

ABSTRACT

The aim of this study was to investigate risk factors and explore child sexual abuse among high school pupils in Lusaka District. Specifically, the study focused on identifying the forms of sexual abuse; examine the factors that put children at risk for sexual abuse; find out the grooming tactics used by sexual abusers; find out the disclosure rate for child sexual abuse cases; examine the abuser-victim relationships; and make recommendations for child sexual abuse prevention. Participants were secondary school pupils, with ages ranging from 16 to 21 years. Data was collected using self-report questionnaires and Focus Group Discussions. Data analysis was done using the Statistical Package for the Social Sciences (SPSS).

The results show an overall prevalence rate of child sexual abuse to be 43.5% (n=87). Of the 87 victims, 41.1% (n=36) were males and 58.6% (n=51) were females. Among the forms of sexual abuse, sexual touch/arousal had the highest frequency (n=54, 62.1%). Most of the subjects (75.6%, n=19) did not disclose their sexual experiences, whereas only 24.4% (n=19) did. Most abusers were found to be family members (n=39, 44%).

7 risk factors for sexual abuse were examined: the most powerful one was parental absence (n=63, 73.3%); having punitive parents (n=57, 68.7%); alcohol intake by a parent or other guardian (n=30, 34.5%); poor parent-child relationship (n=20, 23.7%); parental conflict (n=19, 22.4%); presence of a stepparent (n=13, 13.1%); and physical disability (n=4, 7%). In addition, chi-square results show that there is a significant relationship between the expected and observed frequencies obtained on the responses given for the risk factors.

Furthermore, the results obtained from the FGDs show that the most frequently used trick for sexual abuse is the offer of money and /other gifts (n=21, 67.8%). Fifty-six (69%) of the victims lacked knowledge to know that the grooming they experienced would result into sexual abuse.

The report makes suggestions on the roles of children, parents, the school and the general community in child sexual abuse prevention. It also gives recommendations for further study in the area of child sexual abuse, specifically to ascertain the levels of awareness among teachers, as these were identified as key players in the prevention of child sexual abuse. An evaluation of the existing sexual abuse prevention programs in Zambian schools is also recommended.

I am dedicating this work to my dear husband John, and son Chalede, both of whom mean so much to me. John made significant emotional, academic and financial support to the realization of this dream. Without this support, my dream would not have come to fruition.

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LIST OF ABBREVIATIONS

CHIN	Children in Need Network
FGD	Focus Group Discussion
ICWR	.....	Institute for Child Witness Research and Training
UNICEF	.....	United Nations International Children’s Emergency Fund
USDHHR	.....	United States Department of Health and Human Services
WHO	.....	World Health Organization
YWCA	.....	Young Women’s Christian Association
YMCA	.....	Young Men’s Christian Association

CHAPTER ONE

BACKGROUND TO THE STUDY

1.1: Introduction

This study is aimed at investigating risk factors and exploring child sexual abuse among high school pupils in Lusaka District. The context of the different risk factors for child sexual abuse is two-fold, that is, internal risk factors, (namely physical disability of the victim); and external risk factors, (namely parental absence; having punitive parents or guardians; the presence of a stepparent; parental alcohol intake and/or other drugs; poor parent-child relationship; and parental conflict). This chapter contextualizes the problem of child abuse in general, then child sexual abuse in particular. It also gives the background to the study and discusses the relevance of the dissertation, and finally reviews the overall and specific objectives. The escalating extent of the problem of child sexual abuse is discussed in terms of responses given by the participants in various secondary schools in Lusaka District.

In this dissertation, the term child sexual abuse is used to refer to all sexual activities in which any child was engaged by an adult or older person, without the child's consent, but using force and bribery, (Finkelhor, 1994; American Academy of Pediatrics, 1991; WHO, 2002). This definition does not refer to child sexual abuse as exclusively comprising only vaginal penetration, but includes all sexual activities, that is, contact forms that include, penile penetration of the mouth, anus or vagina; fondling sexual organs of the child's body; kissing the child or making the child touch the sexual organs of the adult's body; and non-contact forms, that include showing sexual organs to the child and exposing the child to adults having sex, (Finkelhor, 1994).

It should be stated, however, that even though a child gives consent to a sexual activity, such an activity would still be considered to be sexual abuse, especially if the child is developmentally unprepared and the activity violates the social taboos of society (American Academy of Pediatrics, 1999).

1.2: Background to the study

For every child, childhood is supposed to be joyous, peaceful, of learning and playing. However, the reality for most children is altogether different. Children the world over suffer as victims of activities such as sexual abuse. The problem of child sexual abuse appears to be a universal phenomenon, and Zambia has not been an exception.

Child sexual abuse is a silent epidemic that is restricting the lives of millions of children and adolescents. Until the early 1970s, it was thought to be centered among the poor, (Finkelhor, 1984; United States Department of Health and Human Services, 1998). Experts now agree that child sexual abuse has always occurred, and exists in all socioeconomic groups. Furthermore, it is a problem that affects children from every racial, ethnic and cultural background.

In the United States, when child abuse reports of 1970 to 1990 were reviewed, they showed that child sexual abuse increased more than other categories of abuse, (United States Department, 1998). For example, of the total population, the population which has been sexually abused ranges from a low rate of 24 % to a high rate of 61%, (National Research Council, 1993).

In Sub-Saharan Africa, literature from countries surrounding Zambia documents the existence of a child sexual abuse epidemic in the region (Chomba et al, 2010). Prevalence studies rely on cross-sectional study design, most often surveying school children about their experiences of sexual abuse. These prevalence studies, however, cannot be easily quantified due to lack of adequate data (UNICEF, 2001). Although studies on child sexual abuse are emerging, the process is slow and inconsistent. In Sub-Saharan Africa, research into child sexual abuse is limited and largely confined to the Republic of South Africa (Lalor, 2004). Two major reasons have been attributed to this. First, there is a widespread belief that it is a recent phenomenon which can be attributed to the harmful forces of modernity, foreign influences and rapid social change. Because of this, it is deemed un-African, unnatural and very rare. Secondly, it is because of the competing social problems affecting children such as war, disease, poverty, hunger and homelessness, (Ibid).

Furthermore, the scarcity of research is due to lack of resources, the overshadowing of child protection by political and economic problems, and lack of research culture and research experience, (Lachman, 1996). With a few exceptions, research conducted outside South Africa is scarce.

From the studies that have been conducted in South Africa, the problem of child sexual abuse in this region is extensive. Prevalence rates of child sexual abuse differ in African studies. Variations are likely to be due to methodological issues which occur throughout child sexual abuse research (Leventhal, 1998). The rate of child sexual abuse also differs according to the definition used. For example, when “touched sexually by force” was used as a question, 5.2% of the participants were deemed sexually abused (Madu, 2001), compared to 26.3% when “unwanted genital fondling was used (Collings, 1997). Despite the discrepancies in the reporting across cultures, the existence of child sexual abuse is a problem that cannot be denied (McCran et al, 2006).

Although Zambia has been declared a Christian Nation, and by inference accepting the Biblical prescriptions, dreadful events like child sexual abuse have found fertile ground, (Liche, 2009; YWCA, 1999). Each year, a number of children are subjected to sexual abuse. In addition, although several attempts have been made by concerned bodies leading to stiffer punishment for such crimes in the courts, and despite moral condemnation of such practices, these happenings seem to be on the rise (Ibid). According to the statistics obtained from the Victim Support Unit (VSU) at the Central Police station in Lusaka, in the year 2009 only, the total number of child sexual abuse cases that were reported was 1, 676. Of these, 633 (38%) were taken to court, while 1,043(62%) were not.

The prevalence of child sexual abuse continues to be a problem due to issues such as HIV/AIDS, among others, [World Health Organization (WHO), 2002]. While prenatal transmission accounts for the majority of new pediatric HIV infections, in Zambia where the HIV prevalence is high, sexual abuse remains an important risk factor in children in the post-weaning period (Chomba al, 2010). While HIV transmission rates attributable to sexual abuse are unknown, pediatric victims of sexual abuse are at high risk of HIV transmission due to the fact that multiple exposures often occur prior to the discovery of the abuse

(Lindergren et al, 1998). In the second quarter of 2003, Zambia police handled 300 cases of child rape, and some experts believe that for every case reported, another 10 go undisclosed, (Agency France Press, 2003). In a study with a sample of 3,360 adolescents, Mukuka and Nevo (2007) found that 10% of the adolescents reported that they had been sexually abused.

1.3: Statement of the Problem

Child sexual abuse is a violent crime against humanity that cuts across all social classes and racial and religious groups. Both boys and girls are victims, and it is not a rare occurrence (Cohen et al, 2006:215).

Although epidemiological data for the prevalence of child sexual abuse in Zambia is not available, Murray et al (2006) found that that child sexual abuse is a significant concern in Lusaka communities. Defilement was mentioned by 40% of women and 30% of children. In a study that was conducted in Zambia by CHIN and UNICEF (2001), out of 1,957 children that participated, one hundred thirty-one (6.7 %), reported being sexually abused. This is the same as saying that one in every fifteen of the children sampled had been sexually abused. In the general population, however, one would expect that that one in every thirteen to eighteen children is likely to experience some form of sexual abuse (Ibid).

Child sexual abuse leaves the survivors with diverse psychological and physical effects. The nature and severity of these difficulties may depend upon the age of the child, the identity of the offender, the circumstances of the abuse, and the family's reaction to the disclosure, (Cohen et al, 2006: 213). Finkelhor and Browne (1986) formulated a conceptual framework for the initial and long-term effects of child sexual abuse. They pointed at the effects to be the conjunction of the following trauma-causing factors: traumatic sexualization, stigmatization, betrayal and powerlessness. Other possible psychological effects are Post-Traumatic Stress Disorder, depression and substance abuse problems. The physical effects include body damage, (Vale, 1996), HIV/AIDS infection and contracting other sexually transmitted diseases. Child sexual abuse may even lead to death, (Rosel, 1986). Survivors of sexual abuse may also exhibit behavioral problems such as nightmares, difficulty in school and running away, (Cohen et al, 2006:213). It would therefore be justifiable to argue that child sexual abuse affects its victims negatively. Despite this, few studies have been done in

Africa, particularly Sub-Saharan Africa to investigate risk factors. Of the studies done, most of them are conducted in South Africa. However, results from some of their findings cannot be generalized because they are based on unrepresentative samples, (Lalor, 2004).

In addition, research findings show that there are certain conditions and circumstances that put children and adolescents at risk for sexual abuse. However, in Zambia, like in many other African countries, the risk factors that expose children to sexual abuse remain unexplored, (Chiroro et al, 2006).

1.4: Justification of the study

The choice of this research topic is made from the observation that the problem of child sexual abuse seems to be on the rise. From a global perspective, estimates from studies show that from 7 to 62% of girls, and from 3 to 19 % of boys have experienced some form of sexual abuse (Sanderson, 2004).

In Zambia, child sexual abuse is compounded by the HIV prevalence exceeding 25% in urban adults, (Murray, 2006). In addition, Zambia's economy is among the worst of the African continent, and the numbers of orphans and street children are increasing. These children are particularly vulnerable to child sexual abuse, (Allan, 2006). Furthermore, child sexual abuse in Zambia is linked with high risk of HIV transmission. Poverty, gender and inequality, and the increasing numbers of AIDS orphans are rapidly expanding the number of children who are vulnerable to sexual abuse, (Bota, 2003).

To this effect, the fact that the prevalence of child sexual abuse tends to be on the rise and that it may affect the victims negatively in their immediate and later life, may signal the need for research in this area to be undertaken in order to help curb the problem. This study therefore becomes significant in three ways. First, it will help create awareness among children and adolescents, parents and other caregivers, on the risk factors for child sexual abuse. Secondly, knowledge regarding risk factors will be essential for effective sexual abuse prevention, (Benedict and Zautra, 1993). Thirdly, it will allow for comparisons to be made between the findings made by scholars in other countries and findings drawn from a Zambian perspective.

1.5: Research Objectives

1.5.1: Overall Objective

The overall objective of this study was to investigate risk factors and explore child sexual abuse among high school pupils in Lusaka District.

1.5.2: Specific Objectives

1.5.2.1 To identify the different forms of sexual abuse experienced by the victims.

1.5.2.2 To examine the factors that put the victims at risk for the form of sexual abuse that they experienced.

1.5.2.3. To find out the tactics that sexual abusers use to groom children for sexual abuse.

1.5.2.4. To find out the rate of disclosure for sexual abuse cases

1.5.2.5. To examine the abuser-victim relationships

1.5.2.6. To make recommendations for sexual abuse prevention.

1.6: Research Hypotheses

Based on the literature reviews of Cohen et al (2006) and Dam (2001) respectively, the study tested the following hypotheses:

- i. Alcohol intake by the parent or guardian is a significant risk factor for child sexual abuse.
- ii. In Lusaka District, children and adolescents that are sexually abused have knowledge of the grooming tactics used by perpetrators.

2.4. Definition of terms

2.4.1 Child Sexual Abuse: Variations in the Definitions

It is estimated that by the age of 18, 12 to 25% of girls, and 8 to 10% of boys have been victims of sexual abuse, (Putnam, 2003).

Several definitions have been provided for child sexual abuse. It is worth noting that definitions of child sexual abuse differ from country to country due to cultural and societal perceptions and attitudes, [Institute for Child Witness Research and Training (ICWRT), 2008]; and the legal age of consent may vary by State. Where the law stipulates an age, the range is from 12 to 16 years, and 18 years in a few countries, (WHO, 2002).

Sanderson (1990), defines the term as the involvement of dependent children in sexual activities with an adult, or any person bigger or older, in which the child is used as a sexual object for the gratification of the older person's needs and desires, and to which the child is unable to give consent due to the unequal power in the relationship.

It can also be defined as the engaging of a child in sexual activities that the child cannot comprehend, for which the child is developmentally unprepared and cannot give consent, and violate the social taboos of society, (American Academy of Pediatrics, 1999).

Child sexual abuse includes any of the following acts committed by an adult upon a child 18 years of age or younger: attempted or completed intercourse, that is, oral, anal and genital; touching; grabbing; kissing; rubbing up against the child in the context of a sexual situation; photographing the child nude; exhibiting sexual body parts to the child; or having a child view a sexual act, (Finkelhor, 1994).

According to WHO (2002), the term child sexual abuse is generally used to refer to any sexual activity between a child and closely related family member (incest), or between a child and an adult or older child or person outside the family. It involves either explicit force or coercion, or in cases where consent cannot be given due to his or her younger age, implied force, (Ibid).

As traditionally conceived by the West, child sexual abuse is abuse perpetrated by adults through physical or psychological coercion, or lack of consent, (Ibid).

Child sexual abuse must be differentiated from sexual play, and it is important to consider developmental factors in assessing whether sexual behaviors between two children are normative, (Cohen et al, 2006). In sexual play, the developmental level of the participants should be similar and without coercion. It follows then from these definitions that child sexual abuse takes physical, verbal and emotional forms, and it is affected by four factors namely lack of consent, exploitation, ambivalence, and force or secrecy, (ICWRT, 2008).

According to Finkelhor (1994), these legal and research definitions of child sexual abuse require two elements namely sexual activities involving the child and the abusive condition.

2.4.2: Sexual Activities

They are generally categorized as contact and non-contact sexual abuse.

- ***Contact Sexual Abuse***

Most often, sexual abuse involves physical contact, (Cohen et al, 2006). Contact sexual abuse is of two types namely penetration (penile, digital and object penetration of the mouth, anus and vagina), and non-penetration (fondling sexual organs of the child's body, sexual kissing or the child touching sexual parts of a partner's body, (Finkelhor, 1994).

- ***Non-Contact Sexual Abuse***

It includes exhibitionism (showing sexual organs to the child), voyeurism (making a child peep or watch others having sex), and the involvement of children in the making of pornography. Sometimes, verbal propositions of harassment, such as making sexual comments about the child are also included (ICWRT, 2008; Finkelhor, 1994).

2.4.3 Incest

The terms child sexual abuse and incest are often used interchangeably. Incest, according to Sanderson (1990), refers to a sexual act imposed on a child or an adolescent by any person within the family constellation, who abuses their position of power and trust in the family. Therefore, whereas incest denotes a full range of intrafamilial child sexual abuse, the term

child sexual abuse as it is, denotes both intra and extra familial abuse, and it includes all sexual behaviors ranging from pornography, voyeurism, exhibitionism, fondling, masturbation and penetration of the penis through the vagina, (Ibid). To this effect, it includes biological fathers, stepfathers, resident male friends of the family, uncles, brothers, grandfathers, cousins, as well as female relatives or family friends.

2.4.4 Risk Factors

A risk factor can be defined as a variable that is associated with an increased chance of an event-taking place. In the context of child sexual abuse, risk factors are conditions or circumstances associated with an increased likelihood of child sexual abuse taking place or happening. Risk factors increase the probability or chance of a child or adolescent to be sexually abused. These conditions or circumstances may be within the child himself or herself, such as disability, or may exist in the environment, such as having an alcoholic father. It is important to note that risk factors for child sexual abuse do not cause sexual abuse. Rather, they indicate that a person, that is, a child or an adolescent, has a higher chance of being sexually abused.

2.4.5: A Child

The term child is defined differently in different contexts. Article 1 of the United Nations Convention on the Rights of the Child (1989) defines a child as a human being below the ages of 18 years, unless under the law applicable to the child, majority is attained earlier. This implies that the convention clearly specifies the upper age limit to be 18 years, but recognizes that the majority may be obtained at an earlier age under the laws applicable to the child. Thus while the convention defines the child in this way, it allows for minimum ages to be set.

To this effect and according to Section 131A, Act Number 15 of the Penal Code of the Government of Zambia, a child is a person below the age of 16 years.

2.5: Operational Definitions

2.5.1 Child Sexual Abuse

In this study, the term child sexual abuse was operationally defined as the involvement of a person below the age of 16 years in any form of contact or non-contact sexual activity where the perpetrator used physical force, trickery, bribes, threats or pressure to intimidate or dominate the victim. This means that the sexual activity must have taken place before the victim completed the age of 16 years. The upper age limit was therefore 16 years.

2.5.2 Sexual Activities

These referred to all contact and non-contact sexual activities namely pornography, voyeurism, exhibitionism, fondling, masturbation, penetration (penile, object and digital, either through the mouth, vagina or anus), grabbing, touching or kissing, that the victims experienced with an adult or older person, to which they did not give consent.

2.5.3 A Child

Child was defined as any person below the age of 16 years who was sexually abused by an adult or older person.

2.5.4 An Adult or Older Person

An adult or older person was defined as any person older than the child, who sexually abused the child. This could have either been a family member, friend or stranger. The lower age limit for the age of an adult or older person was 17 years.

2.5.5 Punitive Parent

A biological parent/guardian who lived with the victim at the time he/she was sexually abused and used physical punishment to discipline the victim.

CHAPTER TWO

LITERATURE REVIEW

2.1: Introduction

This chapter outlines the literature surrounding child sexual abuse. It specifically discusses the theoretical framework and findings of previous research on the problem of child sexual abuse, that is, the risk factors, the nature of sexual abuse and some of the grooming tactics used by sexual abuse perpetrators, forms of sexual abuse, disclosure and reporting of sexual abuse and sexual abuse perpetrators. It also outlines some of the definitions of child sexual abuse and provides operational definitions of terminologies used in the study.

Literature on child sexual abuse in Zambia is inadequate (YWCA, 1999). The researcher, therefore, had to draw some of the literature from western countries, particularly the United States to gain a better understanding of the problem of child sexual abuse, especially on the risk factors. Despite this limitation, some literature has been drawn from the few studies that have conducted in Zambia.

2.2: Conceptual Framework

Child sexual abuse occurs when an adult, adolescent or older child, uses their power and authority over a child, to involve them in any sexual activity (Sanderson, 2007). Clinicians have noted many symptoms in children who have been sexually abused (Rosenberg and Fenley, 1991). The symptoms include fear, compulsivity, hyperactivity, phobias, withdrawal, depression, mood swings, suicidal ideation, fatigue, loss of appetite, somatic complaints, changes in eating and sleeping patterns, hostility, mistrust, sexual acting out, dissociative disorders, compulsive masturbation and school problems. However, there have been very few systematic evaluations of sexually abused children to assess the prevalence and risk factors of sexual abuse (Ibid).

Against such a backdrop, it becomes imperative to assess the risk factors, forms of sexual abuse and the grooming tactics used by sexual abusers in Zambia.

There are several circumstances that have been identified as putting most children at risk for sexual abuse. The primary markers for increased risk for child sexual abuses are having few

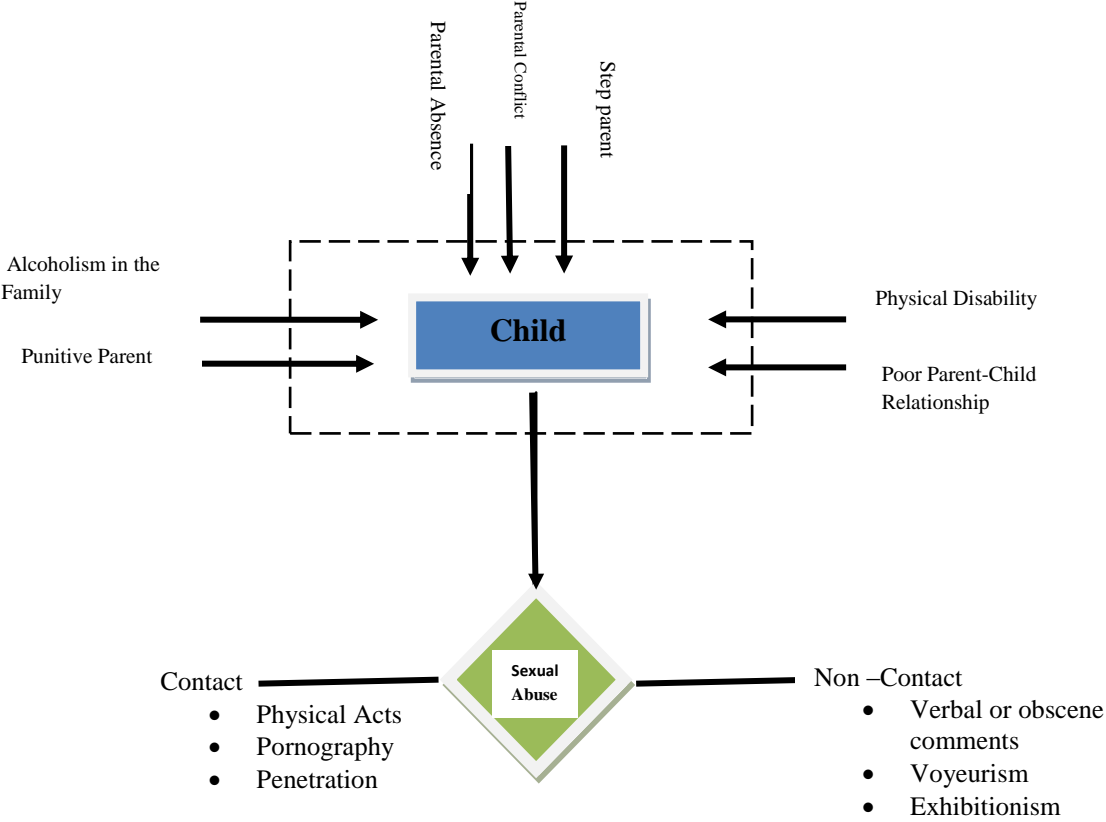
friends, (Finkelhor, 1986); absent or unavailable parents, (National Research Council, 1993; Rosenberg, 1991); presence of a stepparent, especially a father; and conflict with or between parents (Finkelhor, 1986). Others are physical or mental disability (Sobsey, 1992); separate living arrangements from biological parents (Gutman, 1991); alcohol and drug abuse in the family, a parent who was physically abused as a child and homes with other forms of abuse (Rosenberg, 1991).

Child sexual abuse occurs in all social classes, and the vast majority of abusers include someone the child knows, such as a parent or other relative, teacher, clergy, neighbors and friends (Prevent Child Abuse America, 2005). People who sexually abuse children engage or indulge into what is known as grooming behavior. Therefore, the use of deliberate tactics by abusers to select the child victims, to engage them into sexual activities and maintain the secrecy surrounding these acts is what is commonly referred to as the grooming process, (Sanderson, 2007). This process involves the following stages:

- ❖ Identification/targeting of the child
- ❖ The recruitment of the child through the development or exploitation of a relationship of trust in order to engage the child in the abuse
- ❖ The maintenance of a secretive, increasingly abusive relationship (Ibid).

Sexual activities that constitute sexual abuse may either be contact or non-contact (Sanderson, 2007). Contact sexual activities include physical acts (kissing or holding in a sexual manner; fondling; masturbation; penetration of the anus and/or vagina with the penis, finger or object and oral sex), and pornography (exposing a child to pornographic material). Non-contact abuse, which may include exhibitionism (abuser exposing their naked body, genitals or anus to the child, or masturbating or performing sexual activities on other adults in view of the child), voyeurism (watching or observing children for sexual pleasure and gratification) and verbal or obscene comments or remarks to the child either to trick, threaten or sexualize them), often occurs, (Botash, 2008).

Figure 1: A Logical Representation of Interrelationships between Child Sexual Abuse and Risk Factors



Source: Formulated by the researcher from the literature

The figure above incorporates sexual activities and shows how risk factors are an entry point for sexual abuse. It further shows that for child sexual abuse to take place, certain conditions should be present that put children and adolescents at risk for sexual abuse.

2.3: Empirical Research

2.3.1: Risk Factors

Child sexual abuse occurs in rural, urban and suburban areas, and among all ethnic, racial and socioeconomic groups. To this effect, quite a lot of studies have been conducted and literature documented on risk factors for sexual abuse.

It should be mentioned, however, that most of these studies do not yield consistent results with each other, (Madu and Peltzer, 2000). In other words, findings across cultures are not the same or uniform with each other. For example, Finkelhor (1979) in North America found 8 risk factors namely parental occupation, income and education; religion; ethnicity; presence or absence of the father at home; presence of a stepparent; degree of violence; and the quality of parental marital home; as putting children at risk for sexual abuse. However, Bergner et al (1994) confirmed only one factor, that is, family income. In South Africa, for example, Collings (1991), found punitive or emotionally rejecting parents and separation from the natural father as significant factors.

It would therefore be justifiable to argue that risk factors may differ from situation to situation and from one society to another. What one would perceive as a risk factor in a particular society and situation may not be the case in another. This means that risk factors for child sexual abuse depend on the type of society and the environment in which the child lives.

Furthermore, it is difficult to distinguish between intrafamilial and extra familial child sexual abuse victimization because most of the studies combine the two types. However, Benedict and Zautra (1993) conducted a study that identified family environmental characteristics that are risk factors among 152 college students and their siblings. Seventy-six students (50%) who reported a history of childhood sexual abuse and their siblings were compared to 76 age-and gender-matched controls and their siblings. All the subjects completed the Family Environment Scale (FES) along with questions regarding family history and demographic characteristics. Utilizing multivariate logistic-regression techniques, parental absence was found to be the most powerful risk factor for childhood

sexual abuse. The level of family conflict also contributed significantly to the prediction of sexual abuse.

Despite these variations in child sexual abuse research, several studies have been done and their findings have been used to compare results in different societies.

In a ten-year research update review on child sexual abuse, Putnam (2003) highlights factors, namely gender, age, disabilities, socioeconomic status, race and ethnicity and family constellation, that make children and adolescents become vulnerable to sexual abuse. These factors are reported on the basis of studies conducted in the United States.

2.3.1.1 *Gender*

In the United States of America, girls appear to be somewhat at greater risk as opposed to boys (Deblinger et al, 1997). Girls are at about three times higher risk than boys are, although approximately, 22 to 29% of all child sexual abuse victims are male.

2.3.1.2 *Age*

Risk for child sexual abuse rises with age. Approximately, 10% of the victims are between 0 and 3 years old. Between ages 4 and 7 years, the percentage almost triples (28.4%). Ages 8 to 11 years account for a quarter (25.5%) of cases, with children 12 years and older accounting for the remaining third (35.9%) of all cases, [United States Department of Health and Human Services (USDHHS), 1998]. It is believed that as a risk factor, age operates differently for boys and girls, with high risk starting earlier and lasting longer for girls.

2.3.1.3 *Disabilities*

Physical disabilities such as blindness, deafness, and mental retardation, as well as communication disorders are associated with increased risk. Children who cannot report because they cannot speak or use manual language are at very high risk for sexual abuse. Three factors namely institutional care, dependency and communication difficulties seem to contribute to this, (Westcoff and Jones, 1999).

2.3.1.4 Socioeconomic Status

Although socioeconomic status is a significant risk factor for physical abuse and neglect, it has much less impact on sexual abuse. Community survey studies find almost no socioeconomic effects. However, most of the child sexual abuse cases reported come from lower socioeconomic classes, (Finkelhor, 1994).

2.3.1.5 Race and Ethnicity

According to Putnam, race and ethnicity do not seem to be risk factors for child sexual abuse, but they may influence symptom expression. For example, research suggests that Latina girls have worse emotional and behavioral problems than African-American or white girls (Shaw et al, 2001).

2.3.1.6 Family Constellation

Family constellation, particularly the absence of one or both parents, is a significant risk factor, (Finkelhor, 1993). The presence of a stepfather in the home doubles the risk for girls, not only for being abused by the stepfather, but also for being abused by other men prior to the arrival of the stepfather in the home. Parental impairments; extended maternal absence; serious marital conflicts; parental substance abuse; social isolation; and punitive parenting have all been associated with increased risk in some studies. Clinically, the presence of abusive siblings is thought to increase the child's risk, although this has not been established.

Based on the above risk factors and others, research has been conducted to examine their association with child sexual abuse. However, a distinction is made between the victim's risk factors and the victim's family or environmental characteristics. This is because, while some risk factors have to do specifically with the victim, others may exist in the victim's environment, that is, within the family and in the larger community.

2.3.2 Victim Risk Factors

Several studies have been conducted in the United States to investigate the relationship between child sexual abuse and the following variables: child demographics (age and

gender); child community context; intelligence and academic performance; child behavior; and prior victimization.

2.3.2.1 Age

Four studies were conducted that investigated the relationship between a child's age and sexual abuse. Finkelhor (1984), using a sample of parents of six to sixteen year olds, found that the majority of sexually abused children (81%) were under the age of twelve; and 19% between ages 13 and 16 years. However, the effect size could not be calculated.

Boney-McCoy and Finkelhor (1995), reported on a nationally representative sample of 2000 (boys, n = 1042; girls, n = 958) 10-16 year old children in the United States, including 132 victimized children, that the teenagers, that is, children older than 12 years, were at increased risk for child sexual abuse than were children aged 10 -12years (odds ratio=2.8).

Consistent with this finding, Finkelhor et al (1997), in their sample of 1000 families with a child under 18 years of age, found that teenage children (ages 13-17 years), were at increased risk for victimization (odds ratio = 2.7), than were children under the age of 13 years.

Finally, Sedlack (1997) in the United States investigated the association between a child's age and sexual abuse in the second National Incidence Survey (NIS-2). However, in this study, the relationship between a child's age and child sexual abuse interacts with race and family structure. Older children, (that is, 15 -17 year olds), compared to younger children (younger than 15 years), were at greater risk in father-only families, than they were in mother-only families, or families with both parents. At older ages, White, Black and Hispanic children were at higher risk for sexual abuse than were other races.

Taken together, these studies suggest that older children are probably at greater risk for sexual abuse, and it may be that the age of the child must be considered within the context of other variables, (Black et al, 2001).

In a review article of child sexual abuse in Sub-Saharan Africa, Lalor et al (2004) found that between 3.2 and 7.1% of all the respondents reported experiencing unwanted and forced

sexual intercourse before the age of 18 years. Jewkes et al (2002) surveyed 11,735 South African women between the ages of 15 and 49 years about their history of rape during childhood. Overall, 1.6% reported unwanted sexual intercourse before the age of 15 years. 85% of child rape occurred between the age of 10 and 14 years, and 15% between the ages of 5 and 19 years. In a study in Zimbabwe, Birdthistle (2008) reported that among unmarried sexually active adolescents, 52.2% had experienced forced intercourse at least one time. 37.4% of first sexual intercourse acts were forced. In a study of 487 university students in Tanzania, 11.2% of women and 8.2% of men reported unwanted sexual intercourse (McCran et al, 2006). The average age at the time of abuse was 13.6 years. Collings and Madu (2002) surveyed a sample of 640 female university students in South Africa and found that 34.8% had experienced contact sexual abuse before the age of 18 years.

2.3.2.2 Race

Two studies conducted in the United States investigated the relationship between child sexual abuse and a child's race in nationally representative samples. McCoy and Finkelhor (1995) found that Black, compared to other children (odds ratio = 2.3) are at increased risk for sexual abuse, and White, compared to other children were at decreased risk (odds ratio = 0.6). As noted above, Sedlack (1997) that the relationship between a child's race and sexual abuse interact with the child's age.

2.3.2.3 Gender

Ferguson et al (1996) reported that there is a relationship between gender and child sexual abuse. Two studies analyzed data from nationally representative samples and found that female, compared to male children, were at three times greater risk for child sexual abuse (Boney-McCoy and Finkelhor, 1995); odds ratio = 3.0). Sedlack (1997) also found that girls were at greater risk than were boys (although the effect size could not be calculated). In contrast, Finkelhor et al (1997) did not find a relationship between a child's gender and sexual abuse ($r = -0.05$). Given the differences in these findings (self-reports; Child Protective Service and Sentinels; and parent report respectively), ages 10 – 16 years; 6 -

18years; and 0 -18 years respectively, and sample sizes 2000, 6033 and 1000 respectively, interpreting these results is difficult.

In a pilot study that was conducted at the university Teaching Hospital in 2003, 99% of the sexually abused children reporting to the gynecology ward were females, which also places them at a higher risk for HIV infection (Chomba et al, 2006).

2.3.2.4 Child's Community Context

Boney-McCoy and Finkelhor (1995) in the United States, found that children from dangerous communities, that is, communities with violence, were at increased risk for sexual abuse (odds ratio = 1.5), compared to those from other communities.

2.3.2.5 Intelligence and Academic Achievement

Manion et al (1996), in the United States investigated the association between a child's intelligence and child sexual abuse by contrasting victimized (n =56) and non-victimized (n =75) children. Compared to the non-victimized children, sexually abused children had lower scores on verbal intelligence ($r = -0.33$). Paradise et al (1994), compared sexually victimized (n=154) and non-victimized (n =53) on academic performance. Sexually victimized, compared to non-victimized children, had significantly lower achievement in reading, mathematics, science and social studies. Further, sexually abused children were more likely to be enrolled in special education (although the effect size could not be computed).

2.3.2.6 Child's Behavior

Paradise et al (1994) found that compared to mothers of non-abused girls, mothers of the sexually abused girls reported more child behavior problems on the Child Behavior Checklist (CBCL) developed by Achenbach and Edelbrock (1983; $r = 0.26 - 0.29$). Sexually abused and comparison boys under 6 years of age did not differ ($r = 0.03$). According to teacher ratings from school records, sexually victimized, compared to non-victimized children were significantly more likely to receive unsatisfactory classroom behavior problems.

2.3.2.7 Prior Child Victimization Problems

Boney- McCoy and Finkelhor (1995) found that history of sexual victimization was very strongly associated with child sexual abuse (odds ratio = 11.7). Prior child physical abuse by a family member ($r = 0.25$) and prior physical sexual victimization of a family member ($r = 0.21$) were associated with increased sexual victimization. Prior physical assault by a non-family member ($r = 0.05$), prior attempted kidnapping ($r = 0.07$) and prior genital violence ($r = 0.07$) were weakly associated with child sexual abuse. Finkelhor et al (1997) found that children who had been neglected were at increased risk for sexual abuse (odds ratio = 2.1).

2.3.3 Victim's Family Characteristics

In a review of literature, Finkelhor and Baron (1986) identified a number of family environmental characteristics that appear to be associated with child sexual abuse: Social isolation from siblings and friends; parental unavailability, most notably paternal absence, maternal employment and having an emotionally and distressed parent; presence of a stepfather during childhood; reporting a poor relationship with one's parents and a poor marital relationship between parents; and growing up in a family with an authoritarian family and conservative values. Based on these risk factors and others, research has been conducted to examine their association with child sexual abuse.

2.3.3.1 Quality of Parent-Child Relationship

From a nationally representative sample of 2000 young people between the ages 10 and 16 years, Finkelhor and McCoy (1995) found that a poor relationship with the parents increased the risk for child sexual abuse (Odds ratio=2.6). Poor parent-child relationship as a risk factor for child sexual abuse is also reported by Finkelhor (1986).

2.3.3.2 Parents' Marital Relationship

To examine the relationship between child sexual abuse and a poor marital relationship, Paveza (1988) used a clinical comparison design. The sample included mothers of 5 to 8 year-old children who were sexually abused by their fathers or stepfathers ($n=34$) and mothers of children with no history of sexual abuse ($n=68$). The results showed that families in which marital relationship is unsatisfactory are at greater risk for intrafamilial child sexual abuse (odds ratio=7.19); and mothers victimized by husband-to-wife physical

aggression were at six times greater risk (odds ratio=6.51) than were comparison mothers. Poor marital relationship as a risk factor for child sexual abuse was also found by Ferguson et al (1996).

2.3.3.3 Mother-Daughter Child Closeness

Using a sample comprising mothers of 5-18 year-old children who were sexually abused by their biological fathers or step fathers (n=34), and mothers of children with no history of child sexual abuse (n=68), Paveza (1988) found that families in which the mother and child have a distant relationship are at greater risk for intrafamilial child sexual abuse (odds ratio=11.61).

2.3.3.4 Parental Discipline or Parent's Use of Physical Punishment

Previous research by Boney- McCoy and Finkelhor (1995) had suggested that there is an association between child sexual abuse and the use of physical discipline in the home. However, in a nationally representative survey of 1000 families with one or more children under the age of 18 living in the household, Finkelhor (1997), found that parents' use of corporal punishment did not have a relationship with child sexual abuse (odds ratio = 0.9).

2.3.3.5 Family Structure

Boney-McCoy and Finkelhor (1995) found that children living with only one biological parent compared to two, were at twice the risk for sexual abuse ($r = 19$; odds ratio = 2.2). Similarly, Finkelhor et al (1997) found that families without two biological parents were at three times the risk for sexual abuse (odds ratio = 3.1), compared to families with two biological parents. In a National Incidence Survey-2, Sedlack (1994) found that the relationship between family structure and child sexual abuse depended on the age of the child. Older children from father-only families, compared to other children were at increased risk for child sexual abuse. Finally, using a clinical comparison design, Paveza (1988) found that the mothers of the sexually abused children were more likely to be in a second marriage than were comparison mothers ($r = 0.31$).

2.3.3.6 Family Income

In two nationally representative samples, children from families with lower income, compared to other families, were at increased risk for sexual abuse (Finkelhor et al, 1997; Sedlack, 1997). Likewise, using clinical comparison designs, Manion et al (1996) and Paveza (1988) both found that families of sexually abused children had significantly lower yearly income than comparison families ($r = -0.44$; odds ratio = 3.37, respectively).

2.3.3.7 Parents' Education

In a nationally representative sample, Finkelhor et al (1997) found that the parents' level of education was not related to child sexual abuse (high school or less - odds ratio = 1.1; some college – odds ratio = 1.2; college graduate – odds ratio = 0.7). However, Lehrer et al (2007) found that low parental education is a risk factor for child sexual abuse.

2.3.3.8 Parents' Occupational Status

Paveza (1988) found that the parents of the intrafamilially (within the family) sexually abused children were more likely to work in blue-collar jobs than were other parents ($r = 0.24$). Similarly, Manion et al (1996) found that parents of sexually victimized children had significantly less prestigious occupations (mother, $r = -0.37$; father, $r = -0.36$).

2.3.3.9 Alcoholism in the Family

Prior research by Ferguson et al (1996) had found alcohol intake by a parent or guardian is a risk factor for child sexual abuse. The explanation is that while in a drunken state, such parents or guardians may themselves sexually abuse children who are under their care. However, Cohen et al (2006) argue that a small percentage of offenders sexually abuse children and adolescents when the offender is under the influence of alcohol.

Despite such studies being conducted, Finkelhor and Baron (1986) noted that the validity of these associations is weakened, however, by several methodological limitations:

- Many studies relied on subjective clinical impressions rather than standardized measures with strong psychometric properties, (Molnar and Cameron, 1975).

- The few studies employing standardized measures assessed only one or two family domains, limiting the ability to develop a comprehensive appreciation of the family environment.
- Some investigators did not obtain independent reports concerning the family environment at the time of the sexual abuse. This is an important methodological limitation because perceptions of the family environment may be highly relative to the sexual experience.
- Most studies relied on univariate analysis of group comparisons. A multivariate analysis provides information regarding the extent to which an observed risk factor is a unique predictor or independent of the other risk factors (Kelsey, Thompson and Evans, 1986). Moreover, most investigators have not employed logistic regression models. These statistical models are the most appropriate for use with dichotomous dependent variables, such as sexually abused versus non-abused status (Aldrich and Nelson, 1988).

The present study attempts present the findings on the risk factors for child sexual abuse by examining the extent to which each variable is a risk factor. However, logistic regression will not be utilised because no comparisons were made between sexually abused and non-sexually abused subjects. Instead, the chi-square test will be done to determine the level of significance between the observed and expected responses on the risk factors.

A study was conducted by Madu and Peltzer (2000) in South Africa to investigate risk factors for child sexual abuse among secondary school students in the Northern Province. Using self-administered questionnaires, four factors proved to be significant for sexual abuse. These were ethnicity; mother's employment; stepparent present during childhood; and violence at home. The study further showed that as the number of risk factors increased, the probability of sexual abuse also increased. Participants who had one risk factor had a 58.4% probability of sexual abuse; those with two risk factors had a 69.8% probability; those with three risk factors had 89.8%; and those with all the four risk factors had a 100% probability of child sexual abuse.

2.3.4 Research on Child Sexual Abuse in Zambia

In Zambia, children from all social strata, especially girls, are vulnerable to sexual abuse. However, there are certain values that have contributed to the rise in sexual abuse and oppression by Zambian children namely economic deprivation, urbanization and the lack of safety nets for children (Human Rights Watch, 2002). Danger factors for child sexual abuse include men and women targeting younger children that are assumed to be HIV negative for sex, or based on the myth that sex with a virgin will cure AIDS (Ibid). Girls in particular are at risk of sexual abuse in various settings:

- Selling vegetables or other goods in markets or by the roadside. These are subject to abuse by customers.
- Simply playing on the streets in their communities, or at school. Even at church, they can face risks (Human Rights Watch, 2002).

A study was conducted by CHIN and UNICEF (2001), whose main objective was to establish the levels of child abuse in the country. It was carried out in 20 districts of Zambia. The sample comprised 1,954 children (973 girls; 981 boys) and 208 adults. The children were below 18 years of age. Data collection was done using questionnaires and interview guides for the Focus Group Discussions.

Specifically on child sexual abuse, the results showed that of the total sample of children, 131 (6.7%) reported that they had been sexually abused. Furthermore, the study identified 5 variables as risk factors for child sexual abuse in Zambia, namely gender; traditional ceremonies; family breakdown; children's activities; and school attendance. These risk factors are discussed below.

2.3.4.1 Gender

From the quantitative (questionnaire) data and the Focus Group Discussions, it was observed female children are more at risk for sexual abuse, with 72% of the female children experiencing it, compared with 28% of males.

2.3.4.2 Traditional Ceremonies

Initiation ceremonies were seen as facilitating the occurrence of child sexual abuse in so far as they prompt those below the age of 16 years, who are technically children, to turn their minds to early marriages. Of the girls who acknowledged that they had been sexually abused, 82% said they had undergone initiation and had been encouraged to marry soon afterwards. Initiation ceremonies can therefore be seen as promoting early marriages of people that are children. In this sense, they contribute to child sexual abuse. Furthermore, in each of the 20 districts where the study was conducted, 10% or more of the children interviewed stated that they had been sexually abused.

2.3.4.3 Family Breakdown

Family breakdown is seen as a socioeconomic factor that might facilitate the occurrence of child sexual abuse. Factors that occasion family breakdown include divorce, separation, location of work and major or prolonged sicknesses. Almost three quarters of the children who experienced sexual abuse did not respond to the question about family breakdown, either because their parents were living together or because they were reluctant to do so. Of the 36 (27.5%) who did respond, nineteen were from families broken by divorce, eight from families broken by separation and 9 from families that broke down for unspecified reasons. In other words, every sexually abused child who responded to this item in the questionnaire came from a broken family. However, with so few responses, the evidence may not be very strong, but the fact that the limited available evidence showed complete agreement between sexual abuse and family breakdown suggests that there is a connection between child sexual abuse and family breakdown.

2.3.4.4 Children's Activities

Almost one-third (43 out of 131 [33%]) who reported child sexual abuse stated that they engaged in selling activities. The next largest proportion (which was 34 out of 131, 26%), consisted of children who played in town areas. Putting these findings together, 77 out of 131 children, which is 60%, who reported being sexually abused lived in areas where a significant number of people pass or assemble in towns, on streets, at bus stops, around markets, and at selling points (which could be located along the roadside to attract those

passing by. However, this is not to say that children are only sexually abused in such places, they are also vulnerable to sexual abuse in and around their homes. In this study, out of the 131 children who reported being sexually abused, 36 (27.5%), which is more than one-quarter of the children, reported being sexually abused in the vicinity of their homes, if not in the home itself.

2.3.4.5 School Attendance

Of the 131 children who were sexually abused, 43 (33%) were attending school, while 88 (67%) were not attending. This finding suggests that children who do not have an opportunity to attend school are more vulnerable than others to sexual abuse. Since literacy and school attendance seem to be synonymous, there is some justification to argue that child sexual abuse may occur more frequently among children who do not possess literacy skills. This, however, does not mean that it is only children who do not attend school that are sexually abused. A child who is attending school may also be at risk for sexual abuse, depending on the child's age and the environment.

2.3.5 Grooming

Muller (2006) defines the term grooming as the process by which child molesters build trust with the child in order to transition from a non-sexual relationship to a sexual one, in a manner that seems natural and non-threatening. Before sexual abuse takes place, the offender goes through great lengths to cement the sexual relationship with the child to ensure compliance. This relationship is developed with the target for months before beginning the abuse (Courtoise, 1998). The interaction aims to relax the child's defenses, gain a child's compliance and prevent them from telling (Muller, 2006; ICWRT, 2008). It is also done to gain the child's trust as well as the trust of other adults in the child's life. Because research has shown that children are less likely to report the crime if it involves someone the child trusts, knows and cares about, a trusting relationship with the family means the child's parents will be less likely to believe any potential accusations, or suspect the abuse (ICWRT, 2008).

According to Stang (2008), the grooming process involves 5 stages. The time spent on each stage depends on the child (CHIN and UNICEF, 2000). While some grooming relationships may last for a few months, others may last an average of 4 years (Courtoise, 1998). In addition, some stages can be skipped and/or returned to throughout the grooming process. Stang (2008) describes the 5 stages as follows:

2.3.5.1 Identifying a possible victim

Abusers differ in their preferences regarding gender, age and appearance, but almost every abuser looks for a child who is vulnerable in some way. According to Dam (2000), a vulnerable child, and thus a child more likely to be a target of abuse would have one of the following characteristics:

- a) needy, and thus vulnerable to positive attention;
- b) quiet, and thus less likely to tell;
- c) craves attention, and thus vulnerable to attention;
- d) younger, less likely to understand or tell;
- e) picked on by other children, and thus needing a friend;
- f) low self esteem, and thus vulnerable to the positive reinforcement of the molester; trusting, and thus less likely to understand the danger;
- g) compliant, and thus vulnerable to an adult telling them it is okay;
- h) eager to please, vulnerable to engaging in activity if they are told it is pleasing to the adult;
- i) single mother, thus the child generally needs attention and the mother is grateful for the help; and
- j) Unsupervised, thus vulnerable to the attention of the molester.

2.3.5.2 Collecting Information about the intended Victim

This is done through casual conversations with the victim and/or the victim's parents.

2.3.5.3 Filling a Need

Once the abuser knows a little about the victim, he or she steps into that child's life to fill a need. Thus, a poor child might receive expensive gifts, a lonely child might receive extra time and attention, and a child who feels unloved might receive unconditional affection.

2.3.5.4 Lowering Inhibitions

The abuser begins to lower the child's inhibitions about sexual matters. He/she may make sexual comments, show the child pornographic movies or pictures, or manufacture situations where the abuser and the child will be undressed. At this stage, children sometimes become a little uncomfortable around the abuser.

2.3.5.5 Initiating the Abuse

At this stage, the abuser begins overt sexual abuse of the child. When the abuse occurs, many children show marked changes in their personalities and behaviors. Often, they will look for an excuse to avoid the abuser.

Based on a survey of tactics used by abusers to groom their victims, Pryor (1996) describes several methods or tactics by which offenders approach and initiate sex with their victims. These methods include verbal and/or physical intimidation, seduction or the use of enticements such as candy, money or other gifts. These tactics used by offenders depend somewhat on the potential victim's response to the tactic. If an offender encounters little or no resistance from the potential victim, he or she will continue to use the same tactic repeatedly. If, however, some resistance is encountered, the offender may either change the tactic and/or become more forceful in his or her endeavor.

One common tactic noted by Pryor is the seduction and testing of a child. This tactic is often used when there is an existing relationship with the child and the child is accustomed to the affectionate expression of the offender. The offender gradually extends the affectionate touching to include sexual behavior, all the while testing the child's response. If no overt resistance is observed, the sexual abuse continues.

A less frequent tactic that is mentioned by Pryor entails the offender catching the victim by surprise. In this instance, the offender may plan a situation to distract the victim or seize the

opportunity to abuse when it arises. The latter is more common and is usually a result of the offender's frustration from waiting for the right time to initiate the contact.

A third and more intimidating tactic used by offenders entails gathering victim compliance through the use of either physical or verbal force. In this situation, the offender either commands the victim to perform sexual acts and/or physically forces the victim to engage in sexual acts. This tactic is common in more serious, repeat offenders. Pryor found that emotional manipulation and verbal coercion were the most common tactics used by offenders to groom their victims. This occurs in various ways, such as doing favors for the victim in exchange for sex; and emotionally blackmailing the victim into compliance. Even though it may appear that there is room for negotiation on the part of the victim, the outcome always favors the offender. Offenders who have ongoing contact with their victims often utilize this tactic, that is, incest offenders.

Another tactic used by offenders in order to groom their victims entails disguising sexual advances in the context of playing a game. For example, the offender will begin by tickling the victim, and gradually progress to fondling. While this approach may appear to be spontaneous, it has been well planned by the offender, yet orchestrated in a rather secret manner.

The most methodical and deliberate tactic of engaging a victim into sex involves a process of initially introducing the victim to the idea of sex, and then gradually engaging them in sexual activity. Pryor describes this tactic as "turning the victim out". For example, the offender will begin by displaying himself in the nude or introducing the victim to pornography. Then there is a period for rationalizing that sex is "okay". This may be followed by fondling the victim or having the victim fondle the offender; all the while rationalizing that sex is "okay" and possibly verbally praising the victim for his or her efforts. This exchange slowly builds up to more serious sexual acts and possibly to the point where the victim is being rewarded with gifts for his or her participation. Over time, the victim becomes groomed to the point that engaging in sex with the offender is more or less automatic. While most grooming tactics are pre-meditated, this tactic is more methodically planned and the offender is willing to wait months or possibly years to accomplish this task.

In a joint study that was conducted by CHIN and UNICEF (2001) to assess the levels of child abuse in Zambia, it was found that children receive various offers in attempts to lure them into sexual activity. The most common allurements are the promise of money for the service rendered. Although there may be other material rewards such as gifts or clothing, or non-material rewards such as good grades in school, most of the children who had been sexually abused reported that they had been given money for the sexual abuse.

According to Human Rights Watch (2002), the phenomenon of “Sugar Daddies”, that is, older men who entrap young girls by offering gifts, treats, food, clothes, or money in exchange for sex- is reportedly widespread and often puts children, especially girls, at serious risk for HIV infection. The HIV epidemic seems to be pushing sexual abusers to seek increasingly young girls on the assumption that, other things equal, younger girls are less likely to be HIV infected. This predation forces girls to become sexually active at very young ages. In cases of rape or sexual abuse by acquaintances, as with abuse within the family, sometimes the girl’s family seeks monetary compensation from the perpetrator rather than penalties.

What can be noted, therefore, is that when offenders set out to groom a victim, they will usually use tactics that have previously proved successful in gaining the victim’s compliance. Sometimes, they may even initiate new tactics. However, given that offenders attend to their victim’s response, they are open to changing their tactic if an approach proves unsuccessful. Furthermore, the relationship of the offender to the victim has a bearing on the kind of tactic that is employed to win the victim’s compliance into a sexual activity.

Most children are abused by someone they know and trust, (Courtoise 1988; Cohen et al, 2006). Offenders are often family members such as cousins, uncles, biological parents, stepparents, or individuals who are unrelated but well known to the child such as a neighbor, coach or babysitter (Cohen et al, 2006). In Zambia, what is more worrying is that most children who are sexually abused are done so by people they depend on physically, mentally and religiously for their growth. With the impact of HIV/AIDS, many children have found themselves in the custody of their brothers, sisters, uncles and aunts. The abusers may also include teachers, (Liche, 2009). Anderson et al (1993) found acquaintances to be the abusers

in most cases (46.3%); family members were found to be abusers in 38.8% of the cases; and strangers accounted for 15% of all abuse experiences.

It should be noted that there is no clear-cut description or profile of a sex offender, and there is no way to recognize a potential abuser (Ibid). Therefore, it is often hard to believe a trusted individual would be capable of sexually abusing children. Some offenders have been sexually abused themselves as children; others have suffered other forms of abuse and neglect in childhood; some may be unable to function sexually with adult partners, and may have many different encounters with children. Others are unable to maintain sexual relationships with adults, but may turn to children for gratification during times of stress, (Ibid).

Those offenders who take time to plan the sexual abuse in what is termed grooming or pre-meditated behavior intended to manipulate the potential victim into complying with the sexual abuse (Pryor 1996; American Psychiatric Association, 2000).

2.3.6 Forms of Child Sexual Abuse

Studies have been conducted to examine the forms of child sexual abuse in different contexts. Chen et al (2004) conducted a study to examine child sexual abuse experiences and associations with demographic factors in China. The sample comprised 2,300 students in the target classes in grades 11 and 12. Using self-report questionnaires, the results showed that sexual penetration was rarely reported (1%), while 7% reported at least one type of contact abuse. This is in contrast with the findings reported in Zambia by Mukuka (2007), who found that 10% of the girls who have experienced sexual abuse are violated through vaginal penetration.

A study conducted by Chiroro et al (2006) aimed to examine the nature and prevalence of self-reported childhood sexual abuse among high school girls and college students from 5 provinces in Zimbabwe. A total sample of 1,216 students was recruited for participation in the study. Overall, the results showed that 437 (36%) of the participants had experienced contact and non-contact forms of sexual abuse.

2.3.7 Child Sexual Abusers

According to WHO (2002), most children that are sexually abused are done so by a family member or adult close to them, rather than a stranger. Few perpetrators are strangers. In fact, parental figures account for one-third (10%) to half of girls' abuse, and acquaintances account for 40%. Findings from the study that was conducted in Zambia by Human Rights Watch (2002) show that an alarming and apparently increasing number of child sexual abuse among girls comes members of their own families. Those knowledgeable of the sexual abuse of girls, and the girls themselves repeatedly described to Human Rights Watch abuses by uncles, cousins, fathers and stepfathers. Similarly, YWCA (1999) found that in Zambia, some of the cases of sexual abuse are incestuous by nature as they involve sexual intercourse between biological and/or closely related people. They also found that perpetrators may be the father, uncle, brother or grandfather to the victim.

2.3.8 Child Sexual Abuse Disclosure and Reporting

Despite child sexual abuse being a crime, it is extensively undisclosed and widely underreported. There are several reasons for this. First, many children are afraid or ashamed to reveal victimization, have repressed memories of the abuse, refuse to participate in sexual abuse studies and deny that what happened was not real abuse. Secondly, perpetrators may also use direct threats of physical harm to children or the family members. Furthermore, children are led to believe that the abuse is their own fault, and that they will be blamed, rejected or disbelieved if they tell (National Research Council, 1993; Cohen et al, 2006). There is also a definite trend for adults to fail to recognize that sexual abuse has occurred. In Zambia, the reporting of child sexual abuse cases is a relatively recent phenomenon. Few cases are ever reported to the authorities and of the ones that are, many are apparently reported too late for action to be taken (HRW, 2002). This usually happens in cases where the abuser is a relative (incest cases). According to YWCA (1999), incest is the most hidden social problem of our time. It is rarely reported and absent from most public discussions on reproductive health and social wellbeing. It is a taboo, and therefore, considered to be an unthinkable act. Child victims are widely silenced and others do not even attempt to disclose at all. Child victims, particularly orphans that are being cared for by their relatives, are

acutely aware of their dependency, and the fear of loss of support and rejection if they reveal, are some of the reasons they do not disclose (HRW, 2002). Other children, particularly girls who try to tell another adult family member about the abuse they are suffering are often told not to bring shame upon the family (Ibid). In some cases, girls are threatened with physical abuse if they tell anyone. Shame and stigma upon themselves that some girls associate with sexual violence is also a serious constraint to reporting. In addition, shame associated with rape and incest also discourages the families from revealing what is happening. Far too often, the girl herself is blamed for instigating the abuse.

Commenting on the reporting of sexual abuse cases by children, Mary Silavwe Mulenga- Executive Director of YWCA in Human Rights Watch (2002:26) notes that:

Society blames you and the legal system is not there to protect you. If a girl is defiled by a relative, they want to hush it up. Culture teaches us to keep quiet about all these things. There is no support to come out.

Priscilla Chileshe- Research Associate for Women and Law in Southern Africa in Human Rights Watch (2002) also notes that:

Sexual abuse in the family is the most difficult to actually bring out. The family sits on it. The abusers are often the economic providers. They use their power to get everyone to shut up so it is difficult it penetrate. Even the police are frustrated.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The chapter discusses and provides detailed information on how the research was conducted. It commences by discussing the research design. It further mentions the ethical issues taken into consideration. Thereafter, the research population is outlined and sample size discussed. In addition, it discusses the research procedure, data collection tools used to collect primary data and data analysis. Finally, the limitations of the study are discussed.

3.2 Research Design

In order to collect primary data, both the quantitative and qualitative techniques, that is, questionnaires and a focus group discussion were used respectively. The focus group discussion was used in order to gather information that could not sufficiently be elicited from the questionnaires, that is, the grooming tactics that abusers in the Zambian context use.

3.3. Ethical Considerations

Since the questionnaire and focus group discussion might have aroused some emotions, especially among the sexually abused pupils, the participants were told to feel free to contact the researcher (either through mail or phone) in case of any questions. Other ethical issues that were ensured were informed consent and confidentiality. The participants were also informed that their participation in the study was solely voluntary; that their responses would be treated with utmost confidentiality, and would not be associated with them in any way after the research. To this effect, each participant was given a consent form, which they read and signed before being given the questionnaire to complete.

3.4: Pilot Study

Before adopting the questionnaire for use in the main study, a pilot study was conducted to determine its suitability in the Zambian context. It was administered to 10 secondary school students, with ages ranging from 16 to 18 years. Five of the participants were male and 5 were female. No changes were made to the questionnaire because the participants did not

face challenges when responding to the item in the questionnaire. It was thus adopted for use in the main study.

3.5: The Main Study

Data for the study was collected from January 2010 to March 2010. During this period, the participants were contacted from various secondary schools in Lusaka, Zambia. Details of the nature and purpose of the study were explained first of all to the school managers, and later to the pupils. Informed consent to participate in the study was obtained.

3.6: The Research Population

The study population consisted of all adult pupils who were 16 years and older and enrolled in secondary School. The choice of such a population was done with three assumptions. First, the chances of accessing participants that were 16 years and older were higher in secondary schools than Basic schools. Secondly, administering the questionnaire would be less time consuming since a lot of participants could be accessed in one setting. Thirdly, it was assumed that most pupils in secondary school are better able to read and write in English, therefore, they would have less difficulty responding to the items in the questionnaire, since the wording was done in English.

3.7: The Research Sample

An anonymous sample of 200 pupils was recruited in the study. These were drawn from 5 High Schools (2 single sex schools and 3 co-sex High Schools) in Lusaka District. To identify the schools at which the study could be done, a list of 15 High Schools in Lusaka District was sought from the District Education Office. These were then divided into single and co-sex schools. The result was that there were 6 single sex and 9 co-sex schools. To sample the schools, every third school on the two lists was picked. Before recruiting the pupils in the study, they were met by the researcher in their various schools days before it was conducted. This was for the purpose of introducing herself to them and also providing them with prior information about the study, that is, what it was all about, the researcher's expectations and also to emphasize to them that their participation was not compulsory but voluntary. With the help of the Guidance and Counseling teacher, and using class registers as a technique for selecting the participants, 40 pupils from each school were selected for

participation in the study, whether or not they were victims of child sexual abuse. Information on whether or not the participants were victims of child sexual abuse would be obtained from their responses given to the questions contained in the questionnaire.

However, despite the researcher making an effort to have an equal number of male and female participants in the study, more females than males were recruited. This was because in all the co-sex schools where the study was done, there were more female pupils in the class registers compared to the males. Of the total number of the participants that were recruited, 114 were females while 86 were males.

The choice of such a sample was on the basis of three main considerations. Firstly, it would facilitate the possibility of administering the questionnaire to a lot of participants at the same time, thus making data collection quicker and cheaper since the group of participants was localized. Secondly, since the wording of the questionnaire was in English, it was thought that the school would be a convenient place for conducting the study. This was done with the thought that most High school pupils know how to read and write, and would therefore have less difficulty responding to the items in the questionnaire. Thirdly, the chances of finding participants that were 16 years and older in the school were higher than elsewhere and the memories of their childhood experiences are not very old.

3.8: Research Instruments

To collect the data, both quantitative (questionnaire) and qualitative (Focus Group Discussion) methods were used respectively. The questionnaire was anonymous and self administered. It contained both closed and open-ended questions to which the participants responded based on the sexual experiences they had before the age of 16 years. The questionnaire was used to collect data on the demographic information, forms of sexual activities in which the victims were engaged, risk factors for sexual abuse and grooming tactics. Since sexual abuse is a sensitive area, it was felt that participants would be more comfortable to answer the questions in the questionnaire than talking about it due to problems such as victimization and shame. The focus group discussion, on the other hand, was only used to collect data on the grooming tactics but in much detail.

An abbreviated and modified form of the Child Maltreatment Interview Schedule, (Bierre, 1993); questions from Benedict and Zautra, (1993); the study by Chiroro et al (2006), Finkelhor's (1979) Risk Factor Checklist used by Bergner et al (1994); and Hopper (2009): were used to come up with the items that were included in the questionnaire and questions for the focus group discussion. Items adapted from Chiroro et al (2006) were used to construct questions on the forms of sexual abuse; items from Bierre (1993) and Benedict and Zautra (1993), were used to come up with questions on the demographic information; and whereas Hopper (2009) and Finkelhor's Checklist was used to construct questions on the risk factors. Literature by Hopper (2009) was used to come up with questions on the grooming tactics and behaviors used by abusers for sexual abuse. Adaption of the items was achieved by picking out the items from the various instruments that were relevant to the study and incorporating them in the final instruments that were used to collect the data.

It should be stated that none of the instruments from which the items had been adapted have been used in the *Zambian* context before. With the exception of the instrument used by Chiroro et al (2006) which was used in *Zimbabwe*, the rest have only been used in *Western Countries*. However, these instruments have been tested for validity and reliability. Chiroro et al's instrument, as assessed by computing Cronbach's Alpha Coefficient, was acceptable ($\alpha = .92$). In addition, with Benedict and Zautra's instrument, Cronbach's Alpha Internal Consistency reliability was found to be .82. According to Briere (1992), there are no studies known regarding the overall reliability or validity of the Child Maltreatment Interview Schedule- Short Form. This is partly due to the fact that all the items in this instrument simply ask about potential maltreatment experiences, and are not summed to form scales. In addition, the author argues that the instrument can be used by various researchers in different ways according to their interests. However, according to Briere and Runtz (1990), this instrument generally has good alpha reliability. They further argue that the successful use of the instrument in various studies suggests predictive and construct validity. Such limitations were what formed the basis for carrying out the pilot study.

3.9: Research Procedure

After the research sites were identified, the researcher took letters to the school authorities. These letters were for the purpose of introducing herself and also to seek for permission to conduct the research in the identified schools. Then on dates and times agreed, the researcher went to the schools and a group of male and female pupils identified from the class registers was organized by the researcher but with the help of the Guidance and Counseling teacher. Once this was done, the researcher, who had visited the school earlier, explained the purpose of the study. Emphasis was put on the fact that the pupils that were not willing to take part in the study were free to withdraw from the study, and those that were participating could pull out at any time if they did not wish to continue with their participation. They were also assured that their responses would be treated with utmost confidentiality and they would be anonymous. In order to help the participants have an in-depth understanding of what the study was all about, consent forms were distributed to them. After they read through and fully understood the purpose of the research, they were required to sign on the space provided on the form. Their signature was regarded as consent for their participation in the study. With this in their minds, questionnaires were distributed to the pupils, to which they responded. All the 40 participants from each school responded to questionnaire in the same room. This was the first phase.

The second phase of the study involved conducting Focus Group Discussions (FGDs). A total of 3 FGDs were conducted at 3 different schools. It should be mentioned that the questionnaire had a section at the end that was inviting all the participants that reported experiencing one or more sexual activities to take part in a FGD. This was the recruitment method that was used to select the participants for the discussion. On the dates and venues agreed, the FGDs were conducted. The main purpose of this discussion was to hear from the victims what their abusers did before they engaged them in the sexual activity.

Sampling for participants in the FGD was purposive in that only participants who had reported experiencing one or more of the sexual experiences outlined in the questionnaire or others were eligible for participation. On the day the FGDs were scheduled, the researcher met the group members. She introduced herself and the topic to the participants. She then

assured the participants of confidentiality and anonymity. Using a question guide, (see appendix B), the researcher asked open-ended questions to which the participants responded. The question guide contained 2 questions, one main one and a probing question. The main question generally asked the participants to describe the tricks that their sexual abusers used. The probing question was mainly used to help the participants elicit precise answers. Using note-taking as a technique for recording the information, the researcher wrote down the responses given by the individual participants.

The main role of the researcher during the FGD was merely that of a facilitator that is, providing structure and direction. The discussions were conducted in English, although the participants were encouraged to use vernacular languages if they felt that they could express themselves better that way.

3.10: Data Analysis

The results were analyzed using the Statistical Package for the Social Sciences (SPSS). Using this tool, descriptive statistics namely frequencies and cross-tabs were used for the analysis. Frequencies were mainly used to show the percentages, while crosstabs were used to make comparisons between responses given by male and female participants. In addition, among the non-parametric tests, chi-square was used to test the hypotheses. This was done for the purpose of finding out the degrees of freedom and the levels of significance which would help determine whether the results obtained were due to chance or some other factors.

Results from all the 3 FGDs were analyzed together and analysis involved two steps. Step 1 involved the analysis of individual transcripts. During this process, information from the individual transcripts was recorded in the coded transcript for all the 3 FGDs. Code words were used to categorize the responses. For example, under “Offer of Gifts” as a trick used to coax children and adolescents into sexual activities, the code word “OG” was used. Therefore, all the responses given by the participants involving the offer of gifts was recorded under this code word. Several code words were used (See Appendix C for the code book containing the code words used in the study).

Step 2 involved the use of a log book. This simply entailed using a logbook to enter every response under each coded word (see results table 25). Tallies were used to separate the responses for each FGD. Ultimately, information from the logbook was used to analyze the data.

3.11: Methodology Limitation

Despite the researcher doing everything possible to ensure that the study was carried out effectively, one major limitation was anticipated, which was that since the questionnaire was self-report, child sexual abuse could have been underreported due to the participants' fear of being victimized and ashamed, despite being assured of confidentiality and anonymity

CHAPTER FOUR

RESEARCH RESULTS

4.1. Introduction

This chapter is devoted to presenting the findings of the research. Therefore, the chapter begins with a discussion on the response rate. This is followed by a presentation of the findings according to the structure of the questionnaire and the focus group discussion.

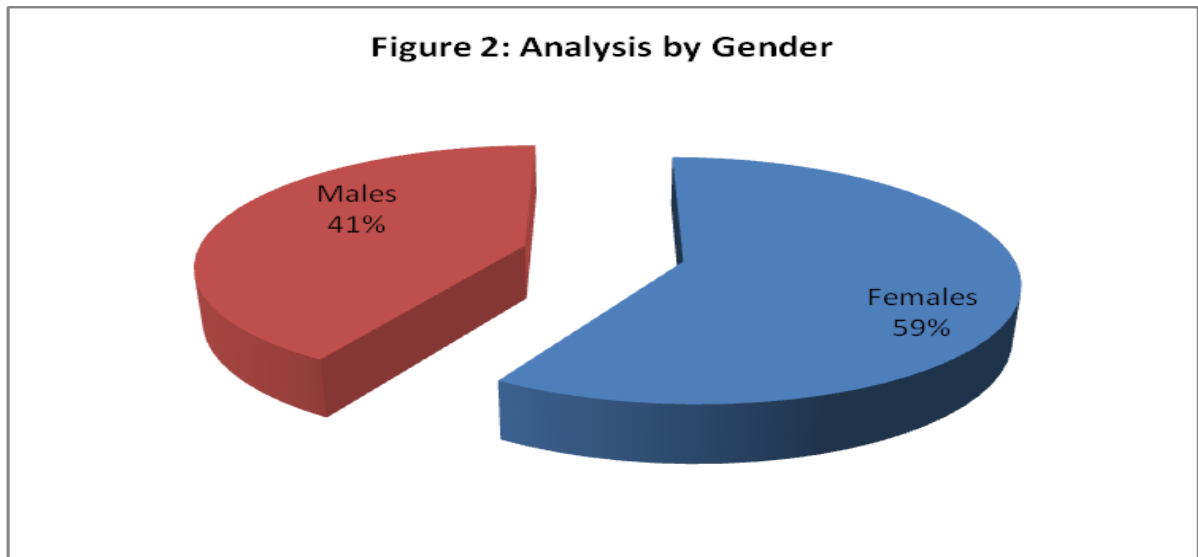
4.2. The Response Rate

The total number of participants that were recruited in the study was 200 secondary school pupils. Out of this number, 86 (43%) were males and 114 (57%) were females. However, it should be mentioned that of the 200 participants, 87 (43.5%) reported having been sexually abused before they were 16 years old. Of the 87, 51 (59%) were females and 36 (41%) were males. The results are therefore based on the 87 participants who had experienced sexual abuse.

4.3. Results From the Sexually Abused Participants.

As already stated, the results are from the 51 female and 36 male participants who reported experiencing sexual abuse.

Figure 2 shows the results by the gender of the participants.



Of the 87 participants, 77 (86%) were in the age range 16 -18 years; 8 (9.2%) were in the range of 19 - 21 years; and 2 (2.3%) did not indicate their ages. This means that most of the participants were aged between 16-18 years.

Table 1: Forms of Sexual Abuse Items.

Form of Sexual Abuse	Cases					
	Included		Excluded		Total	
	N	Percent	N	Percent	N	Percent
Sexual touch/arousal.	87	100.0%	0	.0%	87	100.0%
Abuser rubbing genitals against the victim's body.	84	96.6%	3	3.4%	87	100.0%
Abuser touching the victim's genitals with the mouth.	86	98.9%	1	1.1%	87	100.0%
Victim made to touch the abuser's genitals with the mouth.	87	100.0%	0	.0%	87	100.0%
Attempted vaginal/penile sexual intercourse.	87	100.0%	0	.0%	87	100.0%
Actual vaginal/penile sexual intercourse.	87	100.0%	0	.0%	87	100.0%
Attempted anal intercourse.	86	98.9%	1	1.1%	87	100.0%
Actual anal intercourse.	85	97.7%	2	2.3%	87	100.0%
Victim forcibly kissed.	85	97.7%	2	2.3%	87	100.0%
Victim exposed to adults having sex.	85	97.7%	2	2.3%	87	100.0%
Abuser exposing their genitals to the victim.	85	97.7%	2	2.3%	87	100.0%
Abuser masturbating in front of the victim.	85	97.7%	2	2.3%	87	100.0%

The above table shows the forms of child sexual abuse to which the respondents answered “YES”, if they had either one or more of the listed sexual activities, and “NO”, if they did not experience any one or more of the listed items.

“N” in the “Included” column refers to the number of participants who responded to the question. “N” in the “Excluded column refers to the number of participants who did not respond to the question. “N” in the “Total” column refers to the total number of participants.

Table 2: Comparison of Responses in Terms of Participants’ Gender.

Gender of the participant	Sexual touch/arousal	Perpetrator rubbing genitals against the victim's body	Perpetrator touching the victim's genitals with the mouth	Victim made to touch the perpetrator's genitals with the mouth	Attempted vaginal/penile sexual intercourse	Actual vaginal/penile sexual intercourse	Attempted anal intercourse	Actual anal intercourse	Victim forcibly kissed	Victim exposed to adults having sex	Perpetrator exposing their genitals to the victim	Perpetrator masturbating in front of the victim	
M	N	36	35	36	36	36	36	36	36	36	36	35	
	Std. D.	.506	.426	.280	.319	.504	.439	.351	.167	.478	.422	.494	.284
	Median	1.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00
F	N	51	49	50	51	51	50	49	49	49	49	50	
	Std. D.	.469	.466	.404	.272	.500	.488	.351	.200	.503	.434	.481	.388
	Median	1.00	2.00	2.00	2.00	1.00	2.00	2.00	2.00	1.00	2.00	2.00	2.00
T	N	87	84	86	87	87	86	85	85	85	85	85	
	Std. D.	.488	.449	.360	.291	.503	.470	.349	.186	.501	.427	.484	.350
	Median	1.00	2.00	2.00	2.00	1.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00

The above table goes beyond just showing the forms of sexual abuse, but goes into detail to show the responses in terms of gender.

NB: M=Male Respondents

F=Female Respondents

Std.D= Standard Deviation

F.N= Total number of female respondents

M.N= Total number of male respondents

T.N=Total number of respondents, that is, both male and female respondents combined.

Each of the tables below presents the responses given to each of the forms of sexual abuse according to the gender of the respondents.

Table 2a: Sexual touch/arousal

Form of sexual abuse		Gender of the Participant		Total
		Male	Female	
Sexual touch/arousal	Yes	19	35	54
	No	17	16	33
Total		36	51	87

The above table shows that all the participants (n=87) responded to the question. Out of this number, 35 females out of 51 reported having experienced sexual touch/arousal, whereas 16 did not. On the other hand, 19, out the total number of 36 males reported experiencing a sexual touch/arousal, and 17 did not. The total number of victims who experienced this form of abuse was 54, representing a total of 62.1% of all the cases.

Table 2b: Abuser Rubbing Genitals against the Victim's body

Form of Sexual Abuse		Gender of the participant		Total
		Male	Female	
Abuser rubbing genitals against the victim's body	Yes	8	15	23
	No	27	34	61
Total		35	49	84

The table above shows that out of the 87 participants, a total number of 84 participants responded to the question. Of these, 49 were females whereas 35 were males. Of the 49 females, 15 reported having the abuser's genitals rubbed against their body, while 34 did not. On the other hand, 8 out of the 35 males had an experience of this form of abuse, while 27 did not. Therefore, the total number of victims who experienced this form of abuse was 23, which was 27.4% of the total number of victims.

Table 2c: Abuser touching the victim's genitals with their mouth

Form of Sexual Abuse		Gender of the Participant		Total
		Male	Female	
Abuser touching the victim's genitals with the mouth	Yes	3	10	13
	No	33	40	73
Total		36	50	86

The above table shows that 86 participants responded to this question. Of these, 50 were females and 36 were males. Of the 50 females, 10 reported that their abuser touched their genitals with their mouth, while 40 did not. On the other hand, only 3 males experienced this form of sexual abuse and 33 did not. The total number of victims for this form of abuse was 13, representing 15.1%.

Table 2d: Victim made to touch the abuser's genitals with their mouth.

Form of Sexual Abuse		Gender of the Participant		Total
		Male	Female	
Victim made to touch the abuser's genitals with the mouth	Yes	4	4	8
	No	32	47	79
Total		36	51	87

This table shows that all the participants (n=87) responded to this question. Of this total number, 4 females reported that they were made to touch their abuser's genitals with their mouth, while 47 did not. Four males, on the other hand also reported experiencing this form of abuse and 32 did not. This brought the total number of victims who experienced the form of abuse to 8 (9.2%), and the total number of those who did not to 79.

Table 2e: Attempted Vaginal/Penile Intercourse

Form of Sexual Abuse		Gender of the Participant		Total
		Male	Female	
Attempted vaginal/penile sexual intercourse	Yes	16	29	45
	No	20	22	42
Total		36	51	87

This table shows that all the participants (n=87) responded to this question. Of the 51 females, 29 experienced attempted vaginal intercourse, whereas 22 did not. Sixteen out of the 36 males had an experience, whereas 20 did not. Therefore, the total number of victims, both males and females combined was 45, which represents 51.7% of the cases.

Table 2f: Actual Vaginal/Penile Intercourse

Form of Sexual Abuse	Response	Gender of the participant		Total
		Male	Female	
Actual vaginal/penile sexual intercourse	Yes	9	19	28
	No	27	32	59
Total		36	51	87

The above table shows that all the participants (n=87) answered the question on whether or not they experienced actual vaginal/penile intercourse. The results show that out of the 51 females, 19 experienced actual vaginal intercourse, whereas 32 did not. Of the 36 male participants, 9 experienced this form of sexual abuse. The total number of victims for actual vaginal and penile intercourse was 28, which was 32.2%.

Table 2g: Attempted Anal Intercourse

Form Of Sexual Abuse	Response	Gender of the participant		Total
		Male	Female	
Attempted anal intercourse	Yes	5	7	12
	No	31	43	74
Total		36	50	86

The above table shows that 86 participants responded to this question. Out of this number, 50 were females and 36 were males. Out of the 50 females, 7 reported experiencing attempted anal intercourse, whereas 43 did not. On the other hand, out of the 36 males that responded, 4 reported experiencing attempted anal intercourse, whereas 31 did not. The total number of victims of this form of sexual abuse was 12 (14%).

Table 2h: Actual Anal Intercourse

Form of Sexual Abuse	Response	Gender of the Participant		Total
		Male	Female	
Actual anal intercourse	Yes	1	2	3
	No	35	47	82
Total		36	49	85

The above table shows that 85 participants responded to the question. Out of this number, 49 were females and 36 were males. Out of the 49 males, 47 reported that they did not experience actual anal intercourse, whereas 2 did. On the other hand, out of the 36 males, only 1 experienced this form of sexual abuse. Therefore, the total number of victims of actual anal intercourse was 3, which only accounted for 3.5% of the total number of cases.

Table 2i: Victim Forcibly Kissed

Form of Sexual Abuse	Response	Gender of the participant		Total
		Male	Female	
Forcibly kissed	Yes	12	27	39
	No	24	22	46
Total		36	49	85

The above table shows that a total number of 85 participants responded to the question on whether or not they were forcibly kissed. Out of these, 49 were females and 36 were males. Of the 49 females, 27 reported being forcibly kissed, while 22 did not. Of the total number of 36 males, 12 reported that they were forcibly kissed, while 24 reported that they were not. This brought the total number of forcibly kissed victims to 39 (45.9%).

Table 2j: Victim Exposed to Adults Having Sex

Form of Sexual Abuse		Gender of the participant		Total
		Male	Female	
Victim exposed to adults having sex	Yes	8	12	20
	No	28	37	65
Total		36	49	85

What can be observed from the above table is that 85 participants responded to this statement. 49 were females while 36 were males. Out of the 49 females, 12 reported being exposed to adults having and 37 did not. Among the males, 8 were exposed to adults having sex whereas 28 were not. The total number of victims of this form of sexual abuse was 20, representing a total of 28.5%.

Table 2k: Abuser Exposing their Genitals to the Victim

Form of Sexual Abuse		Gender of the participant		Total
		Male	Female	
Abuser exposing their genitals to the victim	Yes	14	17	31
	No	22	32	54
Total		36	49	85

The table above shows that a total number of 85 participants responded to this question. Out of this number, the females were 49, while males were 36. Of the 49 females, 17 reported that their abuser exposed their genitals to them, whereas 32 did not. On the other hand, out of the 36 males, 14 reported that that they experienced this form of sexual abuse, and 22 did not. This brought the total number of victims of this form of sexual abuse to 31, which amounted to 36.5%.

Table 2l: Abuser Masturbating in Front of the Victim

Form of Sexual Abuse		Gender of the participant		Total
		Male	Female	
Abuser masturbating in front of the victim	Yes	3	9	12
	No	32	41	73
Total		35	50	85

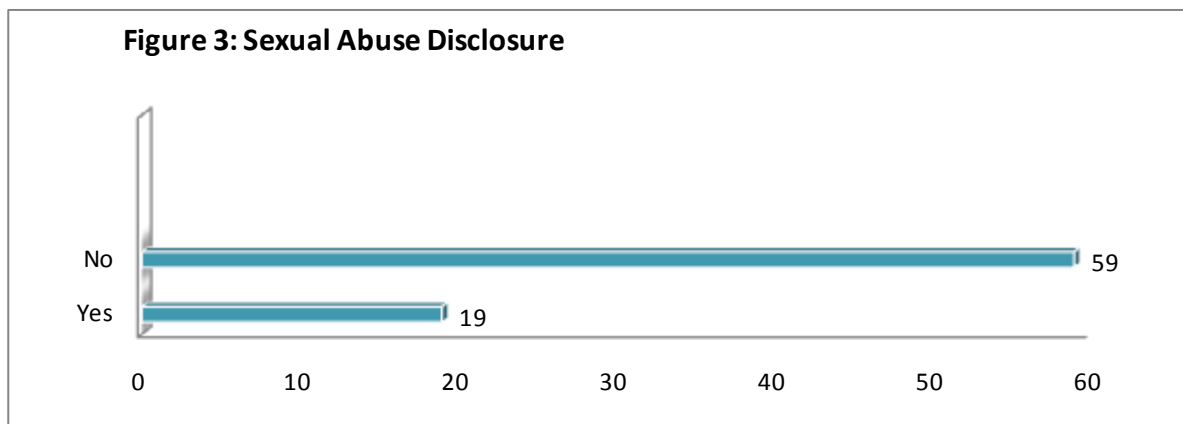
The table above shows that a total number of 85 participants responded to this question. 50 were female while 35 were males. Out the total number of females, 9 had their abuser masturbate in front of them, whereas 41 did not. Of the 35 males, 3 experienced this form of sexual abuse. The total number of victims was 12. This represented 14.1% of the total number of cases.

4.3.5: Analysis for the Disclosure of the Sexual Experience.

Table 3: Frequencies for Responses on Disclosure

	Response	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	19	21.8	24.4	24.4
	No	59	67.8	75.6	100.0
	Total	78	89.7	100.0	
Missing	0	9	10.3		
Total		87	100.0		

The table above shows that out of the total number of 87 participants, 78 responded to this question, whereas 9 did not. Of the 78, 19 (24.4%) reported that they disclosed or reported their sexual experience; while a total of 59 (75.6%) did not. These results can also be shown in a bar chart as below:



4.3.6: Age Range when the Victim Was First Sexually Abused.

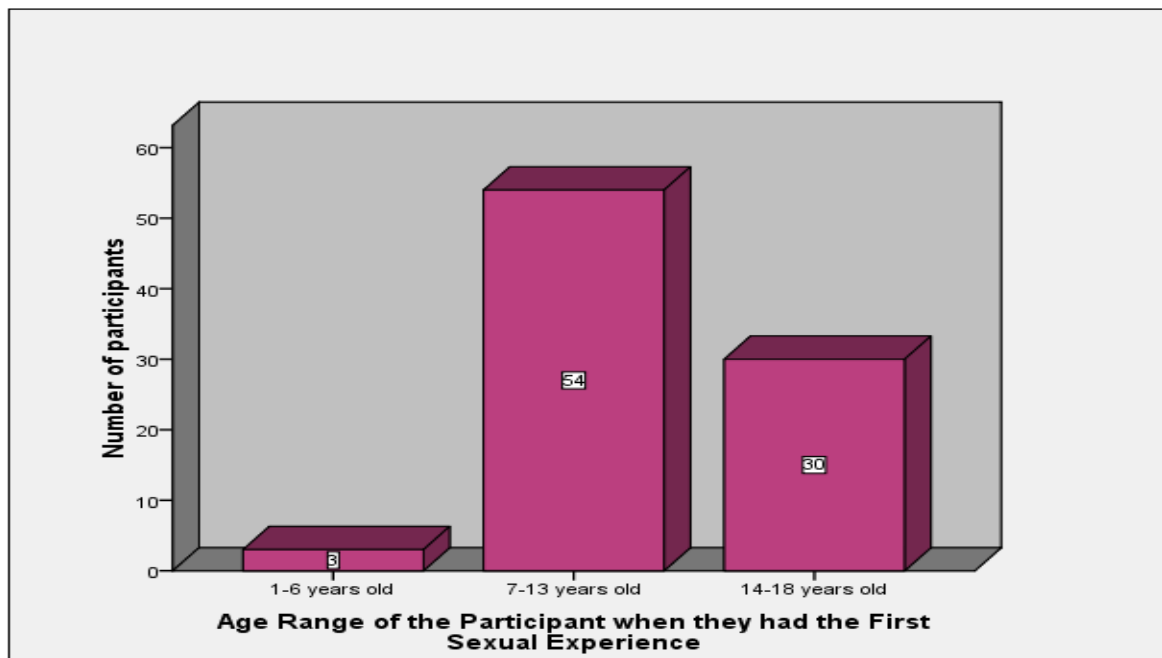
Table 4: Age-ranges when the victim was first sexually abused

Age Range	Frequency	Percent	Valid Percent	Cumulative Percent
1-6 years old	3	3.4	3.4	3.4
7-13 years old	54	62.1	62.1	65.5
14-18 years old	30	34.5	34.5	100.0
Total	87	100.0	100.0	

All the respondents (n=87) responded to this question. Out of this number, 3 respondents (3.4%) reported that they were sexually abused when they were in the age range 1-6 years of age; 54 (62.1%) reported that they were sexually abused in the age range 7-13 years of age; and 30 (34.5%) reported that they were sexually abused when they were in the age range 14-18 years of age. This means that most of the participants were sexually abused when they were in the age range 7-13 years of age.

These results can also be shown graphically as follows:

Figure 4: Age ranges when the Victims were First Sexually Abused



4.3.7: Relationship of Participants to the Abusers.

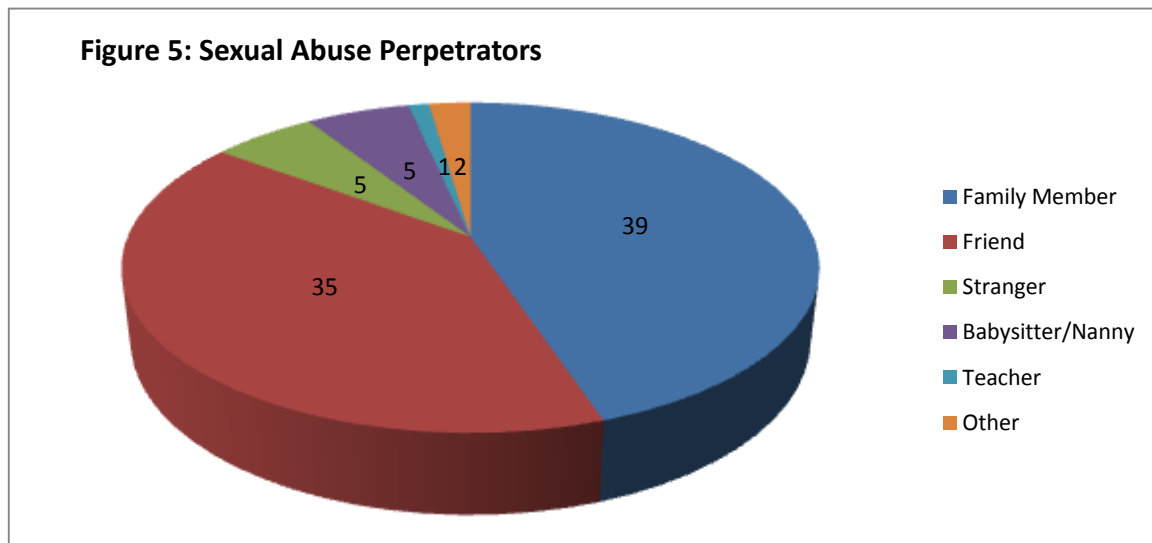
In addition to the above results, the participants were also asked questions on the relationship of the perpetrator to the victim. The perpetrator in this case was the one who engaged them in the sexual abuse that they reported as having experienced. They were asked whether the perpetrator was a family member, family friend, stranger and so on. The results were as follows:

Table 5: Analysis of the Abusers

Perpetrator	Frequency	Percent	Valid Percent	Cumulative Percent
Family members	39	44.8	44.8	44.8
Stranger	5	5.7	5.7	50.6
Friend	35	40.2	40.2	90.8
Teacher(s)	1	1.1	1.1	92.0
Babysitter or nanny	5	5.7	5.7	97.7
Other	2	2.3	2.3	100.0
Total	87	100.0	100.0	

The table above shows that all the participants (n=87) answered this question. Of the 87, 39 victims (44.8%) were abused by a family member; closely followed by friends (35, 40.2%). These could have either been family friends or friends to the victims. Five participants (5.7%) were abused by strangers. Only 1 participant (1.1%) was abused by a teacher; babysitters/nannies accounted for 5.7 % (n=5); while other abusers accounted for 2% of the abusers. This shows that most of the victims in the sample were abused by family members, closely followed by friends.

These results can also be shown as follows:



In addition to the above results, 5 cases of victims with multiple abusers were found, that is, a child being sexually abused by more 1 person. The findings were as follows:

Table 6: Victims with multiple abusers

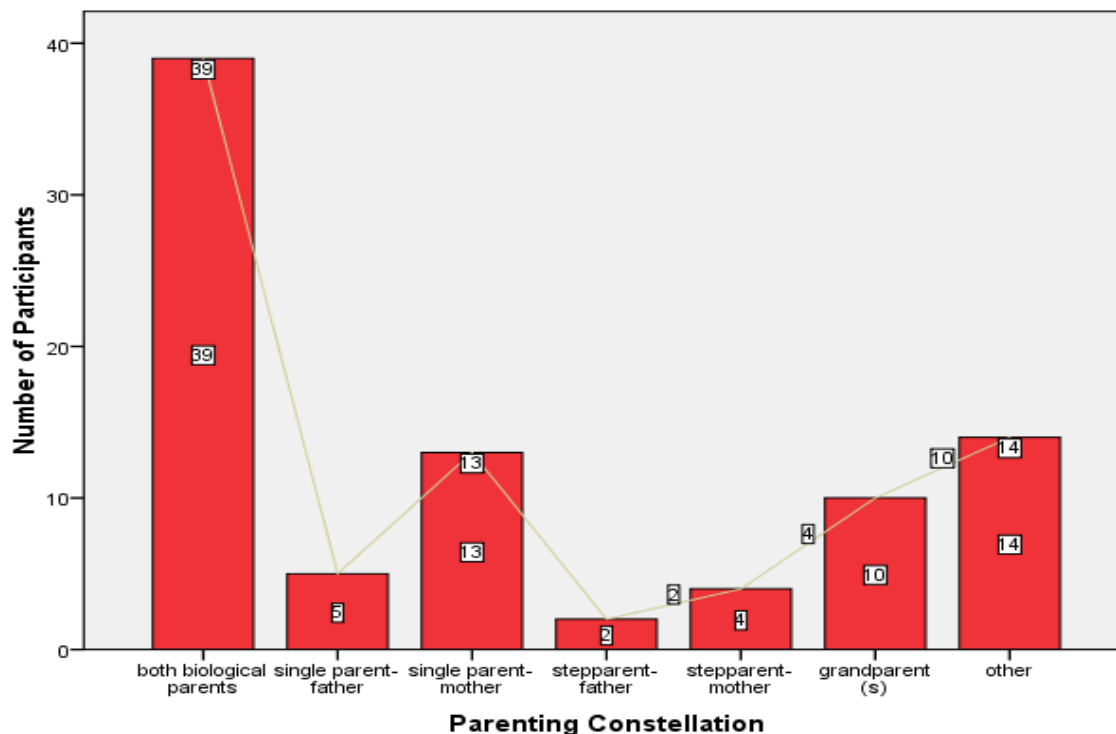
Frequency	Gender	Perpetrator/Abuser
1	Female	Uncle and teacher
1	Female	Uncle and neighbor
1	Female	Elder brother and stranger
1	Male	Older female and sister's friend
1	Female	Stranger and "boyfriend"

The table shows that even when the victims with multiple abusers are considered, family members and friends are the abusers in most of the cases.

4.3.8: Victim's Parenting Structure

When the participants were asked questions on their parenting structure or their guardians at the time they were sexually abused, their results were as follows:

Figure 6: Victim’s Parenting Structure at the Time of the Sexual Abuse



The figure above shows that all the participants (n=87) responded to the question on their parenting constellation or guardians at the time they were sexually abused. The results show that the highest frequency (n=39) of sexual abuses cases was found among participants who lived with their biological parents; 5 lived with a single parent (father); 13 lived with a single mother; 2 with a stepfather; 4 with a stepmother; 10 with grandparents; and 14 with other guardians who included uncles, cousins, brothers, sisters and aunts.

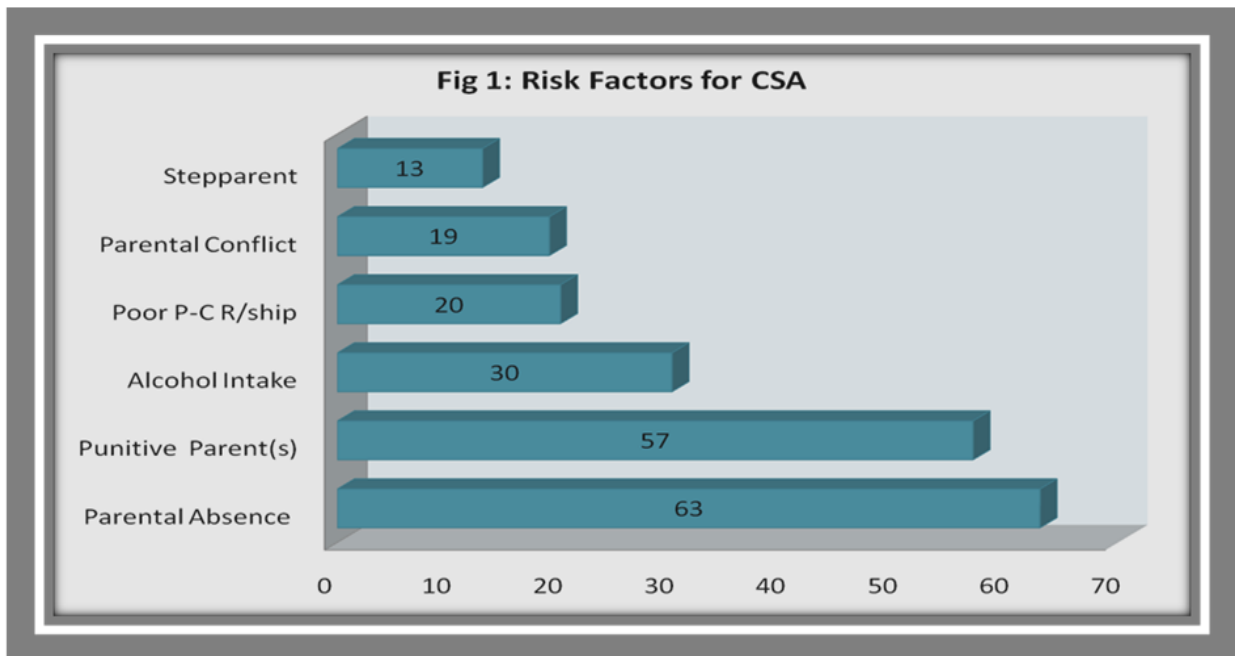
4.3.9: Results Risk Factors for Sexual Abuse.

The following results outline the data obtained from the participants on the risk factors for child sexual abuse.

Figure 7: Summary of Responses on the Risk Factors for Child Sexual Abuse

Seven risk factors for child sexual abuse were examined namely the presence of a stepparent in the household; parental conflict; poor parent-child relationship; alcohol intake by a parent

or guardian; having punitive parents; and parental absence. The figure below shows the responses given on each of the items. The number in each of the bars represents the number of participants who reported each of the items as being a factor that put them at risk for sexual abuse.



The results in the above figure show that the most frequently reported risk factor for child sexual abuse was parental absence. This was reported by 63 participants and represents 73.3%. This was followed by having punitive parents (n=57; 69%). Alcohol intake by a parent/guardian was a risk factor among 30 participants, which represents 34.5%. Poor parent-child relationships were reported by 20 participants (26%). Next was parental conflict, which was reported by 19 participants and represented 22.4%. The presence of a stepparent in a home as a risk factor for sexual abuse was reported by 13 participants (15.5%). In addition to this, the risk factor with the lowest frequency was physical disability which was reported only by 6 participants and represented 7% of the total number of cases.

4.3.9.2: Chi-Square Results on the Risk Factors for Child Sexual Abuse

The results obtained on the risk factors for sexual abuse were further analyzed to determine whether the observed frequencies were significantly different from the expected frequencies. To achieve this, a chi-square test was done. Statistical difference in this case implied determining whether the differences were due to chance alone, or may be indicative of other processes at work. Each of the tables below shows the results obtained for the observed and expected frequencies for each risk factor.

Table 7: Are you physically disabled?

	Observed N	Expected N	Residual
Yes	6	43.0	-37.0
No	80	43.0	37.0
Total	86		

The results in the above table show that 86 participants responded to the question on physical disability. Of these, it was expected that 43 and 43 participants would say “Yes” and “No” respectively. However, the observed results show that 6 responded “Yes”, while 80 said “No”.

Table 8: Were your parents/guardians engaging in quarrelling/fighting behaviors?			
	Observed N	Expected N	Residual
Yes	19	42.5	-23.5
No	66	42.5	23.5
Total	85		

The results in the above table show that a total of 85 participants responded to the question on parental conflict as a risk factor for child sexual abuse. Of these, it was observed that 19 said “Yes”, while 66 said “No”. However, it was expected that 42.5 and 42.5 participants would say “Yes” and “No” respectively.

Table 9: How was your relationship with your parents/guardians?

	Observed N	Expected N	Residual
Good	65	42.5	22.5
Bad	20	42.5	-22.5
Total	85		

The table above shows that 85 participants responded to the question on a poor parent-child relationship as a risk factor for child sexual abuse. Of these, it was expected that 42.5 and 42.5 participants would respond “Good” and “Bad” respectively. However, the results obtained show that 65 said that their relationship with their parent(s) was good, while 20 said it was bad.

Table 10: Were your parents physically abusive, that is, did they beat or shout at you when you did something wrong? Did your parents beat or shout at you when you did something wrong?

	Observed N	Expected N	Residual
Yes	57	41.5	15.5
No	26	41.5	-15.5
Total	83		

The results in the table show that 83 participants responded to the question on having punitive parents as a risk factor for sexual abuse. The expected results would be 41.5 and

41.5 participants responding “Yes” and “No” to the question respectively. The obtained results, however, show that 57 answered “Yes”, while 26 answered “No”.

Table 11: Did your parent(s)/guardians take alcohol or other drugs?

	Observed N	Expected N	Residual
Yes	30	43.5	-13.5
No	57	43.5	13.5
Total	87		

The results in the above table show that the question on alcohol intake by a parent and/or guardian as a risk factor was responded to by all the 87 participants. The expected results would be that 43.5 and 43.5 participants would say “Yes” and “No” respectively. The results obtained show that 30 participants answered “Yes”, while 57 said “No”.

Table 12: Were your parents present/absent?

	Observed N	Expected N	Residual
Present	23	43.0	-20.0
Absent	63	43.0	20.0
Total	86		

On the question of parental absence as a risk factor, 86 participants responded. Of these, it was expected that 43 and 43 would say their parents were present and absent respectively. However, the results obtained show that 23 said their parents were present, while 63 said they were absent.

Table 13: Were you living with stepparents?

	Observed N	Expected N	Residual
Yes	13	42.0	-29.0
No	71	42.0	29.0
Total	84		

A total of 84 participants responded to the question on the stepparent variable. Of these, it was expected that 42 would say they lived with a stepparent, while another 42 would say they did not. The observed results, however, show that 13 participants reported living with a stepparent at the time they were sexually abused, while 71 said they did not.

To determine the level of significance between the expected and observed frequencies, the relative standard of $p=0.05$ was used. The “P” value is the probability that the deviation of the observed from what was expected is due to chance and not other forces acting. In the case of the results obtained, one would expect any deviation to be due to chance alone 5% of the time or less. The chi-square test results for the risk factors are shown in the table below.

Table 14: Chi-square Results on the Risk Factors for Child Sexual Abuse

	Physical Disability	Parental Conflict	Poor Parent-Child Relationship	Presence of a Stepparent	Parental Alcohol Intake	Parental absence	Punitive Parenting
Chi-Square	63.674 ^a	25.988 ^b	23.824 ^b	40.048 ^c	8.379 ^d	18.605 ^a	11.578 ^e
df	1	1	1	1	1	1	1
Asymp. Sig.	.000	.000	.000	.000	.004	.000	.001

The results in the above table show that for physical disability, ($p=.000$); parental conflict ($p=.000$); poor parent-child relationship ($p=.000$); presence of a stepparent ($p=.000$); alcohol intake by a parent/guardian ($p=.004$); parental absence ($p=.000$); and punitive parenting ($p=.001$). It can also be observed that for all the 7 risk factors examined, the probability (p) value is less than 5. This means that the probability that the results obtained are due to chance is less than 5%. The implication is that there is a significant difference between the expected and observed frequencies. Ultimately, this means that the differences between the expected and observed frequencies were not due to chance, but some other factors.

4.3.10: Analysis of the Grooming Tactics and Behaviors used by Perpetrators before Sexually Abusing Children and Adolescents

The table below outlines the statements to which the participants responded “YES” or “NO”, when they were asked questions on the tactics that abusers use before they abuse their victims.

Table 15: Response Items on Grooming Tactics/Behaviors Used by Sexual Abusers

Grooming Behavior/tricks	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Showing love and care to the target	87	100.0%	0	.0%	87	100.0%
buying gifts and giving money	87	100.0%	0	.0%	87	100.0%
Exposure to pornographic materials	87	100.0%	0	.0%	87	100.0%
spending a lot of time with the target e.g. doing school work, taking walks	87	100.0%	0	.0%	87	100.0%
Favoritism	86	98.9%	1	1.1%	87	100.0%
Playing sexual games with the target e.g. tickling, hugging, kissing	87	100.0%	0	.0%	87	100.0%

The table above shows the statements outlined in the questionnaire to which the participants responded “YES”, if it applied them, and “NO”, if it did not. “N” in the “Valid” column refers to the total number of participants who responded to the question. “N” in the “Missing” column refers to the number of participants who did not respond to each statement. “N” in the “Total” column refers to the total number of participants in the study, and (n=87).

Table 15a: Showing the Victim Love and Care.

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
He/she used to love and care for me.	Yes	20	35	55
	No	16	16	32
Total		36	51	87

The table above shows that 87 participants responded to this question. Of the 36 males, 20 reported their perpetrator showing them love and care, while 16 did not. Furthermore, 35 females said they were shown love and care by the person who sexually abused them before the sexual experience, while 16 did not. This brought the total number of victims subjected to this kind of behavior to 55 (63.2%).

Table 15b: Buying Gifts and/or Giving the Victim Money

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
He/she used to buy gifts and give me money	Yes	6	6	12
	No	30	45	75
Total		36	51	87

From the table above, it can be observed that all the participants (n=87) responded to the question. Of the 51 females, 6 reported that their perpetrator used to buy gifts for them and offer them money as a way of grooming them, whereas 45 did not. The same number of males reported that their abuser used money and gifts as a way of grooming them for the sexual experience. The total number of participants who experienced this kind of grooming behavior was 12 (13.8%) of the total number of cases.

Table 15c: Exposure to pornographic materials and/or movies

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
We used to read and watch pornographic materials and/or watch movies together.	Yes	4	9	13
	No	32	42	74
Total		36	51	87

All the participants (n=87) responded to this question. Four males reported that they read and watched pornographic materials with their abusers, whereas 32 did not. Furthermore, 9 males reported that they were exposed to pornographic material, whereas 42 said they were not. Therefore, the total number of victims of this form of grooming tactic was 13, or 14.9% of the total number of cases.

Table 15d: Time Spent with the Victim

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
We used to spend a lot of time together doing school work and taking walks	Yes	3	7	10
	No	33	44	77
Total		36	51	87

All the participants responded to this question. Of the 51 females, 7 reported spending a lot of time with their perpetrator, while 44 did not. Three males out of 36 said they used to spend a lot of time with their abuser before they had the sexual experience. The total number of victims was 10, which represents 11.5% of the total number of cases.

Table 15e: Complementing Tactic

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
He/she used to favor and tell me good things about myself	Yes	3	3	6
	No	33	47	80
Total		36	50	86

The table above shows that 1 participant did not respond to the question. Of the 86 that responded to it, 36 were males, while 50 were females. Of the 50 females, 3 reported that they used to be favored by their perpetrators, while 47 reported that they were not. In addition, 3 males reported being favored while 33 did not. The total number of victims that experienced favoritism was 6, which represents 7% of the total number of cases.

Table 15f: Playing Games with the Victim

Type of Grooming Behavior		Gender of the participant		Total
		Male	Female	
We used to play games together	Yes	6	5	11
	No	30	46	76
Total		36	51	87

All the participants responded to this question. Of the 51 females, 5 reported playing games with their perpetrators, while 46 did not. Furthermore, 6 males out of the 36, reported that they used to play games with their perpetrators before the sexual experience. The total number of participants exposed to this kind of grooming behavior was 11, which was 12.6% of the total number of cases.

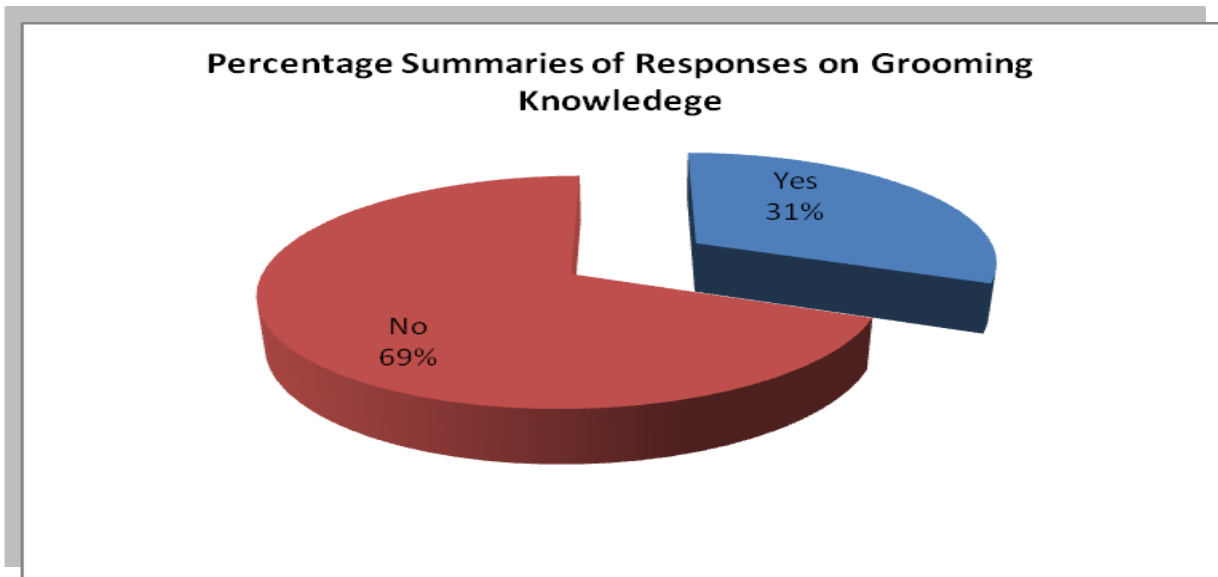
4.3.11: Analysis for Grooming Knowledge

The participants were also asked a question on whether or not they were aware that the grooming behaviors that the perpetrators used would result into sexual abuse. The responses to this question are shown in table 25.

Table 16: Did you have an idea that doing the activities you answered “YES” to in the previous section would result into sexual abuse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	26	29.9	31.0	31.0
	No	58	66.7	69.0	100.0
	Total	84	96.6	100.0	
Missing	0	3	3.4		
Total		87	100.0		

Figure 8: Summary of the responses on participants’ awareness of the abusers’ grooming tactics



The table and figure above summarize the responses given by the participants when they were asked a question on whether or not they were aware that the behaviors displayed by their perpetrators would result into sexual abuse. The results show that out of the total

number of 87 participants, those who answered the question were 84, while 3 did not. Of the 84, only 26 (31%) said they knew that the behavior exhibited by the abuser could result into sexual abuse. Fifty-eight participants (69%) said they did not know.

4.4: Results from the Focus Group Discussions

A total of 3 focus group discussions were conducted at three different schools, each comprising a total number of 10 (6 males;4 females) 12 (5 males;7 females); and 9 (3 males;6 females) participants respectively. This means that the total number of pupils that participated was 31. Of the 31, seventeen (54.8%) were females, while the males were 14 (45.2%). Their ages ranged from 16 to 20 years old.

The main aim of conducting the focus group discussions was to find out what grooming tricks are used by sexual abusers to coax children and adolescents into the sexual relationship. The table below shows a summary of the results obtained.

Table 17: Responses from the Focus Group Discussions

Grooming Behavior		FGD 1	FGD 2	FGD 3
1.Abuser showing the target care, affection and love	M	2(20%)	1(8.3%)	1(11.1%)
	F	4(40%)	5(41.7%)	3(33.3%)
2.Abuser exposing the target to pornographic material	M	1(10%)	3(25%)	3(33.3%)
	F	3(30%)	4(33.3%)	4(44.4%)
3.Abuser offering money/other gifts to the target	M	1(10%)	1(8.3%)	2(22.2%)
	F	4(40%)	7(58.3%)	6(66.6%)
4.Abuser spending a lot of time alone with the target	M	2(20%)	1(8.3%)	1(11.1%)
	F	3(30%)	4(33.3%)	5(55.6%)
5.Abuser showing favoritism to the target	M	3(30%)	1(8.3%)	1(11.1%)
	F	1(10%)	7(58.3%)	3(33.3%)
6.Abuser playing sexual games with the victim, such as hugging and kissing	M	2(20%)	0(0%)	2(22.2)
	F	4(40%)	3(25%)	5(55.6%)

The results in the above table show that from Focus Group Discussion 1, there was a total number of 10 participants (6males and 4 females). Of these, two males (20%) had their abuser show them that they loved and cared for them, whereas 4 females (40%) had their abusers use this tactic. In the same group, one male (10%) was exposed to pornographic material compared to 3 females (30%). Furthermore, only I male (10%), compared to 4 females (40%) was offered money or other gifts by their abuser. Two males (20%) reported that they used to spend a lot of time with their abuser, compared to 3(30%) that was reported by the females. Three males (30%) reported that their abuser used favoritism to lure them into the sexual activity, compared to only 1 (10%) of the females. On the playing of sexual games variable, 2(20%) of the females reported that their abuser engaged them in sexual games, while was found in 4(40%) of the female cases.

From FGD 2, out of the 12 participants (5 males and 7 females), one participant (8.3%) of the males were shown care and love by their abuser, compared to 5 (41.7%) of the females. Three males (25%) were exposed to pornographic material in comparison with 4(33.3%) of the females. One male (8.3%) was offered money/other gifts by the abuser compared to all the 7 (58.3%) female participants in the group. One male (8.3%) used to spend a lot of time alone with the abuser, whereas 4 females (33.3%) reported this. In addition, one male (8.3%) said he was favored by the abuser, while this was reported by all the 7 (58.3%) female participants in the group. Playing of sexual games with abuser was reported by none (0%) of the male participants, while it was reported by 3 (25%) of the females.

The results obtained from FGD 3 showed that out of the 9 participants (6 females and 3 males), one of the males (11.1%) indicated that their abuser used love and affection as a tactic for their sexual experience. This was lower than that reported by the female participants who indicated that this tactic was used in 3 (33.3%) of the cases. Three males (33.3%) were exposed to pornographic material compared to 4(44.4%) of the females. Two males (22.2%) were lured into the sexual activity through the offer of gifts, compared to all the 6 (66.7%) female participants. Favoritism accounted for 1(11.1%) among the male participants, while this was found in 3 (33.3%) of the female cases. Sexual games accounted

for 2 (22.2%) of the male cases, whereas it was reported by 5(55.6 %) among the female participants.

When the findings from the 3 groups are compared, the most frequently used tactic among the participants was the offer of gifts. This was reported by 21 (67.8%) of both the male and female participants. Furthermore, the results were also examined in terms of the participants’ gender. The results show that the most frequently reported tactic among the males was the exposure to pornography (n=7; 50%). Among the females, the offer of gifts such as money had the highest frequency and was reported by all the female participants (n=17; 100%).

In addition to the above results, it was found the use of compliments such as telling a child “you are beautiful or handsome” were not frequently reported by the participants. Such cases were only reported by 3 (9.68%) of the female participants, one (3.2%) of the males.

4.5: Hypotheses Testing

As already stated, the study had three main hypotheses: a) alcohol intake by the parent or guardian is not a significant risk factor for child sexual abuse b) among the penetration forms of sexual abuse, vaginal intercourse is the most common form when examined among the females c) in Lusaka District, children and adolescents that are sexually abused lack adequate knowledge of the grooming tactics used by abusers. When these were tested using Chi-square, the results obtained were as follows:

Table 18: Chi-square Results for Hypotheses Testing.

	Did your parent(s)/guardians take alcohol or other drugs?	Did you know that this kind of behavior exhibited would result into sexual abuse?
Chi-Square	8.379a	12.190b
Df	1	1
Asymp. Sig.	.004	.000

From the above table, the chi-squared results show that:

- ❖ There is a relationship between child sexual abuse and parental intake of alcohol. In the results, the significance test is reported because the Significance level was found to be less than 5 ($n=30$) $=8.379$, $p=0.004$. $P < 0.05$. This means that the result was significant at a significance level of $p= 0.004$, and therefore cannot be attributed to chance. This means that the hypothesis, that alcohol intake by a parent is not a significant risk factor has been rejected. An alternative hypothesis therefore has been provided, that alcohol intake by a parent is a significant risk factor for child sexual abuse.

- ❖ There is a relationship between child sexual abuse and inadequate knowledge of the grooming tactics used by perpetrators. In the results, the significance level was found to be $p = 0.000$, $p < 0.05$. This means that the results cannot be attributed to chance. Therefore, the hypothesis that in Lusaka District, children and adolescents that are sexually abused have knowledge of the tactics used by abusers has been rejected. The alternative hypothesis that children that are sexually abused lack knowledge of the grooming tactics used by perpetrators has been adopted.

CHAPTER 5

DISCUSSION OF THE RESULTS

5.1: Introduction

This chapter discusses the results obtained from the study. It gives an interpretation of the results and discusses them in relation to the research problem.

5.2: Discussion of the Results

The results show that a total number of 87 pupils participated in the study. Of these, 51 were females while the males were 36. This shows a percentage split of 58.6% and 41.4% respectively. This was because the pupils that participated in the study were randomly selected from their class registers and it was found there were more female pupils than males.

The participants were asked questions on the form(s) of sexual abuse that they experienced. Although most of the questions were on the contact forms of sexual abuse, non-contact forms were also included.

From the responses given, it was found that sexual touch/arousal had the highest frequency (n=58). This represented 62.1% of the total number of cases. This was followed by attempted vaginal/penile sexual intercourse, which was found in 51.7% of the respondents (n=45). Being forcibly kissed was found in 45.9%, which represented a total number of 27 respondents who experienced this form of sexual abuse. Perpetrator exposing their genitals/private parts to the victim was found to be true for 36.5%; actual vaginal/penile sexual intercourse was found in 32.2% of the cases, while perpetrator rubbing their genitals/private parts against the victim's body was found in 24.7%. Furthermore, 23.5% of the victims were exposed to adults having sex; and 15.1% experienced the perpetrator touching the victim's genitals/private parts with their mouth. Perpetrator masturbating in front of the victim was found in 14.1%, with a similar score (14%), found with attempted anal intercourse, which accounted for 14.0%. Among the victims, 9.2% were made to touch the perpetrator's genitals/private parts with their mouth. The least occurring form of child

sexual abuse was actual anal intercourse, which only accounted for 3.5%, and was only reported by 3 participants.

When the forms of sexual abuse were examined, it was noted that there were 4 forms of sexual abuse that involved genital penetration, either through the anus or vagina. Therefore, from the list of the forms of sexual abuse outlined in the questionnaire, the 4 forms were attempted vaginal/penile intercourse, actual vaginal/penile intercourse, attempted anal intercourse and actual anal intercourse. However, for the purpose of hypothesis testing, only two forms of penetration were considered, namely actual vaginal intercourse and actual anal intercourse. When these were examined among the females, it was found that actual vaginal intercourse had the highest frequency (n=19). This represented 37.6%. Actual anal intercourse was experienced by 2 females (n=2), which represents 4%. This result shows that when actual anal and vaginal sexual intercourse are examined among the females, the most common form is vaginal intercourse. This is consistent with the findings of Mukuka and Nevo (2007), who found that the most common form among the girls is vaginal intercourse, and this was found in 10% of their sample. These findings are somewhat different from the ones made by Chen et al (2004), who found 1% of sexual penetration among their subjects. Another observation that is made is that when actual vaginal/penile sexual intercourse and attempted vaginal/penile intercourse are compared, more participants experienced attempted vaginal/penile intercourse than actual intercourse. This was the case perhaps because some of the perpetrators did not succeed with their attempt to sexually abuse their targets due to the victims' resistance.

The participants were further asked a question on whether or not they disclosed or reported their sexual experience(s). Out of the total number of 87 participants, 9 did not respond to the question. Of the 78 that did, (n=19) said they reported or disclosed their sexual experience(s). This represented a total value of 24.4% of the total number of the cases that responded to the question. On the other hand, (n=59), which was 75.6% of the cases said they did not report or disclose the abuse. Three reasons could be attributed to this. First, children subjected to sexual abuse are often afraid to report due to shame and fear of stigmatization of themselves or their family. This is also reported by Global Action for

Children, (2005). Secondly, abusers may use direct threats of physical harm to children or the family members. Thirdly, children are led to believe that the abuse is their own fault, and that they will be blamed, rejected or disbelieved if they tell, as was also found by National Research Council (1993); and Cohen et al, (2006). In Zambia, the Young Women' Christian Association (1999) and Human Rights Watch (2002) also found that disclosure of sexual abuse cases either by the victims themselves or their families is a challenge. This is because most of the sexual abusers are related to the children may even be their guardians or parents.

A question was asked that involved collecting information on how old the participants were when they were first sexually abused. When data was collected, their responses on age were formulated into 3 age ranges. The first age range was from 1-6 years old, the second range was from 7-13 years old and the third was from 14 to-18 years old. All the respondents (n=87) responded to the question. The results show that at the time of their first sexual experience(s), 3 participants (3.4%) were in the age range 1-6 years; 54 (62.1%) were in the range of 7-13 years of age; and 30 (34.5%) respondents were in the age range 14-18 years old. The highest frequency (n=54) was in the age range 7-13 years old. Despite this being found to be the age group when more children are sexually abused, research does not show the reasons why this could be the case. Perhaps, it could be due to the physiological changes that children, especially girls, go through. By the age of 13 years, most girls experience changes in their physiological make up. They go through a shift from childhood to adolescence (puberty). For most of them, their bodies become bigger and they begin attracting people of the opposite sex, who may be members of their family and so on. The age group 14-18 years old could have had 30 victims because this is the adolescence period. Therefore, sexual abuse attempts could have been made, but not all of them were entirely successful because the adolescents were old enough to resist and/or report if such a thing happened. Therefore, it is not expected that most abusers would have targeted children in this age group.

Although the results show that more participants were abused when they were in the age range 7-13 years, it is however possible that more victims could have been abused before

this age range. This is because abuse at younger ages may be significantly under-reported because of issues of detection, disclosure and recall. This finding is in agreement with the findings of Finkelhor (1994).

The participants were asked to state their relationship to the abuser. This question was answered by all the participants (n=87). Out of this number, the abusers with the highest frequency were family members (n=39), who were 44.8% of the total number of abusers. These were followed by friends (n=35). These could have either been friends to the child or family friends, and they accounted for 40.2%. Babysitters and/or nannies (n=5) contributed 5%. These had the same figure with strangers (n=5), who were also 5.7%. Teachers (n=1) contributed 1.1%. Other abusers namely the clergy (n=2), contributed 2.3% of the total number of abusers. This means that most of the cases were due to incest, as was also found by the World Health Organisation (2002). The vast majority of child sexual abusers include someone the child knows and trusts such as a parent or other relative, teacher, clergy, neighbors and friends. Strangers are abusers in very few cases. Family members are sexual abusers in most cases because they have adequate information about their target victims. This finding was also made by Human Rights Watch (2002) and the Young Women's Christian Association of Zambia (1999) who found that in their surveys that most child sexual abuse cases in Zambia are incestuous in nature, that is, they are usually perpetrated by family members.

In addition to these findings, 5 cases were found where the victim had multiple abusers, that is, more than one. Of the 5 cases, 1 was male and 4 were females. The male victim was abused by his older female cousin and his sister's friend; 1 female by an uncle and teacher; the other by an uncle and teacher; the next by her elder brother and a stranger; and the last by a stranger and her "boyfriend." This shows that some of the children that are sexually abused could be victimized by more than one person.

The questionnaire also had questions on the risk factors for child sexual abuse. When the risk factors were examined, it was found that the most powerful risk factor was parental absence (n=63), which represented 73.3% of the total number of the victims. Research conducted prior to this investigation suggested that parental absence increases a child's risk

of sexual abuse (Bagley and Ramsay, 1986). Specifically, maternal employment and illness of one or both parents were associated with a greatly increased likelihood of having a sexual abuse experience. The explanation is that parental absence may be a powerful risk factor because it leads to certain environments that are conducive for child sexual abuse. Children may be at increased risk for child sexual abuse because of the absence of supervision needed to protect children from exploitative adults (Finkelhor and Baron, 1986). Parental absence could also decrease the parental opportunities to meet their children's emotional needs. In addition, children with a poor emotional adjustment and a high need for attention and affection may be more likely to respond to other attentive and available adults (Finkelhor and Baron, 1986; Gruber and Jones, 1983; Benedict and Zautra, 1993).

Parental absence was followed by parental use of physical discipline, specifically beating, (n=57), which was 68.7% of the total number of the abused participants. According to World Health Organisation (2002), children who experience physical abuse are also at risk for child sexual abuse. A possible explanation is that physical abuse results into a child developing low self-esteem, and low self-esteem is one of the characteristics of children and adolescents that are vulnerable to sexual abuse (Dam, 2000). Therefore, when a perpetrator notices a child with low self-esteem, they become easy targets for abuse.

Alcohol intake by the parent or guardian accounted for 34.5% (n=30) of the sexually abused participants. One would argue that alcohol intake by a parent or guardian increases the chances of being sexually abused. This was also reported by Ferguson et al (1996). The possible explanation is that children whose parents or guardians take alcohol and/or other drugs may lack supervision because their parents are usually not there to ensure that their welfare is taken care of. In addition, such parents and/or guardians may even themselves abuse their own children when they are under the influence of alcohol (Lehrer et al, 2007). Despite this being true, other research findings such as the one made by Finkelhor (1997) show that there is no association between child sexual abuse and having punitive parents. Despite this discrepancy, results collected in the present study showed that alcoholism in the family is a risk factor for child sexual abuse. Therefore, the hypothesis that alcohol intake by a parent/guardian is a significant risk factor for child sexual abuse was accepted.

The next risk factor that was examined was a poor parent-child relationship. This was found in 23.7% of the victims (n=20). Poor parent-child relationship had a similar score with parental conflict (n=19), which represented 22.4%. The connection between the two is that, a child who witnesses marital conflict is likely to have impaired attachment with either one or both parents. Ferguson et al (1996) also found marital conflict to be a risk factor for child sexual abuse. This finding is also consistent with the conclusions made by Finkelhor (1986) and Mc- Coy and Finkelhor (1995).

The presence of a stepparent, especially a stepfather, also seems to increase the risk for sexual abuse. The results show that 13 participants, which were 13.1%, lived in a home where there was a stepparent. The explanation could be that a stepparent, especially a father, could he himself be an abuser. Madu and Peltzer (2000) also found step parenting to be a risk factor for sexual abuse.

Physical disability was found to be the least risk factor for child sexual abuse. It was reported by 4 participants (7%).) Finkelhor in his 1986 study also found physical disability to be a risk factor. Physical disabilities, especially disabilities such as blindness, deafness, mental retardation and communication disorders increase risk. This is because children cannot report due to their lack of the ability to talk or use mutual language, (Westcoff and Jones, 1999). The main reason why physical disability is a risk factor is because of the child's dependency on other people for movements and other activities. The explanation could be that the people on whom the disabled children depend could in turn take advantage of the child's physical disability and ultimately abuse them.

These results show that all the seven risk factors examined in the study are potential risk factors for child sexual abuse in Zambia. However, what makes the difference is the extent to which they are risk factors for particular children. While they might pose a high risk to certain children, they may not do so for others.

The results on abusers' grooming behaviors and activities revealed that showing the child love and care had the highest frequency (n=55), which represented 63.2% of the total number of cases. This was followed by reading and watching pornographic materials with

the child (n=13). This was 14.9%. Buying gifts and giving the child money was accounted for by 12 participants, which were found to be 13.8%. Next came playing games with the child (n=11), found in 12.6%. Spending a lot of time with the child, such as taking walks and doing school work was next with (n=10) cases, which represented 11.5% of the total number of cases. The least grooming tactic mentioned by the least number of participants (n=6; 7%) was favoritism and complimenting the child.

The results from the FGDs show that the most frequently used tactic is the offer of money and other gifts (n=21; 68%). This is consistent with the findings of CHIN and UNICEF (2001), who found that although there may be other material rewards such as clothing, or non-material rewards such as good grades in school, most of the children who have been sexually abused reported that they had been given money before the abuse. This was found to be the case especially among the female participants among whom it was found that all of them (n=17) reported that their abuser used this tactic to lure them into sexual activities. This finding was followed by the exposure to pornography, which was reported by 18 participants (58.1%). Playing sexual games was next with 17 participants (55%) reporting it. Favoritism; showing love and affection; and spending a lot of time alone with the target; had an equal frequency and were each reported by 16 participants (51.6%).

One explanation that can be provided for the discrepancy noted between findings from the FGDs and questionnaires is that, it is possible that the responses obtained from the FGDs might have been influenced by the presence of other participants in the group. It is possible that some participants could have given certain responses just because another participant reported the same. This was noted as one major limitation of this method of data collection. Despite this discrepancy, the results obtained still become important in identifying the tricks that are used by sexual abusers.

When the tactics described by Pryor (1996) are compared with the ones reported in the present study, one finds some commonalities. The common tactics include the use of enticements such as money and/or other gifts; sexual touching; playing sexual games; and exposure to pornography. The most important conclusion that can be drawn from these

findings is that regardless of the method that an offender uses to engage a child into a sexual activity, the main purpose of grooming the child is to win their trust.

The last question in the questionnaire had to do with the victims' knowledge of the grooming, that is, if they knew or had an idea that doing the above activities to them would result into sexual abuse. Of the 87 participants, the question was answered by 84 participants, 3 did not answer it. Of the 84, 20 (31%) said they knew, while 56 (69%) responded that they did not know. The main reason why children may not suspect that the grooming behavior may result into sexual abuse is because sometimes, the abuser will assimilate him or herself into the child's family life and the parents will feel comfortable leaving their child unattended with the potential abuser. Therefore, due to the trusting relationship that is created between the target and the potential abuser, the child may fail to recognize the grooming activities as a means to get to them. In addition, many abusers go out of their way to be charming, nice and helpful to divert the attention of the child away from their deeper motive. Unfortunately, using these tricks or tactics, abusers may succeed perhaps because care, help and love are some of the important things that every child needs.

Since the abuser has already created a trusting relationship with the child, the child may not know that this "trust" will result into sexual abuse. In addition, children's young age may prevent them from being able to know that doing certain adult behaviors towards them may result into sexual abuse (Sanderson, 2004).

5.3: Limitations of the Study

The study had four major limitations:

- One of the limitations of the study was the fact that the sample did not include individuals that did not attend school. This was the case because the questionnaire used was worded in English and it was thought that non-school going participants would have difficulties comprehending the questions.
- There was a possibility that some participants were not honest or truthful in their responses, especially on the forms of sexual abuse that they experienced. They may have either over reported or underreported their sexual experiences. For example,

one would have expected that all the participants who were victims of sexual abuse were sexually touched or aroused by their abuser. However, the results show that only 54, out of 87 participants experienced this form of sexual abuse. The possible explanation is that due to the sensitive nature of the area of sexual abuse, most participants could have been hesitant to respond truthfully because of feelings of shame and the fear of being victimized, despite being assured of confidentiality and anonymity.

- There were unequal numbers of male and female respondents.
- Since the questionnaire was administered in a classroom setting and contained mostly closed-ended questions, it is possible that most participants may have concentrated on giving rational answers than what they really experienced. The presence of the other participants in the room might have influenced the way they responded to the question, despite being assured of confidentiality.
- It is also possible that some participants may have forgotten about the sexual experiences they had before age 16 years, especially if it happened when they were very young.

Despite these limitations, it is hoped that findings from the study will contribute in some way towards an understanding of risk factors and child sexual abuse in Zambia. Future research, using more representative samples could shed more light on the problem of child sexual abuse in Zambia.

CHAPTER 6

RECOMMENDATIONS AND CONCLUSION

6.1: Introduction

This chapter summarizes the study. Suggestions on how child sexual abuse can be prevented are also included. The chapter begins by making suggestions on child sexual abuse prevention from a wider perspective, and then from these, ways that are feasible in the Zambian context are extracted. This is followed by recommendations for further study, and then a conclusion is made.

6.2: Suggestions for Child Sexual Abuse Prevention

Child sexual abuse is a complex problem that is grossly underreported and sometimes poorly managed. Major players in its effective prevention include the children themselves, family, school, community and nation as a whole. This section will therefore discuss ways of preventing child sexual abuse, particularly the education of children, the role of the parents, schools, community and the state.

6.2.1: Educating Children

In countries where prevention programs are implemented, they come in many forms including slide-shows, presentations, movies, discussions and even role-play (Money, 1988). In Zambia, since child sexual abuse is widely underreported series of public sensitization activities, including school debates, should be conducted to increase children's awareness of child sexual abuse and increase awareness on early reporting and where to report (Chomba et al, 2010). To this effect, an initiative was made by the Zambia Media Women Association in 2010 to hold a series of radio programs on child sexual abuse to create awareness and sensitize the public on the magnitude of the problem in the country and how it can be prevented. Such programs are aimed at preventing child sexual abuse and have been designed for and implemented in elementary schools. They usually provide children with a brief overview of sexual abuse, and inform them of the following topics:

- Definition of sexual abuse.
- Who can be an abuser, that is, making it clear that it can be people they know and trust.
- Having control over one's body.
- Good and bad touch.
- Emphasizing actions that must be taken in abusive situations.
- How to say “no” to adults.
- The difference between good secrets and bad secrets.
- Telling a trusted adult about inappropriate behavior, and to keep telling until someone listens (Ibid).

According to Faulkner (1996), to the extent that prevention programs can be said to be successful, research should be able to show that a child is able to:

- Recognize a situation as abusive.
- Believe that he or she can take action.
- Use protective skills that he or she has been taught.

Furthermore, prevention programs must provide age-appropriate information as well as detailed instructions of how to react to such situations. Additionally, if these programs are to be effected in Zambia, they should not only be targeted at children and adolescents in school, but those that are not in school as well. The reason is child sexual abuse does not only affect school-going children. It affects all, whether in school or not.

6.2.2: Educating Parents

While it is important for children to be educated about sexual abuse, it is equally important for the parents to be educated as well. The main reason for this is that parents or guardians are the most important adults in the lives of their children and to whom the children look up.

It is understood that parents care for children, but while concerned about their safety, unfortunately, they cannot always ensure it. However, through education on child sexual abuse, parents and guardians can equip their children with information and skills to build self-protective behavior. Some of the specific ways through which parents can help to prevent child sexual abuse have been provided by McEvoy (1990: 247), and they include the following:

- *Setting family safety rules*, such as making a list of people they should allow their child to be alone with anywhere. They should also listen to their child's response to the names they suggest.
- *Teaching proper names for private body parts*. If a child is young, vernacular may be used, but they should use unique terms. They should not give private parts names that also represent something else (such as "flower" or "snake").
- Children like all of us, have a right to personal space and can declare who is and who is not allowed to enter it. Therefore, parents should set rules for their children about privacy, and teach them how to assert their rights if their personal space is violated.
- *Affirming children's feelings* and let them know they have a right to their feelings. Children can say "NO" without being disrespectful.
- Teaching children that keeping secrets is not okay, especially if this involves breaking family safety rules.
- *Helping build a child's self-esteem*. Children need a strong self-esteem to be able to protect them from sexual abuse and tell their parents about what happened.
- Teaching children to contact people they trust if a problem occurs.
- Children need to know that the people they know are also capable of doing hurtful things. Therefore, parents should teach their children to look out for certain "situations" or "actions" instead of the people themselves. Children should be taught to differentiate between "unsafe actions" and "unsafe people", thus removing the

fear of adults, and allowing healthy contact. Furthermore, they should carefully scrutinize the backgrounds and references of any caregivers such as drivers, nannies, and so on.

It can be seen, therefore, that more effort must be made to increase parental awareness as well as their willingness to discuss sexual abuse with their children, (McEvoy, 1990).

6.2.3: The Role of the School (Teachers)

The school is the one social institution outside the family with which nearly all children have consistent ongoing contact. Therefore, it is particularly well suited for helping endangered children, including those who are sexually abused (Lumsden, 1991). Additionally, schools are the frontline of child protection since they have the potential to both teach the protective behaviors effectively and to a greater number of children than any other system, including parental instructions. This is because children spend most of their time in school. Teachers in particular, have a role to play in combating child sexual abuse since they possess the knowledge, training and opportunity to observe and respond to children's behavior and physical conditions over a period of time. Furthermore, because of the close daily contact that teachers are in with the children, they are in a unique position to identify children that need help and protection (Ibid). To this effect, schools should strive to become more effective participants in prevention efforts designed to reduce the complex problem of child sexual abuse.

However, despite their central role in child sexual abuse prevention, some teachers may fail to help children in imparting knowledge and information on child sexual abuse and help children who are sexually abused. Three major reasons have been attributed to this. First, they fear and lack knowledge (McIntyre, 1990). The argument is that although a lot of teachers graduate from college every year, most colleges allow them to become certified without exposure to sexual abuse curricula. In one survey, 66% of teachers said they had not been given any in-service education in the area of child sexual abuse (McIntyre, 1987). This lack of adequate training hinders teachers' ability to recognize sexual abuse since most victims manifest no obvious signs. The other problem is that even when teachers suspect

that sexual abuse occurred, however, they do not always report to either the Victim Support Unit or organizations that look into the welfare of the children such as Young Women's Christian Association. According to Trudell and Whatley (1988), "The reporting philosophy of the school head teacher has been found to exert an influence on teacher reporting of child sexual abuse. Where a head teacher encourages it, teachers are more likely to report; and where a head teacher is reluctant to report (frequently for reasons related to maintaining good parental relations and school image), teachers report less often". In addition, some teachers may be unaware that if they report in good faith, they have immunity from civil or criminal liability (Ibid). These factors may hinder teachers from reporting sexual abuse cases.

Therefore, in order to ensure that schools are effective agents in sexual abuse prevention, Sanderson (2004) suggests that:

- More teachers should be trained in the area of child sexual abuse.
- Schools should implement and enforce a policy for reporting child sexual abuse and handling disclosures from children.
- Teachers should be provided with the opportunity to discuss and ask question about their schools' policies and procedure regarding sexual abuse. This will facilitate both understanding and compliance.
- Schools should collaborate with other social service agencies such as Social Welfare because child sexual abuse is such a complex problem that no one section of society can tackle singlehandedly. This can be achieved by designating a liaison person who should provide continuity between the school and the social service agencies (Haase and Kempe, 1990). This person is important because as much as there can be co-operation between school personnel and the child protection agency, there is need for the roles and authority of both organizations to be clearly understood before a collaborative relationship can develop.

- **Zambian schools should collaborate with the police and Social Welfare Office to help disseminate information on child sexual abuse prevention to children in schools and communities. These teams should comprise relevant specialists such as teachers or educators, social workers, doctors, lawyers, police and mental health professionals, who should work together in the areas of coordination. These teams should serve as risk management tools which should work together to decrease the chances of error when dealing with sexual abuse cases, because decision-making is shared and second opinions are built into the framework of responding.**

In order to ensure children's protection, educators and parents need to know what really works. Equally important, they need to know how to accomplish this end without compromising the child's emotional wellbeing, (Kraiser et al, 1989).

6.2.4: The Role of the Community

The general community also has a role to play in prevention of child sexual abuse, if the prevention efforts are to be entirely successful. Here are some of the specific ways in which the general community can help prevent child sexual abuse. According to McEvoy (1990: 250), community members should:

- ***Know.*** Learning more about children's rights and child sexual abuse can help the community ensure the safety of children in their family, community and neighborhood.
- ***Talk.*** Community members should talk to their colleagues, friends, relatives and family about the problem. They should help break the silence around child sexual abuse.
- ***Observe.*** Community members should be alert to the behavioral and physical indicators of sexual abuse in children. They should not just hear children's voices, but listen to them.
- ***Help.*** If community members suspect a child of being abused, they should assist the child.

- **Advocate.** Community members should ask their child's school to incorporate personal safety in the curriculum and to implement a school child protection policy.
- **Contact.** Community members should contact organizations such as Human Rights Commission that can organize talks or workshops for their schools, organization, or community.
- **Get Involved.** Community members should volunteer their time and resources in organizations working against child sexual abuse.

6.2.5. The Role of the State

The state has a major role to play in the prevention of child sexual abuse In Zambia. According to the World Health Organization (2004):

- As a member state on international treaties and human rights, Zambia should focus on children's rights and protection
- It should also develop or strengthen national legal frameworks for the implementation and management of child sexual abuse in partnership with families, religious leaders, youth organizations such as YWCA and YMCA, political leaders, community-based organizations, non-governmental organizations, relevant government ministries and the private and public institutions.

6.2.6 Other Interventions for Child Sexual Abuse Prevention and Management

According to the World Health Organization (2004), child sexual abuse can be prevented and better managed through a set of priority interventions namely:

- Vigorous advocacy and communication
- Enhanced law enforcement and the development of a standardized protocol for clinical care and management
- Multidisciplinary and coordinated responses

- Rehabilitation of child sexual abuse survivors. To this effect, in Zambia, a one-stop center for sexually abused children has been established at the University Teaching Hospital. This was done in 2006 and it is located in the pediatric department.
- Trainings of professionals to staff the one-stop centers
- Community-based surveillance, support, monitoring and reporting.

6.3: Recommendations for further study

Having seen the central role of the school, particularly the teachers in child sexual abuse prevention and education, there is need for more research to be done in Zambian schools. It is recommended that evaluation kind of studies be done to assess child sexual abuse knowledge and awareness among teachers. Once this is achieved, there would be need to examine exactly what the schools are doing regarding the problem of child sexual abuse, that is, find out whether prevention programs exist in Zambian schools. To the extent that they do, it should be found what the school policy on child sexual abuse is, successes and failures in implementation, challenges and finally suggestions for inclusion in the programs so that they are effective.

6.4: Conclusion

Child sexual abuse has been, and continues to be a problem that exploits and degrades children and adolescents throughout the globe. It is not a problem that only affects girls; this research has shown that boys are also at risk.

It has been established that most of the sexual abuse offences are committed by people that are known and trusted by the child, that is, family members, and friends to the child and/or family. In addition, this study has identified the conditions and circumstances that put children and adolescents at risk for sexual abuse. It has also investigated the forms of sexual abuse activities, as well as some of the tactics that abusers use to groom or lure children for sexual abuse. Unfortunately, most children are not aware that such behaviors can lead to sexual abuse. Therefore, since it is now known that child sexual abuse prevention is a collective and individual responsibility, it is important for schools, particularly teachers, parents and children to put in mechanisms for effective prevention.

Furthermore, several ways of child sexual abuse prevention have been identified. These include education, for children and their parents or guardians, the role of the teachers, and the general community. It has also been found that policy makers can contribute significantly to the prevention of sexual abuse. Therefore, it has been suggested that at policy level, child sexual abuse topics should be incorporated into the school curricula so that pupils are able to acquire sexual abuse information in the classroom setting, just like they do with the other subjects. In order for this to be effective, there is need for teachers to be provided with adequate training in the area of child sexual abuse while in college so that they become knowledgeable, thereby enabling them to impart child sexual abuse information and knowledge in their pupils. Furthermore, research culture in the area of child sexual abuse should be encouraged among Zambian scholars.

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APPENDICES