS THIS REVIEW FOR?

Decision-makers   **Advocates**   **Program Implementers**

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.**[9] These harmful practices are forms of violence that are sometimes considered to be sexual in nature and primarily affect girls and women.
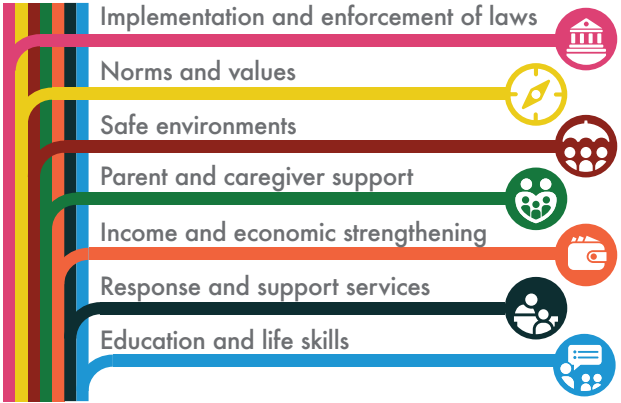
INSPIRE: Seven strategies for ending violence against children

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.

The seven strategies are:

- 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

Economist Intelligence Unit's Out of the Shadows Index

The Out of the Shadows Index is a 60-country benchmarking index developed by the Economist Intelligence Unit, which examines how countries are responding to the threat of sexual violence against children. It explores the environment in which the issue occurs and is addressed; the degree to which a country's legal framework provides protections for children from sexual violence; whether government commitment and capacity is being deployed to equip institutions and personnel to respond appropriately; and the engagement of industry, civil society, and media in efforts to tackle the problem. The index notes that country action to combat violence against children has been most pronounced on the legal framework, while performance varies greatly on government commitment and capacity. 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. For more information, visit outoftheshadows.eiu.com.

CLASSIFICATIONS USED IN THIS EVIDENCE REVIEW

In this review, interventions were classified as "effective," "promising," "prudent," "no effect," and "harmful" based on the following criteria, adapted from the INSPIRE framework.[10]

CLASSIFICATION	DEFINITION
EFFECTIVE	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.
PROMISING	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).
PRUDENT	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.
CONFLICTING	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).
NO EFFECT	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.
HARMFUL	Evidence from at least two high- or moderate-quality studies shows that this intervention can cause unintended harm or increase risk.

IV.

THE EVIDENCE: SOLUTIONS TO PREVENT SEXUAL VIOLENCE IN CHILDHOOD

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Ratifying international treaties, frameworks, and legislation	Age: All Gender: All	PRUDENT	Provides framework for adoption and implementation of domestic legislation	Often not enforced	UN protocols and conventions such as the United Nations Convention on the Rights of the Child (CRC)
Implementing and enforcing laws that criminalize various forms of sexual violence against children and adults	Age: All Gender: All	PRUDENT	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.	Measuring effectiveness of prevention is challenging	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)
Establishing victim-sensitive standards and specialized services for policing and justice	Age: All Gender: All	PRUDENT	Can minimize re-traumatization of victims; provides an essential building block for effective prevention; can increase reporting	N/A	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
Laws that limit alcohol misuse	Age: All Gender: All	PRUDENT	Can address risk factors associated with sexual violence victimization and perpetration, such as excessive alcohol use and binge drinking	N/A	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

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

Criminal Justice Response to Sexual Violence in Guatemala

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.[11] 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

The Child Friendliness Index: Holding Governments to Account

Dr. Assefa Bequele, African Child Policy Forum, Addis Ababa, Ethiopia

As part of its Pan-African evidence-based advocacy, the African Child Policy Forum (ACPF) developed, in 2008, the first ever Child-Friendliness Index (CFI) which serves as an empirical framework to measure, monitor, and analyze the performance of African governments in ensuring the dignity and rights of children.

This pioneering and powerful policy and advocacy tool scores and ranks the performance of governments based on a rights-based and statistically robust methodology that has gone through several validation processes. The key questions the CFI addresses include:

- How well are African governments doing to meet their obligations to children? Which governments are doing well, and which ones are not?

- How do governments rate in relation to each other?

- What accounts for differences in government performance?

- Which are the areas where they have or have not progressed well?

The CFI follows a holistic approach based on the 3Ps of the CRC, namely Protection, Provision, and Participation. Some thirty indicators relating to legal, policy, budgetary, and child wellbeing outcomes are used to measure performance. These include indicators on birth registration, child marriage, violence, education, nutrition, and health services. With respect to violence, the CFI evaluates efforts to prevent and address all forms of violence against children, including harmful practices.

The analyses and results from this exercise — which are published in ACPF's biennial publication *The African Report on Child Wellbeing* — provide critical policy-oriented information which governments and child rights advocates can use in initiating, implementing, and campaigning for legal, policy, and budgetary reforms.

The strength and international relevance of the CFI lies in its deliberate focus on government performance, its methodological and empirical rigor, and in being anchored to universal principles.

Because it provides a rights-based statistical framework for assessing the comparative performance of governments, it has the added advantage of being an incontestably objective advocacy tool to hold governments accountable and to promote child rights and child wellbeing in Africa and beyond.

For more information, please visit ACPF's website at africanchild.report/.

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, 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 in the United States, 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.[12]

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, evidenced-based interventions for youth with problematic sexual behavior. Juvenile SORN (Sex offender registration and notification) are not among these effective interventions.

NORMS AND VALUES

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Community mobilization programs to change attitudes, norms, and behaviors with direct intervention at the community level	Age: Early and late adolescence Gender: All	**EFFECTIVE**	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	More research needed to assess the impact of community mobilization programs for specific age groups and for sexual violence against children and adolescents	SASA!
Working with men and boys to challenge stereotypes, toxic masculinity, and norms that justify violence	Age: Early and late adolescence Gender: All	**PROMISING**	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	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	Coaching Boys Into Men; Men Can Stop Rape; Mentors in Violence Prevention
Awareness-raising campaigns (national)	Age: All Gender: All	**NO EFFECT**	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	No evidence to support ongoing or sustained behavior change on their own	Various generic and short-lived national-level campaigns that are not complemented with direct intervention or follow-up

SASA!

SASA!
Mobilizing Communities to
Inspire Social Change

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.[13] 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

Key Considerations for Engaging Men and Boys as a Prevention Strategy

Dr. Gary Barker, Founder and CEO, Promundo, Brazil and Washington, DC, USA

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, key considerations include:

- 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, read WHO's "Engaging men and boys in changing gender-based inequity in health: Evidence from programme interventions."

- 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.[14]

- Social norms that 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.

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Manipulation of physical environment in school settings (e.g., safe spaces for play, school staff to monitor violence-prone hot spots identified by students)	Age: Early adolescence Gender: All	**PROMISING**	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	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	Shifting Boundaries
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)	Age: All Gender: All	**PROMISING**	Available evidence suggests this can moderate peer-reported victimization, self-reported aggression, and aggressive bystander behaviors	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	Doorways III; Good School Toolkit
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)	Age: All Gender: All	**PRUDENT**	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	Limited evidence on the impact of safeguarding to prevent sexual violence against children	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)
Awareness-raising of online child sexual abuse and exploitation for students, parents, and teachers	Age: All Gender: All	**PRUDENT**	Aim to raise awareness among teachers, parents, and students about the risks associated with technology and the internet; block specific sites and apps	Need for additional evidence on the impact and effectiveness of this approach	Safer Surfer
Manipulation of physical environment in humanitarian settings (e.g., lighting, latrines, child-friendly spaces for play)	Age: All Gender: All	**PRUDENT**	General agreement among humanitarian actors that modifications to the physical environment are necessary to keep women and children safer during displacement	Lack of strong evidence to document the impact of this strategy	Child-Friendly Spaces (CFS)

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.[15] 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.

The Royal Commission recommended implementation of 10 Child Safe Standards in CYSOs.[16] These models emphasize prevention through organizational policy, screening, codes of conduct, monitoring implementation, safe environments, education/training, and responding and reporting. Examples of commendations include:

- 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

Safeguarding Policies and Procedures: Preventing Institutional Abuse

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.[17] Safeguarding within child-and youth-serving organizations (CYSO) 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:[18,19,20,21]

- 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

As evidenced by the array of factors contributing to incidences of sexual violence against children, preventing institutional sexual abuse in organizations requires significant investment in safeguarding for children: changes in the policies, norms, and culture of the organization.

This intervention was classified as `PRUDENT`

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

Preventing and Tackling Child
Sexual Exploitation and Abuse
(CSEA):

A Model National Response

We**PROTECT**
GLOBAL ALLIANCE

November 2016
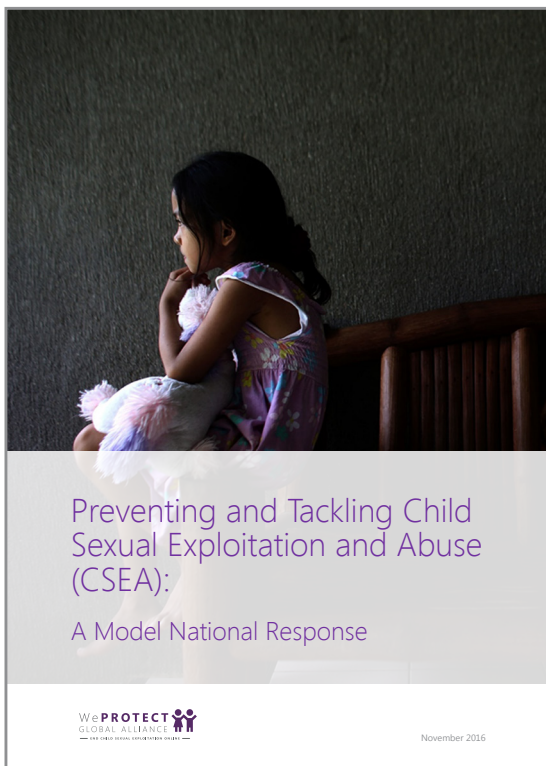
A comprehensive assessment by the WePROTECT Global Alliance from 2018 found that online child sexual exploitation and abuse (CSEA) is the most insidious form of modern cybercrime and one of the most challenging forms of CSEA to prevent and address.[22] In response to the growing issue of online CSEA, 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/.

PARENT AND CAREGIVER SUPPORT

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Parenting programs to prevent teen dating violence	Age: Early and late adolescence Gender: All	**EFFECTIVE**	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	Additional research needed on the impact of these interventions on multiple forms of sexual violence within dating relationships	Families for Safe Dates in high-income countries
Home visiting programs	Age: Expecting parents/ early childhood Gender: All	**PROMISING**	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	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	Nurse-Family Partnership
Parenting programs to improve parent-child communication	Age: Early and late adolescence Gender: All	**PROMISING**	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	Additional research needed on actual reductions in sexual violence victimization	Families Matter! Program

Families for Safe Dates

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.[23] 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.

This intervention was classified as EFFECTIVE

INCOME AND ECONOMIC STRENGTHENING

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Cash transfers	Age: Early and late adolescence Gender: Female	PROMISING	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	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	UNICEF Malawi Social Cash Transfer Program
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)	Age: Early and late adolescence Gender: Female	PROMISING	Multifaceted programs that affect multiple outcomes, including employment, reductions in child marriage, early pregnancy, and forced/ coerced sex	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	Empowerment and Livelihood for Adolescents Program

Empowerment and Livelihood for Adolescents (ELA)

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).[24]

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.[25]

This intervention was classified as `PROMISING`

RESPONSE AND SUPPORT SERVICES

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
Counseling and therapeutic approaches for survivors	Age: All Gender: All	EFFECTIVE	Demonstrated to reduce symptoms associated with traumatic events, including the disclosure of sexual violence	Should be implemented in conjunction with other response and support services	Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
Multisystemic therapy for child/youth offenders	Age: Early and late adolescence Gender: All	EFFECTIVE	Addresses the child's views and perspectives on age-appropriate sexual experiences and relationships, as well as the attitudes that contribute to the offending	Should be implemented in conjunction with other response services	Multisystemic Therapy – Problem Sexual Behavior; Cognitive Behavioral Therapy (CBT); Circles of Support and Accountability (CoSA)
Child protection systems and associated response systems (e.g., health sector, education sector, social welfare, child protection services)	Age: All Gender: All	PRUDENT	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	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	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)
Foster care interventions, including social welfare services	Age: All Gender: All	PRUDENT	Alternative care programs where foster and kinship families are supported by a range of services, improving outcomes for children	Should be implemented in conjunction with other response services	Enhanced Foster Care
Screening in health care settings	Age: All Gender: All	CONFLICTING	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	Must be combined with effective interventions when screening is positive to avoid negative consequences	NICE Guidelines

Bolivia: A Breeze of Hope Foundation

Brisa de Angulo, founder of A Breeze of Hope.

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.[26] 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, A Breeze of Hope 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.

2. **Preventing sexual violence:** ABH shifts social norms and laws that enable sexual violence by educating communities, working for public policy reform, and advocating for the protection of human rights.

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.

Photo courtesy of A Breeze of Hope

This comprehensive model of care, legal assistance, and prevention has generated significant results for Bolivian young 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

Use of Case Advocates to Improve Uptake of Violence Against Children Services Across Different Service Delivery Points in Public Health Facilities

Dr. Lina Digolo, LVCT Health, Nairobi, Kenya

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

EDUCATION AND LIFE SKILLS

INTERVENTION TYPE	AGE GROUP /GENDER	EFFECTIVENESS	STRENGTHS	LIMITATIONS	EXAMPLES OF INTERVENTIONS
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	Shifts in attitudes tend to be short term and regress to pre-intervention levels after brief follow-up periods	Safe Dates; Stepping Stones
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

Safe Dates

There have been several adaptations of safe dating programs implemented across HICs[27], and increasingly in LMICs[28], 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.[29] 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.

This intervention was classified as EFFECTIVE

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[30] found an improvement in children's knowledge about sexual abuse in 20 of 23 reviewed evaluations of prevention programs.

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.[31] 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.

This intervention was classified as PROMISING

V.

IMPLICATIONS

Broadly, there are several factors that are consistently raised as important for 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

The evidence review highlighted some serious gaps in the body of evidence in key areas. There is a need to invest in more targeted research, with a focus on implementation science, to understand what is working for children and adolescents in different contexts. Seven broad areas that require additional research and attention are as follows:

- Age and life-course development

- Gender, gender identity, and sexual orientation

- Disability

- Effects of combined interventions on preventing various kinds of violence against children—including sexual violence

- Conflict/post-conflict/humanitarian settings

- Online sexual violence

- Intersections between violence against children and women

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.

> **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.**

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Executive Summary

OAK FOUNDATION   THE EQUALITY INSTITUTE   Together for girls   STRENGTH IN NUMBERS